



## Health Science Skill Standards Checklist

Student Name	YA Student ID Number
YA Coordinator	YA Consortium
School District	High School Graduation Date
<b>Certification Areas Completed:          Required Skills - For EACH Pathway          Check <input checked="" type="checkbox"/> completed areas (p. 4)</b>	<b>Level One Requirements:</b> <i>Students must complete ALL listed below</i> <b>Check <input checked="" type="checkbox"/> completed areas</b>
<input type="checkbox"/> Core Skills	<input type="checkbox"/> Required Skills
<input type="checkbox"/> Safety & Security	<input type="checkbox"/> Minimum of <b>ONE Unit</b>
<b>Therapeutic Services Pathway</b>	<input type="checkbox"/> Minimum of 2 semesters related instruction
<input type="checkbox"/> Dental Assistant Unit (p. 5)	<input type="checkbox"/> Minimum of 450 work hours
<input type="checkbox"/> Medical Assistant Unit (p. 6)	<b>Level Two Requirements:</b>
<input type="checkbox"/> Nursing Assistant Unit* (p. 7)	<i>Students must complete ALL listed below</i>
<input type="checkbox"/> Pharmacy Technician Unit (p. 9)	<b>Check <input checked="" type="checkbox"/> completed areas</b>
<b>Health Informatics Pathway</b>	<input type="checkbox"/> Required Skills for EACH pathway
<input type="checkbox"/> Medical Office Unit (p. 10)	<input type="checkbox"/> Minimum of <b>TWO Units</b>
<b>Ambulatory/Support Services Pathway</b>	<input type="checkbox"/> Minimum of 4 semesters related instruction
<input type="checkbox"/> Ambulatory/Support Services Unit* (p. 11)	<input type="checkbox"/> Minimum of 900 work hours
<u>CHOICES:</u> Dietary, Imaging, Laboratory, Optician/Optometry, Physical Therapy (PT)	<i>* Unit can be completed two times for a Level Two        as indicated on Unit Page</i>

Total Hours Employed	Company Name	Telephone Number
		( )
		( )

## Instructions for the Worksite Mentor(s) and Instructor(s)

The Skill Standards Checklist is a list of the competencies (tasks) to be achieved through mentoring and training at the worksite.

- The worksite mentor should rate each competency as the student acquires and demonstrates the skill **according to the performance standards criteria.**
- A competency may be revisited and the score raised as the student becomes more proficient at the worksite.
- The mentor and student should go over this checklist together on a regular basis to record progress and plan future steps to complete the required competencies.

**I certify** that this student has successfully completed the competencies required in my department. Circle your YA role, sign and print your name, and complete with the date signed and the department name.

***SIGN this page IF you have been a mentor, trainer, or instructor of this student***

Mentor/Trainer/Instructor Signature	Mentor/Trainer/Instructor Signature
Printed Name	Printed Name
Department	Department
Date Signed	Date Signed

Mentor/Trainer/Instructor Signature	Mentor/Trainer/Instructor Signature
Printed Name	Printed Name
Department	Department
Date Signed	Date Signed

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Printed Name	Printed Name
Department	Department
Date Signed	Date Signed

## Required Skills

Required of ALL Health Science YA Students

Copy this page FOR EACH pathway to be completed

CORE SKILLS	Minimum rating of 2 for EACH Check Rating		
	1	2	3
1. Apply academic knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Apply career knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Apply Health Science industry knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Communicate effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Act professionally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Demonstrate customer service skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Cooperate with others in a team setting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Think critically	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Exhibit regulatory & ethical responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Use resources wisely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Use basic technology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SAFETY & SECURITY	Minimum rating of 2 for EACH Check Rating		
	1	2	3
1. Follow personal safety requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Maintain a safe work environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Demonstrate professional role to be used in an emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Follow security procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Maintain confidentiality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Rating Scale:

3 = Exceeds entry level criteria/Requires minimal supervision/Consistently displays this behavior

2 = Meets entry level criteria/Requires some supervision/Often displays this behavior

1 = Needs improvement/Requires much assistance & supervision/Rarely displays behavior

### Additional Comments -

## Ambulatory/Support Services Pathway

Ambulatory/Support Services Unit- continued	Minimum rating of 2 for EACH Check Rating		
Specific Service- Laboratory	1	2	3
1. Use aseptic technique	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Clean & prepare glassware &/or instruments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Weigh & measure accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Perform calculations & conversions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Prepare reagents, solutions, &/or buffers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Operate lab equipment properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Conduct testing according to protocol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Record & analyze test results	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specific Service- Optician/Optomety	1	2	3
1. Obtain lens prescriptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Measure client eye lengths, centers, & distances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Set up optometry area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Assist to perform eye exam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Instruct clients how to care for eyewear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Order & purchase frames & lenses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Fit glasses to clients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specific Service- Physical Therapy (PT)	1	2	3
1. Set up treatment area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Assist to explain treatment to client	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Position clients on therapy equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Measure vital signs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Assist with application/adjustment of orthotic & assistive devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Assist client with performing range of motion exercise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Assist client with prescribed exercise program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Assist client with gait training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Administer active & passive treatments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**W/S** = Worksite Experience or In Simulation

### Rating Scale:

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