

**General Inpatient CNA Nursing Orientation Competencies**

(Initial Launch 1-15-2019)

(Updated)

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| **#1 Data Collection/ Monitoring** | |
| **Competency Statement** | 1. The certified nurse’s assistant (CNA) at Cheyenne Regional Medical Center (CRMC) collects pertinent data under the direct supervision of the RN/LPN (1b, 2). |
| **Behavioral Criteria** | 1. **Data Collection** :    1. ***Vital Signs:***        1. Collects pertinent data elements such as (1b, 2):          1. Temperatures          2. Pulse          3. Respirations          4. Blood Pressure          5. Weights       2. Data collection is reviewed under the supervision of an RN/LPN.       3. Demonstrates proper technique in obtaining orthostatic vital signs.       4. Demonstrates proper technique in obtaining manual blood pressures.       5. Correctly obtains post-operative vital signs per hospital requirements.       6. Identifies abnormal data parameters for vital signs and reports abnormal findings to the RN/LPN in a timely manner (1a).    2. ***Intake and Output:***        1. Correctly obtains information for accurate intake and output.          1. Identifies the role I&O plays patient safety.          2. Verbalizes the correct fluid measurements found in various types of containers.          3. Documents intake and output.    3. ***Glucometer use:***        1. Attends new employee orientation and receives training on the proper use of the glucometer.       2. Demonstrates the correct procedure for obtaining for a finger stick blood glucose.       3. Appropriately obtains a blood glucose level using the glucometer.       4. Reports glucometer readings to the RN/LPN.       5. Appropriately labels QC and strips with expiration dates. 2. **Prioritization:**     1. Work in collaboration with the RN/LPN to prioritize patient needs. 3. **Documentation:**     1. Accurately documents data obtained in a timely manner. |
| **Evidence of Achievement**  (Checklist of what the aid must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The CNA **must** complete the following:   1. **Competency in knowledge:**     * Completes associated HealthStream courses listed below and successfully completes posttest quizzes.    * Reviews related hospital-specific policies and references listed below. 2. **Competency in Skill:**     * Demonstrates ability to complete vital signs by completing one skill-validation check sheet (located in HealthStream).    * Attends new employee clinical orientation and demonstrates use of the hospital glucometer. 3. **Competency in Attitude:**     * Writes an Exemplar in the Comments sectionthat meets the following conditions:      1. Describes a patient whom had abnormal patient vital signs. What was done with this information? Who was it reported to?      2. Describes the end result for the patient. |
| **References** | 1. The Joint Commission. (2018) Retrieved from <https://edition.jcrinc.com/ProxyLogin.aspx?lnk=8AA7CF7F3484>    1. *PC.02.01.19: The hospital recognizes and responds to changes in patient condition*.    2. *PC.01.02.03: The hospital assesses and reassesses the patient and his or her condition according to defined time frames.* 2. Wyoming State Board of Nursing. (2018). Scope and standards of nursing practice and CNA role. Retrieved from <https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20(Clean)%20v2%20%205.12.17.pdf> |

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| **#2 Teamwork, Coordination, and Collaboration** | |
| **Competency Statement** | 1. The CNA at CRMC collaborates with the patient and RN/LPN to provide optimal patient outcomes. (1,2a, 2c, 3). 2. The CNA at CRMC communicates effectively with other members of the healthcare team to improve patient care (2b). |
| **Behavioral Criteria** | 1. **Chain of Command**    1. Contacts appropriate nursing personnel with regards to clinical issues       1. Utilizes the correct chain of command for questions or issues regarding administrative issues or patient condition. 2. **Communication Skills**     1. Identifies personal strengths and limitations.    2. Identifies how personal communication impacts the team, patients, and team functioning.    3. Respectfully provides timely, constructive feedback to peer and others.    4. Recognizes barriers to effective communication and team functioning.    5. Engages in crucial conversations to facilitate conflict resolution. 3. **Delegation**    1. Notifies the nurse or supervisor when asked to perform skills outside of the CNA scope of practice. 4. **Hand-off report**    1. Ensures safety and continuity of care during patient transitions, by conducting a thorough hand-off report with the RN/LPN and other CNAs.    2. Displays proficiency in utilizing AIDET principles when introducing self or coworkers to the patient and family. 5. **Roles and Scope of Practice**    1. Explains the roles and responsibilities of other healthcare providers and how the team works together to provide safe and efficient care.    2. Identifies skills and procedures that are within the CNA scope of practice. |
| **Evidence of Achievement**  (Checklist of what the aid must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The CNA **must** complete the following:   1. **Competency in knowledge**:    * Completes associated HealthStream courses listed below and successfully completes posttest quizzes.    * Reviews related hospital-specific policies and references listed below. 2. **Competency in Attitude:**    * Writes an Exemplar in the comments section that meets the following criteria:      1. Describes a time when they were delegated a task.      2. Describes how they followed up with the RN/LPN regarding this task.      3. Describes a time they utilized the chain of command protocol to communicate clearly with questions about patient safety. |
| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [COP 482.43(b)(2), 482.55, 482.61, 482.58, 483.65] Retrieved from <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf> 2. The Joint Commission. (2018). Retrieved from <https://edition.jcrinc.com/ProxyLogin.aspx?lnk=8AA7CF7F3484>    1. *PC.02.01.05: The hospital provides interdisciplinary, collaborative care, treatment, and services.*    2. *PC.02.01.21: The hospital effectively communicates with patients when providing care, treatment, and services.*    3. *PC.02.02.01: The hospital coordinates the patient’s care, treatment, and services based on the patient’s needs.* 3. Wyoming State Board of Nursing. (2018). Scope and standards of nursing practice and CNA role. Retrieved from <https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20(Clean)%20v2%20%205.12.17.pdf> |

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| **#3 Patient/ Family Centered Care** | |
| **Competency Statement** | 1. The CNA at CRMC demonstrates honesty, integrity, and practices ethically (1, 2b, 3). 2. The CNA at CRMC interacts with patients in a way that is congruent with cultural diversity (1, 2). 3. The CNA at CRMC respects the patient’s preferences, values, needs (1, 2, 3). |
| **Behavioral Criteria** | 1. **Ethics:**     1. Seeks guidance from appropriate team members in situations where ethical conflicts occur.    2. Demonstrates high standards of ethical conduct and quality of care in one’s contributions to team-based care. 2. **Patient DNR Status:**     1. Correctly identifies patients that have an active DNR status. 3. **Patient/ Family Centered Care:**     1. Asks patient/ family for personal preferences.    2. Involves family and friends in in activities of daily living where appropriate (1, 2).    3. Identifies how family dynamics, cultural background, age, ethnic, community, and socioeconomic backgrounds impact and shape the patients personal values (1,2,3).    4. Places the interests of the patients at the center of health care delivery.    5. Honors patient’s preferences and respects patient’s decisions (1, 2).    6. Communicates with patients of various cultures utilizing medial interpreters, translators, and written materials where appropriate. Staff know how to access a medically qualified interpreter when needed.    7. Alerts the RN/LPN with concerns regarding potential abuse and neglect.    8. Identifies the impact personal attitudes and values have on patient care (2). 4. **Patient grievances:**    1. Uses basic strategies to manage an upset patient/ family member and mitigate a solution that meets the needs of the patients and the healthcare team.    2. Follows the appropriate chain of command for issues involving patient complaints (1, 2f).    3. Implements basic communication techniques to resolve conflicts when dealing with frustrated or irate patients/ family members.    4. Alerts the RN/LPN of conflicts. 5. **Patient Rights and Responsibilities**    1. Understands the need for patients-rights and responsibilities. 6. **Patient Satisfaction:**    1. Verbalizes CRMC’s Mission, Vision, and Values (2a). |
| **Evidence of Achievement**  (Checklist of what the aid must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The CNA **must** complete the following:   1. **Competency in knowledge**:    * Completes associated HealthStream courses listed below and successfully completes posttest quizzes.    * Reviews the related hospital-specific policies and references located below in the resources section of this competency statement. 2. **Competency in Attitude:**    * Writes an Exemplar in the comments section that meets the following criteria:      + Describes a situation in which they provided care to a patient who was not satisfied with their care. Describes how this situation was handled and describes outcomes.      + Describes an interaction with a patient who held a different value/ belief system than the CNA. Describes how this impacted care provided. |
| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [COP: 482.13, 482.58 (b), 483.10, 483.12 (c) (1)] Retrieved from [https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads /som107ap\_pp\_guidelines\_ltcf.pdf](https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf) 2. The Joint Commission. (2018). Retrieved from <https://edition.jcrinc.com/ProxyLogin.aspx?lnk=8AA7CF7F3484>    1. *LD.02.01.01: The mission, vision, and goals of the hospital support the safety and quality of care, treatment, and services.*    2. *LD.04.02.03: Ethical principles guide the hospital’s business practice.*    3. *PC.01.02.09: The hospital assesses the patient who may be a victim of possible abuse and neglect.*    4. *RI.01.01.01 & RI.02.01.01: The hospital respects, protects, and promotes patient rights. Patient is informed of their rights and responsibilities.*    5. *RI.01.02.01: The hospital respects the patient’s right to participate in decisions about his or her care, treatment, and services.*    6. *RI.01.07.01: The patient and his family have the right to have a complaint reviewed by the hospital.* 3. Wyoming State Board of Nursing. (2018). Scope and standards of nursing practice and CNA role. Retrieved from <https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20(Clean)%20v2%20%205.12.17.pdf> |

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| **#4 Environmental Health and Safety** | |
| **Competency Statement** | 1. The CNA at CRMC acts as an advocate for the safety of patients, visitors, and other healthcare professionals (4). |
| **Behavioral Criteria** | 1. **Alarm Safety:**     1. Responds appropriately to alarms (4h).    2. Appropriately tags and reports broken equipment.    3. Removes broken equipment from service. 2. **Change in patient condition:**     1. Notifies the RN/LPN of concerns or changes in vital signs and follows the appropriate chain of command until a resolution is reached.    2. Consults with Administrative Rapid Response team members when patient safety is of concern. 3. **Code Response:**     1. Quickly locates reference materials regarding the steps to take in the event of an emergency. Examples include: Tornado plan, infant abduction, mass casualty plan, snow plan, and fire.    2. Follows policy for emergency situations including code yellow, active shooter, or bomb threats.    3. Identifies their role in caring for a declining patient or during a patient code:       1. Utilizes AHA BLS skills in initiating a code (4).       2. Utilizes appropriate notification system in the event of a code.       3. Follows direction from senior staff and rapid response during patient emergencies. 4. **Egress:**     1. Patients may not be able to move on their own to escape fire or danger. Therefore the CNA:       1. Maintains the hallways clear of clutter for moving patient beds.       2. Ensures that any self-closing door is not propped open, unless secured with an automatic release device that closes the door in response to an emergency (1, 4d). 5. **Environmental Awareness:**    1. Identifies physical safety elements in the environment such as the fire extinguisher locations, fire alarm stations, escape routes, evacuation equipment, fire doors, medical gas, and oxygen shut-off valves (4a, 4e, 4f). 6. **Evacuation Equipment:**    1. Describes steps to take during an evacuation and properly uses emergency equipment, such as the Med-sled and the Evacuation Chair. 7. **One-on-One Sitters:**     1. Identifies the CNAs role and responsibility while caring for patients that require a one-on-one sitter.    2. Maintains patient safety while managing a one-on-one patient.    3. Maintains arm lengths from the patient at all times while the patient uses the restroom.    4. Documents one-on-one care appropriately per hospital standards. 8. **Patient Identification:**     1. Prevents patient errors by utilizing at least two patient identifiers when transporting patients. The patient room number cannot be used as an identifier (4g). 9. **Purposeful Rounding:**     1. Identifies the role purposeful/hourly rounding plays in promoting patient safety.    2. Correctly articulates the key concepts involved in purposeful rounding. 10. **Reporting:**      1. When actual or potential harm to a patient, visitor, or staff member occurs, communicates and reports concerns related to the event to the appropriate leader. Documents these concerns in the MIDAS reporting system. 11. **Safe Environment:**      1. Values the contributions of standardization in improving patient safety and outcomes.     2. Safeguards privacy and confidentiality for patients and patient data (4k, 5). 12. **Suicide Prevention/ Ligature Risk:**     1. Protects suicidal patients from self-harm by ensuring a safe room environment by removing potential risks for ligature, cutting, or ingestion harm (4i). |
| **Evidence of Achievement**  (Checklist of what the aid must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The CNA **must** complete the following:   1. **Competency in knowledge**:    * Completes associated HealthStream courses listed below and successfully completes posttest quizzes.    * Reviews the related hospital-specific policies and references located below in the resources section of this competency statement. 2. **Competency in Skill:**     * Participates in Code Blue Drills on the unit when provided.    * Successfully completes the **Unit Safety Check List** (located in HealthStream) on their given unit. 3. **Competency in Attitude:**    * Actively participates in purposeful rounding as a way to increase patient safety.    * Describes with the unit leader, an unsafe situation that was observed and discusses what actions were taken as a result of this situation. |
| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [COP: 482.13, 482.41 (b)(1)(i), 482.42, 482.51] Retrieved from [https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads /som107ap\_pp\_guidelines\_ltcf.pdf](https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf) 2. Interprofessional Education Collaborative. (2016). Core competencies for interprofessional collaborative practice. Retrieved from <https://nebula.wsimg.com/2f68a39520b03336b41038c370497473?AccessKeyId=DC06780E69ED19E2B3A5&disposition=0&alloworigin=1> 3. The Joint Commission. (2018). Retrieved from <https://edition.jcrinc.com/ProxyLogin.aspx?lnk=8AA7CF7F3484>    1. *EC.02.03.01: The hospital manages fire risks.*    2. *EC.02.02.01: The hospital manages risks related to hazardous materials and waste.*    3. *IC.02.02.01: The hospital reduces risk of infections associated with medical equipment, devices, and supplies.*    4. *LS.03.01.20: The hospital maintains the integrity of the means of egress.*    5. *LS.02.01.34: The hospital provides and maintains fire alarm systems.*    6. *LS.02.01.35: The hospital provides and maintains systems for extinguishing fires.*    7. *NPSG.01.01.01: Use at least two patient identifiers when providing care, treatment and services.*    8. *NPSG.06.01.01: Improve the safety of clinical alarm systems.*    9. *NPSG.15.01.01: Identify patients at risk for suicide.*    10. *PC.02.01.11: Resuscitation services are available throughout the hospital.*    11. *IM.02.01.01: The hospital protects the privacy of health information.* 4. Wyoming State Board of Nursing. (2018). Scope and standards of nursing practice and CNA role. Retrieved from <https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20(Clean)%20v2%20%205.12.17.pdf> |

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| **#5 Information/Technology** | |
| **Competency Statement** | 1. The CNA at CRMC is accountable for clear and accurate documentation of the care provided to the patient (1,2d). |
| **Behavioral Criteria** | 1. Verbalizes expectations and responsibilities of completing documentation. 2. Safeguards the privacy and confidentiality of patients and patient data (1, 2a). 3. Verbalizes the process for correcting documenting errors in the medical record (2b). 4. Demonstrates timely and complete documentation that reflects the care provided to the patient (1, 2f). 5. Demonstrates clear understanding of the ethical, legal, and regulatory implications breakdowns in patient confidentiality (1). 6. Verbalizes the expectations and process of documentation in case of an unexpected downtime (1,2c). 7. When floating to TCU, documents ADLS according to standards of the unit. |
| **Evidence of Achievement**  (Checklist of what the nurses must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The nurse **must** complete the following:   1. **Competency in knowledge**:    * Completes associated HealthStream courses listed below and successfully completes posttest quizzes.    * Reviews related hospital-specific policies and references listed below. 2. **Competency in Attitude:**    * Documents all required information in a timely manner.    * Delegation of assigned charting requirements is co-signed where appropriate. |
| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [COP 482.13, 482.15 (b)(5), 482.24 (c), 482.24(b), 482.58, 482.61 (c), 483.10]. Retrieved from <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf> 2. The Joint Commission. (2018) Retrieved from <https://edition.jcrinc.com/ProxyLogin.aspx?lnk=8AA7CF7F3484>    1. *IM.02.01.01: The hospital protects the privacy of health information*    2. *IM.02.01.03: The hospital maintains the security and integrity of health information*    3. *IM.02.01.03: The hospital plans for continuity of its information management processes*    4. *RC.01.01.01: The hospital maintains complete and accurate medical records for each individual patient.*    5. *RC.01.02.01: Entries in the medical record are authenticated.*    6. *RC.01.03.01: Documentation in the medical record is entered in a timely manner.*    7. *RC.02.03.07: Qualified staff receive and record verbal orders.* |

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| **#6 Quality Improvement Indicators/ Core Measures** | |
| **Competency Statement** | 1. The CNA at CRMC plays an integral role in improving quality indicators and in providing safe patient care. |
| **Behavioral Criteria** | 1. Demonstrates readiness for visits from accreditation site surveyors such as Joint Commission, Center for Medicare and Medicaid Services, and/ or other unit specific accreditation centers. 2. **Quality Indicators:**    1. **Core Measures:**        1. **Venous Thromboembolism (VTE) Prophylaxis and Anticoagulation:** Utilizes evidence-based practices to prevent the development of DVTs and blood clots.          1. **Sequential Compression devices:**             1. Applies sequential compression devices per nursing direction.             2. Routinely removes Ted Hose and washes stockings.    2. **National Data on Nursing Quality Indicators (NDNQI):**       1. **Fall Prevention:** Utilizes evidence-based practices to prevent falls while the patient is hospitalized (3f).          * 1. Identifies which patients have been classified as high fall risk.            2. Appropriately utilizes fall alarms in the prevention of falls.            3. Properly utilizes the video monitoring system to prevent patient falls.       2. **Pressure Injury Prevention:** Utilizes evidence-based practices to prevent pressure ulcers while the patient is hospitalized.          * 1. When a wound is identified, notifies the RN/LPN immediately.            2. Assists the RN/LPN in repositioning the patient every two hours (more often if clinically indicated by the RN) to prevent pressure injury.       3. **Infection Prevention:**          1. **Central Line Associated Blood Stream Infection (CLABSI**): Properly prepares central line dressings for showers to prevent infection. (3c).          2. **Catheter Associated Urinary Tract Infection (CAUTI):** Utilizes evidence-based practices in the management of urinary catheters to prevent catheter associated urinary tract infections (3e).             1. Follows evidence-based guidelines and hospital policy for perineal care and the management of a urinary catheter.   Maintains the indwelling catheter bag below the level of the bladder at all times.  Performs perineal care as required by hospital standards.   * + - * 1. Maintains the use of devices such as external catheters.       1. ***Clostridium Difficile (C.Diff)***: Prevents the spread of *C. Diff* by using evidence-based infection control measures.          1. Demonstrates proper hand washing techniques instead of hand sanitizer for patients for *C.Diff* precautions*.*          2. Demonstrates appropriate use of bleach wipes, instead of routine disinfection wipes, when cleaning equipment and surfaces for patients in precautions for *C.Diff*.          3. Bathes or showers patients admitted for *C.Diff*. daily. Changes linen daily, and wipes down mattresses daily with bleach wipes.       2. **Surgical Site Infections:**  Implements evidence-based guidelines for the prevention of surgical site infections (3d).          1. Demonstrates the appropriate use of hibaclense pre-operative wipes, prior to surgery under the direction of the RN. |
| **Evidence of Achievement**  (Checklist of what the aid must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The CNA **must** complete the following:   1. **Competency in knowledge**:    * Completes associated HealthStream courses listed below and successfully completes posttest quizzes.    * Reviews the related hospital-specific policies and references located below in the resources section of this competency statement. 2. **Competency in Skill:**    * Successfully completes a **Survey Readiness Preparation checklist** (assigned in HealthStream). 3. **Competency in Attitude:**     * Discusses the relationship between personal professional practice and organizational quality outcomes. |
| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. Retrieved from [https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads /som107ap\_pp\_guidelines\_ltcf.pdf](https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf) 2. Press Ganey. (2018). Nursing Quality (NDNQI). Retrieved from <http://www.pressganey.com/solutions/clinical-excellence/nursing-quality> 3. The Joint Commission. (2018). Retrieved from <https://edition.jcrinc.com/ProxyLogin.aspx?lnk=8AA7CF7F3484>    1. *LD.03.04.01: The hospital communicates information related to safety and quality to those who need it, including staff, licensed independent practitioners, patients, families, and external interested parties.*    2. *LD.03.06.01: Those that work in the hospital are focused on improving safety and quality.*    3. *NPSG.07.04.01: Implement evidence-based practices to prevent central line-associated bloodstream infections.*    4. *NPSG.07.05.01: Implement evidence-based practices for preventing surgical site infections.*    5. *NPSG.07.06.01: Implement evidence-based practices to prevent indwelling catheter-associated urinary tract infections (CAUTI).*    6. *PC.01.02.08: The hospital assesses and manages the patient’s risk for falls.* |

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| **#7 Safety in Utilizing Common Procedures** | |
| **Competency Statement** | 1. The CNA at CRMC aids patients with activities of daily living or other healthcare needs under the direct supervision of the RN/LPN. |
| **Behavioral Criteria** | 1. CRMC identifies that CNAs may not have the opportunity, while on orientation, to become proficient in all nursing tasks. Therefore, the CNA at CRMC collaborates with experienced staff members to ensure patient safety is maintained when completing new or unfamiliar skills. 2. **ADLs:**     1. Assists patients as necessary with all ADLs, including but not limited to combing hair, shaving, and brushing teeth.       1. Offers patient bath/shower and other ADLs daily.       2. Completes bedtime cares, such as brushing teeth or other ADLs.       3. Documents care provided to the patient or patient refusal of such care. 3. **Admission/ Discharge/ Transfers.**    1. Prepares the room for patient admission.    2. Follows proper discharge procedures. 4. **End-of-Life Care:**     1. Understands the processes of end-of-life care, post-mortem care, and comfort care in the identified unit (2j)    2. Follows the nurse’s direction for care of a patient awaiting organ donation (2k). 5. **Glucometer use:**  (2l)    1. Attends new employee orientation and receives training on the proper use of the glucometer.    2. Performs finger sticks and obtains a patient blood sugar level using the glucometer.    3. Reports glucometer readings to the RN/LPN.    4. Cleans the glucometer machine per manufactures recommendations.    5. Docks the glucometer machine in the appropriate docking station. 6. **Infection Prevention:** Utilizes hospital policies and evidence-based practices to prevent the spread of communicable diseases and limit harm to patients (1, 2a).    1. Follows the precautions identified by the RN and assists in maintaining isolation by stocking isolation carts and removing full trash from the room.    2. Works to prevent the spread of hospital acquired infection by identifying and using appropriate PPE while caring for patients under different forms of isolation.       1. Standard Precautions       2. Contact Precautions       3. Droplet Precautions       4. Airborne Precautions       5. Neutropenic Precautions 7. **Meals:**     1. The CNA assists patients with meals when necessary.    2. Maintains accurate documentation of the percentage of meal eaten and accurate I&O.    3. Assists patients who are at risk for choking or aspiration with meals.    4. Notifies nurse if patient displays signs of choking or feeding intolerance.    5. For patients receiving tube feedings, ensures the head of bed is elevated above 30° at all times unless indicated by the nurse.    6. Consults the RN before laying the patient flat for repositioning or linen changes. 8. **Restraint Use:** Uses hospital protocols and demonstrates understanding of proper use of restraints (1, 2e, 2f).    1. Describes appropriate use of restraints, while maintaining patient dignity and advocating for patient rights.    2. Demonstrates the correct application of soft wrist restraints and mitten restraints.    3. Documents removal and application of restraints per protocol. 9. **Stocking/ Room Maintenance:**     1. Ensures room cleanliness.    2. Offers daily linen change for patients’ bed.    3. Stocks necessary supplies in patient room.    4. Stocks rooms with only necessary items to eliminate waste. 10. **Toileting Needs:**      1. Assists patients with toileting needs such as up to bathroom, bedside commode, or bed pan as necessary.     2. Measures accurately and records output. 11. **Repositioning:**     1. Assists the RN/LPN with preventing tissue injury by turning the patient every two hours as directed by the RN.     2. Ensures appropriate pressure prevention devices are maintained as implemented by the RN. |
| **Evidence of Achievement**  (Checklist of what the nurses must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The CNA **must** complete the following:   1. **Competency in knowledge**:    * Completes associated HealthStream courses listed below and successfully completes posttest quizzes.    * Reviews the related hospital-specific policies and references located below in the resources section of this competency statement. 2. **Competency in Skill**    * Completes the “EBSCO: Interactive checklist: Limb restraints adults” check sheet (located in HealthStream).  Must be signed by Preceptor.    * Employee demonstrates skills listed above that are appropriate for job responsibilities 3. **Competency in Attitude (Discusses with nursing leader and Preceptor):**    * Follows policy and procedures and seeks guidance when not sure of appropriate procedures.    * Utilizes appropriate reference materials when seeking clarity around procedures.    * Seeks help from experts for procedures that the CNA is new to utilizing or unsure of. |
| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [COP: 482.13 (b) & (e), 482.21, 482.24 (c), 482.27, 482.42, 482.43, 482.45(a), 482.51(b), 482.58(b)(3), 482.62, 483.12(a)(2)]. Retrieved from [https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads /som107ap\_pp\_guidelines\_ltcf.pdf](https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf) 2. The Joint Commission. (2018). Retrieved from <https://e-dition.jcrinc.com/ProxyLogin.aspx?lnk=8AA7CF7F3484>    1. *IC.02.01.01: The hospital implements its infection prevention and control plan.*    2. *LC.04.03.13: Pain assessment and Pain management, including safe opioid prescribing, is identified as an organization priority for the hospital.*    3. *NPGS.02.03.01: Report critical results of tests and diagnostic procedures on a timely basis.*    4. *PC.01.02.07: The hospital assesses and manages the patient’s pain and minimizes the risks associated with treatment.*    5. *PC.02.02.13: The patient’s comfort and dignity receive priority during end-of-life care.*    6. *PC.03.05.01 through PC.03.05.19: Restraint and seclusion application, monitoring, documentation, reporting.*    7. *PC.04.01.03: The hospital discharges or transfers the patient based on his or her addressed needs and the organization’s ability to meet those needs.*    8. *PC.05.01.09: The hospital safely provides blood and blood components.*    9. *RI.01.03.01: The hospital honors the patient’s right to give or withhold informed consent.*    10. *RI.01.05.01: The hospital addresses patient decisions about care, treatment, and services received at the end of life.*    11. *TX.01.01.01: The hospital develops and implements written policies and procedures for donating and procuring organs and tissues.*    12. *WT.03.01.01: Staff and licensed independent practitioners performing waived tests are competent.* |

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| **#8 Safety in Utilizing Common Skills/Equipment** | |
| **Competency Statement** | 1. The CNA at CRMC utilizes common equipment provide safe and effective care to patients. |
| **Behavioral Criteria** | 1. CRMC identifies that CNA may not have the opportunity while on orientation to become proficient in all nursing tasks. Therefore, the CNA at CRMC collaborates with experienced staff members to ensure patient safety is maintained when completing new or unfamiliar skills. 2. **Call light system**    1. Utilizes the patient call system and all its features.    2. Answers call lights according to unit/organization expectations.    3. Recognizes and responds to high risk alarms.    4. Appropriately activates the staff emergency call system via their tracker badge or from the wall unit in the patient room. 3. **Massimo central monitoring and space lab monitors (Where utilized):**     1. Correctly utilizes Space Labs and Massimo for obtaining vital sign measurements.    2. Demonstrates the ability to transmit vital signs into the documentation system. 4. **Patient Transfer Equipment:**    1. Utilizes specialized transfer equipment to move patients safely from one location to the next.    2. Uses lift equipment for bariatric patients.    3. Attends new employee training to receive hands on demonstration transfer devices including those listed below, but not limited to:       1. Lateral-Transfer Devices       2. Sling Lifts       3. Sit-to-Stand Assistive Devices       4. Full-Assist Lifts 5. **Oxygen Administration:**     1. Identifies the CNA’s role in safe oxygen administration.    2. Under any circumstance, the aid refrains from adjusting oxygen flow rates and refrains from setting up oxygen tanks for ambulation.    3. Correctly stores full, in-use, and empty oxygen tanks in the appropriate receptacles. 6. **Personal Protective Equipment:**    1. Demonstrates appropriate use of PPE to prevent the spread of infection.    2. Attends live PAPR training at new employee orientation.    3. Demonstrates correct use of the N95 if qualified for use. 7. **Telemetry (Tele) Monitoring**    1. Identifies the role the CNA plays in applying tele monitoring.    2. Consults nurses and tele techs prior to removal of the tele-box.    3. Correctly changes the batteries to tele box.    4. Places tele leads appropriately and changes the electrodes daily. 8. **Specialty Beds:**     1. Consults with nurses to determine which specialty bed is appropriate for the patient. Specialty beds may be bariatric beds or a pressure injury prevention beds.    2. Demonstrates correct use of the Bariatric bed and/or the air bed depending on job responsibilities. 9. **Tubs** (If applicable):    1. Demonstrates correct use of centrally located tub/showers.    2. Notifies housekeeping for cleaning of room post use. |
| **Evidence of Achievement**  (Checklist of what the nurses must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The CNA **must** complete the following:   1. **Competency in knowledge**:    * Completes associated HealthStream courses listed below and successfully completes posttest quizzes.    * Reviews the related hospital-specific policies and references located below in the resources section of this competency statement. 2. **Competency in Skill:**    * Employee demonstrates skills listed above that are appropriate for job responsibilities. 3. **Competency in Attitude (Discuss with nursing leader or preceptor):**    * Follows policy and procedures and seeks guidance when not sure of appropriate procedures.    * Utilizes appropriate reference materials when seeking clarity around procedures.    * Collaborates with senior staff members to insure patient safety is maintained when completing new or unfamiliar skills. |
| **References** | None |

Approximate Time to complete on-line learning courses

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| Competency Statement | Approx time to complete | Total  765 min/ 13 hours |
| #1 Data Collection/ Monitoring | 90 |
| #2 Teamwork, collaboration, coordination | 5 |
| #3 Patient/ Family centered care | 160 |
| #4 Environmental Health and safety | 125 |
| #5 Information/ Technology | 15 |
| #6 Quality Improvement Indicators/ Core Measures | 215 |
| #7 Safety in Utilizing Common Procedures | 70 |
| #8 Safety in Utilizing Common Skills and Equipment | 25 |
| Complete Competency statements | 60 |
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