

**ALASKA COMMUNITY HEALTH AIDE PROGRAM
PRECEPTORSHIP CRITICAL SKILLS LIST**

PRECEPTORSHIP CRITICAL SKILLS	YES	NO	COMMENTS	RETEST YES / NO
I. CHAM SKILLS: CHA uses CHAM correctly				
Obtain appropriate problem-oriented history				
Select appropriate problem-oriented physical exam				
Make assessment(s) using assessment charts				
Select appropriate plan(s)				
Follow plan(s) to completion				
Cross-reference when indicated				
II. PHYSICAL EXAM SKILLS				
Vital signs infant:				
Rectal temp				
Apical pulse				
Respirations				
Weight				
Length				
Head circumference				
Vital signs child/adult:				
Oral temperature				
Radial pulse				
Apical pulse				
Respirations				
Blood pressure				
Selected exams:				
Ears				
Lungs				
Abdomen, including rebound tenderness				
CVA tenderness				
Circulation/Sensation/Movement exam of extremities				
Prenatal abdomen (FH/FHT)				
Screening physical				
III. RELIABILITY OF EXAM FINDINGS				
Recognize normal findings				
Recognize abnormal findings				
Describe findings accurately				
Follow up abnormal findings				
IV. FOLLOWS UNIVERSAL PRECAUTIONS				
V. LAB SKILLS: If CLIA certification is current, skip this section and note expiration date below.				
1. Blood glucose (finger stick)				
2. Hemoglobin (finger stick)				
3. Rapid Strep (throat swab)				
4. Urine pregnancy test (urine collection)				
5. Urine dipstick (clean catch urine collection)				
CLIA Annual Competency Certificate YES / NO / N/A Exp. Date:				
VI. ASSESSMENT				
Make appropriate assessment(s) based on H & P				

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CHA Name: _____
 Village: _____ Date: _____
 Preceptor #1 Name/Title: _____
 Preceptor #2 Name/Title: _____

Purpose:

This list is a record of critical skills that the CHA has been taught and has practiced during basic training. Critical skills represent the minimum skills that a CHA should be able to perform independently to provide high quality health care. The skills were selected by the Academic Review Committee. The CHA must master these skills before becoming credentialed as a Community Health Practitioner.

Directions to Preceptor:

Please provide opportunity for the CHA to perform all the skills on this list during preceptorship. Observe the skill. The CHA is expected to perform each skill independently, and in compliance with established CHAPCB and CHAM standards, lab test manufacturer's instructions, and OSHA regulations. Initial in **YES** column if the CHA performs the skill independently and according to the appropriate standard of practice.

Initial in **NO** column if the CHA is not able to perform the skill independently, or according to the standard of practice.

Comment specifically on each skill that the CHA needs to improve. Teach the skill as necessary. The CHA may have as many opportunities as time allows during preceptorship to repeat the skill. If the skill is performed independently to the standard, initial in the **YES** column in the retest section. If any skill remains "No" on the retest, the preceptorship will be considered incomplete. A plan for completion will be made by the Tribal Health Organization employing the CHA. Refer to **Overview of Credentialing/ Recredentialing Guidelines**.

Approved: ARC/CHAP Directors, 12/2017

PRECEPTORSHIP CRITICAL SKILLS	YES	NO	COMMENTS	RETEST YES / NO
VII. PLAN				
REPORTING (Attach completed Medical Traffic checklist - may report to preceptor if needed)				
PATIENT EDUCATION (Using CHAM) Explain problem(s)/assessment(s)				
Explain treatment(s)/plan(s)				
Include prevention when appropriate				
Make recheck or follow-up plan with patient				
MEDICINE SKILLS				
Select correct medicine/dose using CHAM				
Notes "Warnings" in CHAM Medicine Handbook (reasons not to give medication)				
Give pt ed using CHAM Medicine Handbook				
Reconstitute liquid oral meds correctly				
Deliver oral medicines correctly (select, label, give to pt)				
Teach patient how to take/administer medicine				
Mix injectable medicine				
Open and draw up a correct dose from an ampule using a filter				
Administer IM injection to older child/adult (no simulation)				
Administer Subcutaneous injection to older child/adult (no simulation)				
Administer IM injection to infant (no simulation)				
Administer Subcutaneous injection to infant (simulation allowed if no patient available)				
Measure dose correctly on pre-filled syringe holder				
VIII. PATIENT TYPES: CHA demonstrates a complete encounter for at least 15 patients required, including the 5 patient types below. At least 1 patient must be from each category. If possible, the CHA/P will see an infant under 3 months old, a child under three years old, and an elder. All 15 patients seen require a PEF.				
Acute care				
Chronic care				
Return prenatal				
Well Child				
Recheck visit				
IX. RECORDING: Attach PEF Review Form and Clinical Evaluation Form for the 5 required patient types above.				
X. SCOPE OF PRACTICE				
Follow Standing Orders policy for region				
Demonstrate knowledge of personal limits (Consults physician and CI/ SI, and accepts direction appropriately)				
XI. ADDITIONAL RECREDENTIALING SKILLS: Simulation allowed if no patient available.				
Sterile technique				
IV start				
Suturing				
Venipuncture				
XII. OTHER REGIONAL SKILLS YOU HAVE BEEN TAUGHT: These skills are not required for the preceptorship. Follow regional guidelines.				