Caregiver Onboarding and Orientation: A National Practice Module

Hiring, orienting, training, and keeping new caregivers in home care.

> **Why this module matters.** Home care employs nearly 3.2 million workers, and turnover was about 75% in early 2025. Strong onboarding is one of the most effective ways to keep caregivers and protect clients.

About this module

This module gives teams a shared, evidence-based approach to hiring, orienting, training, and keeping new caregivers in home care. It draws on current federal rules and national guidance, and it ends with a checklist that agencies, clinicians, and families anywhere in the United States can adopt.

Item	Details
Who it is for	Agency owners, HR staff, supervisors, trainers, and mentors
Format	8 units, case scenarios, a knowledge check, and a national checklist
Time	About 2 hours as training
How to use it	Leaders and HR use Units 1 to 3 and 7 to 8. Trainers and supervisors use Units 4 to 6.

Learning objectives

After completing this module, learners will be able to:

1. Describe the national home care workforce.
2. Explain federal and state training requirements.
3. Prepare new caregivers before day one.
4. Deliver a complete orientation.
5. Check competency by observation.
6. Support new hires through 90 days.
7. Track retention.

> **Scope.** Aides and family caregivers observe, support, and report. Clinical assessments, medication changes, and legal decisions belong to licensed professionals or qualified advisers. Follow your state rules and agency policies.

Unit 1. The national workforce picture

Home care is one of the fastest-growing jobs in the country, and one of the hardest to keep filled. How a new caregiver is welcomed and trained in the first weeks strongly shapes whether they stay.

Measure	Figure	Source
Direct care workers in the United States	Nearly 5.4 million (2024), up from 3.5 million in 2014	PHI, 2025
Home care workers	Nearly 3.2 million (2024)	PHI, 2025
Projected job openings, 2024 to 2034	More than 6.1 million direct care openings	PHI, 2025
Median hourly wage, home care workers	$16.77 (2024); median yearly income $22,429	PHI, 2025
Workers who are women / immigrants / people of color	85% / 33% / 67%	PHI, 2025
Workers receiving some public assistance	59%	PHI, 2025
Home care caregiver turnover	About 75% (early 2025)	Activated Insights, 2025

Because so many workers leave in the first 90 days, strong onboarding is one of the most cost-effective retention tools an agency has.

Unit 2. Federal and state training requirements

Rule	Requirement
Medicare home health aides (42 CFR 484.80)	At least 75 hours of training, including at least 16 hours of supervised practical training, preceded by at least 16 classroom hours; competency evaluation by a registered nurse; at least 12 hours of in-service training every 12 months; retraining after 24 consecutive months without paid work
Medicare home health supervision	A registered nurse or therapist visits at least every 14 days for patients receiving skilled services, and at least every 60 days otherwise, with a yearly onsite observation of each aide
Non-medical home care	Set by each state. Many states require entry-level and yearly training, a background check, a state registry listing, and health screening
Medicaid HCBS	State waiver and program rules; the Access Rule adds workforce reporting and, from 2030, a minimum share of payments for worker compensation

> **State rules differ.** Check your state's home care licensing law and Medicaid program rules for exact hours, topics, and timing.

Unit 3. Before the first day

- [ ] Offer letter with pay, schedule expectations, and benefits.
- [ ] Background check and state registry checks completed as required.
- [ ] Exclusion screening against the OIG LEIE and state lists.
- [ ] Health screening, such as tuberculosis screening where required.
- [ ] I-9 and tax forms.
- [ ] Welcome call from the supervisor, with what to bring and where to go.
- [ ] Assign a peer mentor.

Unit 4. Orientation: what every new caregiver needs

Topic	Key content
Mission and values	Why the work matters; respect and dignity
Client rights and privacy	Rights, HIPAA, confidentiality
Abuse, neglect, and exploitation	Signs and mandated reporting
Infection control	Hand hygiene, gloves, standard precautions
Safety	Body mechanics, safe transfers, home hazards, workplace violence, check-in procedures
Emergencies	When to call 911, emergency plans, fire, power outages
Observation and reporting	Change in condition, early warning signs, SBAR
Documentation and EVV	Visit notes, check-in and check-out
Professional boundaries	Gifts, money, personal relationships, social media
Dementia basics	Communication and responding to distress
Policies	Call-offs, time off, pay, complaints, chain of command

Unit 5. Skills check and competency

Classroom learning is not enough. A nurse or qualified trainer should watch each new caregiver perform key skills before working alone.

Skill	Checked by observation
Hand hygiene and gloves	☐
Transfers and gait belt use	☐
Bathing and personal care	☐
Toileting and incontinence care	☐
Feeding and safe swallowing	☐
Vital signs, if in scope	☐
Range of motion, if in scope	☐
Documentation and EVV	☐

Unit 6. The first 90 days

When	What happens
Day 1	Welcome, tour of systems, meet supervisor and mentor
Week 1	Shadow shifts with an experienced caregiver; first client introduction in person
Week 2	Supervisor check-in call: what is going well, what is hard
Day 30	Supervisory visit or observation; review documentation
Day 60	Check-in on schedule, pay, and support needs
Day 90	Performance review; set a learning goal; recognize progress

Early turnover often comes from schedule problems, feeling unsupported, unsafe situations, and pay issues. Ask about each at every check-in.

Unit 7. Retention practices

- Give consistent schedules and enough hours when workers want them.
- Pay on time and explain pay clearly.
- Recognize good work publicly.
- Offer career steps, such as specialty training in dementia or a path to a certified role.
- Respond quickly to safety concerns.
- Ask for feedback through short surveys and exit interviews.

Unit 8. Measures to track

Measure	How to calculate
90-day retention	New hires still employed at 90 days ÷ new hires
Yearly turnover	Separations in the year ÷ average headcount
Time to first shift	Days from offer to first independent shift
Orientation completion	Completed before first solo shift ÷ new hires
In-service hours	Average training hours per caregiver per year

Case scenarios

Case 1. A quick start

A new caregiver is sent to a client with dementia on day two, with no shadow shift. She quits after a week.

- What went wrong?
- What would you change?

Discussion: No shadowing, no client introduction, and no dementia training. Require at least one shadow shift, an in-person introduction, and dementia basics before complex assignments.

Case 2. Unclear pay

Several new hires complain their first paychecks were wrong.

- How can this affect retention?
- What steps fix it?

Discussion: Pay problems quickly erode trust. Explain pay at orientation, check first paychecks, and fix errors within days.

Knowledge check

1. How many training hours does Medicare require for home health aides? *(At least 75, with at least 16 hours supervised practical)*
2. How many in-service hours per year for Medicare aides? *(At least 12)*
3. About how many home care workers are there in the U.S.? *(Nearly 3.2 million)*
4. What was home care caregiver turnover in early 2025? *(About 75%)*
5. Name three checks before the first day. *(Background, registry, exclusion, health screening)*
6. Why are shadow shifts important? *(They build skill and confidence before working alone)*

National Caregiver Onboarding and Orientation Checklist

This checklist turns federal training rules and retention practice into one tool any agency can adopt. The "National basis" column shows where each item comes from. Adapt it to your state rules and policies.

Name or ID	Date	Completed by and role
Agency or organization	Reviewed by	Next review date

A. Pre-hire and pre-start

Action	National basis	Done	Notes
Background and state registry checks as required	State law	☐	
OIG LEIE and state exclusion screening	OIG GCPG	☐	
Health screening where required	State law; CDC	☐	
Written offer with pay and schedule terms	Best practice	☐	
Peer mentor assigned	Best practice	☐	

B. Orientation and competency

Action	National basis	Done	Notes
Orientation covers all topics in Unit 4	42 CFR 484.80; state law	☐	
Skills observed and signed off by a qualified trainer	42 CFR 484.80	☐	
At least one shadow shift before working alone	Best practice	☐	
In-person or phone introduction to each new client	Best practice	☐	
Medicare aides: 75 hours training and competency evaluation completed	42 CFR 484.80	☐	

C. First 90 days and beyond

Action	National basis	Done	Notes
Check-ins at week 2, day 30, day 60, and day 90	Best practice	☐	
Supervisory visits on the required schedule	42 CFR 484.80; state law	☐	
Yearly in-service training (12 hours for Medicare aides)	42 CFR 484.80	☐	
90-day retention and yearly turnover tracked	Best practice	☐	
Exit interviews completed	Best practice	☐	

Completed by: signature	Printed name and title	Date
Reviewed by: signature	Printed name and title	Date

Sources and further reading

PHI: Direct Care Workers in the United States, Key Facts 2025 (phinational.org)

42 CFR 484.80: Home health aide services (GovInfo) (govinfo.gov)

Home Care Magazine: Activated Insights 2025 Benchmarking Report (homecaremag.com)

Crowell: OIG General Compliance Program Guidance (crowell.com)

Soriaga CPA: Medicaid 80/20 rule status (Sept. 2026) (soriagacpa.com)

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