Training Matrix
Checklist

Agency Name:_____

Employee Name:_____

Competency Verified by :_____ Date:_____

Competency Verified by:	Required Demonstration	Written	Return Demonstration	Verbal Demonstration
GENERAL				
Communication Ability	Agency Personnel			
Criminal History Check	Agency Personnel			
Confidentiality	Agency Personnel			
Participant Rights	Agency Personnel			
UAI - PERSONAL CARE				
Meal: Planning	RN/Dietician	✓		
• **Purchasing**	RN/Dietician	✓		
• **Preparation**	RN/Dietician	✓		
• **Storage and Handling**	RN/Dietician	✓		
Eating/Feeding	RN, RD, ST, OT	✓		
Toileting/Incontinence	RN			✓
Mobility/Transfer	RN/PT		✓	
Personal Care: Hygiene	RN	✓		
• **Bathing**	RN	✓		
• **Skin Care**	RN	✓		
Medications/Treatments	RN	✓		
Supervision:	RN/Social Worker	✓		
• **Cognitive Impairments**	RN/Social Worker	✓		
• **Psychological or Social Disorders**	RN/Social Worker	✓		
Infection Control and Universal Precautions	RN		✓	
Communications:	Agency Personnel /RN	✓		
• **Observation**	Agency Personnel /RN	✓		
• **Reporting**	Agency Personnel /RN	✓		
• **Documentation**	Agency Personnel /RN	✓		
UAI - Home Maintenance:				
Finances	Agency Personnel			
Shopping	Agency Personnel			
Laundry	Agency Personnel			
Housework	Agency Personnel			

Competency Verified by:	Required Demonstration	Written	Return Demonstration	Verbal Demonstration
Non-Medical Transportation:				
Valid Driver's License	Agency Personnel			
Liability Ins.	Agency Personnel			
Safe Driving Record	Agency Personnel			
Safe vehicle	Agency Personnel			
Chore Services:				
Minor Home Maintenance	Agency Personnel			
Minor Home Repair	Agency Personnel			
Safety equip. Installation	Agency Personnel			
Heavy Housework	RN review of Health Screen			

SPECIAL ENDORSMENT AREAS! *REFER TO MATRIX FOR QUESTIONS*

Competency Verified by:	Required Demonstration	Written	Return Demonstration	Verbal Demonstration
A. Maintenance Exercises	PT/OT		✓	
B. Mechanical Lift	PT/RN		✓	
C. Catheter Care	RN		✓	
D. Bowel Care	RN		✓	
E. Dressing	RN		✓	
F. Ostomy Care	RN		✓	
G. Oxygen Therapy	RN, RT		✓	
• **Inhalation Equipment**	RN, RT		✓	
H. Gastrostomy Tube Feeding	RN		✓	
I. Feeding Complications	RN, RD,ST, OT		✓	✓
J. Special Diets	RN, RD			✓
K. Medication Assistance	RN	✓ (With Med Class)		
L. Treatments	RN		✓	✓
M. Supervision:	RN, Social worker, PSR		✓	✓
• **Psychological or Social Disorders**	RN, Social worker, PSR		✓	✓

Agency RN/Agency Personnel must sign in each area of training.

✓ Indicates type of skill demonstration required by Medicaid.

RN= Registered Nurse
RT= Respiratory Therapist
OT= Occupational Therapist
ST= Speech Therapist
PSR= Psychosocial Rehabilitation
RD= Registered Dietician