



**JOB DESCRIPTION AND RESPONSIBILITIES
PERFORMANCE STANDARDS/EVALUATIONS**

JOB TITLE: Certified Nursing Assistant (CNA)

DEPARTMENT: Nursing

POSITION SUMMARY: The CNA position provides quality, direct resident care in all activities of daily living including; dressing, grooming, bathing, feeding, toileting, transferring, walking and positioning. With direction from the Licensed professional Nurse in coordination with the interdisciplinary team, the CNA provides individualized physical, psychological and social support to residents while maintaining dignity and achieving their optimal level of functioning. The CNA interacts with family, visitors and other health care providers while implementing the plan of care for residents.

QUALIFICATIONS: Must be on the Wisconsin Nursing Assistant Registry. Must be able to perform essential functions of the position with or without reasonable accommodation. Must be able to take written and verbal instruction from supervisors. Must be able to communicate with residents visitors and staff. Must qualify for employment, after criminal background check, per guidelines of the Wisconsin Department of Human Services.

RESPONSIBLE TO (SUPERVISOR): Licensed Nursing personnel and Director of Nursing

DEPARTMENT: Nursing

SUPERVISES (IF APPLICABLE): Not applicable

WORKING HOURS: Work hours per week as assigned

PHYSICAL REQUIREMENTS: Refer to CNA Functional Job Description

PROFESSIONAL LICENSE/REGISTRATION VERIFICATION (Attach Copy):

No Restrictions: ___ Restrictions: ___

Please Note: This document is intended to describe the general nature and level of work performed. It is not intended to serve as an exhaustive list of all duties, skills, and responsibilities required of employees in this position. The management reserves the right to add or delete to this position as is necessary to serve the needs of the resident and maintain efficiency in the organization.



I have read the job description and understand the responsibilities of the position. I accept the position of Certified Nursing Assistant, agree to abide by the requirements set forth and will perform all responsibilities with or without reasonable accommodation to the best of my abilities.

Signature of Certified Nursing Assistant

Date