

WINNEBAGO COUNTY JOB DESCRIPTION

**BARGAINING
UNIT**

**STEP AND GRADE:
6J**

**DATE LAST PRINTED:
May 30, 2012**

JOB TITLE: REHAB CERTIFIED NURSING ASSISTANT

Summary of Responsibilities

Assist in the administering physical rehab treatments to River Bluff residents; assists residents in preparing for treatments; cleans and maintains treatment equipment; may assist in transporting residents for treatment.

Illustrative Examples of Work

1. Administers and/or assists in administering physical rehab treatments (following treatment sheets) including but not limited to the following; all forms of therapeutic exercise, gait training, circulating and non-circulating water treatment, heat and paraffin bath treatment.
2. Assembles treatment equipment, prepares residents for treatment and helps them undress, remove glasses, etc.; times treatments as necessary; instructs residents in the use of some equipment; may assist transporting residents for treatment.
3. Makes daily record of attendance and type of treatment given for each resident in physical therapy.
4. Cleans and maintains treatment equipment; changes linens on beds used in treatment room; maintains cleanliness and orderliness in entire treatment area.
5. Attends in-service training, fire drills and other required meetings and activities.
6. Performs other duties as required or assigned.
7. Performs all duties in compliance with Illinois Department of Public Health Regulations.
8. Performs all duties in accordance with County policies and procedures.
9. Regular attendance is required, overtime as needed/scheduled.

Education and Experience

- Completion of four years of high school or general education certificate.
- Nursing Assistant Certificate from State of Illinois.
- Physical Rehab Certification from the State of Illinois.
- One year experience as a certified nurse's assistant
- Submission to a Uniform Conviction Information Act (UCIA) Criminal History Check and supply a copy of the report.
- Previous Hepatitis B immunization; or education and offer of immunization.

Abilities

- Ability to complete on-the-job training.
- Ability to perform repetitive duties in a meticulous manner.
- Ability to follow directions provided verbally or in writing.
- Ability to deal effectively with residents, guests and family.
- Ability to communicate both orally and in writing.
- Ability to establish and maintain working relationships.
- Requires ability to follow prescribed treatment plan and work independently.
- Requires ability to learn specific physical rehab therapy treatments as taught by Physical Therapist.
- Requires ability to operate and maintain physical rehab therapy equipment.
- Requires ability to keep accurate attendance and treatment records.

Refer to the *Analysis of Essential Functions* form for the detailed physical requirements of this position.



WINNEBAGO COUNTY

Physical Essential Functions Details

Position: Rehab Certified Nursing Assistant

Department: River Bluff Nursing Home - Daily Services

ANALYSIS OF ESSENTIAL FUNCTIONS

PHYSICAL DEMANDS

1. This position requires: (check all that apply)

	Not at all (0%)	Occasionally (1 – 33%)	Frequently (34 – 66%)	Continuously (67 – 100%)
Sit	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Walk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Bend/Stoop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Squat	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Crawl – various heights	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climb	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reach above shoulder level	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Crouch	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Kneel	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Push/Pull	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Running	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. This position requires the following (lifting, carrying, pushing and/or pulling):

FLOOR TO WAIST	Not at all (0%)	Occasionally (1 – 33%)	Frequently (34 – 66%)	Continuously (67 – 100%)
Up to 10 pounds	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11 – 24 pounds	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
25 – 34 pounds	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
35 – 50 pounds	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
51 – 74 pounds	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Above 75 pounds	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WAIST TO SHOULDER	Not at all (0%)	Occasionally (1 – 33%)	Frequently (34 – 66%)	Continuously (67 – 100%)
Up to 10 pounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11 – 24 pounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
25 – 34 pounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
35 – 50 pounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
51 – 74 pounds	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Above 75 pounds	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SHOULDER and above	Not at all (0%)	Occasionally (1 – 33%)	Frequently (34 – 66%)	Continuously (67 – 100%)
Up to 10 pounds	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11 – 24 pounds	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
25 – 34 pounds	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
35 – 50 pounds	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51 – 74 pounds	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Above 75 pounds	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. This position requires the employee to operate foot controls with: (check if applicable)

Right	Left	Both
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. This position requires the following hand use: (check if applicable)

	Simple Grasping	Firm Grasping	Fine Manipulation
Right Hand	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Left Hand	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

SENSORY/PERCEPTUAL (check all that apply)

	Not at all (0%)	Occasionally (1 – 33%)	Frequently (34 – 66%)	Continuously (67 – 100%)
Hearing – Conversation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hearing – other sounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Vision – far	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vision – near	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Vision – color	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vision – depth	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Feeling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Balance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Speech	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

WORK ENVIRONMENT (check all that apply)

	Not at all (0%)	Occasionally (1 – 33%)	Frequently (34 – 66%)	Continuously (67 – 100%)
Inside work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Outside work	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hot/Cold	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Humid/Dry	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dust, Vapor or Fumes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Noise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Moving objects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Electrical Equipment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sharp tools	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Slippery	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Congested work site	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Traveling	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work alone	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work independent	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Work within deadlines	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Interact with public	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Use PPE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Vibrating tools	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Human Resource Manager: _____

Date: _____

Department Head: _____

Date: _____

Comments: _____
