



HOME CARE ATTENDANT RIDE ALONG OBSERVATION

Staff Name _____

Staff Resource Coordinator _____

Auditor Name _____

Date of Ride Along _____

Staff Member's Home Office _____

Number of Client visits _____

Criteria	Rating			Comments
	Met	Unmet	Not Applicable	
Introduces/identifies self and states reason for visit.				
Uses 2 client identifiers.				
Retrieves client folder; including communication notes, med/treatment sheets, care plan- Reviews information <u>prior</u> to providing any care.				
Performs all assigned tasks identified on care plan for scheduled time frame.				
If assisting with medication supervision, instructs client it is time to take medication. Medications need to be taken while HCA in attendance and observes client swallowing medication then documents on med sheet. If client refuses medication HCA knows the protocol to follow and who to contact.				Hand Hygiene 2 nd moment _____ Consistently with all clients _____ Before _____ After _____
Dispenses medication correctly and ensures all pills are pushed out of blister bubble (visual inspection).				
Checks 5 RIGHTS				
Documentation done correctly.				

If providing Treatments: Urinary Catheter Care, Compression Stocking, cleaning of equipment, other... Tasks are done as reviewed in Enhanced Skills Session.				State Tasks done:
Assigned medications: Eye drops, Creams, Inhalers, other... Task is done as reviewed in Enhanced Skills Session.				State Tasks done:
Identifies any discrepancies between care plan and med/treatment sheet to RC.				
Removes and disposes of gloves and performs hand hygiene.				Between Tasks _____
At all visits - Involves client in conversation and activities in a polite, respectful manner.				
At all visits - Conversation is appropriate and does not breach PHIA or Respectful Workplace policies.				
Areas of concern noted by Observer and recommended follow up				

Comments:

Auditor's Signature: _____

Date: _____

Employee Signature: _____