



# FAMILY SERVICE COORDINATOR (FSC) NEW EMPLOYEE TRAINING DOCUMENTATION



Name: \_\_\_\_\_

ChildPlus				
General Topic	Specific Topic Introductions	Date	Trainee Initials	Trainer Initials
Service Manual(s)	<input type="checkbox"/> ChildPlus.net Manual			
	<input type="checkbox"/> Add to Email Distribution List			
	<input type="checkbox"/> Create ChildPlus Logon			
	<input type="checkbox"/> Setup Computer for New Employee Use			
	<input type="checkbox"/> General Computer use (Logon, e-mail, Internet/CCS Portal)			
ChildPlus Orientation	<input type="checkbox"/> ChildPlus Logon			
	<input type="checkbox"/> Entering a New Application			
	<input type="checkbox"/> Entering Family/Child Data			
	<input type="checkbox"/> Abandon, Enroll, Transfer, Drop & Re-enroll			
	<input type="checkbox"/> ChildPlus Reports			

Family Services				
General Topic	Specific Topic Introductions	Date	Trainee Initials	Trainer Initials
Service Manual(s)	<input type="checkbox"/> Social Services Manual			
Family Services Overview	<input type="checkbox"/> Introduction to Family Services			
	<input type="checkbox"/> Head Start Performance Standards			
	<input type="checkbox"/> Roles and Responsibilities			
ERSEA	<input type="checkbox"/> Eligibility			
	<input type="checkbox"/> Recruitment			
	<input type="checkbox"/> Selection			
	<input type="checkbox"/> Enrollment			
	<input type="checkbox"/> Attendance			
Family Services	<input type="checkbox"/> Family Needs Assessment			
	<input type="checkbox"/> Referrals			
	<input type="checkbox"/> Family Goals			
	<input type="checkbox"/> Referral Processes			
	<input type="checkbox"/> Confidentiality			
	<input type="checkbox"/> Documenting Family Services in C+			
	<input type="checkbox"/> Resource,( Community Resource Directory (CRD), 211)			
Transition	<input type="checkbox"/> Transition Plan Checklist			
	<input type="checkbox"/> EHS to HS			
	<input type="checkbox"/> HS to Kindergarten			
Parent Engagement	<input type="checkbox"/> Parent Orientation			
	<input type="checkbox"/> Parent Committee/Meetings			
	<input type="checkbox"/> Policy Council, governance			
	<input type="checkbox"/> Involving fathers			
	<input type="checkbox"/> Parent Education Opportunities			
	<input type="checkbox"/> Parent Training Log			

Family Services continued				
General Topic	Specific Topic Introductions	Date	Trainee Initials	Trainer Initials
Child File / Documentation	<input type="checkbox"/> Child File			
	<input type="checkbox"/> Case Management			
Legal	<input type="checkbox"/> Rights of Parents, custodial and non-custodial			
	<input type="checkbox"/> Court Orders			
	<input type="checkbox"/> Subpoenas			

Health Services				
General Topic	Specific Topic Introductions	Date	Trainee Initials	Trainer Initials
Service Manual(s)	<input type="checkbox"/> Family Services Manual			
Role and Responsibility	<input type="checkbox"/> Screenings			
	<input type="checkbox"/> IHP (online)			
	<input type="checkbox"/> Medication Administration			
	<input type="checkbox"/> First Aid Kits/Supplies/Inventory (classroom & home visitors)			
	<input type="checkbox"/> Emergency Notebook			
	<input type="checkbox"/> Parent Education & Prenatal for Home Visitors			
Dental Health & Diet History	<input type="checkbox"/> Completion			
	<input type="checkbox"/> Review with Parent			
	<input type="checkbox"/> Documentation in ChildPlus			
	<input type="checkbox"/> PIR Updating			
Fluoride Education & Documentation	<input type="checkbox"/> Handout			
Sensory Screenings (Vision/Hearing)	<input type="checkbox"/> Equipment Use			
	<input type="checkbox"/> Requirements			
	<input type="checkbox"/> Documentation – Paper & ChildPlus.net			
	<input type="checkbox"/> Strabismus			
Well-Child Exam	<input type="checkbox"/> Documentation for Child File			
	<input type="checkbox"/> ChildPlus			
	<input type="checkbox"/> EPSDT Schedule			
Dental Exam	<input type="checkbox"/> Preschool			
	<input type="checkbox"/> Infant Toddler			
	<input type="checkbox"/> Documentation for Child File			
	<input type="checkbox"/> ChildPlus			
Medication Management & Administration	<input type="checkbox"/> Sign off			
Individual Health Plan (IHP)	<input type="checkbox"/> Procedure			
Head Lice	<input type="checkbox"/> Procedure			
Child Health Summaries	<input type="checkbox"/> Program System			
ChildPlus.net	<input type="checkbox"/>			

Health Services continued				
General Topic	Specific Topic Introductions	Date	Trainee Initials	Trainer Initials
Child File	<input type="checkbox"/> Health Section			
Emergency Notebook	<input type="checkbox"/>			
Immunizations	<input type="checkbox"/> Assessment			
	<input type="checkbox"/> Interpretation			
	<input type="checkbox"/> Calculation			
	<input type="checkbox"/> Program System			
	<input type="checkbox"/> Documentation – CIS & C+			
Referral and Follow-up	<input type="checkbox"/> Child File Documentation Expectations			
	<input type="checkbox"/> Health Referral Letter			
	<input type="checkbox"/> Health Concern Letter Form			
	<input type="checkbox"/> Parent Refusal Letter			
	<input type="checkbox"/> Health Requirement Reminder Form			
	<input type="checkbox"/> Treatment Tracking			
	<input type="checkbox"/> ChildPlus.net			
CCS Incident Accident Report	<input type="checkbox"/> Online Form			
	<input type="checkbox"/> Expectations			

Nutrition Services				
General Topic	Specific Topic Introductions	Date	Trainee Initials	Trainer Initials
Service Manual(s)	<input type="checkbox"/> Nutrition Services Manual			
Pre-Attendance	<input type="checkbox"/> Planning (special diets, allergies			
CACFP	<input type="checkbox"/> Rules & Regulations			
Health, Dental & Diet History	<input type="checkbox"/> Forms			
Anthropometrics	<input type="checkbox"/> height and weight			
	<input type="checkbox"/> Head Circumference			
Anemia Screening	<input type="checkbox"/> Process			
Health & Nutrition	<input type="checkbox"/> Pregnant & Breast Feeding Women			
	<input type="checkbox"/> Nutrition Education			

Disability Services				
General Topic	Specific Topic Introductions	Date	Trainee Initials	Trainer Initials
Service Manual(s)	<input type="checkbox"/> Program Services Manual			
Disability Overview	<input type="checkbox"/> Head Start Performance Standards			
	<input type="checkbox"/> Disability Service Plan			
	<input type="checkbox"/> Role of Specialists			
	<input type="checkbox"/> Parent Support Resources			
	<input type="checkbox"/> IHPs/Supportive Materials/Equipment			

Disability Services continued				
General Topic	Specific Topic Introductions	Date	Trainee Initials	Trainer Initials
	<input type="checkbox"/> Documenting in Child's File			
	<input type="checkbox"/> Teacher Tip Sheet			
	<input type="checkbox"/> Developmental Disabilities Grant			
	<input type="checkbox"/> CAPE classrooms			
When to Refer	<input type="checkbox"/> Parent Input			
	<input type="checkbox"/> Screeners			
	<input type="checkbox"/> Observations			
Child Find	<input type="checkbox"/> Definition			
	<input type="checkbox"/> Referral Process (ITN or SPS)			
	<input type="checkbox"/> Paperwork			
	<input type="checkbox"/> Notifying Disability Specialist			
	<input type="checkbox"/> Participation of DST			
Disability Paperwork	<input type="checkbox"/> Parent Consent			
	<input type="checkbox"/> Assessment Results			
	<input type="checkbox"/> IEP/IFSP			
Transitioning of Children with IEPs/IFSPs	<input type="checkbox"/> EHS to HS			
	<input type="checkbox"/> HS to HS			
	<input type="checkbox"/> HS to Other			
Child Plus	<input type="checkbox"/> Documentation			

Mental Health				
General Topic	Specific Topic Introductions	Date	Trainee Initials	Trainer Initials
Service Manual(s)	<input type="checkbox"/> Family Services <i>and/or</i> Educational Services			
Mental Health Orientation	<input type="checkbox"/> Performance Standards			
	<input type="checkbox"/> Overview of Services			
	<input type="checkbox"/> Behavior Screening			
	<input type="checkbox"/> Second Step Curriculum			
Working with Parents	<input type="checkbox"/> Staff/Parent Collaboration			
	<input type="checkbox"/> Child Development and Growth			
	<input type="checkbox"/> Responding to Child Needs			
Mental Health Consultants (MHC)	<input type="checkbox"/> MHC Role			
	<input type="checkbox"/> MHC Documentation			
Referrals	<input type="checkbox"/> When to Make a Referral			
	<input type="checkbox"/> To Whom to Make a Referral			
	<input type="checkbox"/> Forms			
Documentation	<input type="checkbox"/> Child File			
	<input type="checkbox"/> PIR Log			
	<input type="checkbox"/> ChildPlus and MH Referrals			
Training	<input type="checkbox"/> Crisis Prevention Institute (CPI)			
	<input type="checkbox"/> Circle of Security (CoS): Classroom Edition			
	<input type="checkbox"/> ARC Framework			