

**Paid Feeding Assistant Competency Checklist
Handwashing**

Employee's Name/Credentials: _____

To master this skill, the student must successfully complete all steps, using principles of infection control. Failure to perform any step results in failure of this skill. To be completed by instructor (licensed nurse) during observation of 100% unassisted performance of the procedure by the trainee.

Equipment: Sink with faucet, soap, paper towels, waste basket, hand brush

Handwashing	Yes Able To Perform	No Needs to Improve	Comments
Assembles equipment if necessary.			
Stands away from sink. Clothing and hands must not touch sink. Does not lean on the sink or splatter clothes.			
Pushes sleeves and watch 4-5 inches up on arms.			
Turns on faucet with paper towel held between hand and faucet and adjusts temperature until warm. Wets hands and wrists with fingertips pointing downward without splashing.			
Applies soap to hands and wrists.			
Holds hands downward and lower than elbows while washing.			
Rubs hands together vigorously (using friction) for at least 15 seconds.			
Works up a good lather. Spreads lather over the entire area of hands and wrists (two inches above the wrist). Gets soap under nails and between fingers by rubbing against palms. Adds water while washing.			
Rinses thoroughly under running water, from wrists to fingertips, keeping fingertips down.			
Dries hands and wrists thoroughly with a clean paper towel.			
Uses a clean, dry paper towel to turn off faucet. Does not touch inside of sink with clean hands.			

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Score:

_____ Pass: Yes (all tasks performed satisfactorily)

_____ No (not all tasks performed satisfactorily)

Instructor Signature: _____ **Date:** _____

The above signature attests that the evaluator did not prompt, give hints, or otherwise assist the individual in the performance of the skills, when the individual was being evaluated for competency.

Employee Signature: _____ **Date:** _____