

A WATCHFUL EYE HOMECARE AGENCY, LLC.

SKILLS CHECKLIST FOR LPN/PCA/CNA

Name: Positi		_ Date:
Personal Care Skills Lists	Skilled	Unskilled
	[Check with X]	[Check with X]
Personal Hygiene:		
 Sponge Bath (including bed bath) 		
 Shower Bath 		
Tub Bath		
 Applying Lotion 		
 Dressing & Changing Clothes 		
Oral Hygiene:		
Hair Care:		
Dry Shampoo		
Wet Shampoo		
Skin Care:		
Nail Care:		
 Clip and Clean 		
Diabetic Referral		
Toileting:		
 Use of Bed Pan 		
 Urinal 		
 Applying Briefs 		
 Movement to/from bathroom 		
Feeding:		
 Oral 		
 Tube 		
Meal Preparation		
Mobility & Transfers:		
Positioning/Transferring		
 Lifting (including the use of Hoyer Lift) 		
 Range of Motion (ROM) Exercises 		
Crutches		
Cane		
Walker		
Temperature:		
Oral		
Axillary		
Rectal		
Pulse:		
Radial		
Apical		
Medication:		
Administration		
Reminder		
MAR documentation		



A WATCHFUL EYE HOME HEALTHCARE, LLC. SKILLS CHECKLIST FOR LPN/PCA/CNA

Personal Care Skills Lists	Skilled [Check with X]	Unskilled [Check with X]
General Nursing:		
 Orient Patients 		
 Vital Sign Monitoring 		
 Urine Dipstick 		
 Blood Glucose Monitoring 		
 Wound Care & Dressing Changes 		
 Ostomy Care 		
Light Housekeeping:		
 Laundry 		
 Home management 		
 Bed Making 		
Pain Management:		
 Turning and Repositioning 		
 Backrub 		
Comfort Management:		
 Showing Empathy 		
 Listening to Client 		
Shopping & errands		
Documentation		
Report Writing		

This is a self-evaluation for assessing your experience and demonstrations of skills in specific clinical areas. The information I have given is true and accurate to the best of my knowledge.

Signature of Personal Care Aide

Certifications

___/ Date

Name of Reviewing Officer

Signature

Date