

## Technical Competency Self-Evaluation – PCTI

Employee Name: \_\_\_\_\_ Unit: \_\_\_\_\_

Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

**Directions:** Mark each box for the best corresponding answer. Example: If the statement is **I document when I have contacted a physician** place a mark in the box which best describes how you perform this behavior: **Always, Some of the time, or Rarely**. Scores will be totaled at the end of the self-evaluation.

| Technical Competency Standard  | Always | Some of the time | Rarely |
|--|--------|------------------|--------|
| 1. I take vital signs on patients as directed by the nurse or SNU.   |        |                  |        |
| 2. I chart vital signs in the appropriate areas, i.e. Meditech or graphics.  |        |                  |        |
| 3. I assist patients with their personal care, including bathing, oral care, skin care, hair care, dressing, etc.      |        |                  |        |
| 4. I ensure that my patients are bathed every other day.   |        |                  |        |
| 5. I monitor for changes in my patients' condition and inform a nurse about these changes.                             |        |                  |        |
| 6. I check on all of my patients at least every hour.  |        |                  |        |
| 7. I will assist or get assistance for any patient, even if not assigned to me.  |        |                  |        |
| 8. I document on my patients on the appropriate screens.   |        |                  |        |
| 9. I collect specimens from patients as directed by the nurse.   |        |                  |        |
| 10. I safely apply venous compression devices, restraints, polar care, etc.  |        |                  |        |
| 11. I assist patients with mobility such as turning, positioning, and ambulation.                                      |        |                  |        |
| 12. I always use a gait belt when transferring a patient.  |        |                  |        |
| 13. I assist the nurse with nursing procedures when required.  |        |                  |        |
| 14. I assess my patients for pain at least once per shift.   |        |                  |        |
| 15. I treat aqll my patients with Universal Precautions.   |        |                  |        |
| 16. I give status reports with correct & current information to the on-coming PCT.                                     |        |                  |        |
| 17. I prepare rooms for admissions with an admission kit and fresh ice and water prior to their arrival.               |        |                  |        |
| 18. I orient patients/families to the unit and hospital routine.   |        |                  |        |
| 19. I provide nursing care (toileting, transferring) to my patients.   |        |                  |        |
| 20. I plan my care at the beginning of my shift.   |        |                  |        |
| 21. I badge in & out for each of my shifts in the correct cost center.   |        |                  |        |
| 22. I identify malfunctioning equipment and initiate repair.   |        |                  |        |
| 23. I answer call-lights within 15 minutes.  |        |                  |        |
| 24. I float to other units as assigned by my supervisor.   |        |                  |        |
| 25. I take at least 8 hours of PTAN annually.  |        |                  |        |
| 26. I observe HIPPA Privacy Standards and monitor the unit routinely for HIPPA violations.                             |        |                  |        |
| 27. I arrive to the unit on-time for my shifts.  |        |                  |        |
| 28. I dress professionally by wearing appropriate nursing attire such as clean scrubs, closed-toe shoes, T-shirts with |        |                  |        |

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| appropriate logos, etc.  |  |  |  |
| 29. I am aware of my language and what conversations patients could be overhearing while on the unit or at the nurses' station.                                  |  |  |  |
| 30. When I am unable to answer a call-light within 15 minutes, I alert the nurse or SNU.   |  |  |  |
| 31. I allow scheduled therapies to go on uninterrupted unless it is an absolute medical necessity.   |  |  |  |
| 32. I renew my CPR certification before the expiration date.   |  |  |  |
| 33. If I work between 7a and 7p, I monitor the dayroom for meals.  |  |  |  |
| 34. I find out if a patient is a high fall risk during report and take appropriate action, such as activating bed and WC alarms.                                 |  |  |  |
| 35. I ensure that my patients are ready for therapy sessions, i.e. being dressed, having appropriate medications, etc.   |  |  |  |
| 36. I assist the nurse with transfers using the appropriate body mechanics.  |  |  |  |
| 37. I ensure that my patient rooms are neat and clean at all times.  |  |  |  |
| 38. I chart when I can & don't stay after my shift on a regular basis  |  |  |  |
| 39. I do not regularly pass on tasks to other shifts when I have the time to perform them on my shift.   |  |  |  |
| 40. I check my Time Trax and submit appropriate Kronos correction forms before payroll Mondays.  |  |  |  |
| 41. I ensure that my charting corresponds to my patient's actual condition and is not false "recalled" information.  |  |  |  |
| 42. I make myself available to round at change of shift.   |  |  |  |
| 43. I transfer patients safely as I have been trained to do.   |  |  |  |
| 44. I gown, glove, and – if necessary – wear a mask when I cross a doorway into an isolation room.   |  |  |  |
| 45. I wash/foam my hands before and after touching a patient.  |  |  |  |
| 46. I ensure that rooms are organized and clean before end of shift.   |  |  |  |
| 47. I am responsible for ensuring that my pay is correct by monitoring my badge ins/outs and ensuring that correct Kronos forms are submitted to the timekeeper. |  |  |  |
| 48. I acquire a weight on all new admissions.  |  |  |  |
| 49. I attend scheduled inservices/meetings.  |  |  |  |
| 50. I correctly scan items I use from the POU rooms.   |  |  |  |
| 51. I answer the phone with a standard greeting.   |  |  |  |
| 52. I take care with equipment, furniture, and my general surroundings on the unit and am aware of how neglect of my surroundings impacts the Rehab Center.      |  |  |  |
| 53. I have less than 5 unscheduled absences in a 12 month period   |  |  |  |

Step 1: Write down number of marks in the "Always" category in this blank \_\_\_\_\_

Step 2: Multiply the score from Step 1 x 2. Write the total in this blank \_\_\_\_\_

Step 3: Write down number of marks in the "Some Of The Time" category \_\_\_\_\_

Step 4: Add totals from Step 2 & Step 3 only and write the total in this blank \_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

## Technical Competency Scoring Results

If you scored 88 – 104:

You are providing excellent nursing care and you are an important asset to St. David's. You share St. David's value system, you are proactive, and recognize the importance effective and efficient nursing care. You have the ability to get the job done the way it should be done. You have a positive attitude and you are an excellent role model and mentor to new employees. You view St. David's as *your* hospital. Your supervisor will discuss this evaluation with you during your evaluation meeting, so please bring it with you.

If you scored 52 – 87:

You are a good, solid employee and are a most important PCT to St. David's as you can cause us to succeed or fail in providing excellent nursing care. You actively follow correct procedure and take it upon yourself to provide safe care to your patients. You are wanted as an employee and St. David's is committed to your success and developing you into a PCT who provides excellent, safe nursing care all of the time. Your supervisor will discuss this evaluation with you during your evaluation meeting, so please bring it with you.

If you scored 0 –51:

You do not provide consistent and adequate care to your patients. Your supervisor will discuss this evaluation with you during your evaluation meeting, so please bring it with you.

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### Supervisor/Employee Meeting Notes

Re-score (if necessary)

Step 1: Write down number of marks in the "Always" category in this blank \_\_\_\_\_

Step 2: Multiply the score from Step 1 x 2. Write the total in this blank \_\_\_\_\_

Step 3: Write down number of marks in the "Some Of The Time" category \_\_\_\_\_

Step 4: Add totals from Step 2 & Step 3 only and write the total in this blank \_\_\_\_\_

Goals/Comments: \_\_\_\_\_

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