

Nurse Aide Skill Check Lists

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Nurse Aide Skill Check List

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Skills Checklist #1

Hand Hygiene Technique Using Soap and Water

Name		
Passed	Needs More Practice	
1. Wet hands completely.		
2. Apply soap.		
3. Work up a good lather.		
4. Clean your nails.		
5. Perform hand hygiene by using a rotating, rubbing motion, rubbing palms and between fingers for a minimum of 20 seconds.		
6. Wash at least 2 inches above wrist.		
7. Rinse all washed areas well.		
8. Hands did <i>not</i> touch the sink.		
9. Dry hands thoroughly with paper towel and discard.		
10. Take dry paper towel and turn o	ff faucet.	
11. Discard paper towel in wastebas	sket.	

Comments:

Instructor's Signature _____ Date: _____

Skills Checklist #2

Gloving Put on Nonsterile Glove

Equipment: Nonsterile Gloves

Name

Passed _____ Needs More Practice_____

- _____1. Wash your hands.
- _____ 2. Grasp the cuff of the glove with opposite hand and pull glove on.
- 3. With gloved hand slide the other hand into the second glove.
- 4. Interlace fingers, smooth out folds and create a comfortable fit.
- 5. Carefully look for tears, holes or discolored spots. Replace the glove if needed.
- 6. If wearing a gown, pull the cuff off the gloves over the sleeve of the gown.

Remove Gloves

- 7. Touch only the outside of one glove. Pull the first glove off by pulling down from the cuff.
- _____ 8. As the glove comes off your hand, it should be turned inside out.
- 9. With the fingertips of your gloved hand, hold the glove you just removed. With your ungloved hand, reach two fingers inside the remaining glove. Be careful not to touch any part of the outside of the glove.
- 10. Pull down, turning this glove inside out, and over the first glove as you remove it.
- 11. Place fingers inside cuff of second glove and pull off and enclose the first glove.
- _____ 12. Discard both gloves into the designated container.

Gloving Put on Nonsterile Glove – cont'd.

_____ 13. Wash your hands.

Comments:

Instructor's Signature_____ Date _____

Skills Checklist #3

Make a Closed and Open Bed

Equipment: Sheets, pillowcases, blankets/bedspread

Name _____

Passed _____ Needs More Practice_____

- _____ 1. Hand hygiene.
- 2. Assemble all linen. Place on clean surface within reach of bed.
- _____3. Adjust bed to a comfortable working position and lock wheels.
- _____4. Remove soiled linen and put in appropriate place.
- _____ 5. Hand hygiene.
- _____6. Apply to only one side of the bed. (steps 7-10)
- _____7. Apply bottom sheet correctly.
- _____ 8. Apply top sheet correctly.
- _____ 9. Apply blanket and/or spread.
- _____ 10. Miter bottom corner.
- _____ 11. When the first side is completed, move to the opposite side.
- _____ 12. Complete bed making.
- _____ 13. For open bed, fan-fold top sheet and spread toward the foot of the bed.
- _____ 14. Put pillowcase on pillow, using correct technique do not hold under chin.
- _____ 15. Place call signal on bed.
- _____ 16. Place bed in low position.

Make a Closed and Open Bed – cont'd.

_____ 17. Straighten and clean resident's unit.

_____ 18. Hand hygiene.

Comments:

Skills Checklist #4

Make an Occupied Bed

Equipment: Sheets, pillowcases, blankets/bedspread

Name _____

Passed ______ Needs More Practice _____

_____1. Hand hygiene.

- _____ 2. Assemble all linen. Place on clean surface within reach of bed.
- _____ 3. Explain the procedure to the resident.
- 4. Ask the resident how much they can do for themselves.
- _____ 5. Provide privacy.
- _____6. Lock brakes, provide for resident's safety. Elevate side rail if available.
- _____7. Raise bed to a comfortable working position.
- 8. Lower back rest or knee rest until bed is flat. (Check first with your supervisor. Some residents cannot tolerate flat position).
- 9. Cover resident with sheet/bath blanket to keep resident from being exposed.
- _____ 10. Loosen all linen.
- _____ 11. Lower side rail, if available (on side you are working).
- _____ 12. Remove top linen and put in appropriate place.
- _____13. Ask or assist the resident onto his/her side.
- _____ 14. Adjust pillow under head.
- _____ 15. Fold the dirty bottom linen toward the resident and tuck them against resident's back.
- _____ 16. Apply clean bottom linen on the exposed half of the bed using the correct technique.

Make an Occupied Bed - cont'd.

- 17. Raise the side rail, if available, on your side of the bed. Go to other side of the bed. Lower side rail, if available.
- 18. Ask or assist the resident to roll toward you, over the "hump", onto clean sheets.
- 19. Remove dirty bottom sheets and put in appropriate place.
- 20. Pull clean linen from under resident.
- 21. Tighten all linen before tucking it under mattress.
- 22. Position resident (supine if appropriate).
- 23. Change pillowcase and position pillow under resident's head.
- _____ 24. Apply top sheet and remove the sheet/bath blanket, keeping resident from being exposed.
- _____ 25. Apply blankets and/or spread. Miter bottom corners of top sheet and spread/blanket.
- 26. Position resident in a safe and comfortable position. Raise side rail if available and place bed in low position. Elevate head of bed if requested.
- 27. Place call signal within resident's reach.
- 28. Straighten and clean resident's unit.
- _____ 29. Hand hygiene.
- 30. Report any unusual observations to supervisor.

Comments:

Skills Checklist #5

Choking **Obstructed Airway: Conscious Adult**

Name

Passed ______ Needs More Practice _____

Conscious

- 1. Determine if resident can cough or speak.
- Determine airway obstruction ask "Are you choking?/Can you speak?"
- _____3. Verbally call for "help" (prior to proceeding). <u>Do Not Leave Resident Unattended</u>.

If obstructed, use Heimlich Maneuver

- 4. Position yourself behind resident.
- _____ 5. Wrap arms around resident's waist.
- 6. Make a fist with one hand, place thumb side against resident's abdomen midline, slightly above naval and below breastbone.
- 7. Grasp fist with other hand.
- 8. Press into victim's abdomen with quick upward thrusts until effective or resident is unconscious.
- 9. Each thrust should be distinct and delivered with intent of relieving obstructions.
- 10. If victim becomes unconscious, call 911 (activate EMS system).
- 11. Remain with resident until trained personnel arrives.
- _____12. Hand hygiene.
- 13. Report to Supervisor.

Choking Obstructed Airway: Conscious Adult – cont'd.

Comments:

Instructor's Signature _____ Date _____

Skills Checklist #6

Lift and Move a Resident in Bed - Two Assistants

Name _____

Passed _____ Needs More Practice _____

- _____1. Ask another nursing assistant to assist you.
- _____ 2. Hand hygiene.
- 3. Explain procedure to resident.
- 4. Ask resident how much they can do for themselves.
- 5. Provide privacy.
- 6. Lock wheels on bed.
- 7. Raise bed to a comfortable working height.
- 8. Position selves (nursing assistants) one on each side of resident.
- 9. Lower side rails, if available.
- 10. Place resident on back with bed flat.
- Fold back top covers.
- 12. Remove pillow and place at head of bed to protect resident's head.
- 13. Roll the lift sheet/pad inward until it touches the resident's body.
- 14. Grasp the lift sheet/pad with one hand at the level of the resident's shoulder and the other hand at the resident's hip.
- 15. Face the head of the bed. Stand with back straight, knees bent and feet providing a wide base of support. On the count of three, shift your weight from the rear foot to the front foot and lift the resident toward the head of the bed.
- 16. Straighten lift sheet, replace covers and position pillow under resident's head.
- 17. Position resident for comfort.
- 18. Raise side rails, if available.

Lift and Move a Resident in Bed - <u>Two Assistants</u> – cont'd.

- _____ 19. Lower bed.
- _____ 20. Place call signal within reach.
- _____ 21. Hand hygiene.
- _____ 22. Report any unusual observations to supervisor.

Comments:

Skills Checklist #7-A

Transfer a Resident form Bed to Chair or Chair to Bed – One Assistant

Equipment: Resident's robe and non-skid slippers or proper fitted shoes, chair or wheel chair, gait belt.

Name_____

Passed ______ Needs More Practice _____

- _____1. Assemble equipment.
- _____ 2. Explain procedure to resident.
- _____ 3. Ask resident how much they can do for themselves when appropriate.
- _____ 4. Provide privacy.

_____ 5. Lock wheels on bed.

- 6. Position chair at bedside on resident's strong (unaffected) side so resident can be moved toward stronger (unaffected) side.
- _____7. Hand hygiene.
- 8. Ask the resident to move to edge of the bed nearest you.
- _____9. Place bed in low position.
- _____ 10. Raise backrest so resident is in sitting position.
- _____ 11. Lower the side rails, (if available) when appropriate.
- 12. Assist resident so he/she is sitting on the side of the bed. Feet should be touching the floor.
- 13. Allow resident to sit on edge of bed long enough to adjust to change in position
- _____ 14. Assist resident in putting on robe and slippers/shoes.
- 15. Place gait (transfer) belt properly around resident's waist (over clothing), make sure it is tight enough to be secure, not to slip.

Transfer a Resident form Bed to Chair or Chair to Bed – <u>One Assistant</u> – cont'd.

- 16. Stand in front of the resident maintaining the normal curve of your spine, knees slightly bent, and feet approximately 12 inches apart. If the resident has a weak side, the weak foot should be supported by the inside of your foot to prevent the resident from slipping.
- 17. Lean forward and grasp gait belt from underneath with one hand on each side of the resident. Encourage him/her to help by pushing up on mattress (pushing with unaffected side).
- _____ 18. Pivot and gently guide resident to chair using gait belt properly.
- _____ 19. Giver frequent verbal cues, encouraging the resident to feel for the chair by using his/her legs/arms.
- _____ 20. Once the resident is situated, remove the gait belt.
- _____ 21. Position resident comfortably and in good body alignment (support affected side, if applicable).
- _____ 22. Place call signal within reach.
- _____ 23. Hand hygiene.
- _____ 24. Report any unusual observations to supervisor.

Comments:

Skills Checklist #7-B

Transfer a Resident from Chair to Bed – Two Assistants

Resident's robe and non-skid slippers or proper fitted shoes, chair or wheel chair, Equipment: gait belt.

Name_____

Passed _____ Needs More Practice _____

- 1. Assemble equipment. Ask another nurse aide to assist you.
- 2. Explain the procedure to the resident.
- 3. Ask resident how much they can do for themselves when appropriate.
- 4. Provide privacy.
- 5. Lock wheels on bed.
- 6. Position chair parallel to bedside on resident's strong (unaffected) side so resident can be moved toward stronger (unaffected) side.
- _____7. Hand hygiene.
- 8. Raise bed to comfortable working height.
- 9. Lower the side rails, if available, when appropriate.
- 10. Move resident to edge of the bed nearest you.
- 11. Raise backrest so resident is in sitting position.
- 12. Place bed in low position.
- 13. Assist resident so he/she is sitting on the side of the bed with feet over the side touching the floor.
- 14. Allow resident to sit on edge of bed long enough to adjust to change in position.
- 15. Assist resident in putting on robe and slippers /shoes.

Transfer a Resident from Chair to Bed – <u>Two Assistants</u> – cont'd.

16. Place gait (transfer) belt properly around resident's waist (over clothing), make sure it is tight enough to be secure (not to slip).
17. Nursing assistants stand one on each side, facing the resident, feet 12 inches apart for a broad base of support.
18. Each assistant grasps the front and the back of the gait belt (using an underneath grasp).
19. The assistant on the side closest to the chair stands so that he/she can pivot and move away, allowing the resident unobstructed access to the chair.
20. Move the resident to a standing position on the count of three.
 Instruct the resident to lean forward and push off the bed, using the palms of his/her hands.
21. Nursing Assistants pivot slowly and smoothly by moving their feet, legs and hips toward the chair until the resident can feel the back of the chair with his/her legs.
22. Instruct the resident to place his/her hands on the armrests of the chair, lean forward slightly and lower to the chair.
23. Both nursing assistants bend their knees and support the resident as he/she lowers onto the chair.
24. Once the resident is situated, remove the gait belt.
25. Position the resident comfortably an in good body alignment (support affected side if applicable).
26. Place call signal within reach.
27. Hand hygiene.
28. Report any unusual observations to supervisor.

Comments:

Instructor's Signature _____ Date _____

Skills Checklist #8				
Position Resident in Bed				
Equipment: Supine				
Name				
Passed	Needs More Practice			
1. Explain the prod	cedure to the resident.			
2. Ask the resident how much they can do for themselves when appropriate.				
3. Provide privacy. Lock wheels.				
4. Hand hygiene.				
5. Elevate bed to comfortable working height. Lower side rail, if available (on side you are working).				
6. Turn resident o	nto his/her back.			
7. Gently move re	7. Gently move resident to center of bed (with head of bed flat).			
8. Position head in straight line with the spine.				
9. Elbows are slightly bent, hands resting at resident's side, toes pointing upward, legs are straight (do not allow legs to rotate outward).				
10. Position pillow properly under resident's head.				
11. Raise side rails. Place bed in low position.				
12. Place call signal within resident's reach.				
13. Hand Hygiene				

Side Lying Position

- _____1. Explain the procedure to the resident.
- _____ 2. Ask the resident how much they can do for themselves when appropriate.
- _____ 3. Provide privacy. Lock wheels.

Position Resident in Bed - cont'd.

- 4. Hand hygiene.
- 5. Elevate bed to comfortable working height. Lower side rail, if available (on side you are working).
- 6. Move resident to the side of the bed where his/her back will be positioned.
- 7. Gently turn residents to his/her side (ensure resident is not lying on arm).
- 8. Head Should be positioned in line with spine, body in straight alignment.
- 9. Top knee should be flexed.
- 10. Position pillow under head, at back, between legs, and, if appropriate, under top arm.
- _____ 11. Raise side rail. Place bed in low position.
- _____ 12. Place call signal within resident's reach.
- _____ 13. Hand hygiene.
- _____ 14. Report unusual observations to supervisor.

Comments:

Instructor's Signature _____ Date _____

Skills Checklist #9				
mbulation				
quipment: Gait Belt				
ame				
assed Needs More Practice				
1. Explain the procedure to the resident.				
2. Ask the resident how much they can do for themselves when appropriate.				
3. Get help, if needed.				
4. Provide privacy. Lock wheels.				
5. Hand hygiene.				
6. Assist resident to sitting position in bed, allow resident to gain balance when in this position (according to transfer skill).				
7. Assist in dressing and putting on appropriate shoes. Need firm support with non-skid soles.				
8. Place gait properly around resident's waist (over clothing). Make sure it is tight enough to be secure, <i>not to slip</i> .				
9. Stand in front of the resident maintaining the normal curve of your spine, knees slightly bent, and feet approximately 12 inches apart.				
10. Lean forward and grasp gait belt on both sides of the resident from underneath.				
11. Assist resident to stand. Allow resident to gain balance before walking.*				
12. Assist resident by walking on affected side (if applicable), stand at side or slightly behind the resident, giving support with both hands on the gait belt.				
13. Walk slowly. Observe for tiredness, weakness, etc. Let resident rest if necessary.				
14. Return resident to bed or chair. Make comfortable/safe.				
15. Remove gait (transfer) belt.				
16. Place call signal within resident's reach.				

Ambulation - cont'd.

_____ 17. Hand hygiene.

_____18. Record/report unusual observations to supervisor.

*If a resident becomes weak, falls, or loses balance; gently ease the resident to the floor. Stay with the resident and call for help. Before the resident is moved - **THEY MUST BE EXAMINED BY THE NURSE FOR INJURY.**

Comments:

Skills Checklist #10

Passive Range of Motion				
Equipment:	Bath blanket			
Name				
Passed		Needs More Practice		

- 1. Explain the procedure to the resident and ask the resident to report any discomfort.
- _____2. Ask the resident how much they can do for themselves, when appropriate.
- _____ 3. Hand hygiene.
- _____4. Provide privacy. Use bath blanket, if needed.
- _____ 5. Lock wheels on bend.
- _____6. Position bed at comfortable working height.
- _____7. Lower side rail, if available, on side you are working.

Upper Extremity

Shoulder

- _____ 8. Expose arm to shoulder.
- 9. Position hands correctly support joints.
- 10. Raise arm above head as far as possible keep elbow straight. Return. (Repeat 5 times).
- _____ 11. Keep elbow straight and move away from body. Return. (Repeat 5 times).
- _____ 12. Roll arm inward outward (movement at shoulder joint). (Repeat 5 times).

Elbow

- _____ 13. Position hands correctly support joints.
- _____14. Bend elbow as far as possible straighten completely. (Repeat 5 times).

Passive Range of Motion – cont'd.

____ 15. Position hands correctly – support joints.

____ 16. Extend hand palm up and rotate forearm palm down (supination – pronation) (Repeat 5 times).

Wrist

- _____ 17. Position hands correctly support joints.
- 18. Bend hand down as far as possible, bend hand up as far as possible (movement at wrist). (Repeat 5 times).
- _____ 19. Bend hand from side to side toward little finger, then towards thumb (movement at wrist). (Repeat 5 times).

Fingers

- _____ 20. Position arm and hand correctly support joints.
- _____21. Bend fingers to make a fist with thumb inside fully straighten fingers. (Repeat 5 times)
 - ____22. Spread thumb and fingers apart (keeping all straight) bring them back together again. (Repeat 5 times).
 - 23. Touch the tip of the thumb to the index finger. Open hand wide. Touch tip of thumb to each of the other fingers, opening hand wide between touches. (Repeat 5 times).

Lower Extremity

Hip

- _____ 24. Expose leg to hip.
- _____ 25. Position hands correctly support joints.
- 26. Move leg up off surface as far as possible keep knee straight. Return. (During movement keep opposite knee bent, foot flat on surface.) (Repeat 5 times).
- _____ 27. Move leg out to side as far as possible. Return to start. (Repeat 5 times).
- _____ 28. Roll leg in, roll leg out (movement at hip joint). (Repeat 5 times).

Knee

- ____ 29. Position hands correctly support joints.
 - 30. Bend knee as far as possible straighten completely. (Repeat 5 times).

Skills Checklist #10

Passive Range of Motion – cont'd.

Ankle

- 31. Position hands correctly support joint.
- 32. Bend foot up and down as far as possible, (movement at ankle). (Repeat 5 times).
- 33. Move foot from side to side (inversion-eversion). (Repeat 5 times).

Foot

- _____ 34. Position hands correctly support joint.
- _____ 35. Bend toes down <u>only</u> (curl under); bend toes up <u>only</u>. (Repeat 5 times).
- _____ 36. Spread toes apart. (Repeat 5 times).
- _____ 37. Remove bath blanket (if applied).
- 38. Raise side rail, if available.
- 39. Place call signal within resident's reach.
- _____ 40. Place bed in low position.
- _____ 41. Hand hygiene.

42. Report any unusual observations or complaints of pain to supervisor.

Comments:

Instructor's Signature Date

Skills Checklist #11

Assist with Oral Hygiene

Equipment: Gloves, toothbrush, toothpaste, emesis basin, fresh water in a cup, face towel, mouthwash and straw. Swabs and lip balm for care for unconscious resident.

Name _____

Passed ______ Needs More Practice _____

- 1. Assemble the equipment check label for correct name.
- _____2. Explain the procedure to the resident.
- _____3. Ask the resident how much they can do for themselves, when appropriate.
- _____ 4. Provide privacy. Lock wheels.
- _____5. Hand hygiene.
- 6. Put on gloves.
- 7. Raise bed to comfortable working height, then elevate head of bed.
- 8. Position towel to protect resident's clothing. Lower side rail to side you are working (if in bed).
- 9. Put water or a mixture of half water with half mouthwash in a cup, if applicable.
- 10. Have the resident rinse is/her mouth with the mouthwash or water, to moisten mouth.
- 11. Instruct the resident to expectorate the liquid mouthwash into the sink or emesis basin you have positioned under the resident's chin.
- _____ 12. Dampen the toothbrush and assist resident to put toothpaste on the dampened toothbrush.
- 13. If the resident is able, have him brush his/her own teeth including tongue; if he/she can't brush teeth and tongue for him/her. Use circular motions.
- 14. Have the resident rinse the toothpaste out of his/her mouth using mouthwash (half and half) or fresh water.
- _____ 15. Clean equipment.

Assist with Oral Hygiene - cont'd.

- _____ 16. Remove gloves and complete hand hygiene.
- _____ 17. Make resident comfortable, put equipment away.
- _____ 18. Place bed in low position. Raise side rails (if in bed).
- _____ 19. Place call signal within resident's reach.
- _____ 20. Report any unusual observations to supervisor.

Denture Care

- 1. Assemble the equipment check label for correct name.
- _____ 2. Explain the procedure to the resident.
- _____ 3. Ask the resident how much they can do for themselves, when appropriate.
- _____4. Provide privacy. Lock wheels.
- _____ 5. Hand hygiene.
- _____ 6. Put on gloves.
- 7. Prepare a denture cup filled with water or an emesis basin lined with washcloth or paper towel for placement of dentures.
- _____ 8. Lower side rail on side you are working, elevate head of bed (if in bed).
- 9. Ask the resident or you remove the dentures and place in denture cup or emesis basin.
- _____ 10. Have resident rinse mouth with solution preferred by resident, i.e. mouthwash, water.
- _____ 11. Clean tongue, gums, cheeks and lips with swabs or toothbrush moistened with water and toothpaste. Rinse mouth.
- _____ 12. Observe inside mouth for sores, etc. Raise side rail.
- _____ 13. Line sink with paper towel or washcloth and allow water to run when brushing dentures.
- _____ 14. Apply toothpaste or denture cleanser with dentures held securely in palm. Brush until dentures are clean.
- _____ 15. Rinse dentures thoroughly under cool running water.
- _____ 16. Examines dentures for cracks/breaks.
- 17. Return to denture cup or emesis basin, keeping dentures moist.
- _____ 18. Have resident replace dentures in mouth upper first, then lowers.
- _____ 19. Clean equipment.

Assist with Oral Hygiene – cont'd.

- _____ 20. Remove gloves and complete hand hygiene.
- _____ 21. Make resident comfortable. Put equipment away.
- _____ 22. Place call signal within resident's reach.
- _____ 23. Report any unusual observations to supervisor.

Mouth Care for Unconscious Resident

- ____1. Assemble the equipment.
- _____ 2. Explain the procedure to the resident.
- _____ 3. Provide privacy. Lock wheels.
- _____ 4. Hand hygiene.
- _____ 5. Put on gloves.
- _____6. Raise bed to comfortable working height, then elevate the head of the bed 30 degrees.
- _____7. Lower side rail, if available, on side you are working.
- _____ 8. Turn resident's head toward you.
- _____9. Position towel under resident's chin.
- 10. Wipe the resident's entire mouth with moistened swabs. Clean tongue, gums, inside cheeks and lips. Observe inside of mouth for sores.
- _____ 11. Dry resident's face with towel and apply lubricant to resident's lips.
- _____ 12. Make resident comfortable.
- _____ 13. Raise side rail, if available.
- _____ 14. Clean and put equipment away.
- _____ 15. Remove gloves and complete hand hygiene.
- _____ 16. Lower bed. Place call signal within resident's reach.
- _____ 17. Report any unusual observations to supervisor.

Comments:

Instructor's Signature

Date

Skills Checklist #12

Partial Bath

Equipment: Soap, soap dish, wash cloth, basin, bath thermometer (if available), towels, sheet/bath blanket, clean gown, gloves.

Name _____

Passed ______ Needs More Practice _____

- 1. Assemble the equipment.
- _____ 2. Explain the procedure to the resident.
- _____ 3. Ask the resident how much they can do for themselves, when appropriate.
- _____ 4. Provide privacy. Lock wheels.
- _____5. Hand hygiene.
- 6. Offer bedpan or urinal before you begin. (Refer to appropriate skill).
- _____7. Raise bed to comfortable working height.
- _____ 8. Lower side rail, if available, on side you are working.
- _____ 9. Help resident move to side of bed near aide.
- 10. Position resident comfortably, supine (if resident can tolerate).
- _____ 11. Remove resident's gown.
- _____12. Place sheet/bath blanket over top linen and fold the top linen to the foot of the bed without exposing resident.
- _____ 13. Fill wash basin two thirds full with 105°-115° F. (36.1° C) water. If available, use a thermometer to check.
- _____ 14. Place towel across resident's chest. Make a mitten or four squares with the washcloth and wash resident's face. Dry face well by patting.
- _____ 15. Place towel under resident's far arm to protect bed, wash hand and axilla. Rinse and dry well.
- _____ 16. Wash other hand and axilla.

Partial Bath – cont'd.

- ____ 17. Wash and pat dry areas where body folds and creases exist (i.e. under breasts, abdominal folds).
- _____ 18. Place towel under perineum.
- 19. Offer resident soapy cloth and ask him/her to wash genitals. If they are unable to do this then provide perineal care:
 - a. Complete hand hygiene, put on gloves
 - b. Men cleanse penis by pushing back foreskin, gently washing penis and scrotum. Return foreskin to natural position.
 - c. Women gently separate labia, wash down one side of labia, then the other. Wash from front to back – change cloth or cloth surface with each wipe.
 - d. Turn resident to his/her side.
 - e. Wash upper thigh and buttocks. Wash anal area. (Wash from front to back).
 - f. Rinse and dry thoroughly.
 - g. Remove towel from under perineum.
 - h. Apply moisture barrier, if applicable.
- _____ 20. Remove gloves and complete hand hygiene.
- _____ 21. Assist with dressing and grooming.
- _____ 22. Make resident comfortable.
- _____ 23. Raise side rail, if available, on side you are working.
- _____ 24. Place call signal within resident's reach.
- _____ 25. Place bed in low position.
- _____ 26. Empty, rinse, clean and put equipment away. Place dirty linen in bag.
- _____ 27. Perform hand hygiene.
- _____ 28. Report any unusual observations to supervisor.

Comments:

Skills Checklist #13

Complete Bed Bath

Equipment: Soap, soap dish, wash cloth, gloves, washbasin, bath thermometer (if available), face and bath towels, bath blanket, clean gown, lotion

Name _____

Passed ______ Needs More Practice_____

- 1. Assemble the equipment.
- _____2. Explain the procedure to the resident.
- _____ 3. Ask the resident how much they can do for themselves, when appropriate.
- _____ 4. Provide privacy. Lock wheels.
- _____5. Hand hygiene.
- 6. Offer bedpan or urinal before you begin. (Refer to appropriate skill).
- _____7. Raise bed to comfortable working height.
- _____8. Lower side rail to side you are working.
- _____ 9. Help resident move to side of bed near aide.
- 10. Position resident comfortably, supine (if resident can tolerate).
- 11. Place sheet/bath blanket over top sheet and then remove top sheet without exposing the resident or fold the top linen to the foot of the bed to be reused.
- _____ 12. Remove resident's gown.
- _____ 13. Fill wash basin two thirds full with 105-115° F. (36.1 °C) water. If available, use a thermometer to check .
- 14. Place towel across resident's chest. Wash resident's face, rinse and dry face well by patting.
- 15. Place towel under resident's far arm to protect bed, wash shoulder, arm, axilla and hand. Rinse and pat dry.

Complete Bed Bath – cont'd.

- _____ 16. Place resident's hand in water and wash, clean fingernails. (Refer to appropriate skills.) Rinse and pat dry.
- _____ 17. Wash other shoulder, arm, axilla and hand.
- _____ 18. Place towel across resident's chest. Fold bath blanket down. Wash neck and chest. Rinse and pat dry. Examine skin area under breast.
- _____ 19. Fold bath blanket down to pubic area and wash resident's abdomen. Rinse and pat dry. Replace bath blanket.
- _____ 20. Place towel under the far leg, wash, rinse and pat dry.
- _____ 21. Wash foot (place in basin if possible). Rinse and pat dry all creases and between toes well.
- _____ 22. Wash other leg and foot.
- _____ 23. Empty dirty water, refill basin with water. Check temperature.
- _____ 24. Raise bed to comfortable working position and lower side rail, if available.
- _____ 25. Position resident on side.
- _____ 26. Place towel to protect bed. Wash rinse and pat dry the resident's back of neck, and back down to buttocks.
- _____ 27. Give the resident a back rub with warmed lotion. (Refer to appropriate skill).
 - _____ 28. Place towel under perineum.
 - ____ 29. Offer resident soapy cloth and ask him/her to wash genitals. If they are unable to do this then provide perineal care:
 - a. Complete hand hygiene and put on gloves.
 - b. Men cleanse penis by pushing back foreskin, gently washing penis and scrotum. Change cloth or cloth surface with each wipe, Rinse and pat dry. Return foreskin to natural position.
 - c. Women gently separate labia, wash down one side of labia, then the other. Wash from front to back – change cloth or cloth surface with each wipe.
 - d. Turn resident to his/her side.
 - e. Wash upper thigh and buttocks. Wash anal area. (Wash from front to back).
 - f. Rinse and dry thoroughly.
 - g. Remove towel from under perineum.
 - h. Apply moisture barrier, if applicable.
 - _____ 30. Remove gloves and complete hand hygiene.
 - _____ 31. Assist with dressing and grooming.
 - _____ 32. Make resident comfortable.

Complete Bed Bath – cont'd.

_____ 33. Raise side rail, if available, on the bed and lower the bed.

34. Place call signal within resident's reach.

35. Empty, rinse, clean and put equipment away.

_____ 36. Hand hygiene.

37. Report any unusual observations to supervisor.

Comments:

Instructor's Signature _____ Date _____

Skills Checklist #14

Shower

Equipment: Towels, thermometer (if available), washcloth, soap, resident's clean clothing, disenfectant for cleaning, gloves.

Name _____

Passed ______ Needs More Practice _____

- 1. Assemble the equipment.
- _____2. Explain the procedure to the resident.
- _____ 3. Ask the resident how much they can do for themselves, when appropriate.
- _____4. Insure privacy and retain the resident's dignity.
- _____ 5. Hand hygiene.
- _____6. Apply gloves.
- 7. Check for possible safety hazards in shower room, including water temperature.
- _____ 8. Lock brakes on shower chair.
- 9. Assist resident in getting undressed and into the shower chair.
- _____ 10. Help the resident to wash himself/herself, if needed.
- _____ 11. Help resident out of the shower, being careful he/she stays warm.
- _____ 12. Dry resident well. Assist with dressing and grooming. Transfer to w/chair if appropriate.
- _____ 13. Return resident to room or wherever he/she is to go at the time.
- _____ 14. Make resident comfortable.
- _____ 15. Clean shower chair and bathroom area. Remove all soiled linen.
- _____ 16. Hand hygiene.
- _____ 17. Report any unusual observations to supervisor.

Shower – cont'd.

Comments:

Instructor's Signature _____ Date _____

Skills Checklist #15

Back Rub

Equipment: Bath blanket, bath towel, lotion

Name _____

Passed _____ Needs More Practice_____

- 1. Assemble the equipment.
- _____ 2. Explain the procedure to the resident.
- _____ 3. Provide privacy. Lock wheels.
- _____ 4. Hand hygiene.
- _____ 5. Raise bed to comfortable working height and as flat as the patient can tolerate. Lower side rail on side you are working.
- 6. Position resident on their side.
- 7. Expose the back, shoulder and upper arms and buttocks. Cover the rest of the body.
- _____ 8. Place the towel on the bed along the back.
- _____ 9. Warm lotion by holding under warm water or warming it with your palms.
- _____ 10. Apply lotion to entire back.
- _____ 11. Exert firm pressure upward, buttocks to shoulder, and relax pressure shoulders to buttocks.
- 12. Use circular motions with palms over bony prominence especially shoulders/scapula and coccyx.
- _____ 13. Back rub should be done for 1.5 to 3 minutes.
- _____14. Wipe off excess lotion with the towel.
- 15. Cover and make resident comfortable.
- _____ 16. Put equipment away.
- _____ 17. Place call signal within resident's reach.

Back Rub – cont'd.

_____ 18. Lower bed to its lowest position and raise side rail.

_____ 19. Hand hygiene.

_____ 20. Report any observations to supervisor.

Comments:

Skills Checklist #16

Shampoo a Resident's Hair

Equipment: Shampoo, washcloth, towels - optional cotton for ears, pitcher blow dryer

Name		

Passed Needs More Practice

- 1. Assemble the equipment. Check to see if the resident has a special shampoo. Remove hearing aid and glasses if the resident has them.
- 2. Explain the procedure to the resident.
- _____3. Ask the resident how much they can do for themselves, when applicable.
- _____ 4. Hand hygiene.
- 5. Protect eyes and ears from water and shampoo.
- 6. Wet the hair. Apply the shampoo.
- 7. Wash hair and massage the scalp with fingertips or have resident do if able.
- 8. Rinse hair thoroughly.
- 9. Dry thoroughly by patting hair and scalp with towel.
- 10. Comb hair according to proper procedure (blow dry if available).
- _____11. Put equipment away.
- 12. Make resident comfortable.
- 13. Hand hygiene.
- 14. Report any observations to supervisor.

Comments:

Instructor's Signature Date

Skills Checklist #17

Nail Care

Equipment:	Drangewood Stick, emery board, lotion, basin, soap, washcloth, 2 towels, bath
	nermometer, gloves

Name _____

Passed	Needs More Practice

- _____ 1. Wash your hands.
- _____ 2. Identify yourself by name. Identify the resident by name.
- _____3. Explain the procedure to the resident. Speak clearly, slowly and directly. Maintain face-to-face contact whenever possible.
- 4. Provide for resident's privacy with curtain, screen or door.
- 5. If resident is in bed, adjust bed to a safe level, usually waist high. Lock bed wheels.
- 6. Fill the basin halfway with warm water. Test water temperature with your thermometer or wrist to ensure it is safe. Water temperatures should be 105° F. Have residents check water temperature. Adjust if necessary.
- 7. Place basin at a comfortable level for the resident. Soak the resident's nails in the water. Soak all ten fingers for at least five minutes.
- 8. Remove hands. Wash hands with soapy washcloth. Rinse. Pat hands dry with towel, including between fingers. Remove the hand basin.
- _____ 9. Put on gloves.
- _____ 10. Place the resident's hand on the towel. Use the pointed end of the orangewood stick or a nail brush to remove dirt from under the nails.
- 11. Wipe orangewood stick on towel after cleaning under each nail. Wash resident's hands again. Dry them thoroughly.
- 12. Shape nails with file or emery board. File in a curve. Finish with nails smooth and free of rough edges.

Nail Care – cont'd.

- _____ 13. Apply lotion from fingertips to wrist.
- _____ 14. Empty, rinse and dry basin. Place basin in designated dirty supply area or return to storage, depending on facility policy.
- _____ 15. Place soiled clothing and linens in proper containers.
- _____ 16. Remove and dispose of gloves properly. Wash your hands.
- _____ 17. Make resident comfortable. Make sure sheets are free from wrinkles and bed free from crumbs.
- _____ 18. Return bed to lowest position. Remove privacy measures.
- _____ 19. Place call light within resident's reach.
- _____ 20. Report any observations to supervisor.
- _____ 21. Document procedure using facility guidelines.

Comments:

Skills Checklist #18

Undress/Dress – Groom Resident

Equipment: Resident clothing, comb/brush, sock, shoes

Name_____

Passed ______ Needs More Practice_____

- 1. Explain the procedure to the resident.
- _____ 2. Ask the resident how much they can do for themselves, when appropriate.
- _____ 3. Provide privacy. Lock wheels.
- _____ 4. Hand hygiene.
- _____ 5. Choose appropriate clothing with resident's preference considered.
- _____6. Undress the resident:
 - a. Remove one arm of a shirt or blouse at a time.
 - b. Remove clothing from affected arm or leg last.
 - c. Pull clothing off being gentle and with even motions (no jerking).
- _____7. Dress the resident:
 - a. Remove the affected arm or leg first.
 - b. Button, tie, secure clothing appropriately for resident.
 - c. Resident should be dressed appropriately.
 - d. Put on shoes and socks.
- _____ 8. Groom hair appropriately:
 - a. Ask resident's preference for how to fix hair.
 - b. Brush and comb hair starting with ends going toward scalp.
- _____ 9. Offer to clean glasses.
- _____10. Be sure resident is comfortable.
- _____ 11. Hand hygiene.

Undress/Dress – Groom Resident – cont'd.

_____ 12. Report unusual observations to supervisor.

Comments:

Skills Checklist #19

Shave a Resident with an Electric Razor - Maniken

Equipment: Electric Razor, towel, washcloth, soap, basin of warm water, pre-shave lotion and aftershave lotion (if available), mirror.

Name _____

Passed ______ Needs More Practice_____

- _____1. Assemble the equipment.
- _____2. Explain the procedure to the resident.
- _____ 3. Ask the resident how much they can do for themselves, when applicable.
- _____ 4. Provide privacy.
- _____ 5. Hand hygiene.
- 6. Raise the head of the bed or assist the resident to the chair.
- _____7. Wash face and neck with soap and water, rinse and towel dry so face is clean and facial oils are removed before starting.
- 8. If resident has dentures, make sure they are in.
- 9. Ask the resident if they have pre-shave or after shave lotion. Do not use lotion if skin is red or irritated.
- _____ 10. Apply pre-shave lotion, if available, using care not to get any in eyes or mouth of resident. Include the neck (if appropriate).
- 11. Plug razor into 110-volt receptacle or, if oxygen is in use, use battery-operated razor. Report dull blades, frayed cords or poor functioning equipment to your supervisor.
- 12. With fingers of one hand, hold the skin tight as you shave in circular motions in the direction the hairs grow.
- 13. Apply after-shave lotion if available.

Shave a Resident with an Electric Razor - cont'd.

14. Make the resident comfortable. Make sure call signal is within reach and side rails up if indicated.

- _____15. Clean equipment and put in proper place. Clean razor removing the head and using a soft brush to remove the whickers. Wipe off head with alcohol prep. Put razor back in case. NEVER USE A RESIDENT'S OWN RAZOR FOR ANYONE ELSE. THIS IS THEIR PRIVATE PROPERTY.
- _____16. Hand hygiene.
- _____17. Report unusual observations to supervisor.

Comments:

Skills Checklist #20

Urinal for a Male Resident

Equipment: Urinal, urinal cover, water or wet cloth and towel for hand hygiene

Passed _____ Needs More Practice_____

- _____1. Assemble the equipment.
- _____ 2. Explain the procedure to the resident.
- _____ 3. Ask the resident how much they can do for themselves.
- _____ 4. Provide privacy.
- _____ 5. Hand hygiene.

_____6. Apply gloves.

- _____7. Elevate head of bed or have resident stand, if possible.
- 8. Place or assist the resident to place the urinal so urine will flow into the urinal.
- 9. Place the call signal within easy reach of the resident and tell him to signal when he is finished.
- _____ 10. Remove gloves, perform hand hygiene and leave the room; be alert for the call signal.
- _____ 11. When resident signals, or after a short time, return to the room.
- _____ 12. Hand hygiene and put on gloves.
- _____ 13. Remove urinal, cover and take it to the bathroom.
- _____ 14. Check urine for unusual appearance, if resident is on intake-output, measure the urine.
- 15. Empty urine into the toilet. Rinse urinal with clean cold water and return to resident's bedside.

Urinal for a Male Resident – cont'd.

_____ 16. Remove gloves. Hand hygiene.

- _____ 17. Assist the resident with hand hygiene and make comfortable.
- _____ 18. Hand hygiene
- 19. Record output if required; report any unusual observations to supervisor.

Comments:

Skills Checklist #21

Bedpan or Commode

Equipment: Bedpan, bedpan cover, tissue, water or wet wash cloth, towel

Name	۱ <u>ــــــــــــــــــــــــــــــــــــ</u>	

Passed ______ Needs More Practice _____

- _____1. Assemble the equipment.
- _____ 2. Identify yourself by name and resident by name.
- _____ 3. Explain the procedure to the resident.
- 4. Ask the resident how much they can do for themselves.
- _____ 5. Provide privacy. Lock wheels.
- _____ 6. Elevate bed to a comfortable working height.
- _____7. Complete hand hygiene and put on gloves.
- 8. If bedpan is metal, warm the bedpan by running warm water over it. Dry the rim of the bedpan.
- 9. Lower side rail on side you are working, fold back the top sheets to foot of the bed.
- _____ 10. Raise the resident's gown.
- 11. Ask the resident to bend his/her knees, put feet flat on the mattress, and raise hips by pressing feet down on bed. If necessary, help the resident raise his/her buttocks by slipping your hand under lower part of the back. Place bedpan in correct position (STANDARD BEDPAN = wide end aligned with buttocks, FRACTURE BEDPAN = handle toward foot of bed).
- 12. If resident is unable to lift buttocks, turn resident to his/her side away from you. Slip bedpan under hips and gently roll person back onto bedpan, keeping bedpan centered underneath.

Bedpan or Commode - cont'd.

- _____13. Replace covers over resident.
- _____14. Raise the side rail and lower bed.
- _____15. Raise head of bed. Resident should be in as much of a sitting position as possible.
- _____ 16. Place toilet tissue can call light within easy reach. Ask resident to signal when finished.
- _____ 17. Remove gloves and discard. Hand hygiene. Leave room for privacy. Watch for the call signal
- _____18. When resident signals, return to room.
- 19. Hand hygiene and put on gloves. Raise the bed and lower the side rail on side you are working.
- _____ 20. Lower head of bed.
 - ____ 21. Help the resident raise hips and remove bedpan carefully. Cover bedpan immediately.
- _____ 22. Provide perineal care of resident (refer to skill #28).
- _____ 23. Cover the resident. Raise side rail, if available, and lower bed.
- 24. With gloved hands, take bedpan to bathroom. Empty into toilet (if an output, measure first – refer to skill #26). Check for color, odor and consistency of contents before flushing. Report to supervisor.
- _____ 25. Clean equipment and put away (follow facility's policy).
- _____ 26. Remove gloves. Hand hygiene
- _____ 27. Help resident wash his/her hands and position comfortably.
- _____ 28. Report any unusual observations to the supervisor.

Using the Commode

- _____ 1. Get help if needed, for transferring.
- _____ 2. Explain the procedure to the resident.
- _____ 3. Ask the resident how much they can do for themselves.
- 4. Position commode beside the bed, lock wheels of commode.

Bedpan or Commode – cont'd.

_____ 5. Provide privacy.

- _____ 6. Hand hygiene.
- _____7. Transfer resident from bed, following correct transfer procedure (refer to skill #7).
- _____ 8. Never leave a confused, weak resident with alarm alone on the commode.
- 9. If resident is alert, leave room, place call signal within easy reach of the resident and check resident frequently.
- 10. When resident is finished and you return to room, complete hand hygiene and put on gloves.
- 11. Help him/her with pericare (refer to skill #28), if necessary and then help resident to bed or chair.
- 12. Follow steps 24 through 28 of the above procedure inserting commode instead of bedpan.

Comments:

Skills Checklist #22

Prepare a Resident for a Meal and Feed a Resident

Equipment: Washcloth for washing resident's hands, napkin/clothing protector, silverware, straw, assistive devices if appropriate.

Name_____

Passed ______ Needs More Practice_____

Prepare Resident for Meal

_____ 1. Explain the procedure to the resident.

- 2. Ask the resident how much they can do for themselves. Encourage resident to assist as much as he/she is able.
- 3. Take care of elimination needs (see appropriate skill).
- _____ 4. Hand hygiene.
- 5. Make sure that dentures are clean and inserted (if appropriate). Put on glasses and insert hearing aid if appropriate.
- _____6. Help resident wash hands. Check nails.
- _____7. Remove unpleasant odors/objects.
- _____8. Positioning:
 - a. In bed-position resident on back with head of bed elevated and head slightly bent forward
 - b. In chair position resident in upright position with feet flat on floor.
- _____ 9. Check to make sure the resident has the correct diet.
- _____ 10. Place tray approximately 12-18 inches from the resident's mouth.
- _____ 11. Help resident open packaged items, cut meats and pour liquids.

Prepare a Resident for a Meal and Feed a Resident – cont'd.

Feed the Resident

- 12. Make yourself comfortable. Sit facing the resident when possible.
- 13. Position napkin/clothing protector to protect resident's clothing.
- 14. Season food according to resident's preference
- 15. Ask resident what he/she would like to eat first.
- _____16. Test hot foods by feeling the container and/or dropping a small amount of food on the inside of your wrist. Never blow on or taste the food.
- 17. Offer foods from the tip of a half filled spoon.
- 18. If resident has had a stroke, direct food to the unaffected side and check for food stored in the affected side of the mouth. Watch resident's throat to check for swallowing.
- 19. Alternate liquids and solids.
- 20. Feed resident slowly. Allow him/her to taste, chew and swallow before giving more food. Do not force food.
- 21. If resident is not eating, notify supervisor for appropriate substitute.
 - 22. When finished, remove napkin/clothing protector, assist resident in washing face and hands. Make him/her comfortable.
- 23. If resident is on intake/output, record intake.
- 24. Hand hygiene.
- 25. Report anything unusual to supervisor, e.g. how much was eaten or comments concerning meal.

Comments:

Skills Checklist #23

Temperature/Pulse and Respiration

Equipment: Thermometer and protective sheaths, watch with a second hand.

Name _____

Passed _____ Needs More Practice _____

A. Oral Temperature with Electronic Thermometer

- _____1. Assemble equipment
- _____2. Explain the procedure to the resident.
- _____ 3. Hand hygiene.
- 4. Ask the resident if he/she has had hot or cold fluids recently, or been smoking. If he/she was, wait 10 minutes.
- 5. Check to make sure the probe connector is properly placed in receptacle.
- 6. Remove probe from stored position and insert into the sheath or probe cover.
- _____ 7. Insert the covered probe into the resident's mouth under the tongue.
- _____ 8. Hold the probe in the resident's mouth.
- 9. Wait for the alarm to beep then remove the probe from the resident's mouth.
- _____ 10. Discard the used probe cover/sheath. Do not touch while removing.
- _____11. Read and record the temperature in appropriate place. Must be exact.
- 12. Return the probe to its stored position, and store in charging stand.
- _____ 13. Make the resident comfortable. Hand hygiene and report any temperature above 99.6 °F. or 37.5 °C to supervisor.

Temperature Pulse and Respiration – cont'd.

B. Tympanic Temperature

- _____1. Assemble equipment
- _____2. Explain the procedure to the resident.
- _____ 3. Hand hygiene.
- _____ 4. Place cover on probe.
- _____ 5. Pull ear pinna up and back, insert probe securely in ear.
- _____ 6. Depress activation button and hold in ear for recommended time.
- _____7. Remove thermometer from ear and read results. Must be accurate.
- _____8. Eject and dispose of probe cover promptly.
- 9. Record the temperature in appropriate in appropriate place.
- _____ 10. Hand hygiene.
- _____ 11. Report any temperature above 99.6° F. or 37.5° C.

C. Measuring the Resident's Radial Pulse

* This is usually done at the same time that you take the resident's temperature and respirations.

- _____1. Explain the procedure to the resident.
- _____ 2. Hand hygiene.
- _____ 3. Position resident so her arm and hand are resting comfortably.
- 4. Find the pulse by placing your fingertips on the palm side of the resident's wrist over the radial artery, thumb side.
- _____5. After locating the pulse, note rate, rhythm and force.
- _____6. Count the pulse for one full minute.
- _____7. Pulse rate must be accurate within 4 beats.
- 8. Record the pulse on the TPR sheet in the appropriate place.
- 9. Report any pulse rate under 60 or over 100 to the supervisor. Also report any abnormalities.

Temperature Pulse and Respiration – cont'd.

D. Measuring the Resident's Respirations

Note: The respirations are usually taken right after the pulse with resident's head on chest.

- 1. Continue holding the resident's wrist after obtaining the pulse.
- 2. If you cannot see the rise and fall of the resident's chest, fold the resident's arm across the chest, and then you can feel the respirations.
- 3. Count each rise and fall of the chest as one respiration.
- 4. Count the respiration for one full minute or 60 seconds.
- 5. Calculate accurate respiratory rate within 2 respirations.
- 6. Record the respirations in the appropriate place.
- _____7. Make the resident comfortable.
- 8. Hand hygiene.
 - 9. Report anything unusual with rhythm, sound or if respirations are less than 12 or more than 20 to your supervisor.

Comments:

Skills Checklist #24

Blood Pressure

Equipment: Sphygmomanometer (blood pressure cuff), stethoscope, antiseptic pad, blood pressure board, book or form used in your facility

Name	 			

Passed _____ Needs More Practice_____

- _____1. Assemble equipment
- _____ 2. Explain the procedure to the resident.
- _____ 3. Hand hygiene.
- _____4. Wipe the earplugs and diaphragm/bell of the stethoscope with the antiseptic pads.
- _____5. Have the resident resting quietly. He/she should be either lying down or sitting in a chair.
 - 6. The resident's arm should be bare up to the shoulder or the resident's sleeve should be well above the elbow.
- 7. The resident's arm from the elbow down should be resting fully extended on the bed. Or it might be resting on the arm of the chair, or your hip, well-supported, with the palm upward.
- 8. Unroll the cuff and loosen the valve on the bulb. Then squeeze the compression bag to deflate it completely.
- 9. Wrap the cuff around the resident's arm one inch above the bend of the elbow snugly and smoothly. *Do not wrap so tightly that the resident is uncomfortable*.
- _____ 10. Leave the arm area clear where you will place the bell or diaphragm of the stethoscope.
- _____ 11. Be sure the manometer is in position so it can be read easily.
- 12. With your fingertips, find the resident's brachial pulse at the inner aspect of the arm above the elbow (brachial artery). This is where you will place the diaphragm or bell of the stethoscope.
- _____ 13. Correctly place the earplugs of the stethoscope into your ears.

Blood Pressure – cont'd.

- ____ 14. Tighten the thumbscrew of the valve to close it. Turn it clockwise. Be careful not to turn too tightly.
- _____ 15. Place the stethoscope over the brachial artery. Inflate cuff to a reading of at least 170.
- _____ 16. Slowly open the valve counter clock-wise. This allows the air to escape.
- _____ 17. Note the calibration (number) that the pointer passes as you hear the first sound. This point indicates the systolic pressure (or the top number).
- 18. Continuing releasing the air from the cuff. When the sounds change to a softer or muffled and faster thud or disappear, note the calibration. This is the diastolic pressure (or bottom number).
- _____ 19. Deflate the cuff completely. Remove it from the resident's arm.
- 20. Measure accurately must be within (+/-) 4 mm (rounded up to the nearest number).
- _____ 21. Record blood pressure in appropriate place.
- _____ 22. After using the blood pressure cuff, replace it in the case.
- _____ 23. Wipe the earplugs and diaphragm/bell of the stethoscope again with an antiseptic swab.
- _____ 24. Make the resident comfortable.
- _____ 25. Hand hygiene.
 - 26. Report to your supervisor that you measured the resident's blood pressure, the time that you measured the blood pressure, and your observations of anything unusual. Report Systolic over 140 or less than 90. Diastolic over 90 or less than 50.

Comments:

Skills Checklist #25

Height and Weight

Equipment: Upright scale or scale used in your facility.

Name _____

Passed _____ Needs More Practice_____

- _____1. Assemble equipment
- _____ 2. Ask the resident how much they can do for themselves.
- _____ 3. Hand hygiene.
- 4. Transport/walk resident to scale or take the scale to the bedside.
- _____5. Place weights to extreme left and verify balance.
- 6. Make sure the resident is clothed consistent with the last weighing. Position resident on the scale.
- 7. Move weights to estimated weight or read digital scale accurately.
- 8. Balance weights until bar hangs halfway between.
- 9. Add the two figures record accurately in appropriate place must be exact.
- _____ 10. Lower height bar to top of resident's head.
- 11. Calculate height accurately record in appropriate place.
- 12. Return resident to room/bed replace equipment.
- _____ 13. Record in appropriate place.
- _____ 14. Hand hygiene.
- _____ 15. Report any variations to your supervisor.

Skills Checklist #25 Height and Weight – cont'd. Comments:

Skills Checklist #26

Measure Intake and Output

Equipment: Intake chart, intake/output sheet, urinal or bedpan, measured graduate, gloves

Name	

Passed ______ Needs More Practice _____

- 1. Explain to the resident the amount of fluids he/she drinks is being recorded and ask him/her to help if able.
- 2. Observe all fluids the resident drinks during and between meals.
- _____ 3. Accurately calculate amount of liquids resident drinks.
 - 4. Check the intake chart for standard amounts. Make sure the resident has consumed everything being recorded.
- 5. At the end of the shift, total everything consumed during the shift and record in mL's in the designated space on intake-output sheet.

Output

- 6. Explain to the resident that you will be measuring the amount of urine he/she is putting out, and explain he/she must use urinal or bedpan.
- 7. Instruct the resident no to put toilet tissue in the bedpan.
- 8. After the resident has urinated, using gloved hands, pour urine from urinal or bedpan into the graduate for measuring urine.
- 9. Place on level surface. Accurately read the amount of urine by using the graduated lines on the container.
- _____ 10. Empty urinal or bedpan, rinse and return to proper place.
- _____ 11. Remove gloves and complete hand hygiene.
- _____ 12. Accurately record the amount of the output on the intake/output sheet in mL's.
- _____ 13. Total the entire amount of output at the end of the shift and accurately report/record, as required by your facility.

Measure Intake and Output – cont'd.

Comments:

Skills Checklist #27

Catheter Care and Empty Drainage Bag

Disposable catheter care kit if used by your facility or materials listed in facility Equipment: catheter care procedure. Soap and water, wash cloth, towel, disposable gloves (if used in your facility). Graduate for emptying bag, antiseptic wipes and plastic barrier.

Name

Passed Needs More Practice

Catheter Care

- 1. Assemble equipment.
- 2. Explain the procedure to the resident.
- 3. Provide privacy.
- 4. Hand hygiene.
- 5. Fill basin with warm water.
- 6. Elevate bed to comfortable working height. Side rail down on the side you are working.
- 7. Put on gloves.
- 8. Place towel under perineal area.
- 9. Gently separate labia on female, wash from front to back. Change cloth or cloth surface with each wipe. Gently pull back foreskin on male, replace after cleansing and rinsing. Pat dry.
- 10. Cleanse area around the meatus, then beginning at meatus, wash the catheter 4 inches down the tubing.
- 11. Clean and put equipment away.
- _____ 12. Remove gloves and complete hand hygiene.
- 13. Raise side rail and lower bed.

Catheter Care and Empty Drainage Bag – cont'd.

- 14. Make resident comfortable.
- 15. Report to supervisor that care has been given and any unusual observations.

Empty Drainage Bag

- ____1. Assemble equipment.
- _____ 2. Hand hygiene.
- 3. Put on gloves.
- 4. Remove outer cover of catheter bag.
- 5. Place plastic barrier under graduate, positioned directly under drainage bag.
- 6. Open drain and let urine run into graduate. Be sure you do not contaminate drain.
- 7. Close drain.
- _____8. Wipe drainage with antiseptic.
- 9. Replace drainage tube in protective covering on bag.
- _____10. Check position of drainage bag and tubing to make sure it is positioned correctly.
- _____ 11. Replace out covering over cath-bag.
- _____12. Measure/calculate amount accurately.
- 13. Empty, rinse and return equipment to storage.
- 14. Remove gloves, complete hand hygiene.
- _____ 15. Record intake and output, if applicable.
- _____ 16. Report any unusual observations to supervisor.

Comments:

Skills Checklist #28

Provide Incontinent Care

Equipment: Basin of warm water or peri-wash, gloves, soap, towel and washclothe(s), moisture barrier, peri-wipes

Name _____

Passed ______ Needs More Practice_____

- _____1. Assemble equipment
- _____ 2. Explain the procedure to the resident.
- _____ 3. Provide privacy. Lock wheels.
- _____ 4. Hand hygiene.
- _____ 5. Put on gloves.
- 6. Elevate bed to comfortable working height. Side rail down on side you are working.
- _____7. Remove soiled pads, clothing, linen.
- _____ 8. Put dirty linen in appropriate place.
- _____9. Remove gloves and complete hand hygiene.
- _____ 10. Reapply gloves.
- _____ 11. Place towel under perineum.
- _____ 12. Wash and rinse abdomen and anterior upper thighs (all areas in contact with urine/feces).

Men- cleanse penis by pushing back foreskin – gently wash around penis and scrotum. Return foreskin to its natural position.

Women – gently separate labia – wash down one side then the other. (Wash from front to back).

_____ 13. Change cloth or cloth surface with each wipe.

Provide Incontinent Care – cont'd.

- _____ 14. Place soiled washcloths in appropriate place.
- _____ 15. Turn resident to side. Wash buttocks and upper thighs.
- 16. Wash anal area, front to back with warm water or use disposable wipes and then discard properly.
- _____17. Rinse and dry skin thoroughly.
- _____ 18. Remove towel from under perineum. Put used towels in appropriate place.
- _____ 19. Clean and put equipment away.
- _____ 20. Remove gloves and complete hand hygiene.
- _____ 21. Reapply gloves and apply moisture barrier if applicable (followed by removing gloves and hand hygiene).
- _____ 22. Wash resident's hands.
- _____ 23. Make sure clothing and linen are clean and dry.
- _____ 24. Make resident comfortable.
- _____ 25. Raise side rail and lower bed.
- _____ 26. Place call signal within resident's reach.
- _____ 27. Report any unusual observations.

Comments:

Skills Checklist #29

Apply Antiembo	lism Stockings
Equipment: Ela	stic Stockings
Name	·····
Passed	Needs More Practice
Note: Antiembolis	sm stockings should <u>always</u> be applied with the resident in bed.
1. Assemb	ole equipment
2. Explain	the procedure to the resident.
3. Provide	privacy. Lock wheels.
4. Hand hy	/giene.
5. Elevate	bed to comfortable working height.
6. Position	resident in a supine position in bed.
7. Apply st	ockings
b. c. d.	Turn elastic stocking inside out to heel. Place resident's toes into foot of elastic stocking making sure that sock is smooth. Slide remaining portion of sock over resident's foot being sure that the toes are covered. Continue to pull onto leg and thigh. Make sure there are no wrinkles and heel of stocking is in correct location.
8. Lower	oed.
9. Hand h	ygiene.
10. Make	resident comfortable.
11. Place	call signal within resident's reach.

_____ 12. Report any unusual observations to supervisor.

Apply Antiembolism Stockings – cont'd.

Comments:

Skills Checklist #30

Communication/Resident's Rights/Infection Control/Resident Safety

Objective: To be used whenever student does not return demonstration.

Name								

Passed _____ Needs More Practice _____

- 1. Organize care in an efficient and safe manner.
- _____ 2. Answer call signal promptly in friendly manner.
- _____ 3. When entering resident's room, knock and wait for acknowledgement.
- _____4. Address resident by name when entering room.
- _____ 5. Introduce yourself by name.
- _____6. Explain the procedures that you will be doing to the resident.
- _____7. Answer questions appropriately.
- 8. Determine what the resident can do for themselves.
- 9. Be aware of the condition of the resident and make explanations as clear as possible.
- _____ 10. Listen attentively.
- _____ 11. Provide privacy throughout ALL procedures.
- _____ 12. Provide safety throughout ALL procedures.
- _____ 13. Provide adequate time for the resident to react. Do not rush.
- _____ 14. Provide comfort throughout ALL procedures.
- _____15. Ask the resident if he/she needs anything else before leaving the room.
- _____ 16. Leave the call signal within reach.
- _____ 17. Make observations and reports to nurse effectively.

Communication/Resident's Rights/Infection Control/Resident Safety - cont'd.

- _____ 18. Perform hand hygiene upon completion of resident care.
- 19. If using hand sanitizer follow manufactures directions for proper use.
- 20. Complete hand hygiene at appropriate times.
- 21. Apply and remove gloves at appropriate times.
- _____ 22. Hygiene and attire reflect professionalism.

Comments:

NURSE AIDE SKILLS CHECKLIST SUMMARY SHEET

Student's Name

Total Number of Hours Student Attended During Course

Description: The following summary is a record of the Nurse Aide's level of achievement for each competency included in the 75-hour course. The date indicates when the Nurse Aide demonstrated this competency at this level.

- 4 Prepared to perform competency independently.
- 3 Prepared to perform competency with supervision/assistance
- 2 Not prepared to perform competency
- 1 No exposure No clinical experience or knowledge in this area.

All skills need to be a 3 or 4 to pass clinical/course

SKILLS	Compe	tency Le	evel and	Date
	4	3	2	1
1. Hand Hygiene technique – Must be a 4				
2. Gloving – Must be a 4				
3. Closed and Open Bed				
4. Occupied Bed				
 Obstructed Airway – Conscious Adult – Must be a 4 				
 Lift and Move a Resident in Bed – Two Assistants 				
 Transfer Resident from Bed to Chair/ Chair to Bed 				
A. One Assistant				
B. Two Assistants				
8. Position a Resident in Bed				
9. Ambulate a Resident				
10. Passive Range of Motion				

11. Assist with Oral Hygiene		
A. Conscious Resident		
B. Denture Care		
C. Unconscious Resident		
12. Partial Bath		
13. Complete Bed Bath		
14. Shower – include review date/actual		
15. Back Rub		
16. Shampoo		
17. Nail Care		
18. Undress/Dress – Groom Resident		
19. Shave a Resident with an Electric Razor/Maniken		
20. Urinal for Male Resident		
21. Assist with Bedpan/Commode		
22. Prepare for Meal/Feeding		
23. Vital – TPR		
 A. Electronic Thermometer – oral – include review dates 		
B. Temperature - Tympanic		
C. Pulse and Respiration		
24. Blood Pressure		
25. Height and Weight – Include Review Dates		
26. Intake and Output		
27. Daily Catheter Care and Emptying Drainage Bag		
28. Providing Incontinent Care		
29. Applying Antiembolism Stockings		
 Communication/Resident's Rights – Must be a 4 		

Summary Sheet - cont'd.

Comments:

*Signatures at End of Summary:					
Instructor	Date				
Student	Date				

*Signature indicates student has received a copy of the completed Skills Summary Sheet.