Physician/Dentist Support Staff Competency Assessment – Registered Nurse Rounder

Name of PDSS Member: _____

Please check the appropriate boxes below

- □ Initial RN Rounder Competency Assessment
- □ Annual RN Rounder Competency Assessment

The functions outlined below are reviewed to ensure ongoing competence. Competency Assessment is part of the initial processing and annual performance appraisal.

GENERAL PRIVILEGES	MEETS EXPECTATIONS	DOES NOT MEET EXPECTATIONS*	NOT APPLICABLE
Adheres to working directly with			
authorizing Supervising Provider			
Adheres to utilizing only the equipment for which permissions have been granted			
Demonstrates appropriate hand hygiene, masking, etc, as applicable, while working within Carolinas HealthCare System facilities.			
Complies with patient safety initiative of patient identification			
Demonstrates competency in utilizing equipment			
Communicates pertinent information to the Supervising Physician to ensure patient safety			
Reports any issues or incidents with equipment the PDSS Member utilizes within Carolinas HealthCare System facilities			
Adheres to limited access for patient records and radiology information.			

*If any requested item is noted as "Does Not Meet Expectations", it is the responsibility of the sponsoring provider to address immediately. Please provide written confirmation of competency when achieved.

Name of PDSS Member: _____

Evaluation Date: _____

PDSS Member Signature: _____

Sponsoring Provider Name: _____

Sponsoring Provider Signature: ______