

NEW JERSEY CURRICULUM
FOR NURSE AIDE PERSONNEL
IN LONG-TERM CARE FACILITIES

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PROCESS

The Nurse Aide Curriculum Advisory Task Force, comprised of representatives from the New Jersey State Department of Health, the New Jersey State Department of Education, the New Jersey State Board of Nursing, providers of long-term care, vocational schools, comprehensive high schools, and community colleges, was convened in the Spring of 1994. The Task Force activities included:

1. Reaffirming of the regulation requiring that the nurse aide in the long-term care setting complete a training course to fulfill the requirements defined by the Omnibus Budget Reconciliation Act of 1987 (OBRA) and implemented by the New Jersey State Department of Health.
2. Reviewing the revised "New Jersey Curriculum for Nurse Aide Personnel in Long-Term Care Facilities" which was developed under the supervision of the Nurse Aide Certification Program, New Jersey State Department of Health.
3. Reviewing activities and programs within the State of New Jersey and in other States.
4. Identifying the nature, extent, and characteristics of the problems involved in nurse aide training with the initial 1986 curriculum and determining methods to alleviate the identified areas of concern.
5. Establishing a framework for dissemination of educational standards and training the instructors through workshops and the use of the monitoring process.

The purpose of the nurse aide competency evaluation is to assure that individuals who provide direct care services to residents in Long-Term Care Facilities (LTCFs) have the basic knowledge and skills needed to perform their duties. The certification of nurse aides in LTCFs requires that the candidate successfully complete a New Jersey State Department of Health (NJSDOH) approved training program and pass a competency evaluation consisting of a Skills and Written/Oral Examination.

Since 1987, Assessment Systems, Inc. (ASI), an independent testing company under contract with the New Jersey State Department of Health, has provided support in the development, administration, scoring, and reporting of results of the Nurse Aide in Long-Term Care Facilities Competency Evaluation.

PHILOSOPHY

The New Jersey State Department of Health believes that all residents in long term care facilities are entitled to receive an optimum level of health and personal care services. The New Jersey Curriculum for Nurse Aide Personnel is predicated on that belief and further embodies the concept of Human Caring. Human Caring is viewed as respect for the dignity, worth and uniqueness of the resident, other staff and self and facilitates the protection, maintenance and restoration of the resident. Excellence in the basic care given to each resident requires skill, information, commitment, compassion, respect and consideration. The concept of Human Caring encompasses the roles of the learner, caregiver and humanitarian.

The process of Human Caring becomes the goal of the nurse aide caregiver who is responsible for the outcome of "hands-on" practice and who should strive to contribute to the highest practicable biological, psychological, social, cultural, spiritual, and intellectual function of the resident.

The foundation for learning and the basic practice of the caregiver skill is based on understanding by the nurse aide of why such care is needed, which is the protection of the rights, safety and welfare of each resident.

It is the expectation by the Department that implementation of this curriculum will reflect the preparation of a more caring nurse aide and result in the provision of an enhanced quality of care and quality of life to the residents of LTCFs in New-Jersey.

COURSE OVERVIEW

Title:

New Jersey Curriculum for Nurse Aide Personnel in Long-Term Care Facilities.

Hours:

A Department approved training course for nurse aides shall consist of 90 hours of training. This shall include 50 hours of classroom instruction and 40 hours of clinical experience in a New Jersey licensed long-term care facility. Federal Regulations require at least a total of 16 hours of training in the areas of communication and interpersonal skills, infection control, promoting residents' independence and respecting residents' rights, safety/emergency procedures including the Heimlich maneuver, be taught to the student prior to any direct contact with a resident. The New Jersey curriculum requires completion of Modules I and II prior to giving physical care to residents. While the modules shall be presented in sequence, the lessons within each module may be re-ordered to maximize the teaching process.

Purpose of Course:

The purpose of the Nurse Aide in Long-Term Care Facilities Course is to:

1. Provide the caregiver with the basic nurse aide knowledge and skills needed to care for residents of long-term care facilities.
2. Prepare the nurse aide to assume the responsibilities of a trained caregiver.

Course Requirements:

1. The student to instructor ratio for classroom instruction shall not exceed a ratio of twenty (20) students to one (1) instructor.
2. The student to instructor ratio for clinical instruction shall not exceed a ratio of ten (10) students to one (1) instructor.
3. Each student shall be under the direct supervision of the registered professional nurse instructor at all times when providing resident care as part of the student's clinical experience in the LTCF. The registered professional nurse instructor shall be responsible for evaluating the student's classroom and clinical performance.
4. The nurse instructor shall be responsible for, but not limited to, the following:
 - a. Developing a lesson plan for each lesson in the curriculum. Each lesson plan shall state, at a minimum, the following:
 - (1) The behavioral objective(s) of the lesson as stated in the curriculum;

- (2) The content of the lesson;
 - (3) A description of clinical activities for each lesson, consistent with the objectives in the curriculum;
 - (4) The hours of instruction;
 - (5) Method(s) of presentation and teacher strategies; and
 - (6) Method(s) for evaluation of students with respect to their classroom and clinical performance in the LTCF.
- b. Developing and implementing criteria, related to curricular objectives, for evaluating the classroom and clinical performance of students; and
 - c. Selecting residents for clinical experience and directly supervising the nurse aide student.
 - d. Developing and implementing criteria to determine whether a student has satisfactorily completed a training course.
5. The nurse aide training and evaluation program must be conducted to ensure that each nurse aide student, at a minimum, is able to demonstrate competencies in the basic skills contained in the Content Map. The Content Map throughout contains integrated content threads in the areas of Philosophy of Long Term Care, Resident Rights, Infection Control and Safety. The content threads of the core curriculum are to be emphasized throughout your classroom and clinical instruction.
 6. The LTCF clinical site and classroom laboratory is the preferred site for the teaching of basic care skills, some of which are identified under "Selected Learning Experiences." Instructor use of Pre and Post Conferences on the clinical experience days will assist the student to identify and discuss the related content threads for the care of the resident during the clinical experience.
 7. The LTCF or educational institution conducting a training program shall maintain on file a copy of the lesson plans for the course.

Suggested Teaching Strategies: (Adjunct to Instructor)

Audiovisual
Film
Slides
Videotapes
Chalkboard, Flip Chart, Overhead Projector
Case Studies
Clinical Experience
Computer Software (if available)
Demonstration
Field Visit
Flash Cards
Independent Study
Panel of Experts
Pre-Test/Post-Test
Primary Lecture/Discussion
Return Demonstration
Role Playing
Sensitivity Training

Recommended Instructional Supplies and Equipment:

Bath basin	Measuring container - 500cc minimum
Bath blanket	Mechanical lift
Bath thermometer	Oral mercury thermometer
Bath towel	Orangewood stick
Bed with side rails	Privacy curtain or screen
Bedpan/urinal	Protective/positioning devices
Bedside chair/table/overbed table	Postmortem pack
Catheter and reservoir bag	Rectal mercury thermometer
Clothing protector	Restorative feeding devices
Comb	Scissors, clippers, file
Container for used thermometers	Set of linens
Continent brief	Shower cap
Dentures	Signal device
Denture cleanser/toothpaste	Skin lotion
Denture cup	Soap
Disposable gloves and masks	Soiled linen hamper
Electric or safety razor/shaving cream/lotion	Standing scale - manual or electronic
Emesis basin	Tissues
Foot/bed cradle	Toilet/commode
Footwear-non-skid	Toilet tissue
Full meal tray - which includes cereal, toast, juice, hot beverage, milk, condiments, utensils, napkins	Toothbrush or swabs
Goggles	Walker
Hair brush	Washcloths
Hospital gown	Washing facilities - sink with running water, paper towels, soap/skin cleanser, wastebasket
Isolation bags	Watch with second hand
Lubricant for thermometer	Waterproof pad
Make-up	Wheelchair

Clinical Facilities:

Course approval forms must include the signature and title of the long-term care facility administrator for any course which will take place in his/her facility. Course approval forms for courses which are sponsored by a private school, community college or vocational school must include the signature of the head of the school AND the long-term care facility administrator.

Federal regulations require that no clinical laboratory experience be offered by a Long Term Care Facility which has current Level A Federal deficiencies.

Textbook(s) and Educational Materials:

The State of New Jersey does not require a specific textbook to be used for the nurse aide program. Textbook(s) and educational materials should be reviewed by the designated personnel of the program or Director of Nursing with the teaching staff instructor(s) and evaluator(s).

Selected References and Resources:

Individual programs, schools and facilities should have an on-going acquisition of appropriate reference books and learning aids. A current resource and reference listing can be found in Appendix B.

Student Records and Attendance:

- (a) Each LTCF or educational institution which conducts a training program shall establish a student record for each student. The student record shall include, at a minimum, the following:
 1. The beginning and ending dates of the training course;
 2. An attendance record;
 3. A signed Skills Competency Check List; and
 4. The instructor's evaluation of the student's classroom performance and clinical performance in the facility.
- (b) The facility shall retain the records specified at (a)1, 2, and 4 above for at least four years. (N.J.A.C. 8:39-43.8(b))
- (c) The facility or educational institution conducting a training program shall ensure that a student who is absent receives a reasonable and timely opportunity to obtain the classroom and/or clinical instruction missed. A missed classroom lesson(s) shall be

- made up prior to the student participating in the clinical experience associated with that lesson(s)
- (d) If a nurse aide training and competency evaluation program is terminated but the facility or educational institution continues to operate, the facility or educational institution shall assume responsibility for the records of students and graduates. The Department shall be advised of the arrangements made to safeguard the records.
 - (e) If a nurse aide training and competency evaluation program is terminated and the facility or educational institution ceases to operate, the records of students and graduates shall be transferred to an agency acceptable to the Department.
 - (f) Student records and attendance are to be completed in a timely manner and no later than the last day of course.

Instructor/Evaluator Requirements:

The nurseinstructor/evaluator for this training course must be a registered professional nurse currently licensed by the New Jersey State Board of Nursing with a minimum of three years of full-time, or full-time equivalent, clinical experience in a health care facility. This clinical experience must include at least one year of full-time, or full-time equivalent, experience in a long-termcare facility within the five years immediately preceding submission of the resume to the Nurse Aide Program for approval.

In addition to meeting the above requirement, an instructor/evaluator must have attended an approvedDepartment of Health Nurse Instructor/Evaluator Workshop. Any instructor teaching in a nurse aide program which is approved by theDepartment of Education must meet the regulations of same.

An approved training program must maintain a copyof the instructor/evaluator resume on file.

Supplemental Instructor(s) Requirements:

Pursuant to federal requirements, Section 483.152a)(5)(iv), invited speakers should have expertise in the area.

Training Program Evaluation:

- (a) The facility or educational institution conduing a training program shall develop, implement, and document a process for evaluating the effectiveness of the training program. The evaluation process shall include,at a minimum, the following:
 1. Assignment of responsibility for the evalution process;

2. An annual written evaluation report, including findings, conclusions, and recommendations;
 3. A written evaluation by the facility or educational institution of instructor(s)/evaluator(s) performance;
 4. A written evaluation by each student of the training program; and
 5. Statistical data, which shall be maintained on file in the facility or educational institution. The statistical data shall include, at a minimum, the following for each course:
 - i. Beginning and ending dates;
 - ii. Number of students enrolled;
 - iii. Number and percentage of students who satisfactorily completed the course;
 - iv. Number and percentage of students who failed the course;
 - v. Number and percentage of students who passed the New Jersey Nurse Aide Competency Evaluation Program, including written/oral and skills.
 - vi. Number and percentage of students who failed the New Jersey Nurse Aide Competency Evaluation Program, including written/oral and skills.
- (b) The facility or training program shall retain all evaluation reports for at least three years and shall submit a report to the Department upon request.

Exemptions for the Training Course and Skills Evaluation:

The following persons may take the Department's written/oral competency examination without first completing a nurse aide training course and clinical skills evaluation approved in accordance with N.J.A.C. 8:39-43:

1. Student nurses or graduate nurses pending licensure who submit evidence of successful completion of a course in the fundamentals of nursing;
2. Persons who submit evidence of the successful completion of a course in the fundamentals of nursing within the 12 months immediately preceding application to take the written/oral competency examination;
3. Persons certified as a nurse aide in long-term care in another state by a state

governmental agency and listed on that state's nurse aide registry, who do not meet the requirements for equivalency specified at N.J.A.C. 8:39-43.18; and

4. Persons who have had training and experience as a nurse aide in a military service, equivalent to that of a nurse aide.

End of Course Objectives:

The student will be able to:

1. Utilize the required knowledge and skills to practice beginning level competencies for direct resident care under the supervision of licensed nursing staff.
2. Apply communication principles when interacting with residents, peers and other health team members/providers.
3. Demonstrate respect for the dignity, worth and uniqueness of the resident, other staff and self.
4. Accept responsibility for the effectiveness of his/her own direct resident care.
5. Identify the qualities required of a nurse aide caregiver.
6. Consider from a caring perspective the residents' beliefs, interests and needs at all times.
7. Perform protective, maintenance and restorative interventions with residents.
8. Utilize problem solving steps to meet the needs of the resident as part of the resident plan of care.
9. Integrate knowledge into practice decisions that include values and the ethical, moral and legal aspects of performance.
10. Integrate the concept of caring into his/her practice decisions.

EVALUATION TOOL

Development of a Quality Assurance Evaluation Tool:

A quality assurance tool provides instructors with the opportunity to systematically assess outcomes through the competency evaluation process. Activities related to evaluation provide for input from instructors, administrators, staff, students, CNA graduates and employers. A systematic evaluation process provides information for decision-making by the interested parties for 1) allocation of resources and 2) long-range planning.

Purpose

The purposes of the overall evaluation tool are to:

1. Evaluate the components of the course based on representative input.
2. Provide a systematic and organized method of evaluation.
3. Refine instructor teaching strategies.
4. Improve the quality of resident care.

SKILLS EVALUATION PROCESS

The instructor is responsible to oversee the satisfactory student performance of basic nurse aide clinical skills before the completion of the course. The student is required to have a skills competency checklist available at all times during the course for appropriate sign-off by the instructor observing the student performance (see Appendix C). When a skill is first demonstrated the instructor shall date and initial the appropriate space on Column I of the Skills Competency Checklist. When the student satisfactorily performs the procedure in the classroom under the direct supervision of the instructor, the instructor writes the date in the second column and initials. Onsite observation of the direct care to a resident when the student satisfactorily performs the skill under direct observation of the instructor is documented in the third column of the form with both instructor initials and date passed. Sign-offs of satisfactory performance must be done on the same day as the instructor observation. A copy of the form shall be part of the student record. The completed form must be signed, dated and graded Pass/Fail. If the student received a quantitative grade for the skills competency checklist for clinical performance skills, the Nurse Aide Training Competency Evaluation Program must provide criteria for how the final grade was determined.

MODULE I: CORE CURRICULUM FOR NURSE AIDE PERSONNEL IN LONG-TERM CARE FACILITIES (16 HOURS)

Respect of a resident's right to privacy, dignity and Independence, promotion of a resident's safety, and strict adherence to the practice of universal precautions are integral components of each objective in this curriculum and shall be reflected in the teachings throughout this curriculum.

REQUIRED STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to discuss the role of Federal and State authorities in long-term care facilities.</p> <p>The student will be able to define the job duties for a nurse aide within the total organizational framework.</p> <p>The student will be able to identify ways of encouraging independence and choice for a resident.</p> <p>The student will be able to identify ways of providing privacy to a resident.</p>	<p>A. Introduction to the Concept of Long-Term Care</p> <ol style="list-style-type: none"> 1. Federal Requirement - (OBRA) 2. New Jersey State Licensure Standards (N.J.A.C. 8:39) 3. Office of the Ombudsman for Institutionalized Elderly 4. Medicare/Medicaid Eligibility 5. Facility Organizational Chart <p>B. Job Descriptions</p> <p>b. Personnel Policies</p> <p>B. Responsibilities of the Nurse Aide</p> <ol style="list-style-type: none"> 1. Resident behaviors to be encouraged <ol style="list-style-type: none"> a. Independence b. Choice c. Privacy 	<p>Lecture/Discussion</p> <p>Share Nurse Aide's Ideas and beliefs related to the purpose of long-term care facilities</p> <p>Review a facility organizational chart</p> <p>Panel - Interdisciplinary team members</p> <p>Role play: Students will be denied Independence, choice, privacy and then discuss their feelings in relation to their deprivation</p> <p>Self-Assessment for the Nurse Aide <ol style="list-style-type: none"> a. Need for objectivity and self-review b. Use of problem solving c. Time management </p>

MODULE I

REQUIRED STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to describe the losses experienced by residents in a long-term care facility.</p> <p>The student will be able to discuss how to provide physical and emotional assistance during a resident transfer to a new location.</p> <p>The student will be able to utilize the care plan as a method to obtain information about the resident to form the basis for providing care.</p>	<ul style="list-style-type: none">d. Stress reductione. Safety-work related injury and illnessf. Grief responses <p>3. Effect of Institutionalization</p> <ul style="list-style-type: none">a. Losses experienced by resident<ul style="list-style-type: none">1. Identity2. Independence3. Mobility4. Personal possessions5. Real world life experiencesb. Transferring a resident from one unit to another<ul style="list-style-type: none">1. Reasons for a transfer2. Reassurance3. Protection of belongingsc. Resident Plan of Care (MDS)d. Importance of customary daily routinee. Personal grooming and dress code	<p>Participate in a simulated admission procedure. Role play: A resident roommate, family member and nurse aide</p> <p>Prepare a list of things to take with them into the LTCF</p> <p>Discussion: Placement of their loved ones into a LTCF</p> <p>Review a sample MDS form</p> <p>Supplemental Instructor: MDS Coordinator</p>

MODULE I

REQUIRED STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to list at least twelve rights of residents in LTCF.</p> <p>The student will be able to describe how and to whom an identified resident abuse situation is reported.</p>	<p>7. Promote Resident Rights</p> <p>a. Prevention of Resident Abuse</p> <ul style="list-style-type: none"> 1. Reporting situations 2. Reporting process <p>3. Legal findings/outcomes</p> <p>4. Abuse Registry</p> <p>b. Resolution of Resident Grievances and Disputes</p> <ul style="list-style-type: none"> 1. One to One 2. Group <p>c. Care and Security of Personal Possessions</p> <ul style="list-style-type: none"> 1. Facility policy/procedures 2. Misappropriation of resident property 	<p>Handout Resident Rights</p> <p>Attend Resident Council Meeting, If pre-arranged</p> <p>Share experiences where the student observed illegal or unethical conduct as part of a life experience and the consequences, if known</p> <p>Scenarios of incidents where a nurse aide may become the victim of libel or slander or perform same</p> <p>Review Valuables List</p> <p>Review marking/labeling material</p>

MODULE I

REQUIRED STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to identify information that should remain confidential.</p> <p>The student will be able to demonstrate verbal and non-verbal ways of communicating effectively with residents.</p> <p>The student will be able to discuss the care of the resident with eye glasses.</p>	<p>C. Communication and Interpersonal Skills</p> <ol style="list-style-type: none">1. Elements of a conversation2. Confidentiality<ol style="list-style-type: none">a. HIV+ Resultsb. Sensory deficits which affect the communication process3. Verbal and non-verbal communication<ol style="list-style-type: none">a. Voice toneb. Body language4. Communication techniques with the visually impaired resident<ol style="list-style-type: none">a. Repair/replacement of eye glasses	<p>Handout or review of definitions Pairs of students to practice, as speaker and as listener</p> <p>Handout of listening techniques Interview an alert resident</p> <p>Discuss examples of confidential Information</p> <p>Sensitivity Training - Impaired Vision, Impaired Hearing, Loss of Speech (Role play)</p> <p>Role play: communication with resident</p> <p>Review use of signal light/call bell and how and why it is used</p> <p>Demonstration: Call system on clinical unit.</p> <p>Observe time frame in which call system is responded to by staff</p> <p>Practice techniques to be used when interacting with a visually impaired resident 1) exchanging information, 2) assisting with walking, 3) giving care, 4) meal preparation, and 5) safety</p> <p>Demonstration: Care of eyeglasses</p>

MODULE I

REQUIRED STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to demonstrate skills for communicating effectively with a resident with impaired hearing.</p> <p>The student will be able to discuss the care of the resident with a hearing aid.</p>	<p>6. Communication techniques with the hearing Impaired resident</p> <ol style="list-style-type: none">Repair/replacement of hearing aidInsertion of battery <p>7. Communication techniques with the speech Impaired resident</p> <p>D. Resident/Staff Infection Control</p> <ol style="list-style-type: none">Prevention of spread <ol style="list-style-type: none">Effective handwashingUniversal Precautions <p>1. Personal Protective Equipment (PPE)</p> <ol style="list-style-type: none">Resident cleanlinessCare of linens/clothingProper disposal of waste products/body fluids	<p>Supplemental Instructor: Hearing Specialist, Speech Therapist</p> <p>Role play: Being visually and hearing impaired</p> <p>Demonstration: Care and proper insertion of a hearing aid</p> <p>Use of writing board and picture board</p> <p>Videotape: Infection Control Techniques (Universal precautions)</p> <p>Demonstration: Handwashing</p> <p>Student will wash hands and use PPE</p> <p>Perform proper handwashing skill and linen handling</p>

MODULE I

REQUIRED STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to discuss effective ways to prevent the spread of an infectious disease.</p> <p>The student will be able to demonstrate Infection precautions for infectious disease.</p>	<ol style="list-style-type: none">1. Safe storage of cleaning and disinfecting agents <p>E. Infection Precautions</p> <ol style="list-style-type: none">1. Personal protective equipment<ol style="list-style-type: none">a. Use of gown, gloves, mask, goggles2. Type of Infection Precautions<ol style="list-style-type: none">a. Universalb. Respiratoryc. Strict3. Disposal of contaminated items	<p>Discussion: Proper storage of cleaning agents</p> <p>Demonstration: Proper techniques for cleaning a blood spill</p> <p>Demonstration: Cleaning bedpan/urinal</p> <p>Practice, in pairs - use of gown/gloves/mask/goggles</p> <p>Demonstration: Put on personal protective equipment</p> <p>Demonstration: Proper disposal of infectious waste</p>

MODULE I

REQUIRED STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to describe the responsibilities of the housekeeping and maintenance staff in maintaining an orderly, sanitary, and safe environment for the residents.</p>	<p>4. Care of glassware, plastic, metal and rubber items 5. Care of soiled linen and clothes 6. Responsibilities of Various Staff Members for Cleanliness and Sanitation</p>	<p>Definitions Supplemental Instructor: Quality Assurance</p>

MODULE I

REQUIRED STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to list at least two ways to prevent hypothermia.</p> <p>The student will be able to describe a resident unit.</p>	<p>3. Humidity</p> <p>4. Light</p> <p>5. Public address system</p> <p>I. The Resident Environment</p> <p>1. Resident Unit</p> <ul style="list-style-type: none">a. Description and arrangement of unitb. Personal care items <p>2. Resident preferences</p> <ul style="list-style-type: none">a. Homelike atmosphereb. Hoarding tendenciesc. Consent when rearranging room, storing possession, and discarding items <p>3. Bathrooms</p> <ul style="list-style-type: none">a. Same sex or co-habitant use <p>4. Resident equipment and use (call signal, bed rails, gatch handle, lamps, overbed table etc.)</p> <ul style="list-style-type: none">a. Defective or missing equipment <p>J. Comfort and safety in bed</p> <ul style="list-style-type: none">1. Types of beds - manual, electric, special2. Safety rules with beds	<p>Tour resident unit, with permission of resident, and assess the unit for appropriateness</p> <p>Discussion: Homelike Environment</p> <p>Locate the bathroom in relationship to bedroom and identify resident(s) using the room</p> <p>Identify and record repairs needed and report to licensed charge nurse</p> <p>Demonstration: Equipment</p> <p>Operate siderails, electrical bed or gatch bed</p>

MODULE I

REQUIRED STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to demonstrate skill in making an unoccupied bed.</p> <p>The student will be able to discuss three rules of safety to prevent accidents.</p> <p>The student will be able to identify safety hazards.</p> <p>The student will be able to state at least three accidents that the elderly experience most frequently.</p> <p>The student will be able to describe how each accident may be avoided.</p> <p>The student will be able to discuss the importance of adequate supervision and assistive devices to prevent accidents.</p> <p>The student will be able to demonstrate methods of protecting residents from injury.</p>	<p>K. Making an unoccupied bed</p> <ol style="list-style-type: none">1. Need for a wrinkle-free bed2. Organization of materials3. Proper body mechanics4. Infection control <p>L. Accident Prevention</p> <ol style="list-style-type: none">1. Pre-plan activities and procedures2. Safety measures to prevent<ul style="list-style-type: none">a. Misidentification of residentb. Burnsc. Falls3. Dangers to resident safety4. Protective devices<ul style="list-style-type: none">a. Injury	<p>Demonstration: Unoccupied bed</p> <p>Student will make an unoccupied bed</p> <p>Tour the clinical unit and identify potential accident and safety hazards and record on floor map</p>

MODULE I

REQUIRED STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to demonstrate skill in the use of resident protective devices.</p>	<p>b. Use of protective equipment</p> <ol style="list-style-type: none">1. Siderails - covered2. Footrests - bed and wheelchair3. Recliner/Geri-chair4. Cushioning devices5. Special mattresses6. Bed cradle7. Locking mechanisms on wheels of equipment and furniture <p>5. Restraint reduction</p> <ol style="list-style-type: none">a. Resident Rights - Federal requirements (OBRA)	<p>Videotapes</p> <p>Tour clinical unit to observe the use of restraints and alternative methods for providing care</p> <ol style="list-style-type: none">1. Least restrictive restraints.<ol style="list-style-type: none">a. Monitoringb. Possible negative outcomes<ol style="list-style-type: none">1. Physical<ol style="list-style-type: none">a. Malnutritionb. Incontinencec. Decreased bone/muscle strength

MODULE I

REQUIRED STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
	<ul style="list-style-type: none">d. Bruising/cuts/redness of skine. Fall related Injuriesf. Pressure soresg. Death by asphyxiationh. inability to ambulate2. Mental, Emotional or Social<ul style="list-style-type: none">a. Mental distressb. Withdrawal/decreased participationc. inability to ambulated. Increased sleep disorders	<p>The student will be able to explain the need for following an established fire or disaster plan.</p> <p>M. Fire and Disaster Practices</p> <ul style="list-style-type: none">1. Adherence to facility master fire and disaster plans<ul style="list-style-type: none">a. Knowledge of buildingb. Evacuation process2. Fire Prevention<ul style="list-style-type: none">a. Common causes of fireb. Safety rules - smoking, electrical equipment, and use of oxygen <p>Supplemental Instructor: Fire Department Trainer Videotapes Participate in a facility fire drill Definitions Participate in a community disaster exercise (if possible)</p> <p>Discussion: Importance of safety in the administration of oxygen</p>

MODULE I

REQUIRED STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
The student will be able to demonstrate the proper use of a fire extinguisher.	3. Types of fire extinguishers 4. Prevention of resident injury	Demonstration Identify on floor plan location of fire extinguishers, exit routes, fire doors and sprinklers
The student will be able to list at least three types of disasters.	N. Disaster Safety Plan 1. Types of possible disasters	List types of disasters Discussion of weather "watch" versus "warning"
The student will be able to verbalize proper procedures to be followed in case of a disaster.	2. Team members responsibilities 3. Reassurance of residents	
The student will be able to perform selected lifesaving carries used for nonambulatory residents.	O. Lifesaving Carries for Nonambulatory Residents 1. Types and uses	Local First Aid Squad or Scout troop will demonstrate types of carries and emergency care Perform return demonstration of lifesaving carries
The student will be able to discuss different types of emergencies and what to do in response to each one.	P. Emergency Health Care 1. Immediate action to be taken 2. Heimlich method 3. Functions of local First Aid Squad versus transport personnel	Demonstration Perform return demonstration of Heimlich method

MODULE II: PSYCHO-SOCIAL NEEDS OF THE RESIDENT (10 HOURS)

Respect of a resident's right to privacy, dignity and independence, promotion of a resident's safety, and strict adherence to the practice of universal precautions are integral components of each objective in this curriculum and shall be reflected in the teachings throughout this curriculum.

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to discuss at least three factors which influence resident behavior.</p> <p>The student will be able to discuss the behavior of the resident which results from the physical, mental and emotional changes of aging.</p> <p>The student will be able to describe ways personnel can help meet the residents' need for approval, acceptance, recognition, respect and self-esteem.</p> <p>The student will be able to identify that the subtle behavioral changes in a resident may disguise his/her real needs.</p>	<p>A. Psycho-Social Characteristics of Resident Living in Long-term Care Facilities</p> <ol style="list-style-type: none"> 1. Maslow Theory - Basic Needs of Man 2. Characteristics of Aging Process <ol style="list-style-type: none"> a. Potential Physical Changes b. Potential Mental and Emotional Changes <p>B. Individual Responses to the Aging Process</p> <ol style="list-style-type: none"> 1. Concepts of dependence, independence and interdependence 2. Capacity to remember, to learn, to be self-directive 	<p>Definitions</p> <p>Diagram Maslow's Hierarchy of Needs</p> <p>Life review</p> <p>Write on large, blank sheet attached to wall with masking tape for review/discussion by students the way personnel can help meet the residents' needs</p> <p>Discuss the various roles students play in their life</p> <p>Interview a resident on the unit to discuss his/her perceived role change - well, sick, disabled, etc.</p> <p>Group discussion</p> <p>On the clinical unit, document incidents where residents were able to do more than staff allowed</p>

MODULE II

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to identify the emotional needs of residents in a long-term care facility.</p> <p>The student will be able to explain why residents may behave as they do to express their emotional needs.</p> <p>The student will be able to identify types of behavioral changes in a resident.</p>	<p>C. Emotional Needs and Support of the Resident</p> <ol style="list-style-type: none">1. Basic Emotional Needs2. Types of behavior residents may display in attempting to fulfill their needs<ol style="list-style-type: none">a. Recognition of change in statusb. Modifying caregiver responses to meet emotional needs	<p>Discussion</p> <p>Supplemental Instructor: Social Worker, Psychologist, Psychiatric Nurse Practitioner</p> <p>Definitions</p> <p>Techniques student uses in parenting/family setting which apply to resident interactions</p> <p>Discussion: Time-out, Back-off and Use of a rocking chair</p> <p>Discussion: Behavior Modification</p> <ol style="list-style-type: none">3. Concept of Behavior Modification<ol style="list-style-type: none">a. Usesb. Skills supporting age-appropriate behaviorc. Use of reinforcers4. Methods of indicating care for the resident5. Recognizing the feelings of family members6. Non-judgmental approach to family interactions<ol style="list-style-type: none">a. Listeningb. Referral <p>The student will be able to identify feelings which residents and/or family members may experience.</p> <p>The student will be able to demonstrate a non-judgmental approach to the resident and family interactions.</p> <p>Role Play: Family member with angry resident</p>

MODULE II

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
The student will be able to describe the losses experienced by residents in a long-term care facility.	<p>D. Characteristics of the Resident with Abnormal Behavior or Cognitive Impairment</p> <ol style="list-style-type: none"> 1. Reason for abnormal behavior <ol style="list-style-type: none"> a. Depression b. Delirium c. Dementia <p>E. Residents with Dementia (Alzheimer's Disease)</p> <ol style="list-style-type: none"> 1. Current theories (myths) 2. Stages and characteristics 3. Behavioral manifestations <ol style="list-style-type: none"> a. Types b. Factors that worsen behavioral problems c. Methods of reducing the effects of cognitive impairment <ol style="list-style-type: none"> 4. Treatment plan (strategies) <ol style="list-style-type: none"> a. Need for a routine b. Accept recall deficits - select activities which rely on remote memory <ol style="list-style-type: none"> 1. Reminiscence 2. Music, sing-a-longs 	<p>Definitions</p> <p>Handouts</p> <p>Supplemental Instructor: Alzheimer Support Group, Alzheimer Association</p> <p>Videotape</p> <p>Communication with a cognitively impaired resident</p>

MODULE II

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to demonstrate skills for communicating as evidenced by the proper use of selected communication techniques with confused or disoriented residents.</p> <p>The student will be able to discuss the need for reality orientation and reminiscence for residents in long-term care facilities.</p>	<ul style="list-style-type: none">c. Need for repetitiond. Rewards and promisese. Distractionf. Use or touchg. Need for short, simple statementsh. Avoidance of argument or over-correction of resident statementsi. Validationj. Distraction <p>F. Concept of Reality Orientation</p> <ul style="list-style-type: none">1. Reduction in awareness<ul style="list-style-type: none">a. Use of cues-name, age, room, time, recent eventsb. Resident withdrawal2. Implementation techniques<ul style="list-style-type: none">1. Use of touch, speech, identity, instructions and time	<p>Videotape</p> <p>Discussion: Current resident care plans</p> <p>Discuss important considerations when providing care to a resident with Alzheimer's disease</p> <p>Discussion: Value of exercise, use of walking, barrier straps, rocking chair, etc.</p> <p>Discussion: Purpose and value of reality orientation and reminiscence in everyday life</p>

MODULE III: PHYSICAL NEEDS OF THE RESIDENT (56 HOURS)

Respect of a resident's right to privacy, dignity and independence, promotion of a resident's safety, and strict adherence to the practice of universal precautions are integral components of each objective in this curriculum and shall be reflected in the teachings throughout this curriculum.

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to lift, move and transfer a resident according to the resident plan of care.</p> <p>The student will be able to discuss the importance of a team approach to rehabilitation.</p> <p>The student will be able to assist a resident to move up in bed.</p> <p>The student will be able to assist a resident to ambulate at least 50 feet.</p> <p>The student will be able to transfer a resident using a mechanical lift.</p> <p>The student will be able to list at least two assistive devices.</p>	<p>A. Lifting and Moving Techniques</p> <ol style="list-style-type: none"> 1. Need for plan of care <ol style="list-style-type: none"> a. Interdisciplinary team b. Restorative aide 2. Moving, positioning and transfer techniques <ol style="list-style-type: none"> a. Bed to stretcher b. Mechanical lift 3. Ambulation techniques <ol style="list-style-type: none"> a. Types of Assistive Devices <ol style="list-style-type: none"> 1. Dressing 2. Feeding 3. Mobility - walking, wheels 	<p>Supplemental Instructor: Physical Therapist, Restorative Aide and Activities Director</p> <p>Supplemental Instructor: Restorative Aide, Occupational Therapist</p> <p>Definitions</p> <p>Videotape</p> <p>Demonstration: Lifting techniques-lift sheet; Moving techniques-log rolling, side-position away and toward caregiver, move in bed with assistance; Transfer techniques-pivot, dependent resident; assist resident to ambulate at least 50 feet</p> <p>Assist a resident who uses adaptive devices to dress/eat</p> <p>Assist a resident who uses a cane or walker</p> <p>Assist a resident who uses a wheelchair</p> <p>Properly store artificial body parts</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to perform exercise programs according to the resident plan of care.</p> <p>B. Importance of Bathing</p> <ol style="list-style-type: none"> 1. Functions 2. Procedure for bathing <ol style="list-style-type: none"> a. Bed bath <p>The student will be able to describe the physical and emotional benefits of bathing a resident.</p> <p>The student will be able to state the proper water temperature for bathing residents.</p> <p>The student will be able to give a complete bed bath to a resident.</p> <p>The student will be able to make an occupied bed.</p> <p>The student will be able to give a tub bath or shower to a resident.</p> <p>The student will be able to give a complete backrub.</p>	<p>4. Exercise techniques</p> <p>B. Importance of Bathing</p> <ol style="list-style-type: none"> 1. Functions 2. Procedure for bathing <ol style="list-style-type: none"> a. Bed bath <p>Demonstration: Bed bath/occupied bed</p> <p>Return Demonstration: Students, in pairs, bed bath, occupied bed</p> <p>Videotape</p> <p>1. Equipment and supplies</p> <ol style="list-style-type: none"> 1. Technique 2. Special considerations and observations <p>a. Water temperature</p> <p>b. Make an occupied bed</p> <p>c. Partial bed bath</p> <p>d. Showers/tub bath</p> <p>3. Procedure - Backrub</p>	<p>Videotape</p> <p>Demonstration: Bed bath/occupied bed</p> <p>Return Demonstration: Students, in pairs, bed bath, occupied bed</p> <p>Videotape</p> <p>Bathe a resident in bed, tub or shower</p> <p>Student will test the bath water with the proper equipment at a temperature not to exceed 110 degrees Fahrenheit</p> <p>Student will make an occupied bed</p> <p>Student will test the bath water with the proper equipment at a temperature not to exceed 110 degrees Fahrenheit</p> <p>Demonstration: Observe the student give a backrub</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to explain the importance of observing and reporting physical changes in a resident to the licensed nurse.</p> <p>The student will be able to describe the physical changes that should be noted and reported.</p> <p>The student will be able to distinguish between objective and subjective observations.</p> <p>The student will be able to list three examples of objective observations.</p> <p>The student will be able to list three examples of subjective observations.</p>	<p>C. Observing and Reporting of Physical Changes</p> <ol style="list-style-type: none">1. Importance of observing changes<ol style="list-style-type: none">a. Outward signsb. Reporting process by nurse aide2. Significant physical changes<ol style="list-style-type: none">a. Objective versus subjective<ol style="list-style-type: none">1. Color of skin2. Texture of skin3. Type of breathing4. Mobility5. Appetite6. Mental status7. Weight8. Pressure sores9. Bruises and cuts10. Pain <p>Discussion Videotape Photographs Observe individuals in the classroom or clinical unit and discuss the observations</p> <p>Definitions</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to explain the purposes of hand and foot care.</p> <p>The student will be able to provide a resident with foot care.</p> <p>The student will be able to groom a resident's fingernails with proper care equipment.</p>	<p>D. Care of Hands and Feet</p> <ol style="list-style-type: none">1. Purposes2. Special considerations<ol style="list-style-type: none">a. Nail care - facility policyb. Shoe fitc. Diabetic3. Procedure <p>E. Skin Changes with Aging</p> <ol style="list-style-type: none">1. Anatomy and physiology2. Positioning techniques/safety factors<ol style="list-style-type: none">a. Supineb. Fowlersc. Proned. Sims3. Special consideration with elderly two purposes of skin care.	<p>Supplemental Instructor: Manicurist, Podiatrist</p> <p>Demonstration: Nail care and foot care</p> <p>Student will accurately test the water with the proper equipment at a temperature not to exceed 110 degrees Fahrenheit</p> <p>Chart/diagrams</p> <p>Demonstration: Supine, Fowlers, Prone, Sims</p> <p>Pair off students to position manikin or student volunteer</p> <p>Student will position resident, who needs assistance turning in bed</p> <p>a. Aging skin</p> <ol style="list-style-type: none">1. Purposes of skin careb. Sedentaryc. Positioning-chair, bed

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to properly apply continent briefs.</p> <p>The student will be able to discuss the importance of keeping an incontinent resident clean and dry.</p> <p>The student will be able to list at least three possible causes and signs of pressure sores.</p>	<p>d. Friction-continent briefs, linens, undergarments</p> <p>4. Incontinent care</p> <ul style="list-style-type: none"> a. Bowel b. Bladder <p>5. Pressure sores and ulcers</p> <ul style="list-style-type: none"> a. Causes 1. Pressure on body parts 2. Circulation problems 3. Decreased activity 4. Inadequate nutrition 5. Improper cleanliness 6. Incontinence <p>b. Sites for occurrence</p> <ul style="list-style-type: none"> 1. Bony prominences c. Four stages of pressure sores <p>1. Early signs of problem</p>	<p>Demonstration: Proper application of continent briefs</p> <p>Student will apply appropriate size continent brief to resident</p> <p>Videotape</p> <p>Videotape</p> <p>Videotape</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to discuss the prevention of pressure sores.</p>	<p>d. Preventive measures</p> <ol style="list-style-type: none">1. Observation2. Cleanliness/regular toileting3. Physical activity4. Nutrition and hydration5. Special cushioning devices6. Change linens and clothing7. Tracking position changes <p>e. Special considerations</p> <ol style="list-style-type: none">1. Feeding tubes2. Contracture(s) <p>f. Perineal skin care</p> <p>g. Report observations</p>	<p>Provide direct care to a resident with a pressure sore(s)</p> <p>Demonstration: Tracking documentation of position changes</p> <p>Observe the student giving perineal care</p> <p>Role play: Students, in pairs, dress each other, while acting paralyzed</p> <p>Student will assist a resident with dressing, using clothing which is labeled, clean, in good condition, correct size, seasonal and appropriate for the time of day</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to state the purposes of mouth care.</p> <p>The student will be able to assist or give appropriate mouth care based on individual resident need.</p>	<p>5. Facility policy for labeling of resident belongings</p> <p>G. Mouth Care</p> <ol style="list-style-type: none">1. Purposes2. Age-related changes3. Routine mouth care <p>The student will be able to demonstrate denture care.</p> <p>H. Personal Grooming</p> <ol style="list-style-type: none">1. Care of haira. Purposes<ol style="list-style-type: none">1. Physical2. Emotional	<p>Supplemental Instructor: Dental Assistant</p> <p>Demonstration: Brushing teeth</p> <p>Use of disclosing tablets</p> <p>Students practice in pairs - Brush teeth</p> <p>Demonstration: Denture Care</p> <p>Student will give routine and special mouth care to resident</p> <p>4. Special considerations</p> <ol style="list-style-type: none">a. Denture careb. Comatose residentc. Disabled <p>5. Reporting observations</p> <p>Supplemental Instructor: Licensed Beautician/Barber</p> <p>List in order of occurrence their own daily grooming activities to impress upon the student the importance of individualizing resident care</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to demonstrate appropriate positioning for the elderly when shampooing the hair.</p> <p>The student will be able to give daily haircare including combing, brushing and shampooing as needed.</p>	<ul style="list-style-type: none">b. Shampooingc. Daily hair cared. Pediculosise. Special considerations	<p>Student will test the temperature of the water with proper equipment at a temperature not to exceed 110 degrees Fahrenheit</p> <p>Demonstration: Hair care</p> <ul style="list-style-type: none">1. Age appropriate2. Ethnically appropriate3. Physical limitations <p>I. Shaving and Beard Care</p> <ul style="list-style-type: none">1. Purposes2. Procedure <p>The student will be able to use an electric or safety razor to shave a resident and/or provide care to beard.</p> <p>The student will be able to shave a resident and/or provide care to beard.</p> <p>Demonstration: Male student staff member or resident volunteer</p> <p>Student will safely shave a male or female resident with proper equipment</p> <ul style="list-style-type: none">a. Shaveb. Beard carec. Special considerationsd. Age appropriatee. Ethnically appropriatef. Physical limitations

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to demonstrate skill in giving either morning or evening care to a resident.</p>	<p>J. Morning and Evening Care</p> <ul style="list-style-type: none">1. Morning care<ul style="list-style-type: none">a. Toilet needsb. Mouth carec. Preparation for breakfast2. Evening Care<ul style="list-style-type: none">a. Physical needsb. Emotional needsc. Unit night-ready	<p>Student will give morning care</p> <p>Student will give evening care</p>
	<p>K. Rest and Sleep</p> <ul style="list-style-type: none">1. Purposes2. Characteristics of Sleep<ul style="list-style-type: none">a. Body system changesb. Rem/non-rem<ul style="list-style-type: none">1. Dreamingc. Fears	<p>Definitions</p> <p>Discussion: Residents' right to select bedtime and sleep needs, and students' experience with sleep deficit</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to discuss the importance of fluids in the body.</p> <p>The student will be able to identify at least two signs of dehydration.</p>	<p>L. Importance of Fluids to the Body</p> <ol style="list-style-type: none">1. Body composition and functions of fluids2. Dehydration<ol style="list-style-type: none">a. Signs and symptoms<ol style="list-style-type: none">1. Physical outcomes2. Mental outcomesb. Methods of fluid lossc. Hydration needs<ol style="list-style-type: none">Increase<ol style="list-style-type: none">1. Fever2. Vomiting3. DiarrheaDecrease	<p>Film</p> <p>Lecture/Discussion</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to accurately measure, record, and report fluid intake.</p> <p>N. Monitoring of Fluid Intake</p> <ol style="list-style-type: none">2. Encouragement of elderly to drink beverages<ol style="list-style-type: none">a. Daily requirement of fluids3. Infection controla. Facility policy - containers and fresh water <p>O. Cardiovascular and Respiratory Changes with Aging</p> <ol style="list-style-type: none">1. Anatomy and physiology2. Common disease conditions<ol style="list-style-type: none">a. Tuberculosis3. Vital signs<ol style="list-style-type: none">a. Temperature<ol style="list-style-type: none">1. Normal2. Ranges of abnormal<p>The student will be able to discuss causes of common cardiovascular and respiratory disorders.</p><p>The student will be able to discuss the value of knowing the body temperature of a resident.</p>	<p>Discussion</p> <p>Student will accurately measure, record, and report, if necessary, fluid intake</p> <p>Charts/Diagrams</p> <p>Definitions</p>	

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
	<ol style="list-style-type: none">3. Value of measuring body heat4. Causes of variations in body temperature5. Types of thermometers6. Review parts of body used in taking temperature including when used, type of thermometer used, time required, and special precautions7. Measuring the temperature<ul style="list-style-type: none">a. Oralb. Rectalc. Axillary8. Counting the pulse<ul style="list-style-type: none">a. Various sitesb. Calculations9. Counting the respirations	<p>The student will be able to take a resident's temperature safely and read and record temperature within ± 0.2 degrees of the instructor's reading.</p> <p>The student will be able to record and count a resident's pulse rate within ± 4 beats per minute of the instructor's reading.</p> <p>The student will be able to record a resident's respirations within ± 2 breaths per minute of the instructor's reading.</p> <p>Demonstration: Use of oral and rectal thermometer Videotape Chart/diagram comparing the Fahrenheit and Celsius Scales Compare both Fahrenheit and Celsius Scales</p> <p>Students will take and record routine temperature and pulse</p> <p>Student will count respirations</p> <p>Discussion: Methods to facilitate coughing and deep breathing Definitions Care of equipment</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to discuss the functions and products of the digestive system.</p> <p>The student will be able to discuss causes of common gastrointestinal disorders.</p> <p>The student will be able to list the seven warning signs of cancer.</p> <p>The student will be able to identify the abnormal characteristics of stool.</p>	<p>P. Gastrointestinal Changes with Aging</p> <ol style="list-style-type: none"> 1. Anatomy and physiology 2. Functions and changes in elderly 3. Major disease conditions <ol style="list-style-type: none"> a. Cancer b. Bowel elimination 4. Normal characteristics of stool 5. Abnormal characteristics <p>10. Reporting significant changes to licensed charge nurse</p>	<p>Student will take the vital signs on a resident</p> <p>Charts and Diagrams</p> <p>Supplemental Instructor: American Cancer Society</p> <p>Handouts</p> <p>Definitions</p> <p>Clean a commode chair</p> <p>Observation of stool</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to safely and comfortably assist the resident to use the bedpan.</p> <p>The student will be able to identify the relationship between weight and height.</p>	<p>b. Non-ambulatory resident</p> <ol style="list-style-type: none">1. Bedpan procedure<ol style="list-style-type: none">a. Privacy2. Techniques to promote effective results3. Safety precautions - resident transfer4. Reassurance6. Resident weight and height<ol style="list-style-type: none">a. Variations with body structureb. Reasons for monitoring of weight and height<ol style="list-style-type: none">1. Medications2. Disease conditions3. Food and fluid intakec. Variations in weight<ol style="list-style-type: none">1. Causes2. Unexplained weight lossd. Causes of edema1. Contributing factors	<p>Demonstration: Use of bedpan</p> <p>Assist the resident to use a bedpan</p> <p>Definition</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to weigh a resident and record within ± 1 lb of the instructor's reading.</p> <p>The student will be able to measure the height of a resident and record.</p> <p>The student will be able to describe a well-balanced diet, discussing the body's need for the basic food pyramid.</p>	<ul style="list-style-type: none">e. Procedure to measure height and weight<ul style="list-style-type: none">1. Weighing<ul style="list-style-type: none">a. Types of scalesb. Proper use of scalesc. Safety precautions2. Measuring height<ul style="list-style-type: none">a. Tape measure resident in-bed7. Nutritional needs of the elderly<ul style="list-style-type: none">a. The Food Guide Pyramidb. Basic functions of carbohydrates, fats, protein and waterc. Factors affecting food intake with age-related changesd. Factors influencing food likes and dislikes<ul style="list-style-type: none">1. Cultural2. Emotional3. Religious4. Social	<p>Demonstration</p> <p>Student will weigh a resident</p> <p>Students practice In pairs: Measure height In bed and standing</p> <p>Supplemental Instructor: Dietician</p> <p>Discussion: Role of staff to communicate needed dietary changes to the dietician</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to discuss why a resident may require a modified/therapeutic diet.</p> <p>The student will be able to identify specific modified/therapeutic diet coding used by the dietary department.</p> <p>The student will be able to discuss the responsibilities of a nurse aide when giving care to a resident receiving special feeding.</p>	<p>8. Modified/therapeutic diets</p> <ol style="list-style-type: none">Dietary restrictionsPersonal preferencesPhysician prescribedDietary identification of special resident dietsSpecial considerations - medicationsAlternate feeding methodsSafetyReport observationsNurse aide responsibilities <p>a. Resident handwashing/cleanliness</p> <p>b. Tray check against resident name and diet</p> <p>c. Portion sizes</p> <p>d. Food temperatures</p> <p>e. Liquid temperatures</p> <p>f. Convey complaints about quality and quantity of food</p> <p>g. Meal monitoring process</p> <p>h. Tray removal</p> <p>i. Report observations to charge nurse</p>	<p>Identify specific modified/therapeutic diet coding used by dietary department with the specific diet prescribed by the physician</p> <p>Demonstration/Videotape</p> <p>Student will care for resident or manikin with nasogastric tube, peg tube etc.</p> <p>Tour of facility kitchen (with permission)</p> <p>Supplemental Instructor: Dietitian, Speech Therapist</p> <p>Monitor and record percentages of food intake</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to demonstrate ability to report changes in a resident's eating and/or swallowing pattern.</p> <p>The student will be able to feed a resident who is eating impaired in a safe and caring manner.</p> <p>The student will be able to promote maximum resident independence in dining.</p>	<ul style="list-style-type: none"> i. Between meal and bedtime snacks k. Availability of beverages <p>10. Feeding a dependent resident</p>	<p>Students practice in pairs: Feeding a dependent resident and/or self - Blind, Hemiplegia, Improperly positioned and confused resident</p> <p>Student will feed a dependent resident</p> <p>a. Feeding techniques solids and liquids</p> <ul style="list-style-type: none"> b. Preparation c. Encouragement d. Communications e. Complications <p>11. Meal environment and service</p> <ul style="list-style-type: none"> a. Emotional component <ul style="list-style-type: none"> 1. Resident interaction 2. Pleasure experience b. Physical component <ul style="list-style-type: none"> 1. Preparation for dining 2. Positioning to facilitate chewing and swallowing 3. Furnishings <p>Discussion: Relate how the enjoyment of eating is affected by the environment and atmosphere</p> <p>Supplemental Instructor: Occupational Therapist</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to discuss major disorders that can occur in the endocrine system.</p>	<p>4. Lighting, ventilation, sound level, cleanliness and odors</p> <p>5. Use of utensils and assistive feeding devices</p> <p>6. Placement of tray</p> <p>7. Assisting resident</p> <p>Q. Endocrine Disorder Changes with Aging</p> <ol style="list-style-type: none">1. Anatomy and physiology2. Common disease conditionsA. Diabetes<ol style="list-style-type: none">1. Types2. Monitoringb. Thyroid <p>R. Urinary Changes with Aging</p> <ol style="list-style-type: none">1. Anatomy and physiology2. Common disease conditions3. Principles of fluid balance<ol style="list-style-type: none">a. Importance of intake/outputb. Importance of fluidsc. Consideration with the elderly	<p>Demonstration: Adaptive equipment</p> <p>Observe actual dining experience and critique</p> <p>Charts/diagrams</p> <p>Definitions</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to measure the contents of the bedpan or urinal and record within ±50 cc's of the instructor's reading.</p> <p>The student will be able to discuss the emotional implications of incontinence.</p> <p>The student will be able to demonstrate skill in properly collecting urine specimens.</p>	<ul style="list-style-type: none">4. Elimination of urine<ul style="list-style-type: none">a. Normal characteristicsb. Abnormal characteristics5. Measuring urinary output<ul style="list-style-type: none">a. Purposesb. Procedure6. Implications of incontinence<ul style="list-style-type: none">a. Special concerns7. Specimen collection<ul style="list-style-type: none">a. Urine - types<ul style="list-style-type: none">1. Routine single specimen2. "Clean catch" specimen	<p>Measure contents of a bedpan or urinal</p> <p>Definition</p> <p>Discussion: Emotional Implications of incontinence</p> <ul style="list-style-type: none">1. Discourage urination in bed2. Decrease use of continent briefs <p>Demonstration: Collection containers</p> <ul style="list-style-type: none">Review need for cleanliness and accurate measurementAccurately and safely collect urine specimen from urinal, bedpan or clean catch

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to care for a resident with a urinary catheter demonstrating precautions for control of infection, injury or distention.</p> <p>The student will be able to measure and record the contents of the Foley catheter bag within ±50 cc's of the Instructor's reading.</p> <p>The student will be able to describe bowel and bladder retraining.</p>	<p>8. Urinary catheter</p> <ul style="list-style-type: none"> a. Prevention of injury, infection and distention b. Retraining after removal c. Consideration of resident feelings <p>9. Bowel and bladder re-training</p> <ul style="list-style-type: none"> a. Concept of re-training <ul style="list-style-type: none"> 1. Previous elimination 2. Determine type of incontinence 3. Individual retraining plan 4. Value of reestablishing control c. Factors which improve outcomes d. Reporting observations to enable success <p>5. Musculoskeletal Changes with Aging</p>	<p>Student will care for a resident with an indwelling Foley catheter and bag</p> <p>Student will measure the contents of the catheter bag</p> <p>Discussion</p> <p>Review facility policy and procedure for retraining program</p> <p>Charts/diagrams/skeleton model</p> <p>Observe the student give direct care to the resident with a cast or splint</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to perform exercise programs according to the resident plan of care.</p>	<p>3. Use of exercises 4. Concept of passive and active range of motion</p>	<p>Videotape: Exercising Supplemental Instructor: Physical Therapist, Restorative Aide and Activities Director Students practice in pairs: ROM Assist a resident with exercise Demonstration: Passive and Active Range of Motion Charts/diagrams</p>
<p>The student will be able to discuss major disorders that can occur in the neurological system.</p>	<p>T. Neurological Changes with Aging 1. Anatomy and physiology 2. Common disease conditions a. Parkinsonism b. Stroke (CVA) c. Seizures</p>	<p>Definitions Properly store braces and splints Discussion: Review emergency measures to be taken when a resident experiences a seizure</p>
<p>The student will be able to discuss the care of a resident who uses a brace.</p>	<p>3. Care of a resident with seizures a. Prevention</p>	<p>U. Reproductive System Changes with Aging 1. Anatomy and physiology 2. Age related female gynecological and male reproductive problems</p>

MODULE III

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
The student will be able to discuss misconceptions and myths about aging and sexuality.	<p>3. Sexuality in the elderly</p> <ul style="list-style-type: none">a. Myths, misconceptions and stereotypes related to aging<ul style="list-style-type: none">1. Physical2. Mental3. Sexual-satisfaction, impotence, intercourse, masturbationb. Sexual deviations and molestationc. Privacy and respect	<p>Definition</p> <p>Discussion: Sexual needs of the handicapped and elderly and role of the caregiver</p>

MODULE IV: SPIRITUAL, RECREATIONAL AND ACTIVITY NEEDS OF THE RESIDENT (8 HOURS)

Respect of a resident's right to privacy, dignity and independence, promotion of a resident's safety, and strict adherence to the practice of universal precautions are integral components of each objective in this curriculum and shall be reflected in the teachings throughout this curriculum.

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>A. Resident Needs for Activity and Recreation</p> <ol style="list-style-type: none"> 1. Concepts <ol style="list-style-type: none"> a. Need for meaningful activity b. Importance of variety c. Approach to resident(s) 2. Types and value of activities <ol style="list-style-type: none"> a. Passive recreation - sensory needs b. Arts and crafts c. Physical activity - games, nature walks, exercise class, dancing 3. Resident participation <ol style="list-style-type: none"> a. The student will be able to discuss how unmet social needs may create changes in the behavior and mood of a resident. b. The student will be able to discuss the types and range of activities in which a resident may participate. 	<p>Supplemental Instructor: Activity Director, Occupational Therapist, President of Resident Council</p> <p>Attend and observe a planned activity</p> <p>Participate with a resident 1:1 in a recreational activity</p> <p>Participate with a group of residents in an activity</p>	<p>Supplemental Instructor: Activity Director, Occupational Therapist, President of Resident Council</p>

MODULE IV

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to assist a resident to participate in recreational activities.</p> <p>The student will be able to prepare a resident for transport.</p>	<p>3. Appropriateness of functions</p> <ul style="list-style-type: none"> a. Individual interest b. Desire for companionship c. Energy level d. Self-confidence <p>4. Preparation of a resident for participation</p> <p>B. Spiritual Needs of the Resident</p> <ul style="list-style-type: none"> 1. Concepts a. Spiritually - mind, body, spirit 1. Give life meaning b. Religion 1. Right to belief <p>The student will be able to discuss different religious beliefs.</p>	<p>Prepare a resident for activities and transport</p> <p>Supplemental Instructor: Member of Clergy or Panel</p> <p>Discussion: Assistive aids for vision and hearing loss - LARGE PRINT, earphones</p> <p>Group discussion of the religious beliefs and customs of the students</p> <p>Each student will choose a different religious sect to describe to the class as it relates to the beliefs regarding illness and death</p> <p>The student will be able to assist a resident to satisfy the resident's religious need.</p>

MODULE IV

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
<p>The student will be able to discuss the concept of dying with dignity.</p> <p>The student will be able to discuss how to meet the physical and emotional needs of the dying resident.</p> <p>The student will be able to discuss the goals of hospice care.</p>	<p>C. Coping with Death and Dying</p> <ol style="list-style-type: none"> 1. Right to die with dignity <ol style="list-style-type: none"> a. Advance directive 2. Needs of dying resident 3. Emotional support - caregivers, family and significant other 4. Hospice care or alternative approaches <ol style="list-style-type: none"> a. Concepts b. Facility program D. Age Adjustment to Loss <ol style="list-style-type: none"> 1. Loss experienced by resident and his/her family <ol style="list-style-type: none"> a. Stages of dying (grief) <ol style="list-style-type: none"> 1. Denial/Isolation 2. Anger 3. Bargaining 4. Depression 5. Acceptance 	<p>Supplemental Instructor: Hospice staff or Volunteer</p> <p>Handout: Sample of Facility Advance Directives, Living Will</p> <p>The student will voluntarily discuss their experience with death and dying</p> <p>Handouts</p> <p>Role play: death experience</p> <p>Student will write own obituary and plan own funeral arrangements</p>

MODULE IV

STUDENT OBJECTIVES	CONTENT MAP	SUGGESTED LEARNING EXPERIENCES
	<p>E. Caregiver Skills</p> <ol style="list-style-type: none">1. Positive and caring attitudes<ol style="list-style-type: none">a. Avoidance of false hopeb. "Helper" role2. Comfortable physical care<ol style="list-style-type: none">a. Realistic approachb. Changes in care plan3. Availability to resident - non-avoidance<ol style="list-style-type: none">a. In room activityb. Out room activityc. Active participation in facility program4. Sensitive to cultural and religious needs<ol style="list-style-type: none">a. Confer with charge nurse5. Family involvement as caregiverF. The Resident with Terminal Illness<ol style="list-style-type: none">a. Signs of approaching deathb. Resident control over unfinished business or last wishes	<p>Discussion: Concept of Unconditional Love and establishing a special relationship</p> <p>Panel Discussion: The steps of the death process to help the resident feel more comfortable</p> <p>Care for a terminally ill resident</p> <p>Videotape</p> <p>The student will be able to discuss the care of the terminally ill resident.</p> <p>The student will be able to describe the signs of approaching death.</p> <ol style="list-style-type: none">1. Permission granted to resident to "let go"

MODULE IV

STUDENT OBJECTIVES	CONTENT MAP G. Postmortem Care
The student will be able to discuss the preparation of a deceased resident.	<ol style="list-style-type: none">1. Facility policies for care of the deceased<ol style="list-style-type: none">a. Licensed nurse responsibilitiesb. CNA responsibilities2. Postmortem care supplies3. Preparation of the body4. Resident belongings5. Respectful manner<ol style="list-style-type: none">a. Work quietlyb. Respect for the bodyc. Respect for the family or concerned others - private viewing6. Transporting the body
SUGGESTED LEARNING EXPERIENCES	

APPENDIX

APPENDIX A

NEW JERSEY STATE DEPARTMENT OF HEALTH OPERATIONAL DEFINITIONS

The following words and terms, when used in this material, have the following meanings, unless the context clearly indicates otherwise:

"Abuse" means the willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm or pain or mental anguish, or deprivation by an individual, including a caretaker, of goods or services that are necessary to attain or maintain physical, mental, and psychosocial well-being.

"Accountability" means being answerable for how ones nursing practice is performed.

"Advance directive" means a written statement of a resident's instructions and directions for health care in the event of future decision making incapacity, in accordance with the New Jersey Advance Directives for Health Care Act, N.J.S.A. 26:2H-53 et seq., P.L. 1991, c.201. An advance directive may include a proxy directive, an instruction directive, or both.

"Available" means ready for immediate use (pertaining to equipment) or capable of being reached (pertaining to personnel), unless otherwise defined in these rules.

"Bed" or **"licensed bed"** means, with reference to a resident, the item of furniture assigned to no more than one resident for sleeping, resting, relaxing, or otherwise used for the resident's personal comfort or convenience, and with reference to a facility, one of the total number of beds for which each licensed long-term care facility is approved for resident care by the Commissioner of the New Jersey State Department of Health.

"Caring" means commitment and respect for the dignity of each resident. It involves values, a commitment, communication, knowledge, actions and outcomes.

"Certified nurse aide" means a person who is New Jersey State Certified to give care to residents under the direct supervision of a professional registered nurse or a licensed practical nurse.

"Classroom Instruction" means hours in which topics identified in the content map are taught by the instructor in a specified location and are demonstrated and tested. A group of students are taught together according to a standing subject.

"Cleaning" means the removal by scrubbing and washing, as with hot water, soap or detergent, or vacuuming, of infectious agents and of organic matter from surfaces on which and in which infectious agents may find conditions for surviving or multiplying.

"Clinical experience" means hours at a pre-designated site where the direct treatment, care and observation of residents is performed under the supervision of the nurse aide training instructor.

"Clinical laboratory" means a room which contains special equipment and materials in which students work to enhance skills, remedy deficiencies or perform return demonstrations in a particular content area.

"Communicable disease" means an illness due to a specific infectious agent or its toxic products which occurs through transmission of that agent or its products from a reservoir to the public.

"Communication" means the transmission of information, opinion, feelings, and intentions between two or more individuals. Includes verbal, non-verbal and written forms.

"Conspicuously posted" means placed at a location within the facility accessible to and seen by residents and the public.

"Contamination" means the presence of an infectious or toxic agent in the air, on a body surface, or on or in clothes, bedding, instruments, dressings, or other inanimate articles or substances, including water, milk, and food.

"Current" means up-to-date, extending to the present time.

"Delirium" means a state of mental confusion and disorientation that is caused by infection, disease, chemicals, drugs, toxins or other agents that affect the brain and nervous system. Delirium has rapid onset and can be resolved when the cause is remedied.

"Dementia" means a slowly progressive disease of the brain that causes deterioration in the ability to remember, reason, use and understand language and function in daily activities. The disease causes changes in the chemistry and structure of the brain which leads to the disability of the resident.

"Demonstration" means the act of exhibiting the operation or use of a skill or device.

"Department" means the New Jersey State Department of Health.

"Dignity" means that in their interactions with residents, staff carry out activities which assist the resident to maintain and enhance the resident's self-worth.

"Direct supervision" means supervision on the premises within view of the supervisor.

"Disinfection" means the killing of infectious agents outside the body, or organisms transmitting such agents, by chemical and/or physical means, directly applied.

"Documented" means written, signed, and dated. If an identifier such as a master sign-in sheet is used, initials may be used for signing documentation, in accordance with applicable professional standards of practice.

"Drug administration" means a procedure in which a prescribed drug is given to a resident by an authorized person in accordance with all laws and regulations governing such procedures. The complete procedure of administration includes removing an individual dose from a previously dispensed, properly labeled container (including a unit dose container), verifying it with the prescriber's orders, giving the individual dose to the .

resident, seeing that the resident takes it (if oral), and recording the required information, including the method of administration.

"Drug dispensing" means a procedure entailing the interpretation of the original or direct copy of the prescriber's order for a drug or a biological and, pursuant to that order, the proper selection, measuring, labeling, packaging, and issuance of the drug or biological to a resident or a service unit of the facility, in conformance with all applicable federal, state, and local rules and regulations.

"Epidemic" means the occurrence or outbreak in a facility of one or more cases of an illness in excess of normal expectancy for that illness, derived from a common or propagated source.

"Full-time" means relating to a time period established by the facility as a full working week, as defined and specified in the facility's policies and procedures.

"Guardian" means a person appointed by a court of competent jurisdiction to handle the affairs and protect the rights of any resident of the facility.

"Health" means marked by energy and vigor. It encompasses the requirement that the resident is to be provided the necessary care and services to attain or maintain the highest practicable biological, physical, mental and psychosocial well-being.

"Health care facility" means a facility so defined in N.J.S.A. 26:2H-1 et seq., and amendments thereto.

"Highest practicable well-being" means whether the care provided by the facility has enabled residents to reach or maintain their optimum state and how staff have contributed to the resident's care and outcome. The review of whether a resident has attained or maintained the highest practicable well-being is based on the Quality of Care Assessment.

"Lesson plan" means an instructor aide with lists for each lesson, specific objective(s) indicating the knowledge and skills to be learned, the content which is to be taught to the students to meet the objective(s), the hours of classroom and clinical instruction, method(s) of presentation and teacher strategies, a description of clinical activities for the lesson and a method(s) for evaluation of students with respect to their classroom and clinical performance.

"Licensed nursing personnel" (licensed nurse) means registered professional nurse or practical (vocational) nurse licensed by the New Jersey State Board of Nursing.

"Lived Experiences" means the way individuals encounter situations in terms of their own personal concerns, background, cultural orientation, emotions and thought processes.

"Long-Term Care Facility (LTCF)" means a facility or distinct part of a facility licensed by the New Jersey State Department of Health to provide health care under medical supervision and continuous nursing supervision for 24 or more consecutive hours to two or more residents who are not related to the members of the governing authority by marriage, blood, or adoption; who do not require the degree of care and treatment which a hospital provides; and who, because of their physical or mental condition, require continuous nursing care and services above the level of room and board.

"Monitor" means to observe, watch, or check.

"Neglect" means failure to provide goods and services necessary to avoid physical harm, mental anguish, or mental illness.

"Novice" means that stage of skill acquisition where no background knowledge or understanding of the situation exists which are required for safe entry and performance in the situation. In some instances, the nurse aide may not come to the experience as a novice in skills but has not performed in the care of the elderly.

"OBRA" means Omnibus Budget Reconciliation Act of 1987.

"Ombudsman" means Office of the Ombudsman for the Institutionalized Elderly.

"Reality Orientation" means orientation that is measured in terms of a person's awareness of time, place, person and situation; that is the when, where, who and why of one's awareness. Time orientation includes time of day, date, year, season or other measurements of time relationships, such as "after lunch", "before bedtime", "tomorrow". Place orientation is awareness of surroundings and location. Person awareness is recognition of both the self and others, the relationship of oneself to the others in the environment. Situational awareness or orientation is knowing the purpose or intent of the activity or event one finds oneself in. Reality orientation is a technique which focuses a resident's attention on objects, information or cues in the environment that can be seen, heard, and touched. Reminders or cues are provided to keep a resident aware of the time, place, persons and situation. The drawbacks include the repetitiousness sometimes needed when the resident has severe memory loss, a very limited attention span or is in a state of depression.

"Reasonable hour" means any time between the hours of 8 A.M. and 8 P.M. daily.

"Reminiscence" means a therapeutic technique or activity which utilizes long term memory of the elderly because long term memory endures longer than short term memory. The benefit to the elderly centers around sharing memories with contemporaries and enhancing self-esteem.

"Resident" means a person who resides in a LTCF and is in need of 24-hour continuous nursing supervision.

"Shift" means a time period defined as a full working day by the facility in its policy manual.

"Signature" means at least the first initial and full surname and title (for example, R.N., L.P.N., D.D.S., M.D., D.O.) of a person, legibly written with his or her own hand. A controlled electronic signature system may be used.

"Supervised practical training" means training in a clinical laboratory or facility setting in which the trainee demonstrates knowledge while performing tasks on an individual under the direct supervision of a registered nurse or a licensed practical nurse.

"Supervision" means authoritative procedural guidance by a qualified person for the accomplishment of a function or activity within his or her sphere of competence, with initial direction and periodic on-site inspection of the actual act of accomplishing the function or activity.

"Supplemental Instructor" means additional personnel from the health professions who supplement the primary registered nurse instructor and who have at least one year experience in their respective field.

"Universal Precautions" means the use of infection control for all residents to protect them from blood borne pathogens or any body fluid visibly contaminated with blood.

"Validation Therapy" means a therapeutic technique which focuses on empathetic response to the feeling or mood state of a resident. It is unlike reality orientation, focusing on the content of what a resident states. Validation therapy focuses on context, the way in which the resident states his concern. This technique is used to calm or modify anxiety, and to provide feedback to "validate" the resident's feelings.

APPENDIX B

SELECTED REFERENCES AND RESOURCES LONG-TERM CARE

ORGANIZATION	TYPE
American Journal of Nursing Educational Services Division 555 West 57th Street New York, NY 10019	Rental & Purchases of Educational Materials
Computerized Educational Systems P.O. Box 536905 Orlando, FL 32853-9811 (800) 275-1474	CAI Programs \$195 - \$295
Concept Media P.O. Box 19542 Irvine, CA 92713-9849	Videos, CAI Rentals \$50.00
Costal Healthcare 3083 Brickhouse Court Virginia Beach, VA 23459-9942 (800) 729-4325	Videos, Handbooks Rentals \$95.00
Geriatric Video Productions P.O. Box 1757 Shavertown, PA 18708 (800) 621-9181	Videos
Health Professions Press P.O. Box 10624 Baltimore, MD 21285	Videos, Training Books, Materials
Medcom/Trainex P.O. Box 3225 Garden Grove, CA (800) 877-1443	Nursing Home Special Sale in Summer/Fall Yearly Videos \$99.00

ORGANIZATIONS	TYPE
Mosby Lifeline 11830 Westline Industrial Drive P.O. Box 46908 St. Louis, MO 63146-9806	NA Training Materials Books, Videos, Manuals
NEVCO 305 Fifth Avenue South Suite 207 Naples, FL 33940	Videos & Educational Materials Rental & Purchase
Nursing Staff Development Insider Mosby 11830 Westline Industrial Drive P.O. Box 46908 St. Louis, MO 63146-9934	Bimonthly Newsletter
Springhouse Corporation 1111 Bethlehem Pike Springhouse, PA 19477	Inexpensive Training Videos for Professional Staff
State of New Jersey Department of Health Gerontology Program CN 364 Trenton, NJ 08625-0364 (609) 292-5037	Manual, Videos
State of New Jersey Division of Aging Department of Community Affairs Front and Broad Street CN 807 Trenton, NJ 08625-0807 (609) 984-3981	Films, Video, Handouts
State of New Jersey Library 185 West State Street CN 520 Trenton, NJ 08625-0520 (609) 292-6220 (Reference Desk)	Books, Magazines, Reports, Newspapers

SUGGESTED CONTACTS - Free Audio-visual Loan Programs/Speakers Bureau

Local Schools, Colleges and Library

Facility Support Groups:

**Ambulance/Transport Services
Pharmaceutical Service
Radiology Service
Laboratory Service**

United Fund

Local Volunteer Organizations

**American Red Cross
Boy Scouts of America
Girl Scouts of America
Religious Organizations**

ASSOCIATIONS

National Gerontological Nurses Association

**NGNA
7250 Parkway Drive, Suite 150
Hanover, MD 21076
(800) 723-0560**

National Nursing Staff Development Organization

**NNSDO
437 Twin Bay Drive
Pensacola, FL 32534
(800) 489-1995**

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APPENDIX C

SKILLS COMPETENCY CHECKLIST

Student: _____

Date of Course: Start _____ End _____

School Code: _____

Instructor(s): _____

Final Performance Rating: Pass: Fail:

Skill	Demo Date by Instructor & Initials	Student Demo Date & Inst. Initials	Inst. Initials & Date Student Passed Clinical Performance
Handwashing	_____	_____	_____
Cleaning	_____	_____	_____
Bedpan	_____	_____	_____
Urinal	_____	_____	_____
Universal Precautions	_____	_____	_____
Soiled linen, clothes	_____	_____	_____
Use of gown, gloves	_____	_____	_____
mask, goggles	_____	_____	_____
Bedmaking	_____	_____	_____
Unoccupied	_____	_____	_____
Heimlich Method	_____	_____	_____
Transfers	_____	_____	_____
OOB - assist one	_____	_____	_____
- assist two	_____	_____	_____
Mechanical lift	_____	_____	_____
Out of bed to chair/ wheelchair/geri-chair/ recliner (cardiac chair)	_____	_____	_____
Bed to Stretcher	_____	_____	_____
Ambulation	_____	_____	_____
Assist resident to ambulate	_____	_____	_____
Walker	_____	_____	_____
Cane	_____	_____	_____

Skill	Demo Date by Instructor & Initials	Student Demo Date & Inst. Initials	Inst. Initials & Date Student Passed Clinical Performance
Positioning			
Move up in bed	_____	_____	_____
Use of positioning devices	_____	_____	_____
Assist resident to turn on side	_____	_____	_____
With catheter	_____	_____	_____
Bathing			
Complete bedbath	_____	_____	_____
Partial bedbath	_____	_____	_____
Tub bath/shower	_____	_____	_____
Backrub	_____	_____	_____
Bedmaking			
Occupied	_____	_____	_____
Routine finger nail care	_____	_____	_____
Routine foot care	_____	_____	_____
Assist Bowel/Bladder Retraining	_____	_____	_____
Incontinent Care			
Application continent briefs	_____	_____	_____
Perineal care			
Dressing			
Complete	_____	_____	_____
Partial	_____	_____	_____
Mouth Care			
Routine Care	_____	_____	_____
Denture Care	_____	_____	_____
Non-responsive	_____	_____	_____
Hair grooming			
Shampoo	_____	_____	_____
Comb/brush	_____	_____	_____
Shaving			
Male	_____	_____	_____

Student Name

Skill	Demo Date by Instructor & Initials	Student Demo Date & Inst. Initials	Inst. Initials & Date Student Passed Clinical Performance
Assisting Resident			
Use of bedpan	_____	_____	_____
Use of urinal	_____	_____	_____
Use of commode	_____	_____	_____
Output - Urinary			
Bedpan & record	_____	_____	_____
Urinal & record	_____	_____	_____
Foley & record	_____	_____	_____
Height			
Ambulatory	_____	_____	_____
Bedridden	_____	_____	_____
Weight			
Ambulatory	_____	_____	_____
Non-Ambulatory	_____	_____	_____
Meal/Feeding			
Preparing resident for meal	_____	_____	_____
Set up food/tray	_____	_____	_____
Feeding dependent resident	_____	_____	_____
Intake - Monitor & Record	_____	_____	_____
Vital Signs & Measurements			
Temperature			
Oral	_____	_____	_____
Rectal	_____	_____	_____
Axillary	_____	_____	_____
Pulse Radial	_____	_____	_____
Respirations	_____	_____	_____
Collection of Specimens			
Urine	_____	_____	_____
Bowel Elimination			
Observation & record	_____	_____	_____
Postmortem Care (if occurs)	_____	_____	_____

Instructor Signature (#1) Initials

Instructor Signature (#2) Initials

Student Signature

Date

APPENDIX D
RECOMMENDED QUALITY ASSURANCE EVALUATION TOOL
FOR NURSE AIDE TRAINING AND COMPETENCY EVALUATION PROGRAM
(Process Evaluation)

Category	Evaluation Questions	Process	Time Frame	Outcome
Administration	1. Does the administration facilitate achievement of the goals and objectives of the program?	Input from designated personnel, DON, Instructors	Annually	NJDOH goals and objectives are accepted, agreed upon and are implemented.
	2. Are lines of authority and responsibility clear and functional?	Review of designated personnel, DON, Instructor and Evaluator responsibilities.	Annually	Lines of authority and responsibility are clear and are communicated in updates of staff job descriptions, student handbook or orientation policies.
	3. Is there sufficient input from students, graduates and staff into decisions about program policies?	A standing committee reviews its membership, purposes and process, makes recommendations for revisions/change.	Annually	The Administration provides opportunity for student, graduate and staff input.
Instructor(s)/Evaluator(s)	1. Is there diversity and range in instructional/evaluational expertise to carry out the activities of the course?	The designated personnel, DOH, Personnel Mgr., experienced graduate evaluate the quality of expertise prior to initiating an interview.	As vacancy occurs	New staff enhance the diversity and range of instructional/evaluator expertise.
	2. Do Instructors/evaluators maintain the appropriate expertise for their respective job duties?	Activities to attain/maintain expertise are addressed by the DON, Personnel Mgr., designated personnel.	Annually and as needed	Instructor(s)/Evaluator(s) who are reappointed have attained/maintained expertise.
	3. Are Instructor(s), effective teacher(s), mentors?	Instructor(s)/Evaluator(s) are assessed at completion of each course of instruction by students and DON or designated personnel according to facility policy.	At least Annually (if course given during year)	(Same as above) If indicated the staff is recommended for additional inservice activities.
		DON or designated personnel evaluation of classroom and clinical instructions, student evaluations.	At least Annually (if course given during year)	Instructor(s) who are reappointed are effective teacher(s)/Mentor(s).

Category	Evaluation Questions	Process	Time Frame	Outcome
	<p>4. Are evaluator(s) effective observers of outcomes?</p> <p>5. Are Instructor(s)/evaluator(s) involved in keeping current of theory and skills related to resident long-term care?</p>	<p>DON or designated personnel evaluation of skills session. Data submitted as part of reappointment.</p> <p>Updated resume. Attendance at conferences/workshops.</p>	<p>At least Annually (if course given during year)</p> <p>Annually</p>	<p>Evaluator(s) who are reappointed are effective observers.</p> <p>Instructor(s)/Evaluator(s) who are reappointed are involved in continuing education classes.</p>
Students	<p>1. Is there the appropriate number of qualified applicants enrolled in the course?</p> <p>2. Are the admitted students minimally qualified to meet academic standards and competencies? (Literate in reading/writing/speaking of English.)</p>	<p>Nursing Service leads and conducts recruitment activities and provides reports on the number of qualified applicants.</p> <p>Analysis of data to determine success rate of current/former students by DON.</p>	<p>Weekly</p> <p>Annually</p>	<p>The applicant pool is of appropriate size to meet the state mandated regulations for class/clinical instruction.</p> <p>Admission criteria are appropriate for success in the completion of the course and skill/written/oral test.</p>

Category	Evaluation Questions	Process	Time Frame	Outcome
		DON or designated personnel review of student records.	At least once during current course	Appropriate monitoring of student expectations and outcomes.
3. Do graduates of the certification program build progressive clinical skills?		Review of graduate CNA program performance evaluations according to facility policy and State licensure laws.	At least once Annually	Provision of continuing assessment through performance evaluation. To enable graduates to succeed. Appropriate Inservice classes will be provided which parallel performance outcomes.
4. Do students achieve program objectives?		New graduate survey, self assessment of attainment of course objectives conducted and compiled by DON or designated personnel and analyzed by DON, designated personnel and Personnel Mgr.	Annually	New graduate pass/fail certification rate data analyzed by DON, designated personnel and Personnel Mgr. and shared. Students at completion of the course become 100 percent certified.
5. Do graduates meet employer expectations?		Informal questioning of employers at meeting.	Annually	Feedback and recommendations from clinical staff who work with program graduates are reviewed by designated personnel, DON, Personnel Mgr. and Instructor(s).
6. Are student/graduates satisfied with the course they received?		Survey in-house graduates about their preparation.	Annually	Data about employment experience is reviewed by designated personnel, DON, Personnel Mgr.
		Student evaluation at course completion, summarized by Instructor and shared with DON or designated personnel in a timely manner.	End of course	Student evaluations and recommendations considered by DON or designated personnel, Instructor, and Evaluator who are updating/revising course.

Category	Evaluation Questions	Process	Time Frame	Outcome
Curriculum	Survey of CNA graduates conducted by DON or designated personnel.	<p>DON or designated personnel review for consistency with recommendations for change.</p> <p>DON or designated personnel review with recommendations presented to staff and at workshops.</p> <p>DON or designated personnel reviews course and lesson plans.</p>	<p>Annually</p> <p>Annually</p> <p>On-going and attends class as needed</p>	<p>Evaluation and comments are analyzed by the designated facility staff.</p> <p>Curriculum is consistent with the mandate.</p> <p>The curriculum enables student achievement of end of program objectives and prepares graduates for beginning practice as a nurse aide.</p> <p>Teaching and evaluation methodologies are appropriate and effective.</p>
Resources	<p>1. Is the curriculum consistent with the mandate of the State and Federal authorities?</p> <p>2. Is the curriculum organized efficiently and effectively?</p> <p>3. Are teaching and evaluation methodologies appropriate to the curriculum?</p>	<p>1. Are the fiscal resources sufficient to support a quality program?</p> <p>2. Are the physical facilities, instructional materials and equipment sufficient to enable the instructor to accomplish his/her goals?</p> <ul style="list-style-type: none"> a. Classroom b. Clinical Laboratory 	<p>Review of current budget and development of coming year budget by DON or designated personnel with input from instructor.</p>	<p>Fiscal resources support the program and are sufficient to enable achievement of program objectives.</p> <p>The classroom meets the learning needs of students.</p> <p>The clinical laboratory meets the learning needs of students.</p>

Category	Evaluation Questions	Process	Time Frame	Outcome
		Student, Instructor and evaluator evaluations of the Clinical Laboratory are part of course evaluations.	End of each course	Same as above.
		Laboratory is evaluated by facility purchasing department.	Annually	Same as above.
		Instructor reviews and makes recommendations to designated personnel or DON for new equipment, materials, computers, media and software.	Annually	Same as above.
	3. Are the textbook and library holdings comprehensive and current?	Instructor reviews new collections.	On-going and Annually	Textbooks meet the needs of students and graduates, and instructor(s).
	4. Do the clinical laboratory facilities provide opportunities for learning experiences that promote attainment of the objectives of the program?	Instructor and DON or designated personnel review library holdings. Evaluation by designated personnel, DON, Instructors with input from unit staff during planning and end of course discussion.	Bi-annually On-going and Annually	Library holdings meet the needs of students and staff. Learning experiences in clinical agency enable the students to meet clinical learning objectives.
		Student evaluation of clinical units as part of course evaluation.	End of course	Same as above.

