DESCRIPTION

The Certified Nursing Assistant course is composed of a combination of subject matter and experiences designed to perform tasks of individuals receiving nursing services. The student learns those competencies needed to perform as a nurse assistant under the direction of the registered nurse. The units of instruction should include the role of the nurse assistant while covering general health care topics; medical terminology; patients/clients and their environment; special feeding techniques; psychological support and, in long term and terminal illness, death and dying (e.g. chronically ill, children, new mothers, and so on); and all other basic nursing skills. Topics covered typically include normal growth and development; feeding, transporting patients, hygiene, and disease prevention; basic pharmacology; first aid and CPR; observing and reporting; care of equipment and supplies; doctor, nurse, and patient relationships and roles; procedure policies; medical and professional ethics; and care of various kinds of patients.

STANDARDS, OBJECTIVES, AND INDICATORS

STANDARD 1 15% of Exam Blueprint

◊ COMMUNICATING INFORMATION

Objective 1: Observe and report resident data (verbal)
1. Observe and report significant changes in resident's condition (i.e. change in vital signs, changes in level of consciousness, changes to resident's baseline status)
2. Report to Registered Nurse team leader.
3. Timeliness of significant changes in condition of reporting.
4. What information should be included in verbal reporting.

Objective 2: Record subjective and objective resident data (written)
1. Record observation using acceptable terminology and facility approved abbreviations.
2. Ability to recognize subjective versus objective observations.
3. Record information in accordance with facility policies and procedures.
4. Record personal objective data only.
5. Record subjective information given directly to Certified Nursing Assistant only

Objective 3: Communicate with resident, staff and family within HIPPA guidelines
1. Knowledge of HIPPA privacy guidelines.
2. Appropriate sharing of information for coordination of care issues

Objective 4: Write reports concerning resident care and condition, accidents and incidents
1. Timeliness of reporting
2. Knowledge of appropriate documentation of accidents and/or incidents.
3. Ability to accurately observe and record on facility’s observation forms (i.e. skin assessment after showers, etc.)

Objective 5: Check current documentation of resident status and care
1. Ability to read, understand and apply measures listed on resident’s care plan.
2. Ability to read, understand and apply measures listed on resident’s assignment sheet.
3. Ability to read, understand and apply measures listed on resident’s medical record

Objective 6: Answer call signal
1. Ability to prioritize / differentiate signals (i.e. bed or bathroom or shower)
2. Respond timely to various call signals

Objective 7: Place and receive telephone calls
1. Appropriate private environment for resident's personal calls.
2. Appropriate phone procedure (per facility) for answering phones.
3. Knowledge of communication parameters (i.e. dietary, laundry, administration.

Objective 8: Reinforce or assist with resident teaching
1. Knowledge of "what" information a Certified Nursing Assistant is allowed to reinforce (i.e. Diet, activity, ambulation and discharge plans).
2. Knowledge of "what" information a CNA may assist with teaching (i.e. donning of Personal Protective Equipment).
3. Know resources available to reinforce / assist with resident education for questions outside a CNA scope of practice (combined duty A008 and A009)

Objective 9: Report Pests
1. Know facility’s chain for reporting pests.
2. Understand completion of care/safety concerns with resident prior to reporting.
3. Knowledge of what needs to be reported vs what does not need to be reported.

Objective 10: Communicate with limited English proficient resident
1. Knowledge of communication techniques used by resident.
2. Knowledge of how to contact interpreters when necessary.

Objective 11: Communicate with alert resident impeded by mechanical/physical limitations
1. CNA will understand the principals involved in communicating with person experiencing varied disabilities. i.e. blind, hearing, dementia, and unresponsive).

Objective 12: Report service and repair needs for equipment
1. Knowledge of electrical safety and facility procedure for verification of equipment (prior to use)
2. Knowledge of appropriate chain to report service and repair needs.
3. Ability to identify need for service and repair for resident personal equipment (i.e. electric shavers, radios, TV, etc.)
4. Ability to identify need for service and repair for facility provided.

Objective 13: CNA-1.13 Calculate, report and record fluid intake and output
1. Knowledge of and ability to convert 1 ounce = 30 ml
2. Ability to perform simple math calculations (addition/subtractions/multiplications/division for both whole numbers and fractions)
3. Ability to verbally report intake and output measurements.
4. Ability to record intake and output measurements (i.e. I&O, sheet, graphic sheet and flow sheet)
5. Ability to calculate percentage of meal eaten.
6. Understanding of foods and fluids included in intake recordings.
7. Understanding of materials of output recordings.

Objective 14: Access the list of emergency telephone numbers for household or nursing unit.
1. Knowledge of location of emergency telephone numbers in client's home or nursing unit.
2. Easy access to emergency numbers in client's home or nursing unit.
3. Ability to calculate percentage of meal eaten.

Objective 15: Assist with unit admitting, transfer, and discharge procedures.
1. Knowledge of admitting procedure
2. Knowledge of transfer procedure
3. Knowledge of discharge procedure

Objective 16: Assist with unit admitting, transfer, and discharge procedures.
1. Knowledge of admitting procedure
2. Knowledge of transfer procedure
3. Knowledge of discharge procedure

Objective 17: Carry out assignment from supervisor
1. Knowledge of CNA scope of practice
2. Ability to prioritize care
3. Knowledge of appropriate documentation of care given
4. Knowledge of appropriate reporting of care given (in verbal and written form)

Objective 18: Communicate need for changes in care plan
1. Ability to recognize and report changes in resident's condition.

Objective 19: Instruct resident in use of body mechanics.
1. Understanding of proper body mechanics
2. Ability to communicate instructions to resident
3. Knowledge of correct lifting, moving techniques
4. Ability to demonstrate and explain body mechanics

Objective 20: Communicate with resident with sensory impairments
1. Appropriate approach and vocal tone with resident with a hearing disorder and or visual impairment.
2. Alternate Communication methods with resident with hearing disorder i.e. use of sign language, pictures and gestures.
3. Ability to assess resident's level of understanding
4. Knowledge of both verbal and non-verbal communication techniques.

Objective 21: Instruct visitors in isolation technique
1. Knowledge of various type of isolation
2. Knowledge of PPE required for each type of isolation
3. Ability to instruct appropriate technique
4. Ability to answer questions regarding need for isolation and PPE

Objective 22: Communicate with dementia residents
1. CNA understands appropriate way to approach resident with dementia
2. CNA understands appropriate tone of voice to use with resident dementia
3. CNA understands value of Yes and No questions
4. Value of Non-verbal techniques

Objective 23: Communicate successful techniques with nursing supervisor and other staff members
1. Verbal form
2. Written form

Objective 24: Attend Meetings
1. Knowledge of facility's expectations for staff meeting
2. Knowledge of facility's expectations for staff development meetings
3. Attendance and participation in external continuing education opportunities
4. Attendance and participation in resident in care plan meetings

Objective 25: Report unsafe conditions
1. Knowledge of chain of reporting command for unsafe conditions
2. Knowledge of appropriate written reporting procedures
3. Ability to observe and assess situations and environment for safety issues.

Objective 26: Observe, report, and record changes in resident's behavior pattern
1. Knowledge of "resident's normal" physical assessment and ability to recognize deviations
2. Ability to appropriately report and record changes in resident's behavior
3. Knowledge of resident's baseline behavior patterns

STANDARD 2 %25 of Exam Blueprint

 ô Performing Basic Nursing Skills

Objective 1: Students will express understanding of isolation procedures and techniques.
1. Donning and removing personal protective equipment (PPE)
2. Double bagging soiled materials.
   a. Supplies/equipment
   b. Specimens
3. Providing personal care to the resident with appropriate PPE.
   a. Provide bathing
   b. Linen Change
   c. Hygiene
   d. Emotional needs
      i. Depression
      ii. Insecurity
      iii. Fear

4. Standard precautions

5. Transmission-based precautions
   a. Airborne
   b. Droplet
   c. Contact

6. Blood-borne Pathogens

Objective 2: Students will provide and promote clean, dry, wrinkle-free beds following standard precautions and the Blood-borne Pathogen Standards.

1. Process of bed-making
   a. Linen collection
   b. Rules and process for bed-making

2. Types of Beds
   a. Open
   b. Closed
   c. Occupied
   d. Unoccupied
   e. Surgical

3. Safety
   a. Body mechanics
   b. Rules of safe resident handling, moving and transfers
   c. Medical asepsis

Objective 3: The person’s unit is maintained by keeping area clean, neat, safe, and comfortable at all times.

1. Comfort
   a. Ventilation
   b. Odors
   c. Noise
   d. Lighting

2. Room Furniture and Equipment
   a. Bed
      i. Operations/controls
      ii. Bed positions
iii. Bed safety
iv. Overbed table
v. Bedside stand
vi. Chairs
vii. Privacy Curtain
viii. Bed Rails

3. Call System
   a. Different types
   b. Persons with limited hand mobility
   c. Instruction on use
   d. Confuse residents
   e. Placement
   f. Answering call lights

4. Personal Care Items
   a. Storage

5. Bathroom
   a. Grab bars
   b. Signal light
   c. Raised toilet seats
   d. Towel racks

6. Closet and Drawer Space
   a. Inspection

7. Soiled Linens
   a. Prepare for laundry

8. Supplies and Equipment
   a. Distribute to unit
   b. Stocking and storing

9. Other Equipment
   a. TV
   b. Phone
   c. Radio
   d. Clock

Objective 4: Students will recognize and provide a safe nursing care environment.

1. Accident Risk Factors
   a. Physical Risk Factors
      i. Aging, vision, hard of hearing, impaired mobility, cognitive loss, decreased sense of smell
   b. Seizures
   c. Fainting
   d. Falls

2. Environmental Risk Factors
   a. Hazardous Substances/MSDS
b. Poisoning
3. Fire Safety
   a. RACE
   b. PASS
4. Equipment Safety
   a. Wheelchair/Geri-chair
   b. Bed and stretcher
   c. Resident’s room
   d. Electrical
5. Workplace Violence
   a. Agitated and aggressive residents and/or visitors
6. Abuse and Neglect
   a. Physical
   b. Emotional
   c. Verbal
   d. Financial
   e. Spiritual
7. Burn Prevention
8. CPR and Choking (Adult, Child and Infant)
   a. American Heart Association for the healthcare worker guidelines
   b. Defibrillation
9. Assist with Falling Resident
   a. Ambulatory aids

Objective 5: Students will be able to apply infection control measures whenever providing nursing care.
1. Hand-washing
   a. Demonstrate skill
   b. Identify when applicable
2. Medical asepsis
   a. Clean technique
   b. Disinfection
3. Surgical asepsis
   a. Sterilization
   b. Sterile Technique
4. Disinfecting unit and supplies.
   a. Soiled laundry
   b. Contaminated surfaces
   c. Medical equipment
   d. Patient Room
5. Chain of infection
6. Types of microbes
   a. Pathogens
b. Non-pathogens

c. Normal flora

d. Drug resistance

e. Healthcare-associated infection

Objective 6: Students will be able to assist with care of pressure ulcers.

1. Risk factors for pressure ulcer development
   a. Age
   b. Nutrition
   c. Mobility
   d. Incontinence
   e. Poor Circulation

2. Measures to prevent pressure ulcers
   a. Protective devices
   b. Turning and positioning
   c. Skin Care

3. Complications of pressure ulcers

4. Reporting and documenting pressure ulcers

Objective 7: Students will support and maintain urinary catheter drainage systems.

1. Types of drainage systems
   a. Indwelling/ closed system catheters (retention and Foley catheter)
   b. Condom catheters
      i. Proper application and removal technique
      ii. Maintenance
   c. Leg bags
      i. Changing a leg bag to a drainage bag

2. General care and maintenance of drainage systems
   a. Securing tubing and maintenance of closed systems
   b. Safe turning, moving, transferring of resident and bag/tubing placement
   c. Preventing obstruction of flow
   d. Identifying normal vs. abnormal observations
      i. Complaints of pain, burning, irritation
      ii. Color of urine, clarity, odor, particles
      iii. Secretions or crusting
   e. Catheter care and cleaning
   f. Report and Record observations and patient complaints

3. Safety/Dignity
   a. Follow Standard Precautions and blood-borne Pathogen Standards
   b. Maintain patient safety and dignity
Objective 8: Students will provide safe and appropriate care to a resident with a colostomy/ileostomy following standard precautions and the Blood-borne pathogen standards.

1. Pouch Change
   a. Procedure to change pouch and empty
   b. Frequency for changing and emptying
   c. Disposal

2. Skin and stoma care
   a. Observe for s/s of skin breakdown at and around stoma site
   b. Stoma observation
      i. Characteristics of normal stoma appearance
   c. Emotional Support
      i. Recognize and understand psychological and social effects

Objective 9: Student will measure and interpret accurate 5 vital signs and height and weight.

1. Temperature
   a. Sites
      i. Temporal
      ii. Tympanic
      iii. Oral
      iv. Rectal
      v. Axillary
   b. Process
   c. Equipment
      i. Glass
      ii. Standard electric thermometer
      iii. Temporal artery
      iv. Tympanic membrane thermometer
      v. Digital thermometer
   d. Ranges
      i. 97.6-99.6° F - oral
      ii. 98.6-100.6° F - rectal
      iii. 96.6-98.6° F - axillary

2. Blood pressure
   a. Sites
      i. Brachial
   b. Process
   c. Equipment
      i. Sphygmomanometer
      ii. Stethoscope
   d. Ranges
      i. 90-120/60-80 mm Hg
   e. Hypertension vs. Hypotension
3. Pulse
   a. Sites
      i. Temporal
      ii. Brachial
      iii. Femoral
      iv. Radial
      v. Popliteal
      vi. Carotid
      vii. Apical
      viii. Pedal
      ix. Posterior tibial
   b. Process
   c. Equipment
      i. Watch or clock with second hand
      ii. Stethoscope
   d. Ranges
      i. 60-100 bpm

4. Respirations
   a. Process
      i. Counted with pulse
      ii. Person unaware of respirations being taken
   b. Equipment
      i. Watch or clock with second hand
   c. Ranges
      i. 12-20 breaths

5. Factors affecting vital signs
   a. Fever
   b. Exercise
   c. Pain
   d. Drugs
   e. Eating
   f. Fluid intake
   g. Noise
   h. Smoking
   i. Anger/anxiety
   j. Illness
   k. Fear
   l. Sleep
   m. Weather

6. Pain
   a. Signs and symptoms
   b. Pain scale
   c. Types of pain
7. Height
   a. Process
      i. Inch/feet conversions
   b. Equipment
      i. Standard scale
      ii. Tape measure

8. Weight
   a. Process
   b. Factors affecting weight
   c. Reporting Weight/Loss Gain
   d. Equipment/SCALES
      i. Standing
      ii. Chair
      iii. Wheelchair
      iv. Lift

Objective 10: Obtain and transport specimens appropriately, following standard precautions and facility policies and procedures.

1. Urine Specimens
   a. Clean Catch Urine Specimen
      i. Procedure for collecting
      ii. Appropriate PPE
   b. Routine Urine Specimen
      i. Procedure for collecting
      ii. Appropriate PPE
   c. 24-Hour Urine Specimen
      i. Proper procedure for collecting
      ii. Appropriate PPE
      iii. Proper Storage
   d. Timed Urine Specimen
      i. Procedure for collecting
      ii. Appropriate PPE

2. Sputum Specimens
   a. Procedure for collecting
   b. Appropriate PPE

3. Stool Specimens
   a. Procedure for collecting
   b. Appropriate PPE

4. Privacy

5. Transporting Specimens
   a. Requisition and Labeling
   b. Biohazard bag
Objective 11: Provide appropriate care to the dying person, including postmortem care, while maintaining person’s dignity and following facility policies and procedures.

1. Terminal Illness
   a. Definition

2. Types of care
   a. Palliative
   b. Hospice

3. Factors affecting attitudes about death
   a. Experience
   b. Culture
   c. Religion
   d. Age

4. The 5 Stages of Dying
   a. Denial
   b. Anger
   c. Bargaining
   d. Depression
   e. Acceptance

5. Psychological, Social, and Spiritual Needs
   a. Physical Needs
   b. Vision, Hearing, and Speech
   c. Mouth, Nose, and Skin
   d. Elimination
   e. Comfort and Positioning
   f. The Person’s Environment

6. Family
   a. Psychological Effects

7. Legal Aspects
   a. Advance Directive
   b. Living Wills
   c. Durable Power of Attorney for Health Care
   d. “Do Not Resuscitate” Orders

8. Quality of Life
   a. Dying Patient’s Last Bill of Rights

9. Signs of Death
   a. Loss of movement, muscle tone, and sensations
   b. Slowing of GI functions
   c. Changes in vital signs
   d. Circulation fails
   e. Loss of consciousness

10. Doctor pronounces death

11. Postmortem Care
a. When to begin
b. Why it is done
c. Privacy, dignity, and respect
d. Rigor Mortis
e. Follow Standard Precautions and the Bloodborne Pathogen Standard
f. Applying a shroud

12. Autopsy
   a. No post-mortem care if autopsy will be performed
   b. Can be done by request of family or coroner/medical examiner

Objective 12: Provide care for resident receiving Oxygen treatment.

1. Oxygen Safety
2. Oxygen Devices
   a. Nasal cannula
   b. Simple face mask
   c. Oxygen tank
   d. Oxygen concentrator
3. Oxygen Transportation
4. Flow Rate
5. Oxygen Saturation and Pulse Oximetry
   a. Pulse ox procedure
   b. High
   c. Low
6. Oxygen Skin and Comfort Care

Objective 13: Students will be able to perform and assist nursing staff in an emergency situation.

1. Follow licensed staff instructions in an emergency situation
   a. Know emergency numbers used in facility
2. Myocardial Infarction
   a. Signs and symptoms
   b. Emergency Care
3. Stroke
   a. Signs and symptoms
   b. Emergency Care
4. Initiate CPR on resident
   a. Initiate EMS and CPR
   b. Verbalize compression rate and ratio
   c. Verbalize use of AED
5. Care of a hemorrhaging patient
   a. Define hemorrhage
      i. Internal bleeding
ii. External bleeding
   b. Direct pressure on wound
   c. Observations to be reported
6. Care of choking resident
   a. Recognize signs and symptoms of choking
   b. Differentiate between full and partial airway obstruction
   c. Abdominal and chest thrusts
   d. Care if resident becomes unresponsive
7. Provide assistance to resident who has fainting
   a. Care for resident who has fainted
   b. Care for resident who is about to faint
   c. Provide first aid to resident that has fainted
8. Provide assistance to a resident who is in shock
   a. Recognize signs and symptoms of shock
   b. Provide first aid to resident in shock
9. Anaphylaxis
   a. Recognize signs and symptoms
   b. Provide first aid to resident in anaphylaxis
10. Provide assistance to resident with burns
    a. Recognize types and degree of burns
    b. Provide first aid to burns

Objective 14: Students will be able to recognize and understand common diseases, conditions and care of resident/patient.
1. Able to describe normal vs. abnormal signs/symptoms in a patient
2. Report abnormal signs/symptoms to nurse
3. Recognize common diseases & conditions, signs/symptoms, and care of resident/patient.
   a. Diabetes
   b. Hypertension (HTN)/Hypotension
   c. Arthritis
   d. Cognitive Disorders
      i. Alzheimer's Disease (AD)
      ii. Dementia
   e. Circulatory/Cardiovascular Diseases
      i. Congestive Heart Failure (CHF)
      ii. Coronary Artery Disease (CAD)
   f. Parkinson's Disease
   g. Stroke
   h. Chronic Obstructive Pulmonary Disease (COPD)
   i. Cancer (CA)
   j. Gastrointestinal
      i. Constipation
ii. Diarrhea
iii. Fecal Impaction
iv. Gastroesophageal Reflux Disease
v. Nausea and Vomiting
vi. Hemorrhoids
k. Hearing (TBD)
l. Vision (TBD)
m. Sexually Transmitted Diseases (STD) (TBD)
n. Urinary and Kidney disorders
   i. Chronic Renal Failure
   ii. Kidney Stones
   iii. Urinary Tract Infection

Objective 15: Students will be able to prioritize order of care for residents with various needs.
1. Planning Tools
   a. Kardex
   b. Care plan
   c. Assignment sheet
   d. Nurse/CNA report
2. Life-threatening needs
3. Time Management
4. Planning work
   a. Patient/Resident Needs

STANDARD 3 25% of Exam Blueprint

◊ PERFORMING PERSONAL CARE SKILLS

Objective 1: Assess body alignment of resident
1. Understanding appropriate principals for correct body alignment
2. Knowledge of use of correct positioning / support aids / equipment
   a. positioning of pillows and supportive devices
   b. braces, splints, etc.
3. Understanding concepts of correctly positioning resident on side, back, and sitting position and etc.
4. Observe, report and record.

Objective 2: Give a resident a bed bath
1. Ability to read and follow care guidelines as per resident care plan.
2. Knowledge of appropriate technique and supplies need for bed bath and procedure (facility policy)
3. Ability to apply safety principals to bed bath procedure (i.e. water temperature, use of side rails)
a. Ranges average (110-115)
4. Knowledge of privacy practices
5. Ability to apply appropriate skin care practices
6. Standard Precautions/ Infection Control measures (i.e. eyes first, changing water, changing gloves, peri care last)
7. Observe, report and record.

Objective 3: Place alternating pressure mattress on bed
1. Ability to set up alternating pressure mattress as per manufacturer’s instructions.
2. Linens applied as per mattress instructions (i.e. bottom sheet, turn sheet)
3. Report and record (i.e. proper settings, etc.)
4. Observe Safety Measures / Standard Precautions

Objective 4: Apply heel and elbow protectors / hand rolls
1. Knowledge and ability to correctly recognize and apply heel and elbow protectors and hand rolls (as per facility guidelines or manufacturer’s instructions)
2. Ability to monitor skin condition

Objective 5: Assist resident in care of dentures
1. Knowledge and ability to provide appropriate denture care
2. Ability to apply appropriate safety measures during denture care (i.e. use of cool water, towel in bottom of sink, storing appropriately when not in use.)
3. Standard Precautions
4. Observe report and record (i.e. status of oral cavity, condition of dentures, fit of dentures, etc.)

Objective 6: Give back rub to resident
1. Knowledge of appropriate positioning for back rub.
2. Ability to apply appropriate technique
3. Ability to recognize restrictions and appropriate safety techniques for resident (i.e. whom cannot receive backrub, do not rub red areas)
4. Observe and report and record
5. Standard Precautions

Objective 7: Provide skin care to resident
1. Knowledge and ability to provide appropriate skin care techniques and principals (as per facility policy and procedure).
2. Ability to recognize when skin care is required.
3. Knowledge of appropriate product to use.
4. Ability to apply safety precautions
   a. Linen should be clean, dry and wrinkle free
b. Knowledge of pressure areas and importance of protecting those areas.

c. Do not massage reddened areas.

Objective 8: Assist resident in performing oral hygiene
1. Knowledge of appropriate supplies and technique.
2. Ability to position properly for comfort during oral care.
3. Ability to floss as per resident request or care plan
4. Standard Precautions
5. Observe, report and record

Objective 9: Administer oral hygiene for unconscious client
1. Knowledge of proper positioning.
2. Knowledge of appropriate equipment.
3. Ability to determine when oral hygiene is needed.

Objective 10: Assist resident in using toilet or bedside commode
1. Knowledge of appropriate transfer techniques as per resident care plan.
2. Knowledge of appropriate use and safety measures for gait/transfer belt, wheelchair, resident lift.
3. Ability to recognize different call signals (i.e. room, bathroom, shower)

Objective 11: Assist resident in using urinal
1. Knowledge of proper positioning as per care plan (i.e. standing, dangling, Fowlers position.)
2. Knowledge of infection control measures (i.e. empty promptly, use of standard precautions, appropriate handling and storage).
3. Ability to recognize, save, and report abnormal specimens.

Objective 12: Assist in resident using bedpan
1. Ability to choose appropriate bedpan (standard or fracture)
2. Knowledge of appropriate technique to position and remove bedpan.
3. Knowledge of infection control measures (i.e. use of standard precautions, disposal of contents and appropriate handling and storage).
4. Ability to recognize, save, and report abnormal specimens.

Objective 13: Shave or assist resident with shaving.
1. Knowledge of appropriate razor to use (safety or electric) as per care plan.
2. Knowledge of infection control measures of, (i.e. use of standard precautions, appropriate disposal or cleaning of razor).
3. Knowledge of appropriate shaving technique for use of safety razor.
4. Knowledge of appropriate shaving technique for electric razor.
5. Knowledge of safety measures used in shaving (i.e. prevention of nicks or cuts, electrical safety measures).

Objective 14: Shampoo hair
1. Knowledge of appropriate shampoo method (shower, sink, bed) as per care plan.
2. Knowledge of infection control measures (i.e. standard precautions).
3. Knowledge of technique for shampooing hair in shower, bed or sink.

Objective 15: Assist resident in grooming hair
1. Ability to recognize and report abnormal scalp conditions (i.e. alopecia, dandruff, pediculosis, scabies, scalp sores).
2. Knowledge of techniques used to comb, brush and remove tangles from resident's hair.
3. Understanding of age appropriate hair styles.

Objective 16: Provide appropriate care for toenails and fingernails
1. Knowledge of restrictions regarding nail care.
4. Knowledge of correct technique for care of toenails and fingernails.

Objective 17: Give or assist resident with bath or shower
1. Knowledge of correct water temperature for different baths (i.e. partial, complete, shower or tub).
2. Knowledge of appropriate equipment, technique and sequencing of steps for each type of bath.
3. Ability to recognize and report abnormal skin conditions.
4. Demonstrate understanding of resident's rights to privacy, comfort and safety during bathing procedure.
5. Knowledge and ability to complete post bathing assessment form.

Objective 18: Assist resident with other personal grooming
1. Assist resident with personal grooming preferences (i.e. makeup, wig, jewelry)

Objective 19: Give AM and PM care
1. Knowledge of care given at specific times.
2. Demonstrate appropriate use of standard precautions.

Objective 20: Feed or assist resident with eating
1. Knowledge of appropriate position during feeding (i.e. chair or bed).
2. Knowledge of level of assistance needed as per care plan.
3. Ability to correctly identify resident and validate diet.
4. Ability to monitor resident for chewing and swallowing difficulties.
5. Knowledge of appropriate feeding techniques.
6. Ability to recognize and respond to emergency situations.
Objective 21: Identify general / therapeutic diet
1. Knowledge of general and therapeutic diet types - inclusion and exclusions.

Objective 22: Distribute nourishment
1. Knowledge of facility's policy for distribution of nourishments.
2. Validate correct resident with correct nourishment.

Objective 23: Serve and collect meal tray
1. Knowledge of facility policies regarding serving and collecting meal trays.
2. Ability to identify resident and validate diet.
3. Knowledge of adaptive devices and level of assistance required.
4. Ability to calculate and record resident's fluid intake, percentage of meal consumed and calorie count if required.
5. Standard Precautions
6. Knowledge of facility policy regarding resident's in isolation.

Objective 24: Assist resident in dressing and undressing
1. Knowledge of resident's needed level of
2. Ability to assist with dressing and undressing an independent resident or one with impaired physical ability.
3. Demonstrates respect for personal choice and privacy
4. Ability to change hospital gown for resident with an IV
5. Ability to recognize and report changes or abnormal observations.

Objective 25: Care for incontinent resident.
1. Knowledge of techniques used in performing incontinence care (i.e. barrier cream, incontinence products, and cleansing agent)
2. Ability to perform bowel and bladder training as per resident's care plan.
3. Standard Precautions

Objective 26: Distribute drinking water
1. Knowledge of facility's policy of drinking water.

Objective 27: Encourage fluid intake
1. Knowledge of need for increased oral fluid intake
2. Ability to encourage resident's intake as per care plan

Objective 28: Administer Perineal Care
1. Knowledge of appropriate technique required for performing male or female perineal care.
2. Standard Precautions
3. Ability to determine when perineal care is required.
4. Ability to report abnormal observations made during perineal care.

Objective 29: Take resident to appointment within facility or accompany resident to an appointment outside the facility
1. Knowledge of facility policy and procedure for CNA scope of practice in this situation.
2. Ability to apply HIPPA guidelines in this situation.
3. Knowledge of resident’s ability (i.e. physical and mental ability).
4. Knowledge of what outcomes may come from appointment and what the role of CNA would be.

Objective 30: Implement Nursing Measures to Promote Comfort, Rest and Sleep
1. Ability to Identify the CNA role and scope of practice related to comfort, rest, sleep and pain.
2. Knowledge of facilities policy and procedures related to pain and the role of CNA and the tool the facility uses to assess pain.
3. Ability to implement the CNA measures in the care plan to meet the resident’s needs.
4. Identify factors and changes that are significant, and report and record the changes.

Objective 31: Provide Care for Hearing Aide
1. Knowledge of facility policy and procedure for the CNA role in use of the hearing aids.
2. Ability to apply manufacturer’s instructions and directions related to the equipment.
3. Ability to understand the purpose and function of hearing aids.

Objective 32: Provide Assistance for Visually Impaired
1. Knowledge of disorders and causes of the visual impairment for the residents
2. Ability to implement the steps on the care plan as related to the role of practice to the CNA.
3. Implement safety practices and policies as related to appropriate setting (i.e. home, long term care facility, hospital).
4. Knowledge of resident’s coping skills with disorder.

Objective 33: Provide care for eye glasses/contacts
1. Knowledge of facility policy and procedures for eyeglasses.
2. Knowledge of facility policy and procedures for CNA role with contact lenses.
3. Ability to implement manufacturer’s instructions and care for equipment (i.e. eyeglasses, contacts).

Objective 34: Provide care to resident’s cast or splint
1. Knowledge of facility and policy and procedures for each types of splint or cast device.
2. Ability to apply and remove different types of splints (if applicable) as per manufacturers guidelines and per care plan.
3. Correct positioning of body areas.
4. Observations to report and record (i.e. skin condition, positioning, schedules, tolerance, skin temperature of the splinted or casted extremity, a splint that is damaged or missing parts

Objective 35: Provide care for resident with fever
1. Knowledge of disorders or causes of fevers
2. Ability to take a temperature with appropriate equipment (i.e. glass thermometer, electronic, digital, tympanic, temporal)
3. Knowledge of documentation and reporting of fever (i.e. forms, graphs, abnormal per specific resident)
4. Knowledge of facility practices and treatments for residents with fever, take into consideration each resident’s care plan when necessary.
5. Correct use of facility based forms written or electronic

Objective 36: Provide Care for the Terminally Ill Resident
1. Knowledge of facility or healthcare providers policies and procedures of care of the resident prior to terminal illness, during and post.
2. Implementation of steps on care plan
3. Appropriate interactions with resident and family/or significant others (i.e. emotional, psychological, spiritual)
4. Identify signs and symptoms of approaching death.
5. Knowledge of documentation related to client with terminal illness and how to apply and practice and report and record related to this documentation (i.e. does resident have DNR, living will).

Objective 37: Assist with preoperative and postoperative care
1. Knowledge of facilities policies and procedures related to preoperative and postoperative care.
2. Ability to identify, report and record signs and symptoms after surgery within the scope of the CNA (i.e. vital signs, level of awareness, pain, ...)
3. Describe common fears and concerns of surgical clients.

STANDARD 4 25% of Exam Blueprint

糟糕 PerFORMING BASIC RESTORATIVE SKILLS

Objective 1: Orient visually impaired resident to environment
1. Understand communication techniques and utilization of techniques by resident (i.e. face to face, Braille, per care plan)
   a. Internally counting steps in resident's room and bathroom etc.
   b. Externally counting steps when going outside of the facility.
2. Knowledge and use of safety precautions (do not change furniture in room, do not leave room poor partially open)

Objective 2: Assist resident in sitting position
1. Understand and the ability to use good body mechanics (i.e. wide base of support, lifting with legs not back).
2. Understand and properly utilize equipment as per facility policy
3. Understand the process (raise head of the bed, level of assistance needed, communicating with the resident, number of people needed to perform task)
4. Ability to observe, report and record.
5. Appropriate use of standard precautions

Objective 3: Apply cold / warm compress / hot soak
1. Knowledge of the procedure (appropriate temperature, check site every five minutes, remove compresses / soak after 15-20 minutes, moist or dry applications, check care plan for specific instructions)
2. Knowledge of appropriate equipment required for cold/warm and hot soak.
3. Knowledge and understanding of appropriate use of cold/warm compresses and hot soak
4. Knowledge of application as per care plan / compress should cold/warm
5. Observe, report, and record (i.e. checking for signs of compromise)
6. Understand safety measures, privacy measures and standard precautions

Objective 4: Apply ice bag
1. Knowledge and appropriate use of ice bag.
2. Understand the procedure for application (check every 5 minutes, leave in place 15-20 minutes and monitor skin condition)
3. Understand safety measures, privacy measures, and standard precautions.
4. Observe, report and record.

Objective 5: Assist with whirlpool treatment / therapeutic bath (if not medicated) / or tepid bath
1. Knowledge and understanding of the need for whirlpool or therapeutic bath / tepid bath.
2. Knowledge of procedure and equipment (follow manufacturers direction if applicable, understand facility policy and procedures, water temperatures and follow care plan)
4. Ability to communicate the procedure to resident
5. Observe, report and record

Objective 6: Assist with dressing change
1. Knowledge of CNA scope of practice / facility policy and procedures for simple dressing changes.
2. Knowledge and ability to perform non-sterile dressing changes as per care plan (i.e. frequency of dressing changes, appropriate equipment and tape).
3. Observation, report and record.
4. Use of standard precautions (gloves, disposal of soiled dressings)

**Objective 7:** Use transfer/safety belt properly and to assist with ambulation

1. Knowledge of appropriate rules and technique (safety) for applying transfer / gait belt.
2. Knowledge of appropriate technique (safety) ambulating with a transfer / gait belt
3. Use of standard precautions
4. Observe, report and record.

**Objective 8:** Apply lotion (not medicated)

1. Check care plan for restrictions (i.e. not applying lotion between toes, not rubbing reddened skin)
2. Knowledge of procedure and ability to apply lotion
3. Standard Precautions
4. Observe report and record.

**Objective 9:** Apply anti-embolism elastic stockings

1. Knowledge of appropriate procedure and technique used to apply TED hose (knee high/thigh high)
2. Ability to observe and report signs and symptoms of inadequate circulation (pain, decrease or absence of pedal pulse, swelling and discoloration)

**Objective 10:** Assist resident with dangling standing & walking

1. Knowledge of procedure & ability needed to place resident in dangling position
2. Knowledge of procedure and ability needed to assist resident to stand
3. Knowledge of procedure and ability needed to assist resident with walking
4. Appropriate use of assistive devices if applicable
5. Observe, report & record
6. Standard precautions

**Objective 11:** Assist resident with using single tip & quad cane

1. Knowledge of procedure for correct placement (strong arm) for using cane
2. Knowledge of procedure for appropriate height for safety of resident using cane
3. Knowledge of procedure for feet sequence when using cane assistive device
4. Knowledge of procedure & location for CNA to stand during assisting resident with cane
5. Observe, report & record
6. Standard precautions

Objective 12: Assist resident using a walker
1. Knowledge of type of walker used by resident (as per care plan)
2. Knowledge of procedure for feet sequence when using walker
3. Knowledge of procedure for location for CNA to stand during assisting resident with walker
4. Knowledge procedure for appropriate height for safety of resident using walker
5. Observe, report & record
6. Standard precautions

Objective 13: Assist resident in using wheelchair
1. Knowledge of type of wheelchair used by resident (i.e. modified, specialized & use of foot plates as per care plan)
2. Knowledge of procedure for appropriate placement of wheelchair at bedside
3. Knowledge of appropriate transfer technique from bed / chair to wheelchair
4. Safety procedure for inspection of wheelchair prior to use / locking wheels prior to resident transfer / number of staff needed for safe transfer
5. Observe, report & record
6. Standard precautions

Objective 14: Transfer resident to beside commode / from bed to shower
1. Knowledge of appropriate procedure & equipment (bedside commode, shower chair / stretcher)
2. Knowledge of appropriate placement of bedside commode & shower chair (weak / strong side)
3. Knowledge of appropriate technique during transfer
4. Knowledge of appropriate foot wear during transfers
5. Observe, report & record
6. Appropriate safety measures, privacy measures & standard precautions

Objective 15: Apply brace & splint
1. Knowledge of procedure & equipment required (as per care plan & per facility policy)
2. Ability to assess skin prior to application
3. Knowledge to inspect brace & / or splint for function / wear & tear
4. Ability to apply brace and / or splint correctly according to care plan & manufacturer’s instruction
5. Knowledge & ability to explain to resident correct procedure
6. Observe, report & record
7. Safety and privacy measures / standard precautions
Objective 16: Transfer resident to & from wheelchair (ex: 1 person transfer / 2 person transfer)
1. Knowledge of procedure & appropriate equipment needed for transfer (i.e. ability to stand / resident unable to stand)
2. Knowledge & appropriate technique for dangling resident prior to transfer (ability to assess for dizziness / lightheadedness) & number of staff required for safe transfer
3. Knowledge of appropriate inspection of wheelchair / locking of wheels prior to transfer
4. Knowledge of appropriate foot wear during transfer
5. Knowledge of appropriate placement of gait belt / transfer technique using transfer / gait belt
6. Observe, report & record
7. Safety & privacy measures / standard precautions

Objective 17: Transport resident by wheelchair / stretcher
1. Knowledge of procedure and equipment for wheelchair / stretcher with appropriate transporting process (i.e. backing into elevators etc.)
2. Knowledge of appropriate number of staff required during transport
3. Knowledge of resident’s care plan & resident capabilities (i.e. isolation etc.)
4. Ability to support resident’s rights & safety / observe & report / standard precaution

Objective 18: Transport resident using mechanical lift
1. Knowledge of facility policy & manufacturer’s instruction for mechanical lifts
2. Knowledge of equipment & procedure & number of staff required for safe transport
3. Knowledge of resident’s care plan
4. Ability to assess resident’s level of understanding & mobility
5. Observe, report & record
6. Safety & privacy measures / standard precautions

Objective 19: Move resident in bed using lift sheet
1. Knowledge of correct procedure for lifting, moving techniques (ergonomics)
2. Ability to assess need for assistance
3. Observe, report & record
4. Safety & privacy measures / standard precautions

Objective 20: Assist resident in remaining mobile with exercise / active & active assistive range of motion
1. Knowledge of procedure for range of motion exercises
2. Knowledge of resident’s care plan (i.e. joint, reps, frequency, type of ROM)
3. Ability to assess change in resident’s condition during activity (i.e. tolerance, limitations, complaints of discomfort)
4. Observe, report & record
5. Safety & privacy measures / standard precautions

Objective 21: Assist resident with passive range of motion
1. Knowledge of proper procedure for passive range of motion
2. Knowledge of proper body mechanics used during passive range of motion
3. Ability to differentiate different types of range of motion / resident level of participation
4. Ability to identify restrictions for exercise regime (i.e. Care plan / assignment sheet)
5. Ability to differentiate different types of joint movements, terminology (i.e. abduction /adduction etc.)
6. Ability to practice specific concepts of safety, comfort during PROM (i.e. support extremity, do not force the joint, do not take to point of pain etc.)
7. Ability to explain PROM to resident / family
8. Observe, report & record
9. Safety & privacy measures / standard precautions

Objective 22: Place footboard or over bed cradle on bed
1. Knowledge of specific types of equipment as per facility policy & / or manufacturer's instructions
2. Ability to properly align feet against the footboard
3. Ability to appropriately use equipment based on resident’s care plan
4. Observe, report & record
5. Safety and privacy measures / standard precautions

Objective 23: Position the resident / turn & position resident
1. Knowledge of specific type of equipment / bed positions / chair positions
2. Ability to properly position resident in bed or chair
3. Ability to apply appropriate safety guidelines (i.e. body mechanics, equipment, level of assistance required)
4. Ability to differentiate & understand various bed / chair positions (i.e. fowlers, supine, etc.)
5. Understand need & ability to turn resident every 2 hours or as specified in care plan
6. Ability to interpret resident’s care plan for specific positioning needs
7. Ability to assess resident for comfort / physical well being
8. Observe, report & record
9. Safety (number of staff required for safe lifting & positioning) & privacy measures / standard precautions.

Objective 24: Move resident between stretcher and bed using three person lift

1. Ability to move resident between stretcher & bed using 3 person transfer technique
2. Ability to apply safety & comfort measures during transfer (i.e. wheels locked, staff in charge of counting etc.)
3. Knowledge of appropriate equipment used as per facility policy & procedure and manufacturer’s guidelines
4. Observe, report & record
5. Privacy measures / standard precautions

Objective 25: Assist resident in bladder & bowel training

1. Knowledge and ability to apply concepts & practices of bowel & bladder training (per care plan for frequency)
2. Ability to differentiate type of bladder / bowel training programs (i.e. voiding vs indwelling catheter)
3. Ability to use appropriate equipment related to specific bladder / bowel training programs
4. Ability to communicate program to resident / family
5. Observe, report & record
6. Safety & privacy measures / standard precautions

Objective 26: Logroll resident

1. Knowledge of procedure for logrolling resident (i.e. facility policy & procedure)
2. Knowledge of specific residents that require log rolling
3. Knowledge of specific concepts (i.e. resident moves all in 1 unit)
4. Ability to apply proper body alignment & safety techniques during log rolling (i.e. post spinal surgery, cardiac, arthritis)
5. Ability to communicate process / procedure to the resident
6. Observe, report & record
7. Safety & privacy measures / standard precautions

Objective 27: Apply arm sling

1. Knowledge to apply arm sling as per manufacturer’s instructions
2. Ability to follow resident’s care plan for use of arm sling
3. Observe, report & record
4. Safety & privacy measures / standard precaution

STANDARD 5 5% of Exam Blueprint

◊ PROVIDING MENTAL HEALTH AND SOCIAL SERVICES NEEDS
Objective 1: Student will provide care to resident with different levels of cognitive function.
1. Observe and report resident's level of cognitive function (orientation regarding person, place, and time).
   a. Define and understand delirium and confusion
   b. Define and understand dementia
      i. Vascular dementia
      ii. Alzheimer's Disease
   c. Define behaviors and care associated with dementia
      i. Wandering
      ii. Delusions/hallucinations
      iii. Catastrophic reactions
      iv. Sun downing
      v. Agitation and aggression
      vi. Repetitive behavior
2. Differentiate between reality orientation and validation therapy.
3. Discuss techniques when applying validation therapy and reality orientation.
   a. Validation therapy
      i. Do not attempt to reorient
      ii. Redirect conversations as needed
      iii. Provide reassurance
   b. Reality orientation
      i. Provide memory board
      ii. Reorient as needed
      iii. Use calm voice and touch

Objective 2: Students will provide emotional and spiritual support/care for residents and their families.
1. Help patient/resident/family explore their feelings and thoughts
2. Respecting cultural and religious differences
3. Therapeutic communication
   a. Active listening
   b. Appropriate touch

Objective 3: Student will follow recreation/activity plan.
1. Direct resident to recreational activities
   a. Promote healthy living and independence
2. Assist resident in group or individual activities
   a. Activity director plans, organizes and conducts activities
   b. Calendar of activities is posted with community events in facility

Objective 4: Orient resident and family to facility and room: Students will orient resident and family to the facility and room while maintaining OBRA guidelines and facility policies.
1. Facility
   a. General rules and regulations
   b. Visiting hours
   c. Telephone use
d. Dining services

e. Special services
   i. Rehabilitative services
   ii. Beauty Shop
   iii. Spiritual services
   iv. Daily activity offerings

f. Staff
   i. Introduce staff on duty assigned to resident

g. Ombudsman Program
   i. Purposes of program
      1. Abuse hotline
      2. Complaints

2. Social Services
   a. Financial planning
   b. Room changes
   c. Family issues

3. Resident Room
   a. Bed operation
   b. The call/intercom system in the room and bathroom
   c. Controls for the television/ radio and lights
   d. Over bed table and bedside stand
   e. Closet and drawer space
   f. Bathroom
   g. Bathing
   h. Valuables storage with security
   i. Introduction of roommate if in semi-private room

STANDARD 6

PROVIDING RESIDENT’S RIGHTS

Objective 1: Students will maintain residents right to privacy, confidentiality and care of residents’ belongings along with demonstrating professional ethics and behaviors.

1. Define HIPPA
   a. Discuss when a CNA should provide privacy to the resident
      i. Personal care
      ii. Medical record
   b. Authorized users
   c. Patient and/or family request
   d. Authorized staff
   iii. Telephone/mail

2. Comply with all HIPPA Guidelines
   a. sharing of personal information with others
   b. photographs
   c. computer usage, including password
   d. General guidelines, policies, procedures to maintain confidentiality

3. Care for personal belongings of resident
   a. Discuss CNA’s role in handling a residents’ personal belongings
      i. Admission
ii. Discharge
iii. Inventory/Labeling items
iv. Routine daily activities
   b. Discuss CNA’s role with safety issues of belongings
4. Maintain proper work ethics for professional presentation
   a. appearance/grooming
   b. hygiene/health
   c. language and communication
   d. behaviors and mannerisms
   e. attendance and punctuality
5. Demonstrate qualities for ethical conduct toward residents, co-workers and visitors.
   a. empathy
   b. courtesy
   c. honesty
   d. respect
   e. dependability
   f. cheerfulness

Objective 2: Students will provide safe and appropriate care, keeping resident and resident’s property free from any type of mistreatment, abuse or neglect at all times.
1. Define types of elder abuse and describe signs and symptoms of each
   a. Physical
   b. Neglect
   c. Verbal
   d. Involuntary Seclusion
   e. Financial
      i. Exploitation
      ii. Misappropriation
   f. Emotional
   g. Sexual
   h. Abandonment
2. Reporting of abuse
3. Define Vulnerable adults
4. OBRA Requirements if abuse is suspected
5. Property/belongings

Objective 3: Student will maintain resident’s right to quality care and assist resident in making personal choices at all times.
1. Address resident by the name of his/her choice
2. Assist resident in personal communication, as applicable
   a. Letter writing
   b. Phone calls
   c. Electronic (e-mail, texts, etc.)
3. Assist resident in exercising citizenship rights
4. Self-determination in personal choices
   a. Clothing
   b. Activities
   c. Food
   d. Spiritual/Religious beliefs and practices
Objective 4: Student will maintain the residents right to privacy and care of personal belongings

1. Care of a resident’s right to privacy
   a. Define HIPAA
   b. Discuss when a CNA should provide privacy to the resident
      i. Personal care
      ii. Medical record
      iii. Telephone/mail

2. Care for personal belongings of resident (cross-reference)
   a. Discuss CNA’s role in handling a residents’ personal belongings
      i. Admission
      ii. Discharge
      iii. Inventory/Labeling items
      iv. Routine daily activities
   b. Discuss CNA’s role with safety issues of belongings

Objective 5: Students will have the understanding of how to assist with validation for dementia patients

1. Validation therapy
   a. Don’t attempt to correct a person or to bring them back to reality.
   b. Caregivers need to listen

2. Do not argue with resident/patient
3. Reassure patient
4. Eliminate unneeded noises and distractions
5. Use calm touch