



# HHA/CNA/STNA Skills Checklist



Please check the appropriate boxes to describe your experience

First Name : \_\_\_\_\_

Last Name: \_\_\_\_\_

Social Security: \_\_\_\_\_

Date: \_\_\_\_\_

Please indicate your level of experience by circling in the category below. 1-less experience - 4 more experience

## INFECTION CONTROL/SAFETY AND EMERGENCY SKILLS

Perform Hand washing/use of Hand	1	2	3	4	Handle soiled linens	1	2	3	4
Perform Heimlich maneuver	1	2	3	4	Double-bag for isolation precautions	1	2	3	4
Seizures	1	2	3	4	Apply/Remove waist restraint/lap buddy	1	2	3	4
Falling and Fainting	1	2	3	4	Apply/Remove ankle/wrist restraint	1	2	3	4
Apply personal protective equipment	1	2	3	4	Apply/Remove vest restraint	1	2	3	4
Technique Remove personal protective equipment (gloves)	1	2	3	4	Perform 2-person, head-to-foot lift, Perform 2-person, side-to-side lift	1	2	3	4

## MEAL/FEEDING SKILLS

Use proper feeding techniques/Hygiene for	1	2	3	4
Provide partial feeding as	1	2	3	4
Use positioning and adaptive feeding devices	1	2	3	4
Measure/Record Fluid In	1	2	3	4
Measure/Record Solid In	1	2	3	4

## VITAL SIGN SKILLS

Perform/record manual and digital	1	2	3	4
Measure/record manual and digital	1	2	3	4
Measure/record pain	1	2	3	4
Measure/record respirations	1	2	3	4
Measure/record temperature with glass	1	2	3	4
Transfer resident to wheelchair/operation of wheelchair	1	2	3	4

## AMBULATION SKILLS

Use a mechanical lift	1	2	3	4
Use a gait/transfer belt	1	2	3	4
Assist resident with walker/rolling walker	1	2	3	4
Hoyer Lift	1	2	3	4
Assist resident with walking	1	2	3	4
Move resident up/down i	1	2	3	4

## POSITIONING SKILLS

Perform active range of motion exercises	1	2	3	4
Perform passive range of motion exercises	1	2	3	4
Position resident supine	1	2	3	4
Position resident Fowler's	1	2	3	4
Position resident lateral	1	2	3	4
Position resident semi-supine	1	2	3	4

## PERSONAL CARE SKILLS

Position/reposition resident in chair	1	2	3	4	Use prosthetic, orthotic, and assistive	1	2	3	4
Provide male perineal care	1	2	3	4	Apply compression support stockings	1	2	3	4
Provide female perineal care	1	2	3	4	Make unoccupied bed	1	2	3	4
Provide oral care	1	2	3	4	Make occupied bed	1	2	3	4
Provide oral care for unconscious resident	1	2	3	4	Provide tub, whirlpool, or shower assistance	1	2	3	4
Provide denture care	1	2	3	4	Provide complete bed bath	1	2	3	4
Provide hair care	1	2	3	4	Provide backrub	1	2	3	4
Shave the resident	1	2	3	4	Provide bedpan/fracture pan	1	2	3	4
Provide nail care to non-diabetics	1	2	3	4	Provide urinal assistance	1	2	3	4
Provide foot care to non-diabetics	1	2	3	4	Provide bathroom commode assistance	1	2	3	4
Provide skin checks/Heel and elbow protectors	1	2	3	4	Provide bedside commode assistance	1	2	3	4
Provide dressing/undressing assistance	1	2	3	4	Measure/record fluid output	1	2	3	4

Signature

Date