




NURSE AIDE CURRICULUM SKILL PERFORMANCE CHECKLIST

Name: _____

Provide Fresh Drinking Water - 6.01A

 This performance checklist must be used by the teacher and student during skill acquisition, guided practice, and independent practice.

 During skill check-off, the student must perform the skill unassisted with 100% competence.

 While the course is being taught, a skill performance summary document/chart *may* be used to verify skills that have been completed. However, verification that the student has demonstrated competency on this skill **MUST** be recorded on the NATS Part II by the conclusion of the course.

Equipment: Cart with ice cooler/chest, pitchers, cups, trays, ice, scoop for ice, straws

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|--|--|
| | 1. Receive direction from supervisor regarding residents with special needs (NPO, fluid restrictions, no ice). |
| | 2. Wash hands. |
| | 3. Assemble supplies. (Cart with ice cooler/chest, pitchers, cups, trays, ice, scoop for ice, straws, list with special instructions) |
| | 4. Fill ice cooler on cart with ice. Use scoop to move ice into ice cooler. Do not allow ice to touch your hand and fall back into the container. Place the scoop in proper receptacle after each use. Do not allow handle of scoop to touch ice. Close the lid. |
| | 5. Move, then park cart outside resident's door, near wall, to avoid obstructing the hallway. |
| | 6. Check your list for special needs before entering the resident's room. |
| | 7. Knock; announce your identity and intent. Enter the resident's room, empty and rinse resident's water pitcher. |
| | 8. Bring the resident's water pitcher to the cart parked in the hall and use scoop to fill the pitcher with ice. Close lid to ice cooler/chest. |
| | 9. Add fresh water to the pitcher of ice once in the resident's room. |
| | 10. Place pitcher with fresh drinking water within reach. |
| | 11. Offer to fill a cup with fresh water! Do not drop off water pitcher and run. |
| | 12. Repeat steps 5-11 for each resident. |
| | 13. Record on Intake/Output Record if required. |
| | 14. Return cart. Leave ice cooler clean and dry. |
| | 15. Wash hands. |

Instructor's Initials: _____ Date: _____