

# CERTIFIED NURSING ASSISTANT CURRICULUM

The nursing assistant training program curriculum was developed by the Nursing Assistant Advisory Committee and approved by the Arizona State Board of Nursing on January 27, 2006. The curriculum incorporates Article 8 Certified Nursing Assistants rules implemented on December 5, 2005, and meets the requirements of R4-19-802 (B) (1) through (B) (4) and R4-19-802 (C) (1) through (C) (14). Approved training programs may use this curriculum as a template to develop/write individual program curriculums.

## **1.0 Competency: Functions as a member of the health team within the health care facility and/or community.**

<b>Class Day Put day or date topic will be taught</b>	<b>Learning Goals</b>	<b>Content Outline</b>	<b>Learning Activities and/or Reading Assignment Resources</b>	<b>Time Allotted</b>
	1.1 Identifies essential functions of the health care facility and states the differences between acute, long-term, assisted living, home care and hospice.	Functions, similarities, difference in the following:  A. Acute care  B. Long-term care  C. Assisted Living		

		<p>D. Home care</p> <p>E. Rehabilitation</p> <p>F. Hospice.</p>		
	<p>1.2 Explains the essential duties of the nursing team within a care facility.</p> <p>A. Identifies the essential function of the RN.</p> <p>B. Identifies the essential function of the LPN.</p> <p>C. Identifies the essential function of the nurse assistant.</p> <p>D. Discuss the elements of a functioning team.</p> <p>E. Works with other members of the team e.g., physician, dietician, Dietary Technician, Physical Therapist, Nurse Practitioner, speech therapist and Social Worker</p>	<p>Functions and duties of nursing personnel:</p> <p>A. RN</p> <p>B. LPN</p> <p>C. Nurse Assistant</p> <p>D. Organization structure</p> <p>E. Working with other members of the team e.g., physician, dietician, Dietary Technician, Physical Therapist, Nurse Practitioner, speech therapist and Social Worker</p>		

	<p>1.3 Explains the nursing assistant role as outlined in the different regulatory and professional guidelines.</p>	<p>Regulatory agencies and professional guidelines.</p> <ul style="list-style-type: none"> <li>A. Omnibus Budget Reconciliation Act (OBRA)</li> <li>B. Arizona State Board of Nursing prescribed requirements for certification</li> <li>C. Arizona State Board of Nursing prescribed requirements for recertification</li> <li>D. Standards of conduct (R4-19-814)</li> <li>E. Ethics in the workplace</li> <li>F. Informed consent</li> <li>G. Advanced Directives/ do not resuscitate</li> </ul>		
	<p>1.4 Describes the delegation process.</p>	<p>Delegation process:</p>		

		<ul style="list-style-type: none"> <li>A. Responsibility and accountability in delegation</li> <li>B. Factors affecting delegation</li> <li>C. 5 Rights of delegation</li> <li>D. Accepting and refusing delegation</li> </ul>		
	1.5 Demonstrates professional work habits and time management skills.	<p>Guiding principles:</p> <ul style="list-style-type: none"> <li>A. Time management skills</li> <li>B. Application in the work setting</li> <li>C. Realistic resident care assignment load</li> </ul>		
	1.6 Demonstrates appropriate stress relieving techniques.	<p>Guiding principles:</p> <ul style="list-style-type: none"> <li>A. Stress management techniques</li> <li>B. Application in the work setting</li> </ul>		

**2.0 Competency: Demonstrates ethical and legal behavior that maintains resident’s rights.**

Class Day Put day or date topic will be taught	Learning Goals	Content Outline	Learning Activities and/or Reading Assignment Resources	Time Allotted
	<p>2.1 Demonstrates ethical and legal behavior by maintaining the standards set forth for the health care professions.</p> <p>A. Explains the functions, roles responsibilities and legal limits of nursing assistant/practice.</p> <p>B. Discuss the regulatory boards, state and federal statutes, rules and regulations, standards and legal and advisory opinions that affect the practice of the nursing assistant.</p>	<p>Regulatory agencies and professional guidelines</p> <p>A. Concepts of ethical and legal behavior for healthcare professional (emphasis on nursing assistant standards)</p> <p>B. Functions, roles, limits and state certification process under the Arizona State Board of Nursing <i>Standards of Conduct for Nursing Assistants</i>; Federal) laws regulating standards of care/conduct(Omnibus Budget Reconciliation Act – OBRA); Joint Commission on Accreditation of Healthcare Organizations (JCAHO) standards and Occupational Safety and Health Administration</p>		

	<p>C. Explains state certification and renewal requirements for CNAs – include criminal conduct.</p> <p>D. Identifies the standards of conduct that the nurse assistant must maintain in their daily care of residents.</p> <p>E. Demonstrates professional behaviors.</p>	<p>standards (OSHA)</p> <p>C. Nursing Assistant Certification</p> <ol style="list-style-type: none"> <li>1. AZBN Basic Educational Requirements</li> <li>2. Process for initial certification</li> <li>3. Felony Bar – criminal conduct</li> <li>4. Certification renewal requirements</li> </ol> <p>D. Standards of conduct</p> <ol style="list-style-type: none"> <li>1. Federal</li> <li>2. Arizona Standards of Conduct for Nursing Assistants</li> <li>3. JCAHO standards</li> <li>4. OSHA standards</li> </ol> <p>E. Characteristics of professional behavior (examples such as):</p> <ol style="list-style-type: none"> <li>1. Caring</li> <li>2. Competent</li> <li>3. Conscientious (including personal hygiene)</li> <li>4. Courteous</li> <li>5. Dependable/Timely</li> <li>6. Honest</li> <li>7. Team player</li> </ol> <p>F. Key Terms</p>		
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	<p>F. Accurately utilizes vocabulary words/terms related to ethical/legal behavior and resident rights.</p>	<ol style="list-style-type: none"> <li>1. Abandonment</li> <li>2. Abuse       <ol style="list-style-type: none"> <li>a. Physical abuse</li> <li>b. Sexual abuse</li> <li>c. Verbal abuse</li> <li>d. Emotional abuse           <ul style="list-style-type: none"> <li>• Threats</li> <li>• Humiliation</li> </ul> </li> <li>e. Involuntary seclusion</li> <li>f. Financial abuse</li> </ol> </li> <li>3. Advance Directive</li> <li>4. Advocate</li> <li>5. Assault</li> <li>6. Battery</li> <li>7. Code of conduct</li> <li>8. Defamation of character       <ol style="list-style-type: none"> <li>a. Slander</li> <li>b. Libel</li> </ol> </li> <li>9. Dual relationship &amp; professional boundaries</li> <li>10. Ethics</li> <li>11. False imprisonment</li> <li>12. Informed consent</li> <li>13. Invasion of privacy</li> <li>14. Neglect       <ol style="list-style-type: none"> <li>a. physical neglect</li> <li>b. psychosocial neglect</li> </ol> </li> <li>15. Ombudsman</li> <li>16. Privacy       <ol style="list-style-type: none"> <li>a. Personal</li> <li>b. Visits</li> </ol> </li> </ol>		
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		<ul style="list-style-type: none"> <li>c. Telephone conversations</li> <li>d. Information about care</li> <li>17. Quality of Life</li> <li>18. Restraints <ul style="list-style-type: none"> <li>a. Chemical restraints</li> <li>b. Physical restraints</li> </ul> </li> <li>19. Self-Determination Act</li> <li>20. Standards of Care</li> <li>21. Theft</li> </ul>		
	<p><u>2.2</u> Interprets, explains and applies the Resident's Bill of Rights.</p>	<p>Principles and rationale of Resident's Rights (Right to...)</p> <ul style="list-style-type: none"> <li>A. Free choice</li> <li>B. Freedom from abuse and restraints</li> <li>C. Privacy</li> <li>D. Confidentiality of personal and clinical records (Health Insurance Portability and Accountability Act - HIPAA standards)</li> <li>E. Accommodation of needs <ul style="list-style-type: none"> <li>1. Physical</li> <li>2. Psychosocial</li> </ul> </li> <li>F. Organize and participate in family &amp; resident groups</li> </ul>		

		<p>G. Participate in social, religious and community activities</p> <p>H. Examine survey results and correction plans</p> <p>I. Manage personal funds</p> <p>J. Information about eligibility for Medicare/Medicaid benefits</p> <p>K. File complaints about abuse, neglect or misappropriation of property</p> <p>L. Information about advocacy groups</p> <p>M. Immediate &amp; unlimited access to family or relatives</p> <p>N. Share a room with partner/intimacy</p> <p>O. Perform or not perform work for the facility</p> <p>P. Remain in the facility</p> <p>Q. Use personal possessions</p>		
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		R. Notification of change in condition		
	<p><u>2.3</u> Provides for resident privacy.</p> <p>A. Describes the resident’s right to privacy.</p> <p>B. Explains how the nursing assistant can help the resident maintain the right to privacy.</p>	<p>Principles and rationale of right to privacy:</p> <p>A. Review methods to maintain privacy (i.e. not taking VS in public areas such as the dining room).</p> <p>B. Maintaining privacy while performing resident care.</p>		
	<p><u>2.4</u> Maintains resident confidentiality.</p> <p>A. Describes the resident’s right to confidentiality.</p> <p>B. Identifies how the nursing assistant can protect the resident’s right to confidentiality.</p>	<p>Principles and rationale of maintaining confidentiality:</p> <p>A. HIPAA regulations on confidentiality “unintended receiver”.</p> <p>B. Methods to protect the resident’s right to confidentiality.</p>		
	<p><u>2.5</u> Promotes the resident’s right to make personal choices to accommodate their needs.</p>	<p>Principles and rationale of promoting resident’s personal choices:</p> <p>A. Guidelines, examples situations</p>		

	<p>A. Describes the resident's right to personal choice.</p> <p>B. Offers choices when caring for residents.</p>	<p>describing the right to choose.</p> <p>B. Methods to protect the resident's rights to make personal choices.</p>		
	<p>2.6 Gives assistance in resolving grievances and disputes.</p> <p>A. Describes the resident's right to voice disputes and grievances.</p> <p>B. Explains the role of the nursing assistant when residents voice concerns, complaints or questions about treatment or care.</p>	<p>Guidelines in resolving grievances.</p> <p>A. Key terms and concepts:</p> <ol style="list-style-type: none"> <li>1. Grievance</li> <li>2. Ombudsman</li> <li>3. Resident's Council</li> </ol> <p>B. Methods to resolve grievances and disputes within the nursing assistant role.</p>		
	<p>2.7 Maintains care and security of resident's personal possessions.</p> <p>A. Describes the resident's right related to the care and security of personal possessions.</p>	<p>Security of residents' personal possessions.</p> <p>A. Principles and rationale of safeguarding residents' personal possessions.</p>		

	<p>B. Explains the role of the nursing assistant in safeguarding resident's personal possessions.</p>	<p>B. Methods to care and secure residents' possessions.</p> <ol style="list-style-type: none"> <li>1. Safe for valuables</li> <li>2. Labeling personal items and containers.</li> </ol>		
	<p><u>2.8</u> Promotes the resident's right to be free from abuse, mistreatment and neglect.</p> <p>A. Explains the role of the nursing assistant in protecting the resident from abuse, mistreatment and neglect.</p> <p>B. Describes types of elderly abuse.</p> <p>C. Identifies signs of abuse.</p>	<p>Principles and rationale of protecting resident from abuse, mistreatment and neglect:</p> <p>A. Signs of abuse, mistreatment and neglect.</p> <p>B. Methods to protect the resident from abuse, mistreatment and neglect.</p> <p>C. Signs of resident abuse.</p>		
	<p><u>2.9</u> Reports any instance of abuse, mistreatment or neglect to the appropriate supervisor.</p> <p>A. Discuss the legal requirement and</p>	<p>Principles and rationale to report abuse, mistreatment or neglect:</p> <p>A. OBRA and state requirements</p> <ol style="list-style-type: none"> <li>1. Employee responsibility</li> </ol>		

	<p>consequences for failure to report abuse, mistreatment or neglect.</p> <p>B. Reviews appropriate methods and chain of command to report instances of abuse, mistreatment or neglect.</p>	<p>2. Consequences for failure to report.</p> <p>B. Methods to report abuse, mistreatment or neglect:</p> <ol style="list-style-type: none"> <li>1. Chain of Command</li> <li>2. Facility policy</li> <li>3. Community agencies</li> </ol>		
	<p><u>2.10</u> Utilizes interventions that minimize the need for restraints.</p> <p>A. Identifies ethical and legal issues in the use of restraints.</p> <p>B. Describes the resident's right to be free of restraints.</p>	<p>Principles and rationale for the appropriate use of restraints.</p> <p>A. Ethical and legal issues of using restraints.</p> <ol style="list-style-type: none"> <li>1. JCAHO guidelines</li> <li>2. Physician orders</li> <li>3. Release restraints every 2 hours and document</li> <li>4. Methods to avoid using restraints</li> </ol> <p>B. Right to be free from restraint</p> <ol style="list-style-type: none"> <li>1. Informed consent</li> <li>2. Least restrictive form</li> <li>3. Types of restraints <ul style="list-style-type: none"> <li>• Physical</li> <li>• Chemical</li> <li>• Active restraint</li> </ul> </li> </ol>		

	<p>C. Identifies the role of the nursing assistant in helping to keep the resident free from restraint.</p> <p>D. Provides for resident's basic needs and re-applies restraints as appropriate.</p> <p>E. Observes and reports resident's status while in protective devices.</p>	<ul style="list-style-type: none"> <li>• Passive restraint</li> </ul> <p>C. Alternative to restraints.</p> <ol style="list-style-type: none"> <li>1. Diversion</li> <li>2. Company</li> <li>3. Activities</li> <li>4. Exercise</li> <li>5. Basic needs met</li> <li>6. Other</li> </ol> <p>D. Care of resident in restraint</p> <ol style="list-style-type: none"> <li>1. observe according to protocols</li> <li>2. restraint removed, person repositioned, basic needs met at least every 2 hours</li> </ol> <p>E. Agency guidelines for checking resident and documentation</p>		
	<p><u>2.11</u> Promotes resident independence.</p> <p>A. Describes the resident's right related to self determination, self care and</p>	<p>Guidelines to support resident's independence.</p> <p>A. Principles and rationale of promoting resident independence.</p>		

	<p>independence.</p> <p>B. Identifies actions nursing assistants may take to promote resident independence.</p>	<p>B. Methods to promote resident's independence.</p>		
	<p>2.12 Assists residents to participate in activities.</p> <p>A. Describes the resident's right to participate in family and group activities.</p> <p>B. Provides for activities of daily living and restorative activities for clients.</p>	<p>Guidelines to support resident's involvement in activities.</p> <p>A. Principles and rationale of assisting resident to participate in activities.</p> <p>1. Activities of Daily Living 2. Family meetings</p> <p>B. Methods to assist resident to participate in activities.</p>		

**3.0 Competency: Assists in identifying the mental health and social service needs of residents.**

Class Day Put day or date topic will be taught	Learning Goals	Content Outline	Learning Activities and/or Reading Assignment Resources	Time Allotted
	<p><b>3.1</b> Discuss basic human needs of the individual.</p> <p>A. Identifies basic human needs throughout the lifespan, including physical, socio-cultural, social service and mental health needs.</p> <p><b>B.</b> Identifies the developmental tasks associated with the aging process.</p> <p>C. Describes mental status and behavior changes.</p> <p>D. Identifies the role of the</p>	<p>Basic Human Needs</p> <p>A. Maslow’s hierarchy and Erickson’s development stages</p> <p>B. Basic human needs of the adult moving from middle adulthood through late adulthood.</p> <ol style="list-style-type: none"> <li>1. The young-old: 60-74 years</li> <li>2. The middle-old: 75-84 years</li> <li>3. The old-old: older than 85 years</li> </ol> <p>C. Mental and behavior changes</p> <ol style="list-style-type: none"> <li>1. Impact of restrictions such as reduced income on psychosocial relationships.</li> <li>2. Changes due to disease</li> </ol>		

	<p>elderly in the home and community, including cultural and religious aspects.</p>	<p>process and aging</p> <p>D. Role of elderly in home and community.</p> <ol style="list-style-type: none"> <li>1. Cultural and religious outlooks about older adults.</li> <li>2. Changing family dynamics throughout aging.</li> <li>3. Housing options as aging progresses.</li> <li>4. Impact of retirement and increased time and availability.</li> </ol>		
	<p>3.2 Explains how cultural and spiritual attitudes may influence psychological responses.</p> <ol style="list-style-type: none"> <li>A. Identifies ways to accommodate cultural and spiritual differences.</li> <li>B. Identifies the nursing assistant's role in respecting cultural and spiritual differences.</li> </ol>	<p>Examples of cultural and spiritual preferences and responses that may influence the approach to caring for the resident.</p> <ol style="list-style-type: none"> <li>A. Health care beliefs.</li> <li>B. Sick care practices.</li> <li>C. Family members' roles.</li> </ol>		

	<p>3.3 Identifies sources of stress common to residents and residents.</p> <p>A. Defines stress.</p> <p>B. Explains the difference between mental health and mental illness.</p> <p>C. Identifies nursing assistant's responsibility of reporting signs and symptoms of stress and/or inappropriate coping mechanisms to supervisor.</p>	<p>Basic concepts of Mental Health.</p> <p>A. Definition of stress.</p> <p>B. Definition of mental health.</p> <p>C. Common causes of stress related to life stages.</p> <ol style="list-style-type: none"> <li>1. Signs and symptoms of stress</li> <li>2. Common coping mechanisms</li> <li>3. Potential for self harm</li> </ol>		
	<p>3.4 Provides appropriate care for residents with mental health problems.</p>	<p>Care for residents with common mental health problems.</p> <p>A. Anxiety</p> <p>B. Depression</p> <p>C. Affective disorders</p> <p>D. Schizophrenia</p> <p>E. Substance abuse</p>		

		F. Eating disorders G. Potential for self-harm		
	<p>3.5 Modifies own behavior in response to resident behavior.</p> <p>A. Identifies the nursing assistant's role in maintaining a respectful attitude for the person who display difficult behavior of residents.</p> <p>B. Identifies at least three effective approaches to managing difficult behavior of residents.</p>	<p>A. Nursing assistant role when interacting with residents exhibiting difficult behavior.</p> <p>B. Effective approaches to managing difficult behaviors of residents.</p> <ol style="list-style-type: none"> <li>1. Distraction.</li> <li>2. Relaxation techniques</li> <li>3. Calm environment</li> <li>4. Adjusting time of care</li> <li>5. Encouraging family participation</li> </ol>		
	<p>3.6 Describes ways that residents may be expressing their normal sexuality.</p> <p>A. Identifies common myths related to sexuality.</p> <p>B. Identifies nursing assistant's</p>	<p>Appropriate and inappropriate expressions of sexuality.</p> <p>A. Common myths.</p> <p>B. Reporting responsibilities</p>		

	responsibility of reporting inappropriate expressions of sexuality to supervisor.	related to sexuality.		
	<p>3.7 Facilitates the resident's expression of needs and provides supportive communication.</p> <p>A. Assists and encourages residents to be independent in the activities of daily living.</p> <p>B. Modifies care to accommodate resident values, customs, preferences or habits.</p> <p>C. Utilizes resident's family as a source of resident emotional and/or spiritual support.</p>	<p>Various communication methods and enhancing two-way exchange of ideas and responding to needs.</p> <p>A. Supporting choices and control in activities of daily living.</p> <p>B. Adaptation of personal care to accommodate resident preferences.</p> <p>C. Family participation in supporting the resident to strive towards common goals.</p>		

**4.0 Competency: Demonstrates effective communication.**

Class Day Put day or date topic will be taught	Learning Goals	Content Outline	Learning Activities and/or Reading Assignment Resources	Time Allotted
	<p>4.1 Uses verbal and nonverbal communication to accurately present information.</p> <p>A. Uses appropriate medical terminology and abbreviations.</p> <p>B. Communicates with members of the healthcare team.</p> <p>C. Communicates with residents and family.</p>	<p>Communication concepts:</p> <p>A. Medical terminology and abbreviations.</p> <p>B. Types of communication. Chain of command.</p> <p>C. Communication techniques. 1. Conflict management</p>		
	<p>4.2 Responds effectively to resident's behavior in a positive non-threatening way.</p> <p>A. Identifies communication guidelines.</p> <p>B. Identifies barriers to communication.</p>	<p>Principles of positive communication.</p> <p>A. Communication guidelines</p> <p>B. Barriers to communication.</p>		

	<p>4.3 Observes and describes resident's physical and emotional condition changes.</p> <p>A. Identifies subjective observations.</p> <p>B. Identifies objective observations.</p> <p>C. Identifies emergencies.</p>	<p>Key concepts for recognizing changes to report.</p> <p>A. Subjective observations.</p> <p>B. Objective observations.</p> <p>C. When to report.</p> <ol style="list-style-type: none"> <li>1. Emergencies versus routine observations.</li> <li>2. Timeliness of reporting observations.</li> </ol>		
	<p>4.4 Demonstrates communication skills with the resident who has sensory deficits.</p> <p>A. Demonstrates effective communication with hearing impaired resident.</p> <p>B. Demonstrates effective communication with the visual impaired resident.</p> <p>C. Demonstrates effective communication with the aphasic resident.</p>	<p>Communication skills for residents with a sensory deficit.</p> <p>A. Guidelines for communicating with the hearing impaired.</p> <p>B. Guidelines for communicating with the visually impaired.</p> <p>C. Guidelines for communicating with the aphasic resident.</p>		

	<p>D. Demonstrates effective communication with the cognitively impaired resident.</p> <p>E. Communicating with the comatose resident.</p> <p>F. Demonstrates effective communication with the physically aggressive resident.</p> <p>G. Demonstrates effective communication with the verbally aggressive resident.</p>	<p>D. Guidelines for communicating with the cognitively impaired resident.</p> <p>E. Guidelines for communicating with the comatose resident.</p> <p>F. Guidelines for communicating with the physically aggressive resident.</p> <p>G. Guidelines for communicating with the verbally aggressive resident.</p>		
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**5.0 Competency: Maintains a safe environment for the resident and others**

Class Day Put day or date topic will be taught	Learning Goals	Content Outline	Learning Activities and/or Reading Assignment Resources	Time Allotted
	<p>5.1 Identifies ways to promote safety and handle non-medical emergencies.</p> <p>A. Explains safety and risk management principles and concepts.</p> <p>B. Adheres to safety policies and plans of the facility.</p>	<p>Principles of environmental safety.</p> <p>A. Concepts to understand</p> <ol style="list-style-type: none"> <li>1. Safety</li> <li>2. Risk management</li> <li>3. Accident/incident reporting</li> <li>4. Safety hazards</li> </ol> <p>B. Environmental safety plans, policies, procedures and their purposes.</p> <ol style="list-style-type: none"> <li>1. Safety/risk management</li> <li>2. Disaster plans</li> <li>3. Bomb threat</li> <li>4. Infection control procedures</li> <li>5. Hazard communication</li> <li>6. Radiation protection measures</li> <li>7. Fire plan</li> <li>8. Evacuation plan (floor/exit plan)</li> <li>9. Toxic chemical and</li> </ol>		

	<p>C. Describes how to use safety equipment.</p>	<p>material safety data sheets (MSDS) protocols</p> <p>10. Oxygen Usage</p> <p>C. Safety Equipment</p> <ol style="list-style-type: none"> <li>1. Fire extinguishers</li> <li>2. Eye wash station</li> <li>3. Other</li> </ol>		
	<p>5.2 Identifies environmental safety hazards and methods used to prevent accidents.</p> <p>A. Identifies environmental safety hazards.</p>	<p>A. Environment safety hazards.</p> <ol style="list-style-type: none"> <li>1. Wet floors</li> <li>2. Cluttered paths of travel</li> <li>3. Unlocked wheels</li> <li>4. Side rails (suffocation/asphyxia)</li> <li>5. Bed elevation</li> <li>6. Improper shoes or dress</li> <li>7. Slippery surfaces</li> <li>8. Out-of-reach items</li> <li>9. Dim/reduced lighting</li> <li>10. Frayed cords</li> <li>11. Improper use of assistive devices</li> <li>12. Hot liquids/food</li> <li>13. Smoking</li> <li>14. Exposure to weather</li> <li>15. Uncontained chemicals</li> </ol>		

	<p>B. Identifies common measures and principles to prevent accidents.</p> <p>C. Identifies the common types of injuries occurring in health care facilities.</p> <p>D. Utilizes measures to identify risk factors and prevent falls.</p> <p>E. Identifies the common causes</p>	<p>16. Sharps 17. Gas leaks</p> <p>B. Preventive measures guiding principles</p> <ol style="list-style-type: none"> <li>1. Gentleness</li> <li>2. Slow and ‘steady as she goes’</li> <li>3. Eliminate/control of safety hazards</li> <li>4. ACT (awareness, correction, take precautions)</li> <li>5. Inter-department communication</li> </ol> <p>C. Common injuries in health care facilities.</p> <ol style="list-style-type: none"> <li>1. Sharp object injuries/skin tears</li> <li>2. Muscle strains and sprains</li> <li>3. Bruises</li> </ol> <p>D. Falls</p> <ol style="list-style-type: none"> <li>1. Prevention</li> <li>2. Assisting the falling resident</li> <li>3. Care of the resident after falling</li> </ol> <p>E. Common causes of accident in</p>		
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	<p>of accidents related to the older adult.</p> <p>F. Describes age related safety measures.</p> <p>G. Identifies nursing assistant's responsibility of reporting potential situations to the supervisor.</p>	<p>the older population.</p> <p>F. Age related safety measures.</p> <p>G. Accident/Incident Reports/Supervisory notification.</p>		
	<p>5.3 Identifies safety measures to prevent workplace violence.</p> <p>A. Identifies common measures to prevent work place violence.</p> <p>B. Identifies nursing assistant's responsibility of reporting potential situations for violence in the workplace.</p>	<p>Measures to prevent or control workplace violence</p> <p>A. Environmental systems</p> <p>B. Facility policies and procedures.</p> <ol style="list-style-type: none"> <li>1. Visitors sign-in</li> <li>2. Identification badges for staff</li> <li>3. Timely communication</li> <li>4. Personal safety practices.</li> </ol>		

**6.0 Competency: Demonstrates general principles of infection control.**

Class Day Put day or date topic will be taught	Learning Goals	Content Outline	Learning Activities and/or Reading Assignment Resources	Time Allotted
	<p>6.1 Describes measures that promote infection prevention and control.</p> <p>A. Explains the key infection control concepts and terms.</p> <p>B. Explains the chain of infection.</p> <p>C. Defines the infectious process and identifies modes of transmission.</p>	<p>Infection prevention and control.</p> <p>A. Key infection control concepts and terms.</p> <ol style="list-style-type: none"> <li>1. Types of microbes</li> <li>2. Infectious process</li> <li>3. Infection control</li> <li>4. Body substances</li> <li>5. Biohazard wastes</li> <li>6. Exposure report</li> </ol> <p>B. Chain of infection.</p> <ol style="list-style-type: none"> <li>1. Source</li> <li>2. Reservoir</li> <li>3. Portal of exit</li> <li>4. Method of transmission</li> <li>5. Portal of entry</li> <li>6. Susceptible host</li> </ol> <p>C. Infective process</p> <ol style="list-style-type: none"> <li>1. Modes of transmission</li> <li>2. Immune response</li> </ol>		

	<p>D. Identifies signs and symptoms of infection.</p> <p>E. Describes common aseptic practices.</p> <p>F. Describes nosocomial infections and persons at risk.</p>	<p>D. Signs and symptoms of infection.</p> <ol style="list-style-type: none"> <li>1. Objective signs</li> <li>2. Subjective signs and symptoms <ul style="list-style-type: none"> <li>• Changes in behavior</li> <li>• Confusion</li> <li>• Pain</li> </ul> </li> </ol> <p>E. Aseptic measures.</p> <ol style="list-style-type: none"> <li>1. Principles of 'clean'/medical asepsis.</li> <li>2. Principles of disinfection</li> <li>3. Principles of sterility/Principles of surgical asepsis</li> </ol> <p>F. Nosocomial infections.</p>		
	<p>6.2 Describes and adheres to CDC guidelines for Standard Precautions and for Transmission Based Precautions.</p>	<p>Centers for Disease Control and Prevention (CDC) guidelines</p> <p>Standard precautions.</p> <p>Personal Protective Equipment (PPE) (gloves, gowns, goggles, mask, boots).</p> <p>Hand washing.</p>		

		<p>Isolation precautions.</p> <p>Transmission based.</p> <p>Droplet precautions.</p> <p>Respiratory hygiene/cough etiquette.</p> <p>Exposure control plan.</p> <p>Exposure incidents and reports.</p>		
	6.3 Describes and adheres to OSHA guidelines.	<p>Occupational Safety and Health Administration (OSHA) Guidelines</p> <p>Bloodborne pathogen standard. Hepatitis HIV</p> <p>Other ways of reducing infection. Vaccination Work control practices Engineered controls Education</p>		

**7.0** Competency: Provides basic emergency care.

Class Day Put day or date topic will be taught	Learning Goals	Content Outline	Learning Activities and/or Reading Assignment Resources	Time Allotted
	<p>7.1 Applies principles of basic emergency care in resident care.</p> <p>A. Identifies the goals of emergency care and first aid.</p> <p>B. Describes signs of medical emergencies.</p>	<p>Basic emergency care</p> <p>A. Goals of emergency care procedures and first aid.</p> <p>B. Signs of medical emergencies.</p>		
	<p>7.2 Demonstrates knowledge of basic first-aid principles.</p>	<p>Basic first-aid principles</p>		
	<p>7.3 Responds to emergency situations.</p>	<p>Emergency procedures for healthcare provider</p> <ol style="list-style-type: none"> <li>1. Cardiopulmonary resuscitation (CPR)</li> <li>2. Automated External Defibrillator (AED)</li> <li>3. Abdominal-thrust maneuver</li> </ol>		

	<p>7.4 Identifies specific types of emergencies, responds and reports according to recognized standards of care.</p>	<p>Types of emergencies and standards of care for each type.</p> <ul style="list-style-type: none"> <li>Asphyxia</li> <li>Choking</li> <li>Chest pain</li> <li>Cardiac arrest</li> <li>Stroke/TIA</li> <li>Hemorrhage</li> <li>Anaphylaxis</li> <li>Seizures</li> <li>Shock/Fainting</li> <li>Burns</li> <li>Poisonings</li> </ul>		
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**8.0 Competency: Applies the principles of basic nutrition to resident care.**

<b>Class Day Put day or date topic will be taught</b>	<b>Learning Goals</b>	<b>Content Outline</b>	<b>Learning Activities and/or Reading Assignment Resources</b>	<b>Time Allotted</b>
	<p>8.1 Identifies principles of nutrition.</p> <p>A. Identifies the six basic essential nutrient groups and their use in the body.</p> <p>B. Identifies and describes the basic food groups (Food Pyramids).</p> <p>C. Describes physiologic need for nutrients.</p> <p>D. Describes examples of serving sizes.</p>	<p>Principles of nutrition needs.</p> <p>A. Six basic essential nutrient groups.</p> <ol style="list-style-type: none"> <li>1. Carbohydrates</li> <li>2. Fats</li> <li>3. Proteins</li> <li>4. Vitamins</li> <li>5. Minerals</li> <li>6. Water</li> </ol> <p>B. Food Pyramid</p> <p>C. Physiological functions/purposes of the six essential nutrients.</p> <p>D. Serving sizes for each food group (not just serving size listed on package)</p>		

	<p>8.2 Recognizes personal, cultural, religious and medical conditions leading to variations in the diet.</p>	<p>Personal preferences for food based on:</p> <ol style="list-style-type: none"> <li>1. Personal choices</li> <li>2. Cultural choices</li> <li>3. Religious teachings</li> </ol> <p>Personal preferences for food preparation.</p> <p>Food allergies/intolerances</p>		
	<p>8.3 Describes contributory factors and remedies to address age related dietary problems.</p> <p>A. Gives examples of age related factors that influence adequate dietary intake.</p> <p>B. Describe situational factors that influence/interfere with adequate intake.</p>	<p>Dietary concerns</p> <p>A. Dietary problems of seniors, including signs and symptoms</p> <ol style="list-style-type: none"> <li>1. Loss of appetite</li> <li>2. Reduced sense of taste</li> <li>3. Loss of dentation</li> <li>4. Denture problems</li> <li>5. Dehydration</li> <li>6. Malnutrition</li> <li>7. Severe weight loss</li> <li>8. Severe weight gain</li> </ol> <p>B. Situational factors</p> <ol style="list-style-type: none"> <li>1. Ileostomies</li> <li>2. Dysphagia</li> <li>3. Confusion</li> <li>4. Medications</li> </ol>		

	<p>C. Provides care to assist in meeting dietary needs of residents.</p>	<p>5. Depression 6. Grief 7. Immobility 8. Medical problems</p> <p>C. Aspects of nursing assistant care.</p> <p>1. Socialization 2. Atmosphere 3. Presentation of food 4. Variety of seasonings 5. Oral inspection and hygiene 6. Denture care 7. Adequate fluid intake using a variety of fluids 8. Comfort foods 9. Thickened liquids 10. Liberalized diets – comfort foods</p>		
	<p><u>8.4</u> Provides and restricts fluids as ordered.</p> <p>A. Identifies need for adequate hydration.</p> <p>B. Lists sources for fluid intake.</p>	<p>Adequate hydration</p> <p>A. Need for adequate hydration and thirst mechanism</p> <p>B. Sources of fluids</p> <p>1. Oral fluids 2. Food 3. Intravenous fluids</p>		

	<p>C. Explains the importance of and calculates accurate intake and output and food consumption.</p> <p>D. Lists sources of fluid output.</p>	<p>C. Measuring intake and output.</p> <ul style="list-style-type: none"> <li>• Measurement conversions</li> <li>• Equivalents</li> <li>• Math skills</li> </ul> <ol style="list-style-type: none"> <li>1. Intake – oral and food</li> <li>2. Output</li> </ol> <p>D. Sources of fluid excretion.</p> <ol style="list-style-type: none"> <li>1. Lungs</li> <li>2. Skin</li> <li>3. Kidneys</li> <li>4. Intestines</li> </ol>		
	<p><b>8.5</b> Demonstrates care for residents who have an inability to obtain adequate nutrition or fluid independently.</p> <p>A. Provides food and fluids to residents.</p>	<p>Nursing assistants responsibilities to promote adequate fluid and food intake.</p> <p>A. Tasks that may be performed by the CNA to promote adequate fluid and food intake</p> <ol style="list-style-type: none"> <li>1. Before meal hygiene</li> <li>2. Position of resident to prevent aspiration</li> <li>3. Serving food trays</li> <li>4. Feeding a resident</li> <li>5. Use of assistive devices for feeding/drinking</li> </ol>		

	<p>B. Provides adequate nutrition for cognitively impaired residents.</p> <p>C. Observes and records food and fluid intake as ordered.</p>	<p>6. Adequate fluids intake or restricting fluids as ordered</p> <p>7. Encouraging independence while feeding/drinking</p> <p>8. Post meal hygiene</p> <p>9. Returning used food trays to dietary cart</p> <p>B. Cueing, hand-over-hand, setting up tray, removing unnecessary utensils, finger foods, environment changes in preferences.</p> <p>C. Observations and reporting. Estimating percentage of food intake.</p>		
	<p>8.6 Identifies therapeutic diets.</p> <p>A. Identifies types of food consistencies.</p> <p>B. Identifies the conditions for which therapeutic diets are prescribed.</p>	<p>General and therapeutic diets.</p> <p>A. Food consistencies</p> <ol style="list-style-type: none"> <li>1. Regular</li> <li>2. Soft mechanical</li> <li>3. Puree</li> <li>4. Liquid</li> </ol> <p>B. Types and rationale for therapeutic diets</p> <ol style="list-style-type: none"> <li>1. Clear liquid</li> <li>2. Full liquid</li> <li>3. Soft</li> </ol>		

	<p>C. Identifies alternate feeding methods.</p>	<ol style="list-style-type: none"> <li>4. Bland</li> <li>5. Low sodium</li> <li>6. Cardiac</li> <li>7. Counting carbohydrates</li> <li>8. Regular</li> <li>9. Renal diet</li> <li>10. Special nutritional diet</li> <li>11. High fiber vs. low fiber</li> <li>12. Alternative/ Supplementary nutrition examples</li> </ol> <p>C. Alternate feeding methods.</p> <ol style="list-style-type: none"> <li>1. Types of feeding tubes</li> <li>2. Care associated with feeding tubes</li> <li>3. Intravenous (TPN, IV) care associated with IV lines</li> </ol>		
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**9.0 Competency: Provides the resident with personal care and grooming.**

Class Day Put day or date topic will be taught	Learning Goals	Content Outline	Learning Activities and/or Reading Assignment Resources	Time Allotted
	9.1 Provides for and adheres to the principles of daily hygiene and grooming.	<p>Principles of hygiene and grooming.</p> <p>A. Personal hygiene needs and practices influenced by</p> <ol style="list-style-type: none"> <li>1. Culture</li> <li>2. Personal choice</li> <li>3. Economic consideration</li> </ol> <p>B. Rationale for providing personal care.</p> <p>C. Principles of care</p> <ol style="list-style-type: none"> <li>1. Promote resident's independence, privacy, dignity</li> <li>2. Boundary issues related to giving personal care</li> <li>3. Quality of life</li> <li>4. Observation of skin, scalp, mouth, hair, nails</li> </ol>		

	<p>9.2 Assists resident in personal care and grooming needs.</p> <p><b>A.</b> Bathes resident with consideration for resident need and setting according to plan of care.</p> <p><b>B.</b> Gives skin care including back rub.</p>	<p>Daily personal care and grooming needs.</p> <p><b>A.</b> Purpose of bathing and rationale for each method of bathing.</p> <ol style="list-style-type: none"> <li>1. Complete bed bath</li> <li>2. Partial bath</li> <li>3. Tub bath</li> <li>4. Whirlpool</li> <li>5. Shower</li> <li>6. Special bathing techniques such as towel bath or bag bath</li> <li>7. Bathing resident with dementia</li> <li>8. Working with nursing team to determine type and frequency of bathing</li> </ol> <p><b>B. Skin care</b></p> <ol style="list-style-type: none"> <li>1. Nursing assistant scope of practice</li> <li>2. Principles</li> <li>3. Complications of inadequate skin care</li> <li>4. Back rub, gentle massage procedures</li> <li>5. Abnormal findings</li> </ol>		
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	<p>C. Provides for resident's elimination, toileting and perineal care needs.</p>	<p>C. Elimination, toileting needs and perineal care</p> <ol style="list-style-type: none"> <li>1. Purpose and principles</li> <li>2. Emesis basin</li> <li>3. Elimination practices</li> <li>4. Elimination problems</li> <li>5. Toileting procedures, elimination appliances and equipment <ul style="list-style-type: none"> <li>• Bed-pan</li> <li>• Urinal</li> <li>• Commode</li> <li>• Toilet/seat extension</li> </ul> </li> <li>6. Correct cleansing procedure</li> <li>7. Perineal care with an indwelling or an external catheter in place</li> <li>8. Ostomy care – observe for skin breakdown</li> <li>9. Care for the resident who is incontinent</li> <li>10. Application of briefs</li> <li>11. Bowel and bladder training programs</li> <li>12. Abnormal findings – skin tears/breakdown, bruises</li> <li>13. Measuring, calculating and recording fluid output.</li> </ol>		
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	<p>D. Gives mouth/denture care.</p> <p>E. Gives hair care/shampoo.</p> <p>F. Gives fingernail/toenail care.</p>	<p>D. Mouth/denture care.</p> <ol style="list-style-type: none"> <li>1. Purpose and principles</li> <li>2. Oral care</li> <li>3. Denture care (complete, partial plates and bridges)</li> <li>4. Abnormal findings</li> <li>5. Techniques for cognitively impaired</li> </ol> <p>E. Hair care/shampoo.</p> <ol style="list-style-type: none"> <li>1. Purpose and principles</li> <li>2. Combing, grooming</li> <li>3. Bed shampoo</li> <li>4. Other methods of shampoo, waterless cleansers, “bonnet” shampoos</li> <li>5. Abnormal findings</li> </ol> <p>F. Nail care.</p> <ol style="list-style-type: none"> <li>1. Purpose and principles</li> <li>2. Guidelines for residents with diabetics</li> <li>3. Guidelines for residents with circulatory problems</li> <li>4. Guidelines for residents on anticoagulant medication</li> <li>5. Guidelines for residents with abnormally thick nails</li> </ol>		
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	<p><b>G.</b> Gives foot care.</p> <p><b>H.</b> Demonstrates shaving a resident.</p> <p><b>I.</b> Demonstrates changing a gown/dressing a resident comfortably.</p> <p><b>J.</b> Gives a.m./p.m. care.</p> <p><b>K.</b> Cares for resident with</p>	<p>6. Abnormal findings</p> <p><b>G.</b> Foot care.</p> <ol style="list-style-type: none"> <li>1. Purpose and principles</li> <li>2. Observations</li> <li>3. Abnormal findings</li> </ol> <p><b>H.</b> Shaving.</p> <ol style="list-style-type: none"> <li>1. Purpose and principles</li> <li>2. Techniques of shaving</li> <li>3. Observations</li> <li>4. Abnormal findings</li> </ol> <p><b>I.</b> Dressing.</p> <ol style="list-style-type: none"> <li>1. Purpose and principles</li> <li>2. Resident assistance</li> <li>3. Resident choices of apparel</li> <li>4. Safe appropriate clothing/footwear</li> <li>5. Techniques used for physical or cognitive impairments</li> <li>6. Use of assistive devices in dressing</li> </ol> <p><b>J.</b> AM/PM care; including:</p> <ol style="list-style-type: none"> <li>1. Purpose and principles</li> <li>2. Resident's preference to specific care</li> </ol> <p><b>K.</b> Prosthetic and orthotic devices.</p>		
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	prosthetic and orthotic devices.	<ol style="list-style-type: none"> <li>1. Purposes and principles</li> <li>2. Types of devices and their care.</li> </ol>		
	9.3 Reports and documents personal care and grooming tasks, observations and resident response.	<p>Reporting and documentation responsibilities</p> <p>Completion</p> <p>Observations</p> <p>Resident tolerance, response or problems with personal care.</p>		

**10.0** Competency: Measures vital signs.

Class Day Put day or date topic will be taught	Learning Goals	Content Outline	Learning Activities and/or Reading Assignment Resources	Time Allotted
	<p>10.1 Identifies normal vital signs values and age-related variations.</p>	<p>Normal vital signs values by age groups.</p> <p>Normal range of oral, rectal and tympanic temperatures.</p> <p>Normal pulse rates.</p> <p>Normal respiratory rate.</p> <p>Normal blood pressure.</p>		
	<p>10.2 Measures and records body temperature.</p> <p>A. Identifies purpose of taking a temperature.</p> <p>B. Lists factors that affect body temperature.</p> <p>C. Demonstrates taking an oral, rectal, and tympanic temperature.</p>	<p>Principles of Body Temperature.</p> <p>A. Purpose of taking a temperature.</p> <p>B. Factors that affect body temperature.</p> <p>C. Procedure for obtaining an oral temperature; rectal temperature; tympanic temperature.</p>		

	<p>D. Accurately records temperature using appropriate units of measurement.</p> <p>E. Identifies and reports abnormal findings.</p>	<p>D. Recording a temperature and units of measurement.</p> <p>E. Abnormal temperature reading.</p>		
	<p>10.3 Measures and records pulse (radial, apical).</p> <p>A. Identifies purpose of obtaining a pulse.</p> <p>B. Lists factors that affect pulse rate.</p> <p>C. Accurately counts a radial pulse.</p> <p>D. Accurately counts an apical pulse.</p> <p>E. Accurately records pulse rate.</p> <p>F. Identifies and reports abnormal findings.</p>	<p>Pulse (Radial, Apical, Carotid, Brachial)</p> <p>A. Purpose of obtaining a pulse rate.</p> <p>B. Factors affecting pulse rate.</p> <p>C. Procedure for taking a radial pulse.</p> <p>D. Procedure for taking an apical pulse.</p> <p>E. Recording pulse rate</p> <p>F. Abnormal pulse rate:</p> <ol style="list-style-type: none"> <li>1. Tachycardia</li> <li>2. Bradycardia</li> <li>3. Arrhythmia</li> </ol>		

	<p><b>10.4</b> Measures and Records Respirations.</p> <p>A. Identifies purpose of obtaining a respiratory rate.</p> <p>B. Lists factors affecting respiratory rate.</p> <p>C. Accurately counts respiratory rate.</p> <p>D. Records respiratory rate.</p> <p>E. Identifies and reports abnormal respiratory rate.</p>	<p>Respirations</p> <p>A. Purpose of obtaining a respiratory rate.</p> <p>B. Factors influencing respiratory rate.</p> <p>C. Procedure for obtaining a respiratory rate.</p> <p>D. Recording respirations</p> <p>E. Abnormal respiratory rates and patterns.</p> <ol style="list-style-type: none"> <li>1. Tachypnea,</li> <li>2. Bradypnea,</li> <li>3. Apnea</li> <li>4. Variable patterns</li> </ol>		
	<p><b>10.5</b> Measures and records blood pressure.</p> <p>A. Identifies the purpose of taking a blood pressure.</p> <p>B. Lists factors influencing blood pressure.</p>	<p>Blood Pressure</p> <p>A. Purpose of taking a blood pressure.</p> <p>B. Factors influencing blood pressure.</p>		

	<p>C. Demonstrates use of a stethoscope.</p> <p>D. Demonstrates use of a sphygmomanometer.</p> <p>E. Obtains a blood pressure.</p> <p>F. Recognizes precautions and contraindications to taking a blood pressure.</p> <p>G. Demonstrates technique for taking an orthostatic blood pressures.</p> <p>H. Records systolic and diastolic pressures.</p> <p>I. Reports abnormal blood pressure values.</p>	<p>C. Use of the stethoscope in taking blood pressure.</p> <p>D. Using a sphygmomanometer; types of cuffs; cuff size.</p> <p>E. Procedure for obtaining a blood pressure using a stethoscope and sphygmomanometer.</p> <p>F. Guidelines /precautions /contraindications to taking a blood pressure.</p> <p>G. Procedure for taking orthostatic blood pressures.</p> <p>H. Recording systolic and diastolic pressures.</p> <p>I. Abnormal findings.</p>		
	<p><u>10.6</u> Measures and Records Height and Weight.</p> <p>A. Identifies purpose of measuring height and weight.</p>	<p>Height and Weight</p> <p>A. Purpose of measuring height and weight.</p>		

	<p>B. Lists factors affecting height and weight.</p> <p>C. Describes a variety of scales and height measurement tools.</p> <p>D. Demonstrates measuring a resident's weight using a balanced scale.</p> <p>E. Demonstrates taking a resident's height using a measure bar.</p> <p>F. Discusses methods of obtaining height and weight in bedridden residents.</p> <p>G. Records height and weight.</p> <p>H. Reports abnormal weight.</p>	<p>B. Factors affecting height and weight.</p> <p>C. Scales and measuring devices.</p> <p>D. Procedure for measuring weight using a balanced scale.</p> <p>E. Procedure for measuring height using a measure bar.</p> <p>F. Procedures for measuring height and weight in bedridden residents.</p> <p>G. Recording height and weight/units of measurement.</p> <p>H. Abnormal weight: excessive loss/gain.</p>		
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**11.0 Demonstrates safe transfers, positioning and turning of residents using effective body mechanics.**

<b>Class Day Put day or date topic will be taught</b>	<b>Learning Goals</b>	<b>Content Outline</b>	<b>Learning Activities and/or Reading Assignment Resources</b>	<b>Time Allotted</b>
	<p>11.1 Demonstrates safe body mechanics.</p> <p>A. Identifies principles of body mechanics.</p> <p>B. Employs safe body mechanics when caring for residents.</p> <p>C. Identifies improper body mechanics.</p>	<p>Body Mechanics</p> <p>A. Principles of proper body mechanics.</p> <p>B. Techniques of body mechanics. Proper positions for performing procedures.</p> <p>C. Unsafe body mechanics.</p>		
	<p>11.2. Identifies the effects of limited mobility.</p>	<p>Limited Mobility, Bedrest</p> <p>A. Effects of Limited mobility.</p> <p>B. Complications of Bedrest.</p> <p>C. Tasks that may be performed by the Nursing assistant that prevent complications.</p>		

		<ol style="list-style-type: none"> <li>1. Movement</li> <li>2. Positioning</li> <li>3. Alignment</li> <li>4. Range of motion</li> <li>5. Restorative care &amp; rehabilitation</li> </ol>		
	<p><b>11.3</b> Assists residents in positioning and turning.</p> <p><b>A.</b> Demonstrates the different body positions used for positioning residents.</p> <p><b>B.</b> Demonstrates turning techniques.</p> <p><b>C.</b> Demonstrates use of assistive devices when</p>	<p>Guidelines and principles for positioning residents.</p> <p><b>A.</b> Techniques for positioning residents:</p> <ol style="list-style-type: none"> <li>1. Side lying</li> <li>2. Supine</li> <li>3. Prone</li> <li>4. Sim's</li> <li>5. High and low Fowler's</li> <li>6. Trendelenberg</li> <li>7. Lithotomy</li> <li>8. Orthopenic</li> <li>9. Log-rolling</li> <li>10. Move up in bed</li> <li>11. Dangling</li> </ol> <p><b>B.</b> Turning techniques:</p> <ol style="list-style-type: none"> <li>1. Draw sheet</li> <li>2. Mechanical lifts</li> <li>3. Log roll</li> </ol> <p><b>C.</b> Use of assistive devices.</p>		

	positioning a resident.	<ol style="list-style-type: none"> <li>1. Trochanter rolls</li> <li>2. Foot boards</li> <li>3. Hand rolls</li> <li>4. Bed cradles</li> <li>5. Abdominal pillows</li> <li>6. Abductor pillow</li> </ol>		
	<p><b>11.4</b> Assists the resident to transfer from bed to chair/gurney/stretcher/geri chair.</p> <p><b>A.</b> Demonstrates different transfer techniques.</p> <p><b>B.</b> Demonstrates use of assistive devices in transferring residents.</p>	<p>Guidelines and principles for moving &amp; lifting residents.</p> <p><b>A.</b> Use of transfer techniques.</p> <ol style="list-style-type: none"> <li>1. Chair</li> <li>2. Gurney</li> <li>3. Stretcher</li> <li>4. Geri Chair</li> </ol> <p><b>B.</b> Assistive Devices used in transferring residents.</p> <ol style="list-style-type: none"> <li>1. Gait belt</li> <li>2. Mechanical lifters</li> <li>3. Slide board</li> <li>4. Lift sheet</li> </ol>		
	<p><b>11.5</b> Assists residents to ambulate.</p> <p><b>A.</b> Identifies functional limitation inhibiting ambulation.</p>	<p>Principles/rationale for ambulation</p> <p><b>A.</b> Functional limitations.</p>		

	<p>B. Identifies safety considerations in ambulating a resident.</p> <p>C. Identifies the care of the resident who has fallen.</p> <p>D. Demonstrates the use of assistive devices in ambulation such as crutches, walker, cane and wheelchair.</p>	<p>B. Safety considerations for residents at risk for falling.</p> <p>C. Care of fallen resident.</p> <ol style="list-style-type: none"> <li>1. Reporting pain behaviors</li> <li>2. Facility protocols</li> </ol> <p>D. Use of assistive devices in ambulation</p> <ol style="list-style-type: none"> <li>1. Gait belt</li> <li>2. Cane, Quad cane, Hemi cane</li> <li>3. Walker</li> <li>4. Crutches</li> <li>5. Wheelchair.</li> </ol>		
	<p>11.6 Demonstrates passive and active range of motion.</p> <p>A. States principles of and rationale for passive/active range of motion.</p> <p>B. Identifies key terms to describe joint movements.</p>	<p>Range of Motion</p> <p>A. Principles/rationale for passive/active range of motion.</p> <p>B. Joint Movements</p> <ol style="list-style-type: none"> <li>1. Adduction/abduction</li> <li>2. Flexion/extension</li> </ol>		

		<ul style="list-style-type: none"> <li>3. Hyperextension</li> <li>4. Internal/external rotation.</li> <li>5. Supine/pronation.</li> </ul>		
	<p>C. Safely applies range of motion principles when performing range of motion exercises on major joints, extremities.</p> <p>D. Provides care for resident when continuous range of position device is in use.</p>	<p>C. Range of motion to shoulder, elbow, wrist, forearm, fingers, thumb, hip, knee, ankle, foot, and toes.</p> <p>D. Caring for residents with Continuous Range of motion devices.</p>		
	<p>11.7 Removes and applies oxygen devices during transfers with supervision without changing oxygen settings.</p> <p>A. Identifies oxygen sources, and methods of delivery.</p> <p>B. Incorporates safety measures in caring for</p>	<p>Transferring the Resident receiving Oxygen</p> <p>A. Oxygen sources:</p> <ul style="list-style-type: none"> <li>1. Wall outlet</li> <li>2. Oxygen tank</li> <li>3. Concentrator</li> <li>4. Oxygen cannula/prongs</li> <li>5. Oxygen Mask</li> </ul> <p>B. Oxygen safety measures/ precautions.</p>		

	residents with oxygen.			
	C. Utilizes principles of safe oxygen handling with removal and application of oxygen delivery devices.	C. Techniques of application and removal of oxygen devices/tanks.		

**12.0 Competency: Cares for cognitively impaired residents.**

<b>Class Day Put day or date topic will be taught</b>	<b>Learning Goals</b>	<b>Content Outline</b>	<b>Learning Activities and/or Reading Assignment Resources</b>	<b>Time Allotted</b>
	<p>12.1 Addresses the unique needs and behaviors of individuals with dementia (Alzheimer's &amp; others) and delirium.</p> <p>A. Identifies types of cognitive impairment.</p> <p>B. Describes the effects of cognitive impairment on ADLs.</p> <p>C. Identifies the common diseases that cause dementia.</p>	<p>Caring for residents with cognitive impairment</p> <p>A. Types of cognitive impairment:            1. Dementia            2. Delirium            3. Various levels of consciousness</p> <p>B. Effects of cognitive impairment on attention and memory/ language/ judgment/ special ability/ problem solving for everyday living.</p> <p>C. Common diseases (non-reversible causes of cognitive impairment).            1. Alzheimer's disease            2. Lewy body dementia            3. Parkinson's            4. Vascular dementia            5. Frontal temporal lobe</p>		

	<p>D. Identifies illness/health issues that cause delirium.</p> <p>E. Lists environmental factors that may contribute to dementia, delirium, etc.</p> <p>F. Lists unique needs of individuals with cognitive impairment.</p>	<p>dementia</p> <p>D. Illness/health issues (reversible causes of cognitive impairment - delirium)</p> <ol style="list-style-type: none"> <li>1. Medications</li> <li>2. Nutrition/fluids (including alcohol)</li> <li>3. Fever/infection/anemia</li> <li>4. Mental/emotional problems (depression, grief, fatigue)</li> <li>5. Injury/surgery</li> </ol> <p>E. Environmental factors.</p> <ol style="list-style-type: none"> <li>1. Unfamiliar, large, cluttered environment</li> <li>2. Lack of cues from the environment</li> <li>3. Lack of stimulation from the environment</li> <li>4. Over Stimulation</li> <li>5. Lack of routine</li> <li>6. Television</li> </ol> <p>F. Unique needs of residents with cognitive impairment.</p> <ol style="list-style-type: none"> <li>1. Communication needs</li> <li>2. ADL needs</li> <li>3. Social needs</li> </ol>		
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	G. Communicates effectively with cognitively impaired residents.	<ul style="list-style-type: none"> <li>4. Meaning activities</li> <li>5. Diversions/Reassurance</li> <li>6. Safety needs</li> </ul> <p>G. Communication techniques.</p>		
	<p><u>12.2</u> Respond appropriately to the behavior of cognitively impaired residents.</p> <p>A. Identifies and explains the unique behaviors demonstrated by individuals with cognitive impairment.</p>	<p>Common behavior of cognitively impaired residents and nursing assistant care and intervention.</p> <p>A. Behaviors of residents with cognitive impairment</p> <ul style="list-style-type: none"> <li>1. Resistance to care</li> <li>2. Forgetfulness and confusion</li> <li>3. Agitation</li> <li>4. Hoarding/Rummaging</li> <li>5. Shadowing</li> <li>6. Wandering and Pacing</li> <li>7. Hallucinations, Delusions, Paranoia</li> <li>8. Sundowning</li> <li>9. Perseveration</li> <li>10. Aggression – physical verbal</li> <li>11. Sexual behavior –</li> </ul>		

	<p>B. Utilizes interventions to reduce the effects of cognitive impairments.</p>	<p>disinhibition</p> <p>B. Interventions to reduce effects of cognitive impairment.</p> <ul style="list-style-type: none"> <li>• Approach strategies</li> <li>• Knowing the resident</li> </ul> <ol style="list-style-type: none"> <li>1. Following the care plan promoting as much independence as possible</li> <li>2. Set routine, be consistent (toileting, feeding, bathing)</li> <li>3. Verbal cueing with praise/reward</li> <li>4. Manual cueing with praise/reward</li> <li>5. Joining their reality</li> <li>6. Validation</li> <li>7. Reminiscence</li> <li>8. Activities</li> <li>9. Music</li> <li>10. Sensory stimulation</li> <li>11. Safety</li> <li>12. Simple, time-appropriate environment</li> <li>13. Understanding behaviors as unmet physical or social needs</li> <li>14. Ignoring inappropriate</li> </ol>		
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		<p>(safe) behaviors</p> <p>15. Offer choices when appropriate</p> <p>16. Avoid restraints</p> <p>17. Mobility alarms</p> <p>18. Responding to sexual behaviors</p>		
	<p>12.3 Reports behaviors and resident responses.</p>	<p>Situations that need to be reported</p> <p>A. New or increased changes in behavior</p> <p>B. Further deterioration in physical/mental abilities</p> <p>C. Effectiveness of current behavioral management</p>		

**13.0 Competency: Identifies the function, structure, common health problems and normal aging changes of each of the following systems.**

<b>Class Day Put day or date topic will be taught</b>	<b>Learning Goals</b>	<b>Content Outline</b>	<b>Learning Activities and/or Reading Assignment Resources</b>	<b>Time Allotted</b>
	<p>13.1 Describes major body systems and organs.</p> <p>A. Defines key anatomical terms.</p> <p>B. Identifies the four types of Tissues.</p>	<p>Organization of body – systems/ organs</p> <p>A. Key Terms</p> <p>B. Types of Tissues</p>		
	<p>13.2 Identifies the function, structure, common health problems and normal aging changes of the respiratory systems.</p> <p>A. Identifies the structure &amp; function of each component of the respiratory system.</p> <p>B. Describes the age related changes of the respiratory</p>	<p>Respiratory System</p> <p>A. Components and functions of respiratory system:</p> <p>B. Effects of aging on the system</p>		

	<p>system.</p> <p>C. Describes common health problems involving the respiratory system.</p> <p><input type="checkbox"/> D. Identifies signs and symptoms that Nurse Assistant should observe for and report.</p> <p>E. Measures and records oxygen saturation using the pulse oximeter.</p>	<p>C. Common health problems including signs and symptoms:</p> <ol style="list-style-type: none"> <li>1. COPD</li> <li>2. Bronchitis</li> <li>3. Asthma</li> <li>4. TB</li> <li>5. Pneumonia</li> </ol> <p>D. Signs &amp; symptoms to observe &amp; report to Nurse</p> <p>E. Oxygen saturation</p>		
	<p>13.3 Identifies the function, structure and common health problems and normal aging changes of the circulatory system.</p> <p>A. Identifies the structure &amp; function of each component of the</p>	<p>Circulatory System</p> <p>A. Components and functions of the circulatory system</p>		

	<p>circulatory system.</p> <p>B. Describes the age related changes of the circulatory system.</p> <p>C. Describes common health problems involving the circulatory system.</p> <p>D. Identifies signs and symptoms that Nurse Assistant should observe for and report.</p>	<p>B. Effects of aging on the system</p> <p>C. Common health problems including signs and symptoms:</p> <ol style="list-style-type: none"> <li>1. Atherosclerosis</li> <li>2. Arteriosclerosis</li> <li>3. Angina</li> <li>4. Myocardial infraction</li> <li>5. Coronary artery disease</li> <li>6. Heart failure</li> <li>7. Hypertension</li> <li>8. Irregular heart rates (pacemakers)</li> <li>9. Peripheral Vascular Disease</li> </ol> <p>D. Signs and symptoms to observe and report to Nurse</p>		
	<p>13.4 Identifies the function, structure and common health problems, and normal aging changes of</p>	<p>Urinary System</p>		

	<p>the urinary system.</p> <p>A. Identifies the structure &amp; function of each component of the urinary system.</p> <p>B. Describes the age related changes of the urinary system.</p> <p>C. Describes common health problems involving the urinary system.</p> <p><input type="checkbox"/> D. Identifies signs and symptoms that Nurse Assistant should observe for and report.</p>	<p>A. Components and functions of the urinary tract system</p> <p>B. Effects of aging on the system</p> <p>C. Common health problems including signs and symptoms:  1. Kidney (renal) failure  2. Urinary Tract Infection  3. Incontinence – types  4. Kidney stones</p> <p>D. Signs &amp; symptoms to observe &amp; report to Nurse</p>		
	<p>13.5 Identifies the function, common health problems and normal aging changes of the endocrine system.</p> <p>A. Identifies the structure &amp;</p>	<p>Endocrine System</p> <p>A. Components and functions of</p>		

	<p>function of each component of the endocrine system.</p> <p>B. Describes the age related changes of the endocrine system.</p> <p>C. Describes common health problems involving the endocrine system.</p> <p>D. Identifies signs and symptoms that Nurse Assistant should observe for and report.</p>	<p>the endocrine system</p> <p>B. Changes with aging.</p> <p>C. Common health problems including signs and symptoms:  1. Diabetes mellitus  2. Thyroid disease</p> <p>D. Signs &amp; symptoms to observe &amp; report to Nurse</p>		
	<p>13.6 Identifies the function, structure, common health problems and normal aging changes of the integumentary system.</p> <p>A. Identifies the structure &amp; function of each component of the integumentary system.</p> <p>B. Describes the age related</p>	<p>Integumentary System</p> <p>A. Structure and functions of skin and mucous membranes</p> <p>B. Effects of aging on the</p>		

	<p>changes of the integumentary system.</p> <p>C. Describes common health problems involving the integumentary system.</p> <p>D. Identifies signs and symptoms that Nurse Assistant should observe for and report.</p>	<p>system.</p> <p>C. Common health problems including signs and symptoms:</p> <ol style="list-style-type: none"> <li>1. Bruises</li> <li>2. Skin tears</li> <li>3. Rashes</li> <li>4. Decubitus ulcers</li> <li>5. Shingles</li> <li>6. Lice/scabies</li> </ol> <p>D. Signs &amp; symptoms to observe &amp; report to Nurse</p>		
	<p>13.7 Identifies the function, structure and common health problems and normal aging changes of the nervous system.</p> <p>A. Identifies the structure &amp; function of each component</p>	<p>Nervous System</p> <p>A. Structures and functions of the nervous system.</p>		

	<p>of the nervous system.</p> <p>B. Describes the age related changes of the nervous system.</p> <p>C. Describes common health problems involving the nervous system.</p> <p>D. Identifies signs and symptoms that Nurse Assistant should observe for and report.</p>	<p>B. Effects of aging on the system.</p> <p>C. Common health problems including signs and symptoms:</p> <ol style="list-style-type: none"> <li>1. Cerebral Vascular Accident</li> <li>2. Parkinson's disease</li> <li>3. Delirium</li> <li>4. Spinal cord injuries/head injuries</li> <li>4. Seizures</li> <li>5. Multiple Sclerosis</li> </ol> <p>D. Signs &amp; symptoms to observe &amp; report to Nurse</p>		
	<p>13.8 Identifies the function, structure and common health problems and normal aging changes of the sensory system.</p> <p>A. Identifies the structure &amp; function of each organ of</p>	<p>Sensory System</p> <p>A. Structure and function of each sensory organ</p>		

	<p>the sensory system.</p> <p>B. Describes the age related changes of the sensory system.</p> <p>C. Describes common health problems involving the sensory system.</p> <p>D. Identifies signs and symptoms that Nurse Assistant should observe for and report.</p>	<p>B. Effects of aging on the special senses.</p> <p>C. Common health problems including signs and symptoms:</p> <ol style="list-style-type: none"> <li>1. Cataracts</li> <li>2. Glaucoma</li> <li>3. Macular degeneration</li> <li>4. Loss of depth perception</li> <li>5. Inability to differentiate color</li> <li>6. Hearing loss</li> <li>7. Loss of smell</li> <li>8. Reduction in the sense of taste</li> <li>9. Neuropathy</li> </ol> <p>D. Signs &amp; symptoms to observe &amp; report to Nurse</p>		
	<p>13.9 Identifies the function, structure and common health problems and normal aging changes of the</p>	<p>Gastrointestinal System</p>		

	<p>gastrointestinal system.</p> <p>A. Identifies the structure &amp; function of each organ of the gastrointestinal system.</p> <p>B. Describes the age related changes of the gastrointestinal system.</p> <p>C. Describes common health problems involving the gastrointestinal system.</p> <p>D. Identifies signs and symptoms that Nurse Assistant should observe for and report.</p>	<p>A. Structure and function of each organ of the gastrointestinal system.</p> <p>B. Effects of aging on the system.</p> <p>C. Identify common health problems including signs and symptoms.</p> <ol style="list-style-type: none"> <li>1. Constipation/fecal impaction</li> <li>2. Gastroesophageal Reflux Disease</li> <li>3. Ulcers</li> <li>4. Hernias</li> <li>5. Gall Bladder disease</li> <li>6. Diverticulitis</li> </ol> <p>D. Signs &amp; symptoms to observe &amp; report to Nurse</p>		
	<p>13.10 Identifies the function, structure and common health problems and normal aging changes of the musculoskeletal system.</p>	<p>Musculoskeletal System</p>		

	<p>A. Identify the structure &amp; function of each component of the musculoskeletal system.</p> <p>B. Describes the age related changes of the musculoskeletal system.</p> <p>C. Describes common health problems involving the musculoskeletal system.</p> <p>D. Identifies signs and symptoms that Nurse Assistant should observe for and report.</p>	<p>A. Structure and function of the musculoskeletal system.</p> <p>B. Effects of aging on the system.</p> <p>C. Common health problems including signs and symptoms:  1. Arthritis  2. Osteoporosis  3. Fractures  4. Amputations  5. Complications of bed rest</p> <p>D. Signs &amp; symptoms to observe &amp; report to Nurse</p>		
	<p>13.11 Reproductive System</p> <p>A. Identify the structure &amp; function of each component of the reproductive system.</p>	<p>Reproductive System</p> <p>A. Structure and function of the musculoskeletal system.</p>		

	<p>B. Describes the age related changes of the reproductive system.</p> <p>C. Describes common health problems involving the reproductive system.</p> <p>D. Identifies signs and symptoms that Nurse Assistant should observe for and report.</p>	<p>B. Effects of aging on the system.</p> <p>C. Common health problems including signs and symptoms:  1. BPH  2. Prolapsed uterus  3. Vaginitis</p> <p>D. Signs &amp; symptoms to observe &amp; report to Nurse</p>		
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### 14.0 Competency: Provides for comfort and rest.

Class Day Put day or date topic will be taught	Learning Goals	Content Outline	Learning Activities and/or Reading Assignment Resources	Time Allotted
	<p>14.1 Gathers data to identify resident's level of comfort (or level of pain).</p> <p>A. Identifies nursing assistant scope of practice observation and discussion of level of comfort.</p> <p>B. Identifies purpose of observing level of comfort at each resident contact.</p> <p>C. Discuss barriers to resident comfort.</p> <p>D. Lists types of pain and factors which indicate altered level of comfort.</p> <p>E. Lists non-verbal expressions of altered level of comfort.</p> <p>F. Identifies various scales to measure level of comfort (or pain).</p>	<p>Level of comfort</p> <p>A. Scope of practice and nursing assistant activities.</p> <p>B. Purpose of identifying the level of comfort (or pain) when providing care.</p> <p>C. Various barriers to comfort.</p> <p>D. Types of pain and factors affecting comfort level.</p> <ul style="list-style-type: none"> <li>• Acute/chronic</li> </ul> <p>E. Non-verbal expression of pain.</p> <p>F. Examples of pain measurement scales (e.g.</p>		

	<p>G. Identifies the role of the nursing assistant in non-pharmacological measures which enhance comfort.</p> <p>H. Reports and documents resident's level of comfort.</p>	<p>PAINAD).</p> <p>G. Comfort enhancing measures within nursing assistant scope of practice.</p> <ol style="list-style-type: none"> <li>1. Repositioning.</li> <li>2. Preferred or most comfortable bathing method.</li> <li>3. Gentle touch, regular back rubs/lotion.</li> <li>4. Soft, respectful approach.</li> <li>5. Use of complimentary measures such as music, relaxation and deep breathing and pleasant smells.</li> <li>6. Gentle "presence" .</li> <li>7. Warm or cold packs if ordered.</li> <li>8. Room environment.</li> <li>9. Distraction.</li> </ol> <p>H. Procedures for reporting and documenting level of comfort, interventions and resident response.</p>		
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**15.0 Competency: Assists with diagnostic tests.**

<b>Class Day Put day or date topic will be taught</b>	<b>Learning Goals</b>	<b>Content Outline</b>	<b>Learning Activities and/or Reading Assignment Resources</b>	<b>Time Allotted</b>
	<p>15.1 Demonstrate procedures for acquiring different types of specimens.</p> <p>A. Identifies the types of specimens a nursing assistant may collect.</p>	<p>Diagnostic Tests</p> <p>A. Specimen Collection</p> <ol style="list-style-type: none"> <li>1. Purpose of collecting specimens</li> <li>2. Standard precautions</li> <li>3. Explain procedure to resident</li> <li>4. Sources of specimens               <ul style="list-style-type: none"> <li>• Sputum</li> <li>• Stool</li> <li>• Urine</li> <li>• Emesis</li> </ul> </li> <li>5. Types of urine specimens               <ul style="list-style-type: none"> <li>• Routine</li> <li>• Clean Catch (midstream)</li> <li>• 24 hour</li> <li>• Culture &amp; Sensitivity</li> <li>• Sterile specimen (urine from Foley)</li> </ul> </li> <li>6. Sources of stool specimens               <ul style="list-style-type: none"> <li>• Rectum</li> </ul> </li> </ol>		

	<p>B. Collects, labels and sends specimens for analysis.</p> <p>C. Tests specimen if ordered.</p> <p>D. Identifies pre and post resident care for collection of specimens.</p>	<ul style="list-style-type: none"> <li>• Colostomy or ileostomy</li> </ul> <p>B. Procedure and facility policies for collection of specimens</p> <p>C. Testing specimens</p> <ol style="list-style-type: none"> <li>1. Dipstick</li> <li>2. Strain urine</li> </ol> <p>D. Pre and Post procedure care of resident.</p>		
	<p>15.2 Documents and reports information to nurse.</p>	<p>Documentation Requirements</p> <p>A. Amount, characteristics of sample, color, odor</p> <p>B. I &amp; O</p> <p>C. Forms per facility policy &amp; procedure.</p>		

**16.0 Competency: Provides care for the peri-operative resident and/or resident with special needs.**

Class Day Put day or date topic will be taught	Learning Goals	Content Outline	Learning Activities and/or Reading Assignment Resources	Time Allotted
	<p>16.1 Assists with pre-operative care.</p> <p>A. Defines preoperative period.</p> <p>B. Identifies measures to psychologically prepare a resident for surgery.</p> <p>C. Identifies measures to physically prepare a resident for surgery.</p>	<p>Purpose, principles and procedures for pre-op care.</p> <p>A. Definition of preoperative period.</p> <p>B. Psychological preparation.</p> <ol style="list-style-type: none"> <li>1. Listen to the resident</li> <li>2. Observe body language</li> <li>3. Report observations to nurse</li> </ol> <p>C. Physical preparation</p> <ol style="list-style-type: none"> <li>1. Identification band on</li> <li>2. NPO orders (signs posted per agency policy)</li> <li>3. Assist with surgical checklist (includes void time, vital signs)</li> <li>4. Removal of water pitcher</li> <li>5. Bath/shower</li> <li>6. Remove nail polish, jewelry</li> <li>7. Secure valuables</li> <li>8. Surgical prep (per agency policy)</li> </ol>		

		9. Ensure safety		
	<p>16.2 Assists with post-operative care.</p> <p>A. Defines the post-operative period.</p> <p>B. Identifies measures to prepare the resident's room.</p> <p>C. Provides nursing assistant care for residents after surgery.</p>	<p>Purpose, principles and procedures of post-op care:</p> <p>A. Definition of post-operative period.</p> <p>B. Preparation of resident room</p> <ol style="list-style-type: none"> <li>1. Surgical bed</li> <li>2. Bedside table (emesis basin, tissues)</li> <li>3. VS equipment</li> <li>4. Special equipment as per agency policy</li> <li>5. Warmed blankets</li> </ol> <p>C. Care of Resident</p> <ol style="list-style-type: none"> <li>1. Identify resident.</li> <li>2. Assist transfer to bed.</li> <li>3. Safety; airway maintained.</li> <li>4. Precautions for N/V.</li> <li>5. Standard precautions/bodily fluids.</li> <li>6. Assist with TC&amp;DB and/or incentive spirometer (if not contra-indicated).</li> <li>7. Take VS and pain level per agency protocol.</li> <li>8. Measure and record first post-op void.</li> </ol>		

	<p>D. Identifies common complications of surgery.</p> <p>E. Reports findings in a timely manner.</p>	<p>D. Common complications of surgeries.</p> <p>E. Report observations to nurse.</p>		
	<p>16.3 Assists with care of residents with special needs.</p> <p>A. Observes and reports the condition of client's dressings/wounds with drainage.</p> <p>B. Demonstrates care of resident with gravity drains.</p>	<p>Special procedures that may be delegated to the nursing assistant for the medically stable resident</p> <p>A. Wound dressings and nursing assistant responsibilities.</p> <ol style="list-style-type: none"> <li>1. Purpose.</li> <li>2. Wound care per facility policy &amp; procedure as delegated.</li> <li>3. Appropriate observations.</li> <li>4. Report status, observations and resident's response to nurse.</li> </ol> <p>B. Gravity drains and nursing assistant responsibilities.</p> <ol style="list-style-type: none"> <li>1. Purpose.</li> <li>2. Care of drains per facility policy &amp; procedure as delegated.</li> <li>3. Appropriate observations.</li> <li>4. Report status, observations and resident's response to</li> </ol>		

	<p>C. Demonstrates care of resident/ resident with surgical evacuators.</p> <p>D. Demonstrates care of client with sump drains.</p> <p>E. Applies flexible abdominal binders.</p>	<p>nurse.</p> <p>C. Surgical evacuators and nursing assistant responsibilities.</p> <ol style="list-style-type: none"> <li>1. Purpose.</li> <li>2. Care of client with surgical evacuators per facility policy &amp; procedure as delegated.</li> <li>3. Appropriate observations.</li> <li>4. Report status, observations and resident's response to nurse.</li> </ol> <p>D. Sump drain systems and nursing assistant responsibilities</p> <ol style="list-style-type: none"> <li>1. Purpose.</li> <li>2. Care of client with sump drains. per facility policy &amp; procedure as delegated.</li> <li>3. Appropriate observations.</li> <li>4. Report status, observations and resident's response to nurse.</li> </ol> <p>E. Various types of abdominal binders and nursing assistant responsibilities.</p> <ol style="list-style-type: none"> <li>1. Purposes.</li> </ol>		
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	<p>F. Applies ace and non-sterile dressings.</p> <p>G. Applies anti-embolism stockings and devices.</p>	<p>2. Applying binders per facility policy &amp; procedure as delegated.</p> <p>3. Appropriate observations.</p> <p>4. Report status, observations and resident's response to nurse.</p> <p>F. Description, purpose, application of ace and non-sterile bandages and nursing assistant responsibilities.</p> <ol style="list-style-type: none"> <li>1. Purpose.</li> <li>2. Application of ace and non-sterile dressings per facility policy &amp; procedure as delegated.</li> <li>3. Appropriate observations.</li> <li>4. Report status, observations and resident's response to nurse.</li> </ol> <p>G. Description, purpose and application of the various types of anti-embolism devices</p> <ol style="list-style-type: none"> <li>1. Purposes.</li> <li>2. Application of stockings and devices per facility policy &amp; procedure as delegated.</li> </ol>		
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	<p>H. Applies immobilizing devices.</p> <p>I. Demonstrates care of resident with feeding tube.</p>	<p>3. Appropriate observations. 4. Report status, observations and resident's response to nurse.</p> <p>H. Description, purpose and application of the various types of immobilization devices</p> <ol style="list-style-type: none"> <li>1. Purpose.</li> <li>2. Care of resident with immobilizing devices per facility policy &amp; procedure as delegated.</li> <li>3. Appropriate observations.</li> <li>4. Report status, observations and resident's response to nurse.</li> </ol> <p>I. Purpose/types of feeding tubes and nursing assistant responsibilities.</p> <ol style="list-style-type: none"> <li>1. Purposes.</li> <li>2. Care of resident with feeding tube per facility policy &amp; procedure as delegated.</li> <li>3. Appropriate observations.</li> <li>4. Report status, observations and resident's response to nurse.</li> </ol>		
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	<p>J. Demonstrates care of resident or resident receiving infusion therapy.</p> <p>K. Demonstrates care of resident on a ventilator.</p>	<p>J. Purpose of infusion therapies and nursing assistant responsibilities (observes &amp; reports status)</p> <ol style="list-style-type: none"> <li>1. Purpose.</li> <li>2. Care of resident with infusion therapies per facility policy &amp; procedure as delegated.</li> <li>3. Appropriate observations.</li> <li>4. Report status and observations to nurse.</li> </ol> <p>K. Purpose of ventilator therapy and nursing assistant responsibilities</p> <ol style="list-style-type: none"> <li>1. Purpose.</li> <li>2. Care of resident on a ventilator per facility policy &amp; procedure as delegated.</li> <li>3. Appropriate observations.</li> <li>4. Report status, observations and resident's response to nurse.</li> </ol>		
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**17.0 Competency: Assists in Admission/Transfer/Discharge of the resident.**

<b>Class Day Put day or date topic will be taught</b>	<b>Learning Goals</b>	<b>Content Outline</b>	<b>Learning Activities and/or Reading Assignment Resources</b>	<b>Time Allotted</b>
	17.1 Demonstrates the procedures for admitting a resident to the unit.	Procedure for admitting the resident <ol style="list-style-type: none"> <li>1. Preparation of the room</li> <li>2. Greeting the resident and family</li> <li>3. Orient the resident</li> <li>4. Assist in gathering data, VS Height, weight</li> <li>5. Safety, Comfort measures, Privacy needs</li> <li>6. Personal item inventory.</li> <li>7. Communicate observations and resident response to nurse.</li> </ol>		
	17.2 Demonstrates the procedures for transferring a resident from the unit.	Procedure for transferring the resident <ol style="list-style-type: none"> <li>1. Preparation of the room.</li> <li>2. Transfer of personal belonging and equipment.</li> <li>3. Greeting the resident and family.</li> </ol>		

		<ol style="list-style-type: none"> <li>4. Transport the resident.</li> <li>5. Orient the resident.</li> <li>6. Safety, comfort measures, privacy needs.</li> <li>7. Communicate observations and resident response to nurse</li> </ol>		
	<p>17.3 Demonstrates the procedures for discharging a resident.</p>	<p>Procedures for discharging the resident</p> <ol style="list-style-type: none"> <li>1. Assist with discharge instructions</li> <li>2. Secure personal belongings</li> <li>3. Transport the resident</li> <li>4. Safety, comfort measures,</li> <li>5. Privacy needs</li> <li>6. Communicate observations and resident response to nurse</li> </ol>		

**18.0 Competency: Provides care for residents and family when death is imminent.**

Class Day Put day or date topic will be taught	Learning Goals	Content Outline	Learning Activities and/or Reading Assignment Resources	Time Allotted
	<p>18.1 Identifies and recognizes principles of caring for dying residents and their family members.</p> <p>A. Recognizes common attitudes and beliefs about death and dying.</p> <p>B. Identifies the stages of the dying process.</p>	<p>A. Attitudes and beliefs about death.</p> <ol style="list-style-type: none"> <li>1. Sudden death</li> <li>2. Terminal illness and expected death.</li> </ol> <p>B. Stages of dying process</p> <ol style="list-style-type: none"> <li>1. Denial</li> <li>2. Anger</li> <li>3. Bargaining</li> <li>4. Depression</li> <li>5. Acceptance of death</li> </ol>		
	<p>18.2 Assists in care of dying resident and their family members considering spiritual and cultural beliefs.</p> <p>A. Recognizes cultural and spiritual influences.</p>	<p>Care of the Dying</p> <p>A. Overview of cultural and spiritual influences regarding</p>		

	<p>B. Employs measures to maintain resident dignity.</p> <p>C. Identifies nursing assistant measures when resident is receiving hospice care.</p> <p>D. Recognizes impact of resident death on self and others.</p> <p>E. Adheres to legal-ethical standards when providing end of life care.</p>	<p>death of resident and affect on family members.</p> <p>B. Maintaining dignity of the resident.</p> <p>C. Role of nurse assistant when the resident is receiving hospice care.</p> <p>D. Impact of resident’s death on the nurse assistant and co-workers.</p> <p>E. Boundaries, ethical standards and emotional support of the nurse assistant while caring for residents in end-of-life stages.</p>		
	<p>18.3 Provides care for residents when death is imminent.</p> <p>A. Identifies signs of impending death.</p> <p>B. Recognizes and adheres to advance directives.</p>	<p>When Death is imminent</p> <p>A. Signs of death.</p> <p>B. “Do Not Resuscitate” order, Advance Directives. Procedure for nurse assistant actions according to resident’s</p>		

	C. Observes, records and reports cessation of vital signs in accordance with advance directives.	advance directives and facility protocol. C. Documentation of cessation of vital signs according to facility policy.		
	18.4 Provides postmortem care adhering to cultural practices and facility policy.  A. Identifies cultural practices in caring for the dead.  B. Provides personal care for resident after death.  C. Assists in facilitating organ donation.	Post Mortem Care  A. Culturally sensitive care of the deceased  B. Bathing/cleansing the body. 1. Dressing the body per family choice or facility protocol. 2. Care of personal items 3. Positioning the body. 4. Respect for the deceased.  C. Organ donation		
	18.5 Prepares body for removal from unit.	Procedure for removal of body while maintaining respectful dignity of the body, the family and other residents.		

		Documentation according to facility protocol.		
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