



## DIVISION SCOPE OF SERVICE

<b>Division:</b> SOUTH ATLANTIC
<b>Classification:</b> SITTER- PERSONAL CARE ASSISTANT
<b>Applicant Name:</b>
<p><b>Sitter - Personal Care Assistant:</b> The Sitter-Personal Care Assistant must have equivalent qualifications and competence as employed individuals performing the same or similar services at the facility.</p> <p><b>Definition of Care or Service:</b> The Sitter provides hands-on care and performs routine tasks under the supervision of nursing and medical staff. Scope of Service may include</p> <ul style="list-style-type: none"> <li>• Follows instructions for patient observation as directed by primary nurse <ul style="list-style-type: none"> <li>○ Observes the patient with an unobstructed view at all times when there is significant risk that patient may harm self</li> </ul> </li> <li>• Maintains a safe patient environment by being knowledgeable of fall preventions, protocols and infection control measures</li> <li>• Notifies the RN immediately of an emergency or sudden change in patient condition / behavior</li> <li>• Provides companionship for the patient</li> <li>• Interacts in a professional manner with the patient, the public, physicians and hospital staff</li> <li>• Demonstrates Clinical and Service excellence behaviors to include code of HCA Healthcare conduct core fundamentals in daily interactions with patients, families, co-workers and physicians.</li> </ul>
<p><b>Setting(s):</b></p> <ul style="list-style-type: none"> <li>• Healthcare facilities including but not limited to hospitals, outpatient treatment facilities, imaging centers, and physician practices</li> <li>• Patient care areas, defined by facility policy</li> </ul>
<p><b>Supervision:</b></p> <ul style="list-style-type: none"> <li>• Direct supervision by the registered (primary) nurse</li> </ul> <p><b>Evaluator:</b> Department director, registered primary nurse or designee</p> <p><b>Tier Level:</b> 2</p> <p><b>eSAF Access Required:</b> YES</p>
<p><b>Qualifications:</b></p> <ul style="list-style-type: none"> <li>• High School Diploma/GED or higher</li> <li>• Trained as a Personal Care Assistant / Sitter (Can be found on Skills Checklist)</li> </ul> <p><b>NOTE:</b> Where education may not be defined in qualifications area of the Scope, HCA Healthcare requires the highest level of education completed (not training or courses) confirmed on your background check.</p>
<p><b>State Requirements:</b></p> <ul style="list-style-type: none"> <li>• N/A</li> </ul>
<p><b>Experience:</b></p> <ul style="list-style-type: none"> <li>• N/A</li> </ul>
<p><b>Competencies:</b> The Sitter-Personal Care Assistant will demonstrate:</p> <ul style="list-style-type: none"> <li>• Provides a safe environment for patients</li> </ul>



## DIVISION SCOPE OF SERVICE

- Uses at least two ways to identify patients before treating or performing a procedure
- Identifies and mitigates risks to patient falls
- Complies with precautions for patient safety as instructed by the primary nurse
- Effective communication and interpersonal skills
  - Demonstrates tactful, patient, understanding and dependable behaviors
  - Works as an effective team member
  - Communicate effectively
  - Observes patient behavior by being attentive and engaged
  - Communicates sudden changes in patient status to the primary nurse immediately
- Assists with patient personal care
  - Helps patient to eat, dress, bathe, and use the bathroom, as directed by the primary nurse
  - Maintains neat and tidy environment in the patient room
- Infection Prevention
  - Practices consistent hand hygiene
  - Uses personal protective equipment (PPE) when required
  - Required immunizations per Division requirements
  - Complies with Isolation precautions
  - Maintains sterile field

**References:**

US Department of Labor. (2011). Nursing and Psychiatric Aides. Occupational Information Network (O\*NET; Retrieved from <http://www.bls.gov/ooh/ocos327.htm>).

**Document Control:**

- Created 2/23/2022

**Your signature confirms you will be able to comply with the Qualifications and Competencies listed within this Scope of Service and that you will confirm education via your background check.**

**Applicant Printed Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_