

## **Home Health Care Competency Self Assessment**

## **Directions**

Please circle a value for each question to provide us and the interested facilities with an assessment of your clinical experience. These values confirm your strengths within your specialty and assist the facility in the selection process of the healthcare professional.

	Experience
0	Not Applicable
1	No Experience
2	Some Experience (Require Assistance)
3	Intermittent Experience (May Require Assistance)
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5	Very Experienced (Able to Teach/Supervise)

Print Name Last 4 Digits of SS# Date

Advanced directives 0 Patient/family teaching 0 Lift/transfer devices 0 Specialty beds 0 Restrictive devices (restraints) 0 End of life care/palliative care 0 Skin/wound assessment & care 0 Diabetic care & education 0	1 1 1 1 1 1	2 2 2 2 2 2	3 3 3 3	4 4 4 4	5 5 5
Lift/transfer devices 0 Specialty beds 0 Restrictive devices (restraints) 0 End of life care/palliative care 0 Skin/wound assessment & care 0	1 1 1	2 2 2	3	4	5
Specialty beds0Restrictive devices (restraints)0End of life care/palliative care0Skin/wound assessment & care0	1 1 1	2	3		
Restrictive devices (restraints)0End of life care/palliative care0Skin/wound assessment & care0	1	2		4	
End of life care/palliative care0Skin/wound assessment & care0	1		3		5
Skin/wound assessment & care 0		2	_	4	5
	1	4	3	4	5
Diabetic care & education 0		2	3	4	5
	1	2	3	4	5
Blood Glucose Monitoring (BGM) 0	1	2	3	4	5
General nursing assessment 0	1	2	3	4	5
Recognizing failure to thrive across the lifespan 0	1	2	3	4	5
Monitoring of vital signs 0	1	2	3	4	5
Monitoring of intake/output 0	1	2	3	4	5
Monitoring of weight 0	1	2	3	4	5
Cardiac/respiratory arrest/CPR adult 0	1	2	3	4	5
Cardiac/respiratory arrest/CPR pediatric or infant 0	1	2	3	4	5
Documentation of skilled care (written) or computerized 0	1	2	3	4	5
Medicare 485/486 forms 0	1	2	3	4	5
National Patient Safety Goals 0	1	2	3	4	5
Accurate patient identification 0	1	2	3	4	5
Effective communication 0	1	2	3	4	5
Interpretation & communication of lab values 0	1	2	3	4	5
Medication administration 0	1	2	3	4	5
Medication reconciliation 0	1	2	3	4	5
Anticoagulation therapy 0	1	2	3	4	5
Pain assessment & management 0	1	2	3	4	5
Infection control (nosocomial/community-acquired) 0	1	2	3	4	5
Anti-infective therapy (antibiotics, antivirals, antifungals) 0	1	2	3	4	5
Universal precautions 0	1	2	3	4	5
Awareness of HCAHPS 0	1	2	3	4	5



Initials
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General Skills - cont.	Experience					
Isolation	0	1	2	3	4	5
Minimize risk falls	0	1	2	3	4	5
Prevention of pressure ulcers	0	1	2	3	4	5

IV Therapy	Experience					
Starting & maintaining peripheral IVs	0	1	2	3	4	5
Blood draw: venous	0	1	2	3	4	5
Central line care (includes PICC/Groshong/Hickman)	0	1	2	3	4	5
Blood draw: central line	0	1	2	3	4	5
Care & management of ports	0	1	2	3	4	5
Care & management of nonvascular devices (epidural, intrathecal)	0	1	2	3	4	5
TPN & lipids	0	1	2	3	4	5
Administration of blood and blood products	0	1	2	3	4	5
Administration of chemotherapy	0	1	2	3	4	5
Monitoring of chemotherapy (does not initiate)	0	1	2	3	4	5
Infusion pumps	0	1	2	3	4	5

Cardiac	Experience					
Cardiovascular assessment	0	1	2	3	4	5
Clinical identification of dysrythmias (AP check for rate & rhythm)	0	1	2	3	4	5
Care of Patient with:						
Hypertension	0	1	2	3	4	5
Coronary Artery Disease (CAD)	0	1	2	3	4	5
Acute MI	0	1	2	3	4	5
Post Coronary Artery Bypass Graft (CABG)/valve	0	1	2	3	4	5
CHF	0	1	2	3	4	5
Aneurysm (thoracic or abdominal)	0	1	2	3	4	5
Pre-post surgery	0	1	2	3	4	5
Medication Administration/Patient Teaching						
Antidysrhythmics (i.e., betablockers, calcium channel blockers & cardiac glycosides)	0	1	2	3	4	5
Antihypertensives	0	1	2	3	4	5
Vasoactive drugs (NTG)	0	1	2	3	4	5
Diuretics (i.e., lasix, dyazide)	0	1	2	3	4	5

Respiratory	Experience					
Assessment/auscultation of lung sounds	0	1	2	3	4	5
Incentive spirometry	0	1	2	3	4	5
Principles of chest percussion	0	1	2	3	4	5
Establishing an airway	0	1	2	3	4	5



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Respiratory - cont.	Experience						
Care of Patient with:							
Asthma	0	1	2	3	4	5	
COPD	0	1	2	3	4	5	
Pulmonary hypertension	0	1	2	3	4	5	
Tracheostomy	0	1	2	3	4	5	
Lung cancer	0	1	2	3	4	5	
Pulmonary emboli	0	1	2	3	4	5	
Medication Administration/Patient Teaching							
Aminophylline	0	1	2	3	4	5	
Bronchodilators (Bronkosol/Brethine)	0	1	2	3	4	5	
Expectorants	0	1	2	3	4	5	
Inhaled medications (proventil/anticholinergics/steroids/mucolytics)	0	1	2	3	4	5	

Neurology	Experience					
Assessment of neuro signs	0	1	2	3	4	5
Seizure precautions	0	1	2	3	4	5
Halo traction	0	1	2	3	4	5
Care of Patient with:						
Coma	0	1	2	3	4	5
Cerebral tumors	0	1	2	3	4	5
Seizure activity	0	1	2	3	4	5
Spinal cord injury/paralysis (para/quad)	0	1	2	3	4	5
TBI (Traumatic Brain Injury)	0	1	2	3	4	5
TIA's	0	1	2	3	4	5
Stroke (CVA) hemiparesis	0	1	2	3	4	5
Alzheimer's Disease	0	1	2	3	4	5
Meningitis	0	1	2	3	4	5
Multiple sclerosis	0	1	2	3	4	5
Parkinson's disease	0	1	2	3	4	5
ALS (Amyotrophic Laterial Sclerosis)	0	1	2	3	4	5
Medication Administration/Patient Teaching						
Cortocosteroids	0	1	2	3	4	5
Anticonvulsant	0	1	2	3	4	5
MAOIs	0	1	2	3	4	5
Antidyskinetics	0	1	2	3	4	5
Skeletal muscle relaxants	0	1	2	3	4	5
Dopamine (blockers & stimulants)	0	1	2	3	4	5



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GI / GU	Experience						
NG tube	0	1	2	3	4	5	
Long term feeding tube (Keofeed, Dobhoff)	0	1	2	3	4	5	
PEG/gastrostomy tube	0	1	2	3	4	5	
Tube feeding	0	1	2	3	4	5	
Drainage tubes (surgical & non-surgical)	0	1	2	3	4	5	
G.I. bleed	0	1	2	3	4	5	
Colostomy/ileostomy care	0	1	2	3	4	5	
Ileal conduit	0	1	2	3	4	5	
G.U. irrigations	0	1	2	3	4	5	
Suprapubic catheter	0	1	2	3	4	5	
Care of Patient with:							
Shunts & fistulas	0	1	2	3	4	5	
Straight catheterization	0	1	2	3	4	5	
Self catheterization	0	1	2	3	4	5	
Incontinence	0	1	2	3	4	5	
Peritoneal dialysis	0	1	2	3	4	5	
Hemodialysis	0	1	2	3	4	5	

Gynecology	Experience						
Endometriosis	0	1	2	3	4	5	
Self breast exam	0	1	2	3	4	5	
Mastectomy	0	1	2	3	4	5	
Hysterectomy	0	1	2	3	4	5	

Orthopedic		Experience					
Total joint replacements (knee/hip/shoulder)	0	1	2	3	4	5	
Crutch walking	0	1	2	3	4	5	
Assistive devices	0	1	2	3	4	5	
Arthroscopy/arthrotomy	0	1	2	3	4	5	
TENS unit	0	1	2	3	4	5	
Care of Patient with:							
Arthritis	0	1	2	3	4	5	
Amputation	0	1	2	3	4	5	
Casts	0	1	2	3	4	5	
Fractures	0	1	2	3	4	5	



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Maternal - Child Care	Experience					
Assessment & care of complicated pregnancy	0	1	2	3	4	5
Breast feeding	0	1	2	3	4	5
Homecare of postpartum mother	0	1	2	3	4	5
Healthy baby	0	1	2	3	4	5
Newborn Care						
Bulb suctioning	0	1	2	3	4	5
Cord & circumcision care	0	1	2	3	4	5
Phototherapy	0	1	2	3	4	5
NG feedings	0	1	2	3	4	5
Pediatrics						
Medication calculation for pedi dosing	0	1	2	3	4	5
Use of croup tent	0	1	2	3	4	5
Oxyhood	0	1	2	3	4	5
Care of the Pediatric Patient with:						
Asthma	0	1	2	3	4	5
Bone marrow transplant	0	1	2	3	4	5
Bronco-pulmonary dysplasia	0	1	2	3	4	5
Cardiac surgery	0	1	2	3	4	5
Cystic fibrosis	0	1	2	3	4	5
Epiglottiditis	0	1	2	3	4	5
Near drowning	0	1	2	3	4	5
Overdose/poison ingestion	0	1	2	3	4	5
Post harrington rod insertion	0	1	2	3	4	5
Respiratory Distress Syndrome (RDS)	0	1	2	3	4	5
Reye's syndrome	0	1	2	3	4	5
Sickle cell disease	0	1	2	3	4	5
Spina bifida	0	1	2	3	4	5

Use of Equipment for All Age Groups	Experience					
Cardiac monitors	0	1	2	3	4	5
WoundVAC	0	1	2	3	4	5
Apnea monitors	0	1	2	3	4	5
O2 administration (NC/mask)	0	1	2	3	4	5
Ultrasonic nebulizer	0	1	2	3	4	5
Ventilators	0	1	2	3	4	5

Software Programs		Experience						
MeDecision	0	1	2	3	4	5		
TILE	0	1	2	3	4	5		
OASIS	0	1	2	3	4	5		



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Age Specific Competencies	Experience					
Newborn/neonate (birth-30 days)	0	1	2	3	4	5
Infant (31 days-1 years)	0	1	2	3	4	5
Toddler (2-3 years)	0	1	2	3	4	5
Preschool (ages 4-5 years)	0	1	2	3	4	5
School age (ages 6-12 years)	0	1	2	3	4	5
Adolescents (ages 13-21 years)	0	1	2	3	4	5
Young adult (ages 22-39 years)	0	1	2	3	4	5
Adults (ages 40-64 years)	0	1	2	3	4	5
Older adult (ages 65-79 years)	0	1	2	3	4	5
Elderly (80+ years)	0	1	2	3	4	5

Please list any Additional Skills:					
1.	2.				
3.	4.				
Additional training:					
1.	2.				
3.	4.				
Additional equipment:					
1.	2.				
3.	4.				

Fax to: 1-888-298-3146

The information on this and all preceding pages is true and correct.			
Signature	Date		