

## COMPETENCE ASSESSMENT

October 1, \_\_\_\_\_ – September 30, \_\_\_\_\_

HIGH PERFORMANCE MODEL – CORE COMPETENCIES

Position Specific Competencies including TECHNICAL SKILLS

COMPETENCY	BEHAVIORS	SELF ASSESSMENT		COMP LEVEL			Validation Method/Comments  Supervisor's Initials & Date
				E	S	C	
		I feel I have the knowledge and ability to perform these functions.	I request additional education and/or experience.	E	S	C	
Demonstrates use, set-up, and care of procedures/equipment according to unit policies and procedures.	a) Uses assessment criteria and care plan for safe patient handling and movement appropriately.						
	b) Appropriately uses algorithms for safe patient handling and movement.						
	c) Selects and correctly operates lifting and moving equipment, including overhead lifts, sit-stand lifts, friction-reducing devices, and gait belts.						