

Cluster Area: Med-Surg: Med 4, Med-Surg 5, Onc 6, Surg 7, Med-Surg Float Pool

| Method of Validation Key: O = Observation (in clinical setting) RD = Return Demonstration/simulated T = Written Test V = Verbal Test | Validation of Competency | | |
|--|---|----------------------|------|
| | Validation Method (Use evaluation Key on Left) | Validator's Initials | Date |
| A. EQUIPMENT | | | |
| LEVEL 2: CLUSTER SPECIFIC COMPETENCIES | | | |
| Alaris Pump-use of guardrails, secondary infusion tubing | | | |
| Chest Drainage System | | | |
| PCA Pump | | | |
| LEVEL 3: UNIT SPECIFIC COMPETENCIES | | | |
| Bed alarm attached to nurse call system on Versa Care beds | | | |
| B. DOCUMENTATION/COMMUNICATION | | | |
| LEVEL 1: ROLE COMPETENCIES | | | |
| Identifies reportable conditions via Patient Safety Net | | | |
| LEVEL 2: CLUSTER SPECIFIC COMPETENCIES | | | |
| Writes a timely, appropriate progress notes when needed, in DAR format | | | |
| Dates and times all entries in the medical record, including the actual time patient arrives to unit in the progress note | | | |
| Initiates patient care plan per patient diagnosis/problems | | | |
| Documents ongoing teaching on Patient and Family Teaching Record | | | |
| Accurately documents on Restraint/1:1 Flowsheet | | | |
| LEVEL 3: UNIT SPECIFIC COMPETENCIES | | | |
| None | | | |
| C. PROVISION OF CARE | | | |
| HOSPITAL ADMINISTRATIVE MANUAL | | | |
| Provides care according to the following protocols/procedures: | | | |
| Report / Handoff | | | |
| Vaccinations: Adult Pneumococcal and Influenza Vaccination | | | |
| NURSING PRACTICE MANUAL | | | |
| Provides care according to the following protocols/procedures: | | | |
| Chart Review & Audits | | | |
| Insulin: Continuous Infusion | | | |
| Falls: Risk Identification and Management | | | |
| Medications: Double Check (High Risk Meds. – chemotherapy, heparin infusions, insulin cont. infusions, insulin subcutaneous, narcotic infusions including epidural narcotic infusions) | | | |
| 1:1 Observation / Constant Observation | | | |

| Initials | Signature | Initials | Signature |
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| Ostomy Care – protocol, teaching plan, & patient education handouts | | | |
| Pain: Care of the Adult Patient | | | |
| Pain (Acute): Narcotic Administration | | | |
| Pain Scale: Use of | | | |
| Peripheral Intravenous Therapy (infiltration / phlebitis) | | | |
| Physician Notification for Change in Patient Condition (Chain of Command) | | | |
| Restraints – behavioral & medical-surgical (non-behavioral) | | | |
| Skin Care | | | |
| UNIT PRACTICE MANUAL | | | |
| Provides care according to the following protocols/procedures: | | | |
| Structure Standards – medications/drips allowed on unit, frequency of vital signs | | | |
| Iodine 131 Therapy | | | |
| Radiation Implant/brachytherapy | | | |
| LIPPINCOTT MANUAL OF NURSING PRACTICE | | | |
| Provides care according to the following protocols/procedures: | | | |
| Trach care | | | |
| D. PERFORMANCE MEASUREMENT INITIATIVES (Core Measures) | | | |
| Surgical Care Improvement Project (SCIP) | | | |
| Heart Failure – provides CHF education / teaching sheet to patients with primary or secondary diagnosis of CHF | | | |
| Pneumonia – provides Smoking Cessation education / teaching sheet to appropriate patients | | | |

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