

ConTemporary Nursing Solutions
NURSING ASSISTANT Evaluation

CTS Employee: _____

Facility Worked: _____

Unit: _____

Clinical Competence	Out-standing	Average	Below Average	Not Observed
1. Performs routine procedures and techniques per hospital policy and procedure				
2. Provides patient / family education				
3. Maintains a safe and therapeutic patient environment				
4. Competently uses required technology				
5. Applies and carries out supervisor's requests				
6. Communicates accurate, appropriate information in shift report				
7. Adheres to facility's policies / procedures				
8. Demonstrates understanding of JCAHO Standards				
9. Understands Pt's Bill of Rights including Advanced Directives				
Professional Attributes				
1. Adaptability / Flexibility to work assignment				
2. Initiative / Enthusiasm				
3. Efficient use of time / ability to prioritize and organize				
4. Communicates with others as needed in an efficient manner				
5. Judgment / Ability to handle stress				

My signature below indicates that I have supervised the clinician named above in a clinical setting.

Comments: _____

Evaluator's Signature: _____ TITLE (RN, LPN, etc): _____

Print Name: _____ Date: _____

PLEASE ASK YOUR SUPERVISOR TO COMPLETE
FAX or TEXT it to ConTemporary Nursing

FAX: 703-354-9727
 Toll Free Fax: 866-767-7297
 TEXT: 434-841-9807