

CNA Peer Mentor



POSITION SUMMARY

The primary role of the peer mentor is to help new employees become comfortable with their job responsibilities and the desired culture of workplace.

A peer mentor must possess the following skills: clinical care skills, an ability to apply relevant health-related knowledge, a capacity for solving problems when they arise, and good interpersonal skills. In addition, peer mentors must have the desire—and the patience—to teach these skills to others. Mentors act as both a role model and a coach for new employees. The CNA peer mentor will be required to work on all nursing units in order to better assist the newly hired CNA develop their clinical skills. This is a full-time position with requirements to work every other weekend and assigned Holidays.

PERSONAL QUALIFICATIONS

- Certified through an approved State of Michigan CNA training program with a minimum of one year experience (preferred).
- Leadership: having a positive attitude, motivating others, and using influence in a positive manner. Mentors need to see themselves as role models and to use their leadership to build a high-performance culture in which employees are proud of the work they do.
- Interpersonal communication skills: the ability to listen, ask questions, and reflect back what has been said.
- Teaching and coaching skills: the ability to assess skills, provide supportive feedback, and help mentees develop their clinical and problem-solving skills.
- Problem solving skills: must be able to maintain composure and seeking solutions in stressful situations that involve clients or supervisors.

PRINCIPAL DUTIES AND RESPONSIBILITIES

- I perform all assigned duties in accordance with established policies and procedures, nursing care procedures and safety rules and regulations.
- I will train and orient newly recruited CNAs on ALL applicable units and provide feedback to management as needed.
- I may be asked to participate in the hiring process.
- I will manage my own caseload when not actively orienting.
- I will follow up with newly hired CNAs approximately 30 days after they have completed their orientation to assess their progress and status.
- I will help new employees acquire the full range of knowledge and skills they need to succeed in a new work environment.
- I will perform other duties of a CNA to include:
 - a. I inform the nurse about the present condition and change in condition of

- residents who are in my care.
- b. I obtain and report the resident's vital signs as assigned by the nurse.
 - c. I assist residents with all ADL's allowing them as much independence as possible to perform what they can do for themselves.
 - d. I render social and emotional support to residents.
 - e. I follow stringent cleanliness regimes as to preclude the possibilities of infections and other disease.
 - f. I answer my residents call lights in a timely fashion and help other teammates answer call lights whenever possible.
 - g. I ensure that work/assignment areas are clean and that equipment, tools and supplies are properly stored before leaving such areas on breaks and at the end of my shift.
 - h. I relay information about residents to the next CNA on shift, or to the neighborhood nurse.
 - i. I collaborate with residents to develop a schedule of daily care based on their preferences, past history/lifestyle, integrating scheduling of daily care into the resident care plan.
 - j. I review work procedures and operational problems in order to determine ways to improve service, performance and/or safety.
 - k. I develop positive relationships with residents and families.
 - l. I support residents in arranging their living space to their satisfaction and to foster a home environment.
 - m. I create and maintain an atmosphere of warmth, personal interest and positive emphasis, as well as a calm environment.
 - n. I report all resident and family concerns to the nurse.
 - o. I maintain the required in-service education annually to satisfy the federal requirements for my certification.
 - p. My job description is not intended to be all inclusive, and I will also perform other reasonable related business duties as assigned by my immediate supervisor or other management as required.

SUMMARY OF OCCUPATIONAL EXPOSURES

Blood borne Pathogens: Tasks that involve exposure to blood, body fluids or tissue.

All procedures or other job related tasks that involve an inherent potential for mucus membrane or skin contact with blood, body fluids or tissues, or a potential for spills, splashes of them.

POSITION AUTHORITY AND ACCOUNTABILITY

I report to the Director of Nursing

COGNITIVE AND SENSORY REQUIREMENTS

Talking: Necessary in carrying out duties and responsibilities; and communicating with

staff, patients and families.

Hearing: Necessary in carrying out duties and responsibilities; and communicating with staff, patients and families.

Sight: Necessary for doing job correctly and effectively.

Tasting and Smelling: Necessary for doing job correctly and effectively.

PRIMARY PHYSICAL REQUIREMENTS

Lift up to 10 lbs: Regularly required to lift medical charts, supplies, and residents' personal items, e.g., clothing, food items and food trays

Lift 11 to 25 lbs: Regularly may be reported when lifting soiled bed linens/residents

Lift 26 to 50 lbs: Regularly required when transferring a non-ambulatory resident

Lift over 50 lbs: Occasionally required when transferring a non-ambulatory resident weighing between 100 and 160 pounds. Two aides are typically utilized when resident is unusually heavy or combative

Carry up to 10 lbs: Regularly required to lift medical charts, supplies, and resident's personal items, e.g., clothing, food items and food trays

Carry 11 to 25 lbs: Regularly may be required when lifting soiled bed linens and carrying to the utility area

Carry 26 to 50 lbs: Regularly to frequently required when lifting a resident

Carry over 50 lbs: Occasionally required when transferring a non-ambulatory resident weighing between 100 to 160 pounds. Two aides are typically utilized when resident is unusually heavy or combative. Maxi lift may be used as desired

Reach above shoulder height: Regularly occurs when reaching for medical records or supplies located on shelves

Reach at shoulder height: Frequently may occur when assisting residents in eating, when changing bed linens, and when taking vital signs

Reach below shoulder height: Regularly occurs while assisting residents with peri-care, bathing and dining

Push/Pull: Regularly required to push a cart which rolls easily across tile or carpeted floor

HAND MANIPULATION

Grasping: Frequently grasping during direct care activities

Handling: Constantly handling residents personal

JOB POSTING PROCEDURE:

This position will not be based upon seniority, but qualifications. In the event that two qualified applicants apply, the most senior will be offered the position. This position will be posted both internally and externally when an opening exists.