

OCCUPATIONAL THERAPY COMPETENCY PROFILE

Name:	Date of hire:
Title:	Employee number:
License number:	Evaluation date:
License renewal date:	Specialty certification (if applicable): Expiration date:
BLS renewal date:	
Other:	

Key for met/not met categories and self-needs assessment:

1. Able to perform independently
2. Able to perform after review of information
3. Able to perform with assistance only
4. Unable to perform

Time frame:

3 months = 3m
 6 months = 6m
 1 year = 1 yr

* = Annual evaluation required

Task/Behavior	References: A. Review policy/procedure B. Manufacturer's manual C. Video review D. Skills lab E. Written test F. Self-study packet G. Direct observation	A	Date	Instructor Initials	Time Frame	Met	Not met	Self-needs Assessment
A. DEPARTMENT OVERVIEW								
Tour of (<i>PACE program</i>)	Guided tour				3m			
"PACE" training	PACE manual, P&P manual, preceptor orientation				3m			
Dress code	Policy #				3m			
Clock in/out	Policy #				3m			
Beeper paging	Preceptor orientation				3m			
Telephone system	Tour, policy #				3m			
Location of manuals	Guided tour				3m			
Standards of practice					3m			
Department meetings (staff, in-service)	Clinical ladder manual				3m			
B. DEPARTMENT SAFETY PROCEDURES								
Fire safety procedure*	Disaster manual, P&P				3m			
Disaster plan, evacuation plan*	Disaster manual, P&P				3m			
Location of safety manuals*	Guided tour				3m			
MSDS notebook-agents used*	Hazardous materials manual				3m			
Hazardous waste precautions*	Hazardous materials manual				3m			
Body mechanics*	PT program				3m			
Balance precautions	Unit learning resources				3m			
Use of restraints*	Policy #, restraint P&P				3m			
CPR/basic life support (every 2 years)	Policy #				6m			
C. INFECTION CONTROL								
Handwashing	Policy #				3m			
Universal precautions*	Policy #				3m			
Disposal of infectious waste	Policy #				3m			
TB control/fit check	Policy #				3m			
Immunizations (PPD yearly)	Policy #				3m			
D. RESOURCE MANAGEMENT								
Tour of supply room(s)	Guided tour				3m			
Durable medical equipment	P&P manual, preceptor				3m			
Scheduling of therapy appointments	Preceptor				3m			
Ordering of supplies ♦ Routine supplies ♦ Purchase order requisitions	Unit learning resources, preceptor				3m			

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E. ASSESSMENT OF PATIENTS														
Immunizations ♦ PPD yearly (mandatory)* ♦ Flu vaccination (counseling)	Policy #										3m			
Location and use of personal protective equipment (PPE)*	Safety training manual & video										3m			
D. RESOURCE MANAGEMENT														
Intake and enrollment policies	Unit learning resources										3m			
Disenrollment policy	Unit learning resources										3m			
E. PHYSICAL ASSESSMENT DATA														
Range of motion measurement	Unit learning resources										3m			
Manual muscle testing	Unit learning resources										3m			
Sensory/perceptual testing	Unit learning resources										3m			
Activities of daily living assessment	Unit learning resources										3m			
Neuromotor functioning	Unit learning resources										3m			
Appropriateness of current assistive/adaptive/orthotic devices	Unit learning resources										3m			
F. USE/MAINTENANCE OF EQUIPMENT														
Wheelchair ♦ Manual ♦ Power	Unit learning resources, manufacturer manual										3m			
Hoyer lift	Unit learning resources, manufacturer manual										3m			
Walker	Unit learning resources, manufacturer manual										3m			
Crutches ♦ Loft strand ♦ Standard	Unit learning resources, manufacturer manual										3m			
Ankle foot orthosis (AFOs)	Unit learning resources										3m			
Knee ankle foot orthosis (KAFOs)	Unit learning resources										3m			
Knee immobilizers	Unit learning resources										3m			
Splints	Unit learning resources										3m			
G. CARE OF PATIENTS														
Neurodevelopment treatment	Unit learning resources										3m			
Sensory integration treatment	Unit learning resources										3m			
Muscle stretching	Unit learning resources										3m			
Range of motion exercises	Unit learning resources										3m			

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Positioning	Unit learning resources										3m			
Splints fabrication	Unit learning resources										3m			
Bath chair/shower chair	Manufacturer's instructions, preceptor										3m			
Emergency intervention	Mock codes, situation analysis										3m			
H. PARTICIPANT SPECIFIC COMPETENCIES														
Age specific*	Self-study module										3m			
Latex allergy*	Self-study module										3m			
Cultural respect*	Self-study module										3m			
I. MANAGEMENT OF INFORMATION														
Unit therapy documentation	Medical records manual										3m			
Documents teaching	Medical records manual										3m			
Participant confidentiality*	Policy #, P&P manual										3m			
Completion of physician orders	Medical records manual										3m			
Participation in IEPs	Unit learning resources										3m			
J. UNIT SPECIFIC														
Therapy attendance policy	P&P manual										3m			
Wheelchair maintenance policy, contract	P&P manual										3m			
Seizure precautions, management	Module										3m			
Hip, shoulder dislocation precautions	Unit learning resources, preceptor										3m			
K. QUALITY IMPROVEMENT														
Therapy equipment checks	Policy #										3m			
Chart review	Policy #										3m			
Universal precautions monitor	Policy #										3m			
QI committee	Meeting minutes										3m			

Date competency profile completed: _____

Action plan initiated: Yes No
(If yes, please add action plan to competency profile.)

I understand that it is my responsibility to notify my immediate supervisor if at any time I am unable to perform the basic competencies required to practice in my assigned clinical area.

Employee signature: _____

Preceptor signature: _____

(Attach the competency profile action plan here.)