

Kansas Certified Nurse Aide Bridge Course for Certified Physical Therapist Assistants and Licensed Occupational Therapy Assistants

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KANSAS CERTIFIED NURSE AIDE CURRICULUM GUIDELINES (90 Hours)

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PREFACE

This bridge course has been developed for certified physical therapist assistants (PTA) or licensed occupational therapy assistants (OTA). The outline which follows is to be used by the instructor whose responsibility it is to prepare persons to provide basic direct care for residents living in adult care homes. The outline is to be used in conjunction with the 90-Hour Certified Nurse Aide Curriculum Guidelines, 2008 edition. To be certified as a nurse aide, the PTA/OTA must successfully complete the course and the skills check list, and pass the state certified nurse aide test.

The attached curriculum outline indicates the units of the 90-Hour Certified Nurse Aide Curriculum Guidelines to be covered. Some sections are to be omitted, some are marked to be reviewed briefly and some include only certain topics. Several sections are marked to discuss the material with regard to the certified nurse aide's role in that particular section rather than full coverage of the section. The CNA Guidelines were extensively revised in 2008, for release in 2009. Increased emphasis was placed on person-centered care and other key topics. The current revision of the course ensures that it will be up to date with regulation and practice as of its release. Instructors should continue to update materials as necessary between revisions. Course instructors should obtain the most recent revision of the Kansas 90-Hour Certified Nurse Aide Sponsor and Instructor Manual from the Health Occupations Credentialing Website at www.kdheks.gov/hoc.

Also attached is supplementary information, "PTA/OTA and the Nurse Practice Act," which includes the ethical and legal considerations unique to certified nurse aides who are also certified physical therapist assistants or licensed occupational therapy assistants.

Students need to obtain and review the 90-Hour Certified Nurse Aide Curriculum Guidelines, 2008 edition, before the first class. The guidelines may be obtained online from the HOC website. Students also need to review the Competency Skills Checklist following Part I of the guidelines. The students will be asked to perform the skills listed before working with residents as Trainee IIs. The students need to be alerted that the state test may cover all topics in the guidelines.

The bridge course is designed to be completed in 30 hours. Part I consists of eleven hours: 5 didactic and 6 clinical. The Competency Skills Checklist is given at the completion of Part I. Part II consists of 19 hours: nine

didactic and ten clinical. Class time should be within reasonable limits: no more than eight hours per day of instruction with lunchtime and breaks provided. Lunchtime and breaks may not be counted as instruction time. Instructors are free to include more information in Part I if necessary to prepare students for the checklist. However, Part II must still contain the nine didactic and ten clinical hours.

Appreciation is expressed to each member of the original development committee whose knowledge and guidance made this accomplishment possible. The persons and the associations they represent are:

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Editor's Note: PTAs/OTAs and nurse aides have separate regulatory and disciplinary authorities. PTAs and OTAs are regulated by the statutes of the Board of Healing Arts. Nurse aides are regulated by the adult care home regulations and the Nurse Practice Act. The supplementary material at the end of the curriculum discusses some of the implications of having separate regulatory and disciplinary authorities. This document, however, does not constitute advice for employers in complying with existing federal and state laws or regulations.

Outline of the Nurse Aide Bridge Course
Based on the 90-Hour Certified Nurse Aide Curriculum Guidelines

The units listed below are from the 90-Hour Certified Nurse Aide Curriculum Guidelines. Unless the entire unit is to be included, the topics that must be emphasized in the bridge course are marked with an asterisk (*).

Part I

- Unit 1** Introduction: Cover most of this unit briefly, but spend some time discussing the concept of person-centered care as presented in the 90-hour curriculum guidelines.
- A. Purposes for completing CNA course
 - B. Federal law
 - C. Person-centered care
- Unit 2** Residents of an Adult Care Home: Briefly cover the possible losses residents may encounter, emphasizing the CNA's role, individual resident experiences, and resources available to residents. Give more attention to the topics marked with (*).
- A. Purpose for learning about the aging process
 - B. Stereotypes and facts about aging
 - C. *Basic Human Needs
 - D. Psychosocial losses
 - E. Physical losses
 - F. Psychosocial losses
 - G. *Resident Rights
 - H. Resident and family expectations
 - I. *Goals of long-term care facilities
 - D. *Types of Kansas long-term care facilities
- Unit 3** Role and Responsibilities of CNA : Include all of these topics in course. Add the supplementary information, "PTA/OTA and the Nurse Practice Act" relevant to certified physical therapist assistants or licensed occupational therapy assistants working as certified nurse aides.
- A. Major categories of CNA's role and examples of skills
 - B. Desirable attitudes and actions
 - C. Desirable personal grooming habits
 - D. Typical employer policies
 - E. Respecting confidentiality in communication
 - F. Legal and ethical aspects of working as a certified nurse aide
- Unit 4** Meeting Resident Needs: Communication. Include information regarding the principles of communication between the CNA and residents, staff and team members. Give more attention to the points marked with (*).
- A. Attitudes that promote communication
 - B. *Actions and responses that promote effective communication between CNA and residents

- C. Identify and use actions and responses that promote effective communication between CNA and resident's family and friends.
- D. Identify and use actions and responses that promote effective communication between CNA and other staff members.
- E. Answering the resident's call signal or pager notification
- F. Use of telephone, cell phone or intercom
- G. *Communicating with resident who has a vision or hearing impairment
- H. *Communication with the resident who has cognitive impairment or confusion

Unit 5 Meeting Resident Needs: Infection Prevention and Control. Include a brief review, emphasizing material marked with (*).

- A. Importance of infection prevention and control
- B. *The nature of microorganisms
- C. Systems of precaution used for infection control

Unit 6 Meeting Resident Needs: Mobility. Cover only the topic marked with (*).

- A. *CNA's role related to resident mobility
- B. Body mechanics
- C. General principles for lifting and moving a resident
- D. Safe practices using a transfer belt
- E. Describe and demonstrate lifting and moving and use of transfer belts
- F. Body alignment
- G. Devices that assist the resident in walking or ambulation
- H. Using the wheelchair as a mobility device
- I. Using mechanical lifts

Unit 7 Meeting Resident Needs: The Resident's Personal Living Space. Include each topic in this unit in the course curriculum, emphasizing the person-centered perspective that the resident's living space is his/her home.

- A. Respecting the resident's control of his/her living space
- B. Furniture and equipment in the resident's living space
- C. Actions to provide environmental comfort
- D. Daily maintenance of resident's living space
- E. Bed making

Unit 8 Meeting Resident Needs: Safety. Include a brief review.

- A. Resident situations or conditions that influence safety
- B. Safety precautions to prevent resident falls
- C. Safety precautions to prevent resident burns
- D. Safety precautions to prevent electrical injury
- E. Safety precautions for chemicals
- F. Safety precautions for choking
- G. Safety precautions for oxygen use
- H. Safety precautions when a fire is discovered
- I. Safety measures when a tornado is expected

- J. Safety measures when other emergency is expected
- K. Safety measures for resident elopement or exiting

Unit 9

Meeting Resident Needs: Personal Care and Grooming. Include brief review of each topic, emphasizing the CNA's role and person-centered care.

- A. Factors that affect a person's cleanliness
- B. Oral hygiene
- C. Skin care – bathing
- D. Back rub
- E. Assisting the resident to dress and undress
- F. Personal grooming
- G. Nail care
- H. Assisting the resident with prosthetic, orthotics or other assistive devices

Unit 10

Meeting Resident Needs: Nutrition and Fluids. Cover each topic, emphasizing the CNA's role in feeding and care.

- A. Common nutrition and hydration issues
- B. Structure and function of the digestive system
- C. Additional factors affecting the resident's nutritional/hydration status
- D. CNA's role related to resident nutrition and fluids
- E. Guidelines that promote nutrition and safe eating
- F. Assisting the resident who has dysphagia
- G. Guidelines that promote fluid intake and good hydration
- H. Recording food intake
- I. Weighing
- J. Long-term care facility diets

Unit 11

Meeting Resident Needs: Elimination. Include a general review of topics.

- A. Importance of accurate measuring and recording of intake and output
- B. Methods to measure and record fluid intake
- C. Variations from the usual amount of fluid intake
- D. Methods to measure and record fluid output
- E. Assisting resident with elimination
- F. Care for resident who has been incontinent of urine or feces

Unit 12

Measuring and Recording Vital Signs: Conduct a brief review and be sure students are up-to-date with current practice.

- A. Temperature
- B. Pulse
- C. Respiration
- D. Blood Pressure
- E. Height

End of Part I

Part II

- Unit 13** The Resident's Care Plan: Include each topic in course.
- A. Purposes for resident's care plan
 - B. Interdisciplinary care team
 - C. Planning process
- Unit 14** Observing, Reporting and Documenting: Include each topic.
- A. Communicating information about the resident
 - B. Observation
 - C. Reporting
 - D. Recording or documenting observations
- Unit 15** Physical Changes Accompanying Aging: Include each topic, emphasizing the care the CNA might give a resident in each system.
- A. Eye
 - B. Ear
 - C. Sensory change
 - D. Heart and blood vessels
 - E. Respiratory
 - F. Endocrine
 - G. Genitourinary system
 - H. Musculoskeletal system
 - I. Nervous system
 - J. Integumentary system
 - K. Cancer
- Unit 16** Sexuality in Aging: Review briefly, emphasizing CNA's role.
- A. Sexuality
 - B. Factors affecting sexual expression and the CNA's role in supporting the resident
 - C. Managing inappropriate resident comments or actions
- Unit 17** Meeting Resident Needs for Comfort and Rest: Give a general overview, emphasizing the CNA's role and person-centered care.
- A. Rest and sleep
 - B. Comfort and relief of pain
 - C. Measures to relieve pain
 - D. Determining the effectiveness of pain relieving measures
- Unit 18** Meeting Resident Needs: End-of-Life Care. Cover topics marked with (*).
- A. Personal and society views of end-of-life
 - B. Planning for end-of-life decisions
 - C. *Hospice
 - D. *Anticipating death or loss (general emotional needs)
 - E. *Anticipating death or loss (grieving process)
 - F. *Responses to the death of others
 - G. *Caring for the resident as death approaches

H. *Postmortem care

Unit 19 Meeting Resident Needs: Restoring Nutrition and Elimination. Include a general overview of topics, emphasizing CNA's role.

- A. Alternative fluid intake: Intravenous (IV) infusions
- B. Alternative hydration and nutrition: Tube feedings
- C. Alternative urinary elimination: Urinary catheter
- D. Alternative urinary elimination: External catheter
- E. Restoring bowel function for the resident who has diarrhea
- F. Restoring bowel function for the resident who has constipation
- G. Restoring bowel function for the resident who has a fecal impaction
- H. Maintaining bowel elimination: Enema administration
- I. Maintaining bowel elimination: Caring for resident with an ostomy
- J. Promoting bladder and bowel continence

Unit 20 Meeting Resident Needs: Maintaining and Restoring Mobility. Include each topic, emphasizing CNA's role.

- A. Restorative Care
- B. Complications of inactivity: Physical changes
- C. Complications of inactivity or immobility: Pressure ulcers
- D. Providing restorative care: Range of motion

Unit 21 Meeting Resident Needs: Dementia and Problem Behaviors. Include topics marked with (*). Caring for residents with Alzheimers and other types of Dementia received greater emphasis in the revised CNA Guidelines (2008).

- A. Dementia
- B. *Understanding problem behaviors from dementia and other causes
- C. Communicating with the resident who has dementia
- D. *Common behaviors associated with dementia
- E. Caring for the resident who has depression
- F. *Additional communication and support techniques

Unit 22 Additional Resident Care Procedures: Cover topics marked with (*).

- A. Applying heat
- B. Applying cold
- C. *Care for the resident receiving oxygen
- D. Anti-embolism or elastic stockings
- E. *Specimen collection
- F. *Restraints
- G. Performing delegated tasks (See additional information)

Unit 23 Meeting Resident and Family Needs: Admission, Transfer and Discharge. Include in course curriculum, emphasizing the CNA's role and person-centered care.

- A. Admission
- B. Assisting the resident and family during transfer

C. Assisting the resident and family during discharge

Unit 24

First Aid in the Adult Care Home: Include topics and emphasize CNA's role.

- A. General guidelines
- B. Abrasion, laceration or skin tear
- C. Nosebleed
- D. Burns
- E. Fainting
- F. Falls
- G. Seizure or convulsion
- H. Medical emergency – Shock
- I. Medical emergency
- J. Ingestion of poison or other harmful substance
- K. Choking

Unit 25

Working as a CNA: Cover briefly with emphasis on items marked with (*).

- A. Organizational structure of adult care home
- B. Departments/services commonly found within an adult care home
- C. *Teamwork
- D. Inspection or survey of adult care homes
- E. *Earning and maintaining a CNA certificate

PTA/OTA and the Nurse Practice Act and Board of Healing Arts Statutes

The provision of rehabilitation/restorative nursing care in adult care homes is an important modality in the care of residents. In the past few years, physical therapist assistants (PTAs) and occupational therapy assistants (OTAs) have sought employment in adult care homes. The statutes governing PTAs and OTAs require supervision by a licensed occupational therapist or licensed physical therapist. The licensed therapist must perform an assessment of the resident and provide direction to the PTA/OTA. PTAs and OTAs cannot work under the supervision of a licensed nurse. (KSA 65-2914(c) and KSA 65-5402 (d)). Therefore, a PTA or OTA working under the supervision of a licensed nurse would be violating statutes.

Rehabilitation/restorative nursing care delivered in an adult care home must be based on an assessment performed by a licensed nurse (registered nurse or licensed practical nurse). The licensed nurse may choose to have a nurse aide perform the rehabilitative/restorative nursing care procedures. The nurse aide must be supervised by a licensed nurse.

Persons who are PTAs and OTAs can be very valuable employees of an adult care home. Their educational preparation provides them with the background and skills to help residents improve their level of functioning. In order to remain in compliance with the Board of Healing Arts statutes and the Kansas Nurse Practice Act, these individuals must meet the nurse aide requirements. Federal and state laws allow individuals who are not nurses to provide “nursing” care as long as they have completed a state mandated nurse aide course and have passed an examination.

This bridge course is designed to prepare individuals who are PTAs or OTAs to meet the nurse aide requirements. The transition from being a PTA/OTA to a nurse aide requires a change in focus and thinking. Nurse aides provide basic nursing care as well as restorative care. Nurse aides in adult care homes work under the direct supervision of a licensed nurse. As a nurse aide, the individual is involved in the total care of the resident. Instead of working with one resident at a time, the nurse aide may be assigned to a group of residents. These changes require adjustment in work habits. Those PTAs/OTAs who choose to work as nurse aides undoubtedly add much to the quality of care of residents in an adult care home.

There will be situations when an individual may work as a PTA/OTA and a nurse aide for the same employer. It is very important that these two roles be distinct and separate. When working as a PTA/OTA, the individual must work under the supervision of a licensed therapist. The licensed therapist must perform a resident assessment and develop a plan of care which the PTA/OTA must follow. The PTA/OTA may perform any therapy task included in their basic education. When working as a nurse aide, the individual is limited to the tasks included in the nurse aide curriculum and those delegated to the individual by a licensed nurse. A licensed nurse must assess the resident, develop a plan of care and supervise the individual working as a nurse aide. Keeping the two areas of practice separate and distinct will be a challenge. Individuals working in both capacities should discuss their roles with their supervising therapist and licensed nurse.