

## Appendix F: Skills Performance Tasks

Nurse aide candidates in the state of West Virginia must be able to perform five of the listed performance skills to successfully complete the skills performance portion of the state-approved exam. Each skill has a point value corresponding to each step to be performed. Total possible points are 300. The student will fail if they score below 225.

The procedure for testing will require the student to perform:

- Initial steps 25 points
- Hand washing 50 points
- Four additional skills each 50 points
- Completion steps 25 points

The student may also fail if he/she:

- Cannot perform any part of a skill;
- Tell the rater they did not learn the skill;
- Do not perform the critical steps in one or more skills; or
- Put the resident at risk for injury.

Each scenario mentioned above will be reviewed on an individual basis and the Nurse Aide Registry will make the final decision.

### Preparing to take the competency test:

Two forms of identification (ID) must be presented at the test site. One must be a photo ID (e.g., driver's license, government issued ID, employment badge) with a current photo and the other must be a Social Security card. Photocopies will not be accepted.

### Common Skill Requirements

All candidates will be required to perform "initial steps" at the beginning of each exam, and will not need to perform those steps again during testing. At the end of all five procedures, "completion steps" will be required. Throughout each procedure, the candidate **must** observe the resident's privacy and safety as well as provide for effective communication, proper infection control, and comfort.

### Initial Steps are as follows:

1. Obtain instructions from the nurse about the resident's needs, limitations, and abilities. This information will be provided to each candidate prior to the exam.
2. Knock before entering the room.
3. Greet each resident by name and verify the resident's identity.
4. Identify yourself and your job title.
5. Explain the procedure and encourage the resident to help when possible.
6. Get all needed supplies prior to beginning.
7. Wash your hands. For exam purposes, you will only have to wash your hands once unless they become soiled.
8. Provide privacy.

9. Raise side rails prior to raising the bed to a working height. Lower side rails on side that care is being given. For exam purposes, assume that all residents have the necessary order for side rails.
10. Wear gloves as needed per standard precautions.
11. Use good body mechanics.

**Completion Steps are as follows:**

1. Use good body mechanics.
2. Position resident for comfort and in good body alignment.
3. Adjust side rails as ordered and lower bed.
4. Make sure the resident has everything he/she needs, and thank them.
5. Clean up the area according to facility policy.
6. Remove gloves and wash your hands when applicable.
7. Open drapes, curtains, etc. according to resident's wishes.
8. Check safety of the environment, including ensuring call light is within the resident's reach.
9. Report any unusual findings to the nurse.
10. Document procedures according to policy.

**Skill 1: Hand Washing**

1. Turn on water at sink
2. Wet hands and wrists thoroughly
3. Apply soap to hands
4. Lather all surfaces of fingers and hands, including above the wrists, producing friction, for at least 10 seconds
5. Rinse all surfaces of hands and wrists without contaminating hands
6. Use a new, clean, dry paper towel to dry all surfaces of hands, wrists, and fingers, without contaminating hands
7. Use a new, clean, dry paper towel, or knee (if knee handle is available) to turn off faucet, without contaminating hands
8. Dispose of used paper towel in waste basket immediately after shutting off faucet

**Skill 2: Don and Remove Isolation Gown and Gloves**

Perform initial steps

1. Wash hands
2. Unfold the clean gown so the opening is in the back. Do not shake the gown or allow it to touch an unclean surface
3. Slide hands and arms through the sleeves of the gown
4. Make sure the gown is snug at the neck and covers uniform
5. Tie the ties at the neck of the gown, overlap the back of the gown to cover entire uniform
6. Fasten the ties at the waist of the gown
7. Gloves should be pulled up over the cuffs of the gown

Removing gown and gloves:

8. Remove gloves
9. Untie the ties at the waist and neck of the gown without touching your neck or the outside of the gown
10. Pull each sleeve off by grasping each shoulder on the inside of the gown, at the neckline. Do not touch the outside of the gown. Turn the sleeves and gown inside out as your arms are sliding through them

11. Holding the gown away from your body by the inside of the shoulder seams, fold it inside out, bringing the shoulders together
12. Roll the gown up with the soiled side inside and do not let it touch your uniform
13. Discard in appropriate container

Perform completion steps

Student must declare when they would wash hands in addition to the initial steps for skills 2 and 3.

### **Skill 3: Applying and Removing Face Mask**

Perform initial steps

1. Wash hands
2. Gather mask
3. Remove jewelry, watch and eyeglasses, place in clean paper towel. If wearing long sleeves, push or roll them up
4. Pick up the mask by the top strings or the elastic strap. Be careful not to touch the mask where it touches your face
5. Adjust the mask over your nose and mouth. Tie top strings first, and then bottom strings. Never wear a mask hanging from the bottom strings
6. Pinch the metal strip at the top of the mask (if part of the mask) tightly around your nose so that it feels snug
7. Replace glasses, if worn

Removing mask:

8. Wash hands
9. Untie lower tie of the mask first
10. Untie the upper tie of the mask last
11. Pull off face mask, using only the ties and drop into facility approved container
12. Wash hands

Perform completion steps

Student must declare when they would wash hands in addition to the initial steps for skills 2 and 3.

### **Skill 4: Make Occupied Bed**

Perform initial steps

1. Place clean linen, in order of usage, on clean surface within easy reach
2. Lower head of bed before moving resident
3. Loosen top linen from end of bed or working side
4. Raise side rail, assist client to turn onto side, moving away from self toward raised side rail
5. Loosen bottom soiled linen on working side
6. Move bottom soiled linen toward center of the bed
7. Place and tuck in clean bottom linen or fitted bottom sheet on working side (if flat sheet is used, tuck in at top and working side)
8. Raise side rail and assist resident to turn onto clean bottom sheet
9. Remove soiled bottom linen, avoiding contact with uniform, place it in an appropriate location within the room
10. Pull and tuck in clean bottom linen, finishing with bottom sheet free of wrinkles
11. Cover client with clean top sheet and appropriately remove soiled top sheet
12. Finish with the clean linen anchored and centered
13. Replace pillowcase

14. Avoid contamination of clean linen throughout procedure

Perform completion steps

#### **Skill 5: Measure Oral Temperature with Electronic Thermometer**

Perform initial steps

1. Make sure the oral probe is attached to the electronic thermometer
2. Insert the electronic probe firmly into the probe cover
3. Ask the resident to wet the lips, lower the tongue, and close the lips around the thermometer
4. Place the probe under the patient's tongue, on one side of the mouth
5. Leave the probe in place until the thermometer signals
6. Remove the probe and read the temperature on the digital display
7. Discard the cover and return the probe to its holder
8. Make note of the resident's name and temperature measurement
9. Return the electronic thermometer to the charging or storage unit

Perform completion steps

#### **Skill 6: Taking a Tympanic Temperature**

Perform initial steps

1. Pick up tympanic thermometer and insert in plastic cover. Make sure cover locks into place
2. Stand to the front of the resident's head. Make sure hearing aid is carefully removed and that wax does not block ear canal
3. Turn on thermometer. Wait until "ready" sign appears
4. Pull on ear following guidelines: Adults: pull up/back on pinna or outer edge of ear; Children and Infants: pull ear straight back
5. Gently insert covered thermometer tip into ear, pointing the thermometer toward the front of the resident's head. Make sure you have a good seal
6. To take the temperature, press the button and hold for one full second (to make sure you wait one second, say the words "one one-thousand")
7. Remove from ear and read temperature on display screen
8. If facility policy is to take reading in both ears, repeat procedure using clean plastic cover for the other ear
9. Turn thermometer off (Some have an auto-off.)
10. Replace tympanic thermometer into holder, if available

Perform completion steps

#### **Skill 7: Measure Axillary Temperature Using Electric Thermometer**

Perform initial steps

1. Make sure the oral probe is attached to the electronic thermometer
2. Insert the electronic probe firmly into the probe cover
3. Expose the axilla (underarm)
4. Place the probe into the center of the axilla. Place the residents arm over the chest
5. Hold the resident's arm and the probe in place until the electronic thermometer signals
6. Remove the probe from under the arm, and discard the probe cover; straighten the resident's clothes
7. Make a note of the resident's name and temperature
8. Return the electronic thermometer to the charging or storage unit

Perform completion steps

### **Skill 8: Measure Apical Pulse**

Perform initial steps

1. Place resident in comfortable position, lying down on back
2. Clean both earpieces, the diaphragm and bell sides of stethoscope
3. Place diaphragm of stethoscope under clothing on apical pulse site (on the left side of the chest, just below the nipple). You may have to move the stethoscope to locate loudest pulse sound
4. Hold diaphragm or bell with two fingers firmly on the chest
5. Look at your watch and wait until the second hand gets to the 12 or 6
6. Count pulse (lub-dub) for one full minute
7. Replace clothing and move resident to a comfortable position

Perform completion steps

### **Skill 9: Measure Radial Pulse**

Perform initial steps

1. Place fingertips on thumb side of resident's wrist to locate pulse
2. Count beats for one full minute, noting the rhythm and strength of the pulse
3. Remove fingers from the pulse site and make a note of the residents name and the pulse rate
4. Report pulse within plus or minus 4 beats of evaluator's reading

Perform completion steps

### **Skill 10: Measure Respiration**

Perform initial steps

1. Count one each time the chest rises
2. Count the respirations for one full minute\* to determine the rate
3. Reports rate plus or minus 2 breaths of evaluator's reading

Perform completion steps

*\* For testing purposes, the student must count for one full minute.*

### **Skill 11: Give Back Rub Using Lotion**

Perform initial steps

1. Position resident so back is exposed, on side or prone
2. Place towel lengthwise on bed next to resident's back
3. Pour small amount of lotion into hands, rubbing hands together to warm lotion and hands
4. Apply lotion in long, firm strokes upward from buttocks to back of neck and shoulders
5. Use firm pressure stroking upward and gentle pressure as downward motions. Use circular motion, as hands should never leave the back. Strokes should be one continuous flowing motion
6. Repeat for at least 3 – 5 minutes
7. Pat the resident's back with towel to remove excess lotion

Perform completion steps

### **Skill 12: Range of Motion (Active)**

Perform initial steps

1. Position resident in good body alignment
2. Check joints. If swelling, redness or warmth is present, or if resident complains of pain, notify nurse. Continue procedure only if instructed
3. Support limb above and below joint
4. Begin range of motion at shoulders and include the shoulders elbows, wrists, thumbs, fingers, hips, knees, ankles, and toes\*
5. Slowly move joint in all directions it normally moves
6. Repeat movement at least five times
7. Encourage resident to participate as much as possible
8. Stop procedure at any sign of pain and report to nurse immediately

Perform completion steps

\* For testing purposes, the joint to be manipulated will be designated.

### **Skill 13: Shave with Safety Razor**

Perform initial steps

1. Fill bath basin halfway with warm water
2. Drape towel under resident's chin
3. Put on gloves
4. Moisten beard with washcloth and apply shaving cream over area in a circular motion
5. Wet razor and shave in the direction of hair growth. Hold skin taut and shave beard in downward strokes on face and upward strokes on neck
6. Rinse resident's face and neck
7. Apply after-shave lotion as requested
8. Remove towel
9. Remove gloves

Perform completion steps

### **Skill 14: Denture Care**

Perform initial steps

1. Place towel on resident's chest and emesis basin under the resident's chin
2. Place paper towel/wash cloth in sink bottom to protect dentures
3. If resident is able, ask to remove own dentures—if not appropriate, remove upper dentures by pushing down on upper plate to break suction and lift lower dentures out of bottom of mouth
4. Place dentures in basin and take to sink
5. Brush dentures with toothpaste and rinse under running water
6. Place dentures in clean, rinsed denture cup with cold water for storage

Perform completion steps

### **Skill 15: Administer Oral Hygiene**

Perform initial steps

1. Raise head of bed so resident is sitting up
2. Put on gloves
3. Drape towel below resident's chin

4. Wet toothbrush and put on small amount of toothpaste
5. Brush the upper teeth first and then the lower teeth
6. Hold emesis basin under resident's chin
7. Have resident rinse mouth with water and spit into emesis basin
8. If requested, give resident mouthwash diluted half with water
9. Check teeth, mouth, tongue, and lips for odor, cracking, sores, bleeding, discoloration and loose teeth.  
Report any unusual findings to the nurse
10. Remove towel and wipe resident's mouth
11. Remove gloves

Perform completion steps

#### **Skill 16: Give Mouth Care to Unconscious Resident**

Perform initial steps

1. Drape towel over pillow
2. Turn resident onto unaffected side
3. Put on gloves
4. Place emesis basin under resident's chin
5. Hold mouth open with padded tooth blade
6. Dip swab in cleaning solution and wipe teeth, gums, tongue and inside surfaces of mouth, changing swab frequently
7. Rinse with clean swab dipped in water
8. Swab with lemon glycerin swabs if available
9. Check teeth, mouth, tongue, and lips for odor, cracking, sores, bleeding, discoloration, and loose teeth.  
Report unusual findings to nurse
10. Cover lips with available lubricant
11. Remove gloves

Perform completion steps

#### **Skill 17: Eye Care for Unconscious Resident**

Perform initial steps

1. Position resident in comfortable position, using pillows if needed
2. Obtain basin of clean warm water
3. Put on gloves
4. Place towel and emesis basin under the resident's chin
5. Using either a washcloth or cotton balls, whichever is used in your facility, dip into water and clean eyes, moving from the inner canthus (corner) of the eye to the outer canthus of the eye
6. When using a washcloth, use a clean washcloth for each eye. When using cotton balls, use clean cotton ball for each eye
7. If there is an increased amount of dried secretions, you may be asked by the nurse to apply warm compresses to loosen
8. Dry the eye area completely using a clean towel
9. Add lubricant to the eye if ordered by the physician or directed by the nurse

Perform completion steps

#### **Skill 18: Clean/File Fingernails**

Perform initial steps

1. Place basin with warm water on over-bed table

2. Ask resident to soak hands in basin 3 – 5 minutes
3. Wash, rinse, dry, and place the resident's hands on a clean, dry towel
4. Clean under the nails with the orangewood stick
5. Inspect the hands
6. Trim the fingernails using the nail clipper, clipping straight across and removing sharp edges with an emery board
7. Apply lotion to the hands, gently massaging from fingertips to wrists to stimulate circulation

Perform completion steps

### **Skill 19: Care of Eyeglasses**

Perform initial steps

1. Carefully remove eyeglasses and place in emesis basin
2. Secure the resident. Raise the side rails if necessary and lower the bed
3. Line the sink with a towel
4. Wash eyeglasses in lukewarm water, rinse and place inside emesis basin. While washing observe for loose screws, or broken or loose lenses
5. Dry with soft 100 percent cotton cloth or lens cleaning tissue. Do not dry with tissues as they may scratch eyeglasses
6. Store eyeglasses in special eyeglass case or prepare to replace on the resident
7. Return to bedside
8. Replacing eyeglasses on resident: Place gently over the ears and position comfortably. Observe for proper fit

Perform completion steps

### **Skill 20: Hair Care**

Perform initial steps

1. Raise head of bed so resident is sitting up
2. Drape towel over pillow if resident is confined to the bed. If resident is sitting in a chair, place the towel around the resident's shoulders
3. Remove resident's glasses and any objects in hair
4. Brush hair by separating into small sections and gently combing or brushing two inch sections at a time from the ends of hair to scalp
5. If the hair is tangled, use a small amount of detangler or leave-in conditioner if available. Hold the lock of hair just above the tangle and gently comb or brush through the tangle
6. Use any personal items that residents request and style as requested
7. Offer mirror

Perform completion steps

### **Skill 21: Dress and Undress a Dependent Resident**

Perform initial steps

1. Help resident to choose clothes
2. Help resident move to his/her back
3. Remove garments resident is wearing, always beginning with the unaffected limb
4. Assist resident to dress, always beginning with the affected side first. Residents should always wear undergarments
5. If resident can stand, put shoes on before resident stands up to prevent falls. Protect linen from shoes by putting a towel under feet
6. If resident cannot stand, roll resident from side to side to eliminate wrinkles caused by clothing

Perform completion steps

### **Skill 22: Move Resident Up in Bed with Lift Sheet (Two co-workers)**

Perform initial steps

1. Ask for help from another health care worker
2. Place pillow upright at head of bed to protect resident's head from headboard
3. Position one worker on each side of resident and roll sheet toward resident's body
4. Using good body mechanics, with hands and fingers facing upwards grasp the sheet at the resident's shoulders and hip
5. Ask the resident to raise his/her head, place hands across chest and bend knees, push with heels, if possible, on the count of three
6. Count one, two, three, and then lift
7. Replace pillow under resident's head
8. Straighten bed linens

Perform completion steps

All positioning skills are for a one-person technique unless otherwise designated

### **Skill 23: Move Resident Up in Bed if Resident Can Assist**

Perform initial steps

1. Move pillow against the headboard. If resident can tolerate, lay bed flat
2. Assist resident to bend knees up and place his/her feet flat on the bed. Place one arm under the resident's shoulders and the other under the resident's upper thighs
3. On the count of three, have resident push down with the feet and lift up the buttocks (called bridging) while you help the resident move toward the head of the bed

Perform completion steps

**Note:** If possible, the resident may use the side rails of the bed to assist.

All positioning skills are for a one-person technique unless otherwise designated

### **Skill 24: Turn Resident Toward You**

Perform initial steps

1. Cross the resident's arms over the chest
2. Cross the resident's leg farthest away over the leg closest to you
3. Place one hand on resident's far shoulder, place the other hand on resident's farthest hip and gently roll the resident toward you
4. Move arm on the side that the resident is being turned to out of the way
5. Support the resident's back with a pillow

Perform completion steps

All positioning skills are for a one-person technique unless otherwise designated

### **Skill 25: Sit on Edge of Bed (Dangling)**

Perform initial steps

1. Adjust bed height to lowest position
2. Move resident to side of bed closest to you

3. Raise head of bed to sitting position, if necessary
4. Place one arm under resident's shoulder blades and the other arm under resident's thighs
5. On count of three, slowly turn resident into sitting position with legs dangling over side of bed
6. Support for 10 to 15 seconds, check for dizziness
7. Assist resident to put on shoes or slippers
8. Move resident to edge of bed so feet are flat on floor

Perform completion steps

All positioning skills are for a one person technique unless otherwise designated

### **Skill 26: Move Resident to the Side of Bed**

Perform initial steps

1. Place pillow at the head of the bed against headboard
2. Stand on the same side of the bed to which you are moving the resident
3. Spread your feet apart and slightly bend your knees to protect your back
4. Gently slide hands under the head and shoulders of the resident and move toward you
5. Gently slide hands under the midsection and move toward you
6. Gently slide your hand under the hips and legs and move them toward you

Perform completion steps

All positioning skills are for a one-person technique unless otherwise designated

### **Skill 27: Turn Resident Away from You**

Perform initial steps

1. Stand on side of bed opposite to where resident will be turned
2. Move resident to side of bed nearest you using steps in Skill 26
3. Cross the resident's arms over his or her chest. Move arm on the side that the resident is being turned to out of the way
4. Cross resident's legs. (If possible, bend the resident's knee nearest you. If the knee cannot bend, cross the near leg over the far leg)
5. Place one hand on resident's shoulder and other hand on the hip. Roll the resident over as one unit toward the other side of bed (toward the raised bed rail)
6. Support the resident's back with a pillow

Perform completion steps

All positioning skills are for a one-person technique unless otherwise designated

### **Skill 28: Pivot Transfer of Hemiplegic Resident**

Perform initial steps

1. Make sure the resident is wearing non-skid shoes and the bed is in the low position
2. Position the chair/wheelchair on the resident's unaffected side at a 45 degree angle to the bed. If transfer is to a wheelchair, lock both brakes and put up foot pedals
3. Assist the resident to sit on the edge of the bed with legs and feet hanging over the edge. Put gait belt on resident
4. Stand in front of the resident and firmly grasp the gait belt. Have the resident put his/her arms around your waist
5. Using good body mechanics, stand so that the affected leg of the resident is between your knees
6. Help the resident stand, supporting the affected leg with your knees

7. Have the resident use the unaffected hand to grasp the armrest of the chair/wheelchair
8. Pivot your body, helping the resident to pivot toward the non-affected leg
9. Using good body mechanics (bending knees, keeping back straight) help the resident sit in the chair, adjusting as needed

Perform completion steps

All positioning skills are for a one-person technique unless otherwise designated

### **Skill 29: Transfer Resident From Bed To Chair/Wheelchair**

Perform initial steps

1. Position the chair with the back even with the head of the bed. If wheelchair is used, make sure brakes are locked and pedals are up
2. Make sure resident has nonskid shoes on
3. Assist the resident to dangle at the edge of the bed
4. Brace your knees against the resident's knees and block his feet with your feet
5. Bring the resident to a standing position by putting your arms around resident's underarms or using a gait belt
6. Ask the resident to grasp the chair arms as you support him/her
7. Using good body mechanics, bend your knees as you lower the resident to the chair
8. Use pillows as necessary for positioning the resident in correct body alignment

Perform completion steps

All positioning skills are for a one-person technique unless otherwise designated

### **Skill 30: Pull Resident Up in Chair/Wheelchair**

Perform initial steps

1. Lock the wheels on the wheelchair and move the footrests aside
2. Stand behind the chair, placing your arms around the resident's upper body under the arms and lift. Do not lift by the arms. If possible, ask the resident to place feet on floor and use hands on arm rests to assist in repositioning
3. Replace footrests if applicable and place positioning devices as necessary

Perform completion steps

All positioning skills are for a one-person technique unless otherwise designated

### **Skill 31: Position Resident on Side in Bed in Proper Alignment**

Perform initial steps

1. Lower head of bed and raise side rail toward you
2. Move resident's body toward you
3. Slowly roll resident onto side toward raised side rail while supporting resident's body
4. Proper alignment: head supported by pillow, shoulder adjusted so resident is not lying on arm, top arm supported, back supported by pillow/wedge, top knee flexed and supported by supportive device (pillow) with hip in proper alignment
5. Cover resident with top linen

Perform completion steps

All positioning skills are for a one-person technique unless otherwise designated

### **Skill 32: Assist Resident to Ambulate Using Gait Belt**

Perform initial steps

1. Make sure resident has on nonskid shoes
2. Place gait belt snugly around resident's waist
3. Assist the resident to stand, standing to the resident's side until balance is regained, keeping hold of the gait belt
4. While holding onto the gait belt, change the position of your hands. One hand should be holding the belt at the side nearest you and the other holding the belt in the back
5. Assist the resident to walk, staying slightly behind and to the side of the resident, holding firmly to the gait belt
6. Encourage the resident to stand straight and walk as normally as possible
7. Return resident to chair or bed

Perform completion steps

### **Skill 33: Measure and Record Input and Output**

Perform initial steps

*Input*

1. Measure the fluid left in the container before the dishes are removed from the resident's bedside/table
2. Subtract the amount left in the container from the amount offered
3. Record immediately on appropriate document

*Output without a catheter*

4. Put on disposable gloves
5. Pour the urine into a measuring graduate
6. Set the graduate on a flat surface at eye level to read amount
7. Observe for any signs of blood, dark color, mucus, sediment, and/or change in odor
8. Empty urine into the toilet and flush
9. Rinse container used for urination (bedpan, urinal, etc.) and store appropriately
10. Remove gloves
11. Record immediately on appropriate document, reporting any abnormalities to registered nurse

*Output with a catheter*

1. Put on disposable gloves
2. Place the graduate container below the collection container
3. Carefully open the drain outlet from the collection container, making sure the drain outlet does not touch the container or the floor
4. Allow the container to drain completely
5. Reattach the drainage outlet to the collection container
6. Follow steps 3 – 8 as above

Perform completion steps

### **Skill 34: Empty Urinary Drainage Bag**

Perform initial steps

1. Put on disposable gloves
2. Place the graduate container below the collection container
3. Open the drain outlet from the collection container, maintaining sterility
4. Allow the container to drain completely
5. Reattach the drainage outlet to the collection container
6. Dispose of urine and rinse container

Perform completion steps

### **Skill 35: Assist Resident Bedpan/Fracture Pan**

Perform initial steps

1. Raise the side rails, raise the bed to a correct working height, and lock the brakes. Adjust bed to as flat a position as possible
2. Lower the side rail on the side nearer you
3. Assist the resident to a supine position (on the back) moving the top linens aside
4. Put on gloves
5. Position the resident on the bedpan, using one of these two methods:  
Method 1:
  - a. Ask the resident to raise the hips (bending at the knees and pushing with the feet may make this easier)
  - b. Slide the bedpan under the resident's buttocks
 Method 2:
  - a. Turn the resident onto the side facing away from you
  - b. Place the bedpan against the resident's buttocks
  - c. Roll the resident back onto the bedpan
6. Adjust the head of the bed so that the resident is in a sitting position and cover for privacy
7. Place toilet tissue and the call signal within the resident's reach
8. Raise the side rail and tell the resident to signal when finished
9. Remove gloves and wash hands
10. Leave the room only if the resident can be left alone. Lower the bed if you leave
11. If you leave, check back frequently and answer the call signal promptly
12. To remove the bedpan, lower the side rail and head of the bed
13. Put on gloves and ask the resident to raise the hips or turn the resident onto the side facing away from you. Cover the bedpan immediately
14. Assist as needed to clean the perineal area
15. Raise the side rail and dispose of the bedpan contents according to facility policy
16. Measure input and output or obtain stool sample if needed. Observe contents for abnormalities
17. Remove gloves and wash your hands
18. Assist resident to wash his/her hands

Perform completion steps

### **Skill 36: Demonstrate Proper Use of a Gait Belt**

Perform initial steps

1. Place the belt around the resident's waist, over clothing
2. Fasten buckle snug, leaving enough room for your fingers to slip under the belt, and leaving the buckle slightly off-center, in the front
3. Remove immediately after activity is complete

Perform completion steps

### **Skill 37: Change Gown**

Perform initial steps

1. Untie soiled gown
2. Draw top sheet over resident's chest
3. Remove resident's arms from gown, unaffected arm first
4. Roll soiled gown from neck down and remove from beneath sheet
5. Slide resident's arms into clean gown, affected arm first
6. Tie gown
7. Remove top sheet from beneath clean gown and cover resident

Perform completion steps

### **Skill 38: Supine Position**

Perform initial steps

1. Lower head of bed
2. Move resident to head of bed if necessary
3. Position resident flat on back with legs slightly apart
4. Align resident's shoulders and hips
5. Use supportive padding if necessary

Perform completion steps

### **Skill 39: Fowler's Position**

Perform initial steps

1. Move resident to supine position (Skill 38)
2. Elevate bed 45 to 60 degrees
3. Use supportive padding if necessary

Perform completion steps

### **Skill 40: Lateral Position**

Perform initial steps

1. Place resident in supine position (Skill 38)
2. Move resident to side of bed closest to you
3. Cross resident's arms over chest
4. Slightly bend knee of the leg nearest to you or cross nearest leg over farthest leg at ankle
5. Place your hands under resident's shoulder blade and buttock. Turn resident away from you onto side
6. Place supportive padding behind back, between knees and ankles, and under top arm

Perform completion steps

### **Skill 41: Semi-Fowler's Position**

Perform initial steps

1. Move resident to supine position (Skill 38)
2. Elevate head of bed 30 to 45 degrees
3. Use supportive padding if necessary

Perform completion steps

#### **Skill 42: Assist to Bathroom**

Perform initial steps

1. Walk with resident into bathroom
2. Assist resident to lower garments and sit
3. Give resident call light and toilet paper
4. If resident is able to be left alone, step out of bathroom and return when called
5. Put on gloves
6. Assist resident to wipe from front to back
7. Remove gloves and wash hands
8. Assist resident to raise garments
9. Assist resident to wash hands
10. Walk with resident back to bed or chair

Perform completion steps

#### **Skill 43: Bedside Commode**

Perform initial steps

1. Place commode next to bed on resident's unaffected side
2. Assist resident to commode
3. Give resident call light and toilet paper
4. If resident is able to be left alone, step behind curtain and return when called
5. Put on gloves
6. Assist resident to wipe from front to back
7. Help resident into bed
8. Remove and cover pan and take to restroom
9. Check urine and/or feces for color, odor, amount and character and report unusual findings to nurse
10. Dispose of urine and/or feces, sanitize pan and return pan according to current nursing practices
11. Remove gloves and wash hands
12. Assist resident to wash hands

Perform completion steps

#### **Skill 44: Ambulation with a Walker**

Perform initial steps

1. Assist resident to sit on edge of bed
2. Place walker in front of resident
3. Assist resident to standing position
4. Have resident grasp both arms of walker
5. Brace leg of walker with your foot and place your hand on top of walker
6. Assist resident to stand on count of three
7. Stand to side and slightly behind resident
8. Have resident move walker ahead six to 10 inches, then step up to walker

Perform completion steps

#### **Skill 45: Ambulation with a Cane**

Perform initial steps

1. Instruct the resident to hold the cane close to his or her body on the unaffected side

2. Have the resident move the cane and the involved leg at the same time, and then move the uninvolved leg
3. Encourage the resident to keep the stride length of each leg and the timing of each step equal
4. Demonstrate correct technique if necessary
5. Observe carefully and assist resident to learn the technique

Perform completion steps

#### **Skill 46: Sitting in a Chair Using a Cane**

Perform initial steps

1. Have resident sit by placing backs of his or her legs against the edge of the chair seat, moving the cane out from his or her side, and reaching back with both hands to grasp the chair's armrests
2. Have the resident get up by unhooking the cane, holding it in his or her stronger hand while grasping the armrests, and pushing against the armrests while raising himself or herself upright
3. Demonstrate the technique if necessary
4. Observe the resident's technique and assist him/her in learning the technique

Perform completion steps

#### **Skill 47: Providing Foot Care**

Perform initial steps

1. Test water temperature and ensure it is safe and comfortable before placing resident's foot in water, and adjust if necessary
2. Completely submerge foot in water
3. Remove foot from water, washing entire foot, including between toes, with soapy washcloth
4. Rinse entire foot, including between toes
5. Dry entire foot, including between toes
6. Put lotion in hand and warm lotion by rubbing hands together
7. Massage lotion into entire foot (top and bottom), removing excess (if any) with towel
8. Assist resident to replace sock
9. Support foot and ankle properly throughout procedure

Perform completion steps

#### **Skill 48: Put One Knee-High Elastic Stocking on Resident**

Perform initial steps

1. Turn stocking inside-out at least to heel area
2. While supporting the heel, bring the stocking over the toes, then foot and ankle. The opening in the stocking should be either on top or bottom of the toe area depending upon the manufacturer
3. Slowly bring the stocking up the leg of the resident, smoothing out any wrinkles. This should be done gently and naturally, avoiding force and overextension of limb and joints throughout the procedure
4. Straighten all of the lines and make sure resident is comfortable

Perform completion steps

#### **Skill 49: Give Partial Bed Bath (Face, one arm, hand and underarm)**

Perform initial steps

1. Remove or fold back top bedding keeping resident covered with bath blanket (or top sheet)
2. Remove resident's gown
3. Test water temperature and adjust if necessary
4. Wash face with wet washcloth (no soap) beginning with the eyes, using a different area of the washcloth for each eye, washing inner aspect to outer aspect
5. Dry face with towel, using a blotting motion

6. Expose one arm
7. Place towel underneath arm
8. Using washcloth and towel, wash with soap, rinse and dry arm, hand, and underarm
9. Put clean gown on resident (will verbalize for testing procedure)
10. Remove bath blanket and pull up bedcovers

Perform completion steps

#### **Skill 50: Changing Adult Incontinent Brief or Pad**

Perform initial steps

1. Apply gloves
2. Ensure privacy, remove bed linen, lift gown or pull down pajamas
3. Turn resident to side, place bed protector under the resident
4. Undo incontinent brief, carefully remove it by turning the resident from side to side
5. Place in disposable bag
6. Clean resident with disposable wipe or washcloth. Place disposable wipe in disposable bag or return washcloth to collection container
7. Replace with fresh brief by turning resident side to side. Take care not to pull so hard that the brief is torn
8. Replace adhesive protector from back of brief and attach to strips on the front of brief. Do not wrap too tightly
9. Replace pajamas or gown and secure resident
10. Remove gloves, wash hands

Perform completion steps

#### **Skill 51: Measure and Record Weight of Ambulatory Resident**

Perform initial steps

1. Start with scale balanced at zero before weighing resident
2. Assist resident to step up onto center of the scale
3. Determine resident's weight
4. Assist resident off scale before recording weight
5. Report weight within plus or minus two pounds of evaluator's reading

Perform completion steps

#### **Skill 52: Measuring Height of a Bedridden Resident**

Perform initial steps

1. Turn linen down so it is off the resident
2. Position resident comfortably in the supine (back) position
3. Using a pencil, make a small mark on the bottom sheet at the top of the resident's head
4. Go to the foot of the bed and make another small pencil mark at the resident's heels
5. Using a tape measure, measure the area between the pencil marks. This is the height of the resident
6. Note the number on your paper to report to the nurse and/or document
7. Position resident comfortably and replace linen over resident

Perform completion steps

#### **Skill 53: Measuring Abdominal Girth**

Perform initial steps

1. Turn linen down and raise resident gown or pajamas just enough that abdomen can be measured. Keep all areas covered that do not need to be exposed
2. Carefully wrap measuring tape around the resident's abdomen at the level of the navel (umbilicus)
3. Read the number where the ends of the tape meet

4. Carefully remove the tape measure. Write down the abdominal girth measurement on your paper
5. Replace resident clothing and position comfortably

Perform completion steps

#### **Skill 54: Care of the Artificial Eye**

Perform initial steps

1. Position resident in the supine position with a towel over the chest
2. Position eyecup on flat surface
3. Ask resident to close both eyes and cleanse eyes with moistened cotton balls. Wipe gently from inner corner (canthus) of each eye outward. Use clean cotton ball for each eye
4. Remove eye:
  - a. Hold hand under eye area so that the eye will move out into your hand
  - b. Pull lower eyelid down with the thumb and lift the upper lid gently with the first finger
  - c. Eye should come out into the hand
5. Place eye carefully in eye cup on gauze
6. Secure the resident
7. Bring the eye cup to the sink and place on flat surface
8. Line the sink with towel
9. Empty and rinse eye cup, place new gauze inside of it and replace cup on a flat surface
10. Wash eye in lukewarm water, rinse and place on clean gauze inside eye cup. Do not dry the eye (Eye may be washed in other solution, such as antibacterial soap if ordered by physician or recommended by the manufacturer)
11. Store eye in water or soft contact saline solution or prepare to replace inside the socket
12. Replace eye:
  - a. Return to bedside
  - b. Clean the eye socket, if needed with moistened cotton balls and dry (or as ordered by physician)
  - c. Hold the notched edge of eye toward the nose
  - d. Lift upper lid with first finger and using other hand, gently insert the eye
  - e. Press down on the lower lid until the eye slips into its place. It is held in place by suction

Perform completion steps

#### **Skill 55: Stump Prosthesis Care and Application**

Perform initial steps

1. To care for the plastic prosthesis:
  - a. Wipe the plastic socket of the prosthesis with a damp cloth and mild soap or alcohol
  - b. Wipe the insert with a dry cloth
  - c. Dry the prosthesis thoroughly
  - d. Maintain and lubricate the prosthesis as advised by the manufacturer
  - e. Check for malfunctions and adjust or repair if necessary
  - f. Check the condition of the shoe on the foot prosthesis
2. To apply the prosthesis:
  - a. Apply the stump sock
  - b. Remove the insert from the prosthesis and place it over the stump
  - c. Insert the stump into the prosthesis
  - d. Secure the prosthesis onto the stump according to the manufacturer's instructions

Perform completion steps

### **Skill 56: Care of the Limb After Amputation**

Perform initial steps

1. Wash limb at least once daily, preferably in the evening as the limb should always be dry when putting on the prosthesis
2. Prepare basin with water at proper temperature for bathing
3. Wash limb using mild soap, rinse and pat dry
4. If ordered by physician, the limb should be massaged to decrease discomfort and increase circulation. Always observe for any changes or problems with the stump, such as open wounds, redness, signs of injury or infection
5. Never use lotion or hand cream on a residual limb. The lotion will soften the skin and the goal is to have the skin toughened so it will not break down inside the prosthesis
6. The stump shrinker or ace wrap should be replaced if the resident has one. This will be done by the nurse
7. Empty basin

Perform completion steps