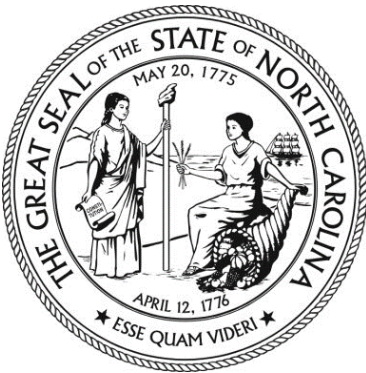


State-approved Curriculum Nurse Aide I Training Program

Appendix A July 2024



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**
Division of Health Service Regulation



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**



North Carolina Department of Health and Human Services
Division of Health Service Regulation
North Carolina Education and Credentialing Section

NCDHHS is an equal opportunity employer.

Appendix A - Skill Performance Checklist Summary

Directions

Column A: The DHSR-approved instructor will

- Provide students a skill check-off sheet for each skill including subsets listed on Appendix A (total of 64 skills)
- Teach and provide a live demonstration for each of the 64 skills
- Document the date of demonstration above the diagonal line
- Document the DHSR-approved instructor's initials below the diagonal line
- Sign off and date all boxes as the live demonstrations are completed

Column B: The student will

- Demonstrate lab proficiency, based on school's proficiency statement, for all starred skills
- Demonstrate lab proficiency, based on school's proficiency statement, for any additional non-starred and school specific skills (if they will be performed in clinical)

The DHSR-approved instructor will

- Evaluate student's return demonstration in lab, based on school's proficiency statement
- Document above the diagonal line, the date student was found proficient for each skill
- Document DHSR-approved instructor's initials below the diagonal line
- Only complete the boxes for skills starred and any additional skills the students are expected to complete during clinical (non-starred and school-specific)

Column C: The student will

- Demonstrate proficiency, based on school's proficiency statement, for at least 15 starred skills
- Demonstrate proficiency, based on school's proficiency statement, for any additional non-starred and school specific skills

The DHSR-approved instructor will

- Evaluate student's return demonstration in clinical, based on school's proficiency statement
- Document above the diagonal line, the date student was found proficient for each skill
- Document DHSR-approved instructor's initials below the diagonal line
- Only complete the boxes for skills completed proficiently in clinical that were observed live by the DHSR-approved instructor

Note: Appendix A will be kept in the student file for a minimum of 3 years

Appendix A - Skill Performance Checklist Summary

- Only DHSR-approved instructors can document information on this form
- When documenting dates and initials on this form, document the date above the diagonal line and DHSR-approved instructor initials below the diagonal line
- The student must perform a minimum of 15 starred skills in clinical
- For starred skills divided into multiple categories, performing at least one or more of the related skills will count as one starred skill. For example, performing 3.1 and 3.2 will only count as one starred skill

Skill Performance Checklists		Column A Demonstrated by Instructor	Column B Proficiency Verified in Lab	Column C Performed in Clinical
Personal Care Skills		Performance Summary		
★	1. Providing complete/partial bed bath	/	/	/
★	2. Dressing and undressing	/	/	/
★	3.1 Providing perineal care for male	/	/	/
	3.2 Providing perineal care for female	/	/	/
★	4. Making an occupied bed	/	/	/
★	5. Providing foot care for both feet	/	/	/
★	6. Providing fingernail care for both hands	/	/	/
★	7. Providing mouth care	/	/	/
★	8. Providing mouth care for unconscious resident	/	/	/
★	9. Providing mouth care for cognitively impaired resident	/	/	/
★	10. Assisting with denture care	/	/	/
	11. Assisting with oral hygiene	/	/	/
	12. Assisting with shaving	/	/	/
	13.1 Providing hair care	/	/	/
	13.2 Provide shampooing as needed	/	/	/
	14. Giving tub bath or shower (per clinical environment)	/	/	/
	15. Providing backrub	/	/	/
Infection Prevention and Control		Performance Summary		
★	16.1 Performing hand hygiene with soap and water	/	/	/
	16.2 Performing hand hygiene alcohol-based handrub	/	/	/

Student Name: _____

Skill Performance Checklists		Column A Demonstrated by Instructor	Column B Proficiency Verified in Lab	Column C Performed in Clinical
★	17. Putting on & taking off Personal Protective Equipment (PPE) – Gown, gloves, mask			
	17.1 Gown			
	17.2 Gloves			
	17.3 Mask			
Measurements		Performance Summary		
★	18. Measuring and recording combined vital signs (BP (manual), temperature, pulse (radial), respirations)			
	18.1 Measuring and recording BP (manual)			
	18.2 Measuring and recording temperature (electronic device similar to clinical site)			
	18.3 Measuring and recording pulse (radial)			
	18.4 Measuring and recording respirations			
	18.5 Reading a non-mercury liquid-filled glass thermometer			
	19. Measuring and recording oral temperature (non-mercury liquid-filled glass thermometer)			
	20. Measuring and recording axillary temperature (non-mercury liquid-filled glass thermometer)			
	21. Measuring and recording rectal temperature (non-mercury liquid-filled glass thermometer)			
★	22.1 Measuring and recording Height (balance scale)			
	22.2 Measuring and recording Weight (balance scale)			
Elimination		Performance Summary		
★	23. Collecting routine urine specimen			
★	24.1 Assisting with use of Bathroom			
	24.2 Assisting with use of Bedside commode			
	24.3 Assisting with use of Bedpan			
	24.4 Assisting with use of Urinal			
	24.5 Measuring and recording urinary output			
★	25.1 Providing catheter care for male			
	25.2 Providing catheter care for female			
	25.3 Emptying urinary drainage bag			

Student Name: _____

Skill Performance Checklists		Column A Demonstrated by Instructor	Column B Proficiency Verified in Lab	Column C Performed in Clinical
	26. Changing adult brief			
	27. Collecting stool specimen			
	28. Applying and caring for condom catheters			
	29. Administering cleansing enema			
Hydration and Nutrition		Performance Summary		
★	30.1 Assisting with dining/feeding resident who cannot feed self			
	30.2 Measuring and recording intake			
	31. Performing relief of choking			
Mobility		Performance Summary		
★	32. Performing range of motion (ROM) exercises (active/passive head-to-toe)			
★	33. Transferring from bed to wheelchair/chair			
★	34.1 Moving up in bed using turning sheet			
	34.2 Positioning on side			
★	35. Assisting with ambulation			
	36. Applying restraints			
	37. Assisting to dangle, stand and walk			
	38. Using mechanical lift (per clinical environment)			
	39. Transferring from bed to stretcher (per clinical environment)			
	40. Assisting to move up in bed			
Treatment		Performance Summary		
★	41. Applying anti-embolism (elastic) stockings			
	42. Applying warm or cold treatments			
	43. Applying elastic bandages			
	44. Assisting with coughing and deep breathing			
	45. Applying non-sterile dressing			

Student Name: _____

Skill Performance Checklists		Column A Demonstrated by Instructor	Column B Proficiency Verified in Lab	Column C Performed in Clinical
	46. Performing post-mortem care			
School Specific Skill		Performance Summary		

Initials	Instructor's Name	Instructor's Signature