

UCHC Competency Checklist: ORIENTATION

Position Title: Nursing Care Associate Employee Name: _____

Unit: Medical-Surgical (Check unit below)

Cluster Area: CSDU Med 3 Geropsych Med 4 Med-Surg 5 Onc 6 Surg 7 Med-Surg Float Pool

Method of Instruction Key: P = Protocol/Procedure Review E = Education Session S = Self Learning Package C = Clinical Practice D = Demonstration	Method of Evaluation Key: O = Observation (in clinical setting) RD = Return Demonstration T = Written Test V = Verbal Review	Self-Assessment by Employee			Validation of Competency		
		Never Done	Needs Review/ Practice	Competent	Method of Instruction (Use Instruction Key on Left)	Date	Initials
All Core Competencies reviewed and documented in Central Orientation							
A. GETTING INTO THE SYSTEM							
Locates Hard Copy Manuals on Unit					E		
Locates On-Line Manuals					E		
Obtains Network & Unit Specific Access					E		
Recalls Proper Call-Out Procedures					E		
Identifies unit-based orientation plan and timing of evaluations					E		
Receives PREF for Position					E		
Locates Educational Activity Records Binder/File					E		
Identifies Performance Improvement Indicators					E		
Places contact information onto disaster call tree & unit phone list					E		
B. SAFETY/INFECTION CONTROL							
Locates fire alarms, extinguishers and exits					E		
Demonstrates appropriate use of Red-Bag Waste					E		
Identifies and locates personal protective equipment					E		
Reviews Safety Plan for unit					E		
Verbalizes the use and online location of Material Safety Data Sheets (MSDS)					E		
Disposes of needles/sharps in designated container					E		
Demonstrates correct procedure for putting on and removing masks, gowns and gloves					E		
Demonstrates and adheres to specific isolation procedures according to UCHC policies					E		
Demonstrates proper care of linen (clean and soiled)					E		
Initials	Signature	Initials	Signature	Initials	Signature		

UCHC Competency Checklist: ORIENTATION

Position Title: Nursing Care Associate Employee Name: _____

Unit: Medical-Surgical (Check unit below)

Cluster Area: CSDU Med 3 Geropsych Med 4 Med-Surg 5 Onc 6 Surg 7 Med-Surg Float Pool

Method of Instruction Key: P = Protocol/Procedure Review E = Education Session S = Self Learning Package C = Clinical Practice D = Demonstration	Method of Evaluation Key: O = Observation (in clinical setting) RD = Return Demonstration T = Written Test V = Verbal Review	Self-Assessment by Employee			Validation of Competency		
		Never Done	Needs Review/ Practice	Competent	Method of Instruction (Use Instruction Key on Left)	Date	Initials
C. COMMUNICATION							
Describes communication considerations for specific age groups							
Maintains patient confidentiality							
Answers phone according to UCHC standards							
Operates and answers nurse call system							
Adheres to customer services values of UCHC							
Uses effective written communication							
Uses effective verbal and nonverbal communication skills							
Discusses and demonstrates respect for patient rights							
Accesses email account							
Locates link to Patient Safety Net							
D. CLERICAL SKILLS							
Identifies self and unit when answering the phone							
Operates telephone: <ul style="list-style-type: none"> • Call pick-up function • Transfers calls • Places a call on hold, then resumes call 							
Promptly relays information to appropriate personnel							
Identifies who takes a verbal/telephone report on critical lab values							
Identifies procedure for accessing transportation department							
Identifies mechanism to report equipment malfunction							
Operates fax machine							
Operates copy machine							

Initials	Signature	Initials	Signature	Initials	Signature

UCHC Competency Checklist: ORIENTATION

Position Title: Nursing Care Associate Employee Name: _____

Unit: Medical-Surgical (Check unit below)

Cluster Area: CSDU Med 3 Geropsych Med 4 Med-Surg 5 Onc 6 Surg 7 Med-Surg Float Pool

Method of Instruction Key: P = Protocol/Procedure Review E = Education Session S = Self Learning Package C = Clinical Practice D = Demonstration		Method of Evaluation Key: O = Observation (in clinical setting) RD = Return Demonstration T = Written Test V = Verbal Review		Self-Assessment by Employee			Validation of Competency		
				Never Done	Needs Review/ Practice	Competent	Method of Instruction (Use Instruction Key on Left)	Date	Initials
E. MATERIALS MANAGEMENT									
Identifies role responsibilities for managing materials in unit/department									
Identifies mechanism to obtain supply from warehouse									
Demonstrates procedure for patient charges									
F. ENVIRONMENT MANAGEMENT									
Maintains patient rooms and unit environment in a neat/orderly fashion									
Assists patient transfer from room to room									
Breaks down patient room after discharge/transfer									
Distributes linen as appropriate									
Identifies and reports environmental problems/concerns appropriately									
Performs unit designated activities as directed									
G. CLINICAL SKILLS									
1	VITAL SIGNS – Competency reviewed and validated in Central Orientation								
2	WEIGHTS:								
	Demonstrates procedure for measuring patient weights								
	<ul style="list-style-type: none"> • Standing scale • Patient lift (Arjo Tempo/sling) • Bed scale 								
	Demonstrates appropriate documentation of weights								
3	BED-MAKING:								
	Demonstrates proper procedure for making an occupied bed								
Demonstrates proper procedure for making an unoccupied bed									
Initials	Signature	Initials	Signature	Initials	Signature	Initials	Signature	Initials	Signature

UCHC Competency Checklist: ORIENTATION

Position Title: Nursing Care Associate Employee Name: _____

Unit: Medical-Surgical (Check unit below)

Cluster Area: CSDU Med 3 Geropsych Med 4 Med-Surg 5 Onc 6 Surg 7 Med-Surg Float Pool

Method of Instruction Key: P = Protocol/Procedure Review E = Education Session S = Self Learning Package C = Clinical Practice D = Demonstration		Method of Evaluation Key: O = Observation (in clinical setting) RD = Return Demonstration T = Written Test V = Verbal Review		Self-Assessment by Employee			Validation of Competency		
				Never Done	Needs Review/ Practice	Competent	Method of Instruction (Use Instruction Key on Left)	Date	Initials
4	<u>PATIENT DEATH:</u>								
	Demonstrates procedure for post-mortem care								
	Discusses the procedure to be followed for admitting a body to the morgue								
	Identifies the necessary paperwork for admission to the morgue								
	Demonstrates how to sign a body into the morgue log								
	Demonstrates putting a body into the morgue locker								
	Demonstrates how to use the body lift using proper body mechanics								
	Identifies where a body that is greater than 300 pounds is placed								
5	<u>BATHING / PERSONAL CARE:</u>								
	Performs / assists with patient bed bath								
	Performs / assists with patient shower								
	Demonstrates proper use of shower chair								
	Performs mouth care								
	Performs or assists with providing care of dentures								
	Shaves patients								
	Shampoos patient hair								
	Demonstrates proper procedure for back rub								
	Male / female perineal care – competency validated in central orientation								
	Performs foley catheter care – competency validated in central orientation								
	Applies skin protective products / ointments as directed								
	Reports to nurse any skin changes observed during personal care								
Reports to nurse any changes in mouth, tongue, gums, teeth									
Maintains patient dignity during any personal care									

Initials	Signature	Initials	Signature	Initials	Signature

UCHC Competency Checklist: ORIENTATION

Position Title: Nursing Care Associate Employee Name: _____

Unit: Medical-Surgical (Check unit below)

Cluster Area: CSDU Med 3 Geropsych Med 4 Med-Surg 5 Onc 6 Surg 7 Med-Surg Float Pool

Method of Instruction Key: P = Protocol/Procedure Review E = Education Session S = Self Learning Package C = Clinical Practice D = Demonstration	Method of Evaluation Key: O = Observation (in clinical setting) RD = Return Demonstration T = Written Test V = Verbal Review	Self-Assessment by Employee			Validation of Competency		
		Never Done	Needs Review/ Practice	Competent	Method of Instruction (Use Instruction Key on Left)	Date	Initials
<u>TOILETING / ELIMINATION:</u>							
Assists patient with bowel and bladder management							
Demonstrates procedure for usage of:							
• Bedpan							
• Urinal							
• Bedside commode							
• Toilet top specimen collection							
Empties foley collection bag, bedpan, urinal, ostomy bag and records output on flowsheet							
Demonstrates proper procedure for catheter care and incontinence care							
6	Applies fecal pouch						
	Applies condom catheter (urine collection device)						
	Applies ostomy pouch						
	Obtains urine specimens according to protocol:						
	• Routine urinalysis						
	• Clean-catch C&S						
	• 24-Hour urine collection						
	Obtains stool specimens according to protocol						
	Demonstrates proper procedure for racking urine after renal biopsy						
	Demonstrates proper procedure for straining urine for kidney stones						
	Documents bowel movements and urinary output on nursing flowsheet						
	Reports any changes in stool and/or urine to nurse						

Initials	Signature	Initials	Signature	Initials	Signature

UCHC Competency Checklist: ORIENTATION

Position Title: Nursing Care Associate Employee Name: _____

Unit: Medical-Surgical (Check unit below)

Cluster Area: CSDU Med 3 Geropsych Med 4 Med-Surg 5 Onc 6 Surg 7 Med-Surg Float Pool

Method of Instruction Key: P = Protocol/Procedure Review E = Education Session S = Self Learning Package C = Clinical Practice D = Demonstration		Method of Evaluation Key: O = Observation (in clinical setting) RD = Return Demonstration T = Written Test V = Verbal Review		Self-Assessment by Employee			Validation of Competency		
				Never Done	Needs Review/ Practice	Competent	Method of Instruction (Use Instruction Key on Left)	Date	Initials
7	TUBES AND DRAINS:								
	Measures and records output on flowsheet:								
	• Nasogastric tube								
	• Jackson Pratt								
• Hemovac									
8	DIETARY CARE:								
	Identifies and differentiates various diet orders and supplemental feedings								
	Sets up meal trays								
	Demonstrates correct positioning for feeding a patient								
	Demonstrates feeding a patient								
	Maintains calorie count and documents amount on appropriate form								
Estimates percentage of meal eaten and records oral intake on flowsheet									
9	SKIN CARE:								
	Identifies risk factors, prevention strategies and management of abnormal skin conditions and pressure ulcers								
	Reports abnormal skin conditions								
	Demonstrates use of VersaCare bed								
	Demonstrates use of Zoneair/Advanta bed								
	Demonstrates use of common rental beds (Kinair, Bariatric)								
Demonstrates correct set-up of cooling / heating units									
10	TWELVE (12) LEAD EKG: (excluding psychiatry)								
	Demonstrates proper lead placement								
	Enters patient data appropriately into EKG machine								
	Obtains reading and EKG tracing								

Initials	Signature	Initials	Signature	Initials	Signature

UCHC Competency Checklist: ORIENTATION

Position Title: Nursing Care Associate Employee Name: _____

Unit: Medical-Surgical (Check unit below)

Cluster Area: CSDU Med 3 Geropsych Med 4 Med-Surg 5 Onc 6 Surg 7 Med-Surg Float Pool

Method of Instruction Key: P = Protocol/Procedure Review E = Education Session S = Self Learning Package C = Clinical Practice D = Demonstration		Method of Evaluation Key: O = Observation (in clinical setting) RD = Return Demonstration T = Written Test V = Verbal Review		Self-Assessment by Employee			Validation of Competency		
				Never Done	Needs Review/ Practice	Competent	Method of Instruction (Use Instruction Key on Left)	Date	Initials
11	<u>PATIENT SAFETY:</u>								
	Ensures side rails are up (≤ 3; 4 side rails = restraint)								
	Ensures nurse call bell is within patient reach								
	Ensures patient ID band is on								
	Maintains fall risk protocol (ensures yellow fall risk identification wrist band is on and the yellow magnet is placed on the patient door frame, if applicable)								
	Answers patient call light promptly								
	Utilizes restraints per policy								
	Utilizes bed and/or chair alarms, as appropriate								
Maintains seizure precautions, as appropriate									
12	<u>RESTRAINTS:</u>								
	Attends restraint class								
	Attends Constant Observation (CO) / 1:1 class								
	Specifies guidelines for restraint use and alternatives to restraints								
	Assists nurse with patient in restraints or who have a CO/1:1								
	Applies restraints according to manufacturer's instructions								
	Applies restraints as delegated by the nurse								
	Identifies complications associated with restraint use								
Maintains restraint protocol									
13	<u>PAIN MANAGEMENT:</u>								
	Reports patient pain to nurse								
Assists patient with pain management									
14	<u>PHLEBOTOMY:</u>								
Performs phlebotomy according to UCHC Lab Standards									

Initials	Signature	Initials	Signature	Initials	Signature

UCHC Competency Checklist: ORIENTATION

Position Title: Nursing Care Associate Employee Name: _____

Unit: Medical-Surgical (Check unit below)

Cluster Area: CSDU Med 3 Geropsych Med 4 Med-Surg 5 Onc 6 Surg 7 Med-Surg Float Pool

Method of Instruction Key: P = Protocol/Procedure Review E = Education Session S = Self Learning Package C = Clinical Practice D = Demonstration	Method of Evaluation Key: O = Observation (in clinical setting) RD = Return Demonstration T = Written Test V = Verbal Review	Self-Assessment by Employee			Validation of Competency		
		Never Done	Needs Review/ Practice	Competent	Method of Instruction (Use Instruction Key on Left)	Date	Initials
POSTIONING, TRANSFER AND TURNING:							
15	Demonstrates proper positioning and turning a patient						
	Assists patient in using trapeze						
	Assists patient into the following postions:						
	• Supine						
	• Lateral						
	• Fowler's						
	Demonstrates how to log roll a patient						
	Demonstrates proper usage of:						
	• Wheelchair						
	• Stretcher						
	• Geri-chair						
	• Slide Board						
	Transfers patient from stretcher to bed / table and back						
	Transfers patient from bed to chair and back						
	Ambulates patient with unsteady gait						
Ambulates patient with tubes / drains							
Demonstrates use of ambulation devices (cane, walker)							
Demonstrates range of motion (ROM) exercises							
Demonstrates proper assembly of the 250lb single trapeze unit							
Demonstrates proper assembly of the 500lb double trapeze unit							

Initials	Signature	Initials	Signature	Initials	Signature

UCHC Competency Checklist: ORIENTATION

Position Title: Nursing Care Associate Employee Name: _____

Unit: Medical-Surgical (Check unit below)

Cluster Area: CSDU Med 3 Geropsych Med 4 Med-Surg 5 Onc 6 Surg 7 Med-Surg Float Pool

	Method of Instruction Key: P = Protocol/Procedure Review E = Education Session S = Self Learning Package C = Clinical Practice D = Demonstration	Method of Evaluation Key: O = Observation (in clinical setting) RD = Return Demonstration T = Written Test V = Verbal Review	Self-Assessment by Employee			Validation of Competency		
			Never Done	Needs Review/ Practice	Competent	Method of Instruction (Use Instruction Key on Left)	Date	Initials
16	RESPIRATORY CARE:							
	Assists patient to turn / cough / deep breathe							
	Applies nasal cannula							
	Applies face mask							
	Recognizes and reports signs and symptoms of respiratory distress							
	Assists patient with incentive spirometry							
	Converts oxygen from wall set-up to portable tank, and back							
	Performs oral suctioning with yankauer catheter							
	Collects sputum specimens according to protocols							
Performs pulse oximetry								
17	CARDIAC CARE:							
	Recognizes and reports signs and symptoms of chest pain / pressure							
	Reports redness, pain or swollen areas of extremities							
	Demonstrates proper procedure for applying / removing Antiembolic stockings (i.e. PAS)							
Demonstrates proper procedure for applying / removing TED stockings								

Initials	Signature	Initials	Signature	Initials	Signature