



Oregon State Board of Nursing
 17938 SW Upper Boones Ferry Rd.
 Portland, OR 97224-7012
 971-673-0685
 www.oregon.gov/OSBN

Oregon CNA 2 Authorized Duties Competency Validation Form

Section 1: CNA 2 Information

First Name:

Last Name:

Oregon CNA 1 Certificate Number

Section 2: Additional Competencies for CNA 2 Authorized Duties

As of March 1, 2015 all current CNA 2's in Acute Care, Dementia Care, or Restorative Care now have a general CNA 2 certification per Oregon Administrative Rule (OAR) 851-062-0050(4).

It will be incumbent on the CNA 2 to:

1. Not assume an assignment, duty, or responsibility unless competency has been established and maintained;
2. Not perform duties or tasks for which the CNA 2 has not demonstrated knowledge, skill, and ability to an Oregon licensed RN who has at least one year of nursing experience;
3. Inform their employer of any current CNA 2 authorized duties that were not obtained within their original CNA 2 training program curriculum; and
4. Maintain documentation to support any CNA 2 knowledge or skill competency that was not obtained within their original CNA 2 training program curriculum (see Section 3 below).

Section 3: Documenting Additional CNA 2 Knowledge and Skill Competency

The CNA 2 is expected to keep this form to document the attained CNA 2 knowledge or skill competency that was not obtained within their original CNA 2 training program curriculum. Only the knowledge and/or skill(s) for which the individual CNA 2 has not previously demonstrated competency will be documented on this form.

Skill	Date Taught (m/d/yy)	Date Competency Verified (m/d/yy)	Signature of RN Evaluator
Domain: Communication and Interpersonal Skills			
Coaching and mentoring peers			
Crisis Intervention			
Domain: Observation and Reporting			
Observing and collecting pain responses			
Relieving pain			
SBARR			
Domain: Person-Centered Care			
Embracing the friendship philosophy of care			
Positively impacting environment for person with dementia			

Skill	Date Taught (m/d/yy)	Date Competency Verified (m/d/yy)	Signature of RN Evaluator
Cultural competence			
Domain: Technical Skills			
Adjusting oxygen rate of flow			
Applying and removing CPAP or BiPAP devices (ON and OFF)			
Bladder scanning			
Clipping hair in preparation for surgical procedure			
Discontinuing saline lock			
Fingerstick capillary blood testing			
Interrupting and re-establishing nasogastric suction			
Obtaining a nasal swab			
Obtaining a rectal swab			
Placing electrodes/leads for, and run an EKG			
Placing electrodes/leads for telemetry			
Removing casts in non-emergent situations			
Screening newborn hearing			
Setting up traction equipment			
Suctioning oral pharynx			
Testing stool for occult blood			
Urine dip stick testing			
Domain: Infection Prevention and Control			
Establishing and maintaining a sterile field			
Obtain sterile urine specimen from port of catheter			
Discontinue Foley catheter			
Measuring, recording, and/or emptying output from drainage devices and closed drainage systems			
Changing wound vac canister			
Domain: Safety			
Implementing preventive/protective strategies			
Minimizing safety risks			
Domain: Promoting Nutrition and Hydration			
Adding fluid to established post-pyloric, jejunostomy, and gastronomy tube feedings			
Changing established tube feeding bags			

Skill	Date Taught (m/d/yy)	Date Competency Verified (m/d/yy)	Signature of RN Evaluator
Pausing and resuming established tube feedings to promote personal care			
Domain: Promoting Functional Abilities			
Assisting person in and out of Continuous Passive Motion (CPM) machine			
Range of motion on clients with complex medical problems			
Fragile Skin			
Risk of pathological fractures			
Spasticity			
Contractures			
Therapeutic Positioning			
Bridging			
Proning			
Use of Adaptive, Assistive, and Therapeutic Equipment			
Ankle and foot orthotics			
Braces			
Established Traction Equipment			
Remove			
Reapply			
Foot lifter			
Splints			
Domain: End-of-Life Care			
Provide compassionate end-of-life care			
Removal of non-surgically inserted tubes and devices from post-mortem person			
Domain: Documentation			
Use accurate terminology			
Use abbreviations appropriately			
CNA 2 Signature:			Date (m/d/yy)

1. Printed name of licensed RN evaluator _____ Date _____
2. Printed name of licensed RN evaluator _____ Date _____
3. Printed name of licensed RN evaluator _____ Date _____
4. Printed name of licensed RN evaluator _____ Date _____

IMPORTANT: Certificate holder will maintain this document as record of proof of completion of any additional CNA 2 knowledge and skill competencies obtained outside of their original program.