VIRGINIA BOARD OF NURSING Education Informal Conference Committee Agenda

March 6, 2019

Department of Health Professions, 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233

Board Room 1

9:00 A.M. Education Informal Conference Committee - Conference Center Suite 201

Committee Members: Joyce A. Hahn, PhD, RN, NEA-BC, FNAP, Chair

Laura Freeman Cei, BS, LPN, CCRP

Nursing Education Programs

Request to Increase Enrollment

Medical Solutions Academy, PN Program, Danville, US28110700

Request to Change from a Day to Evening Program

Bryant & Stratton College, ADN Program, Hampton, US28409900

Relocation of Campus

Chamberlain University, BSN Program, Arlington, US28500600

Request to Change Length of Program

Fairfax County Public Schools, PN Program, Springfield, US28108600

11:00 Public Comment

Applications to Establish Nursing Education Programs: Update

Practical Nursing Programs:

Salvation Academy, Alexandria

American National University, Salem

Registered Nursing Programs:

Stratford University, BSN, Virginia Beach

Regent University, BSN, Withdrawing Application

American National University, ADN, Salem

ECPI University, BSN, Norfolk

Education Informal Conference Committee March 6, 2019 Page 2
NCLEX Pass Rates Below 80% for 1 Year
NCLEX Pass Rates Below 80% for 2 Years
NCLEX Pass Rates Below 80% for 3 Years
Virginia and National NCLEX Pass Rates 2018
Nurse Aide Education Programs
Nurse Aide Education Program Application
Grace Health and Rehabilitation Center of Greene County - Application for a Hybrid Program
Our mission is to ensure safe and competent patient care by licensing health professionals, enforcing standards of practice, and providing information to health care practitioners and the public.



COMMONWEALTH of VIRGINIA

David E. Brown, D.C. Director

Department of Health Professions
Perimeter Center
9960 Mayland Drive, Sulte 300
Henrico, Virginia 23233-1463

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Virginia Board of Nursing Jay P. Douglas, MSM, RN, CSAC, FRE Executive Director Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

Revised
February 11, 2019

Mary Williamson. RN, MSN Program Director Medical Solutions Academy 306 Poplar Street Danville, VA 24541

RE: Request to Increase Enrollment by Adding an Additional Cohort

Dear Ms. Williamson:

This letter is sent as notification that the Education Informal Conference Committee of the Virginia Board of Nursing will consider the request to increase enrollment by adding an additional cohort to begin in April 2019 at Medical Solutions Academy, Danville. The committee will meet at 9:00 a.m. on March 6, 2019 at Perimeter Center, 9960 Mayland Drive, Suite 201, Board Room 1, in Henrico.

In an effort to facilitate a more complete review of educational programs, the Board of Nursing has established the procedure which is reflected in this letter. This allows for a careful review of each application, the opportunity for you to be present, if you wish, and for you to participate in the process with the Committee.

While your attendance is not required, you may be present when the program is considered by the Committee. Attending the meeting will give you the opportunity to make comments about the request and respond to questions from the Committee. Questions from the Committee that cannot be answered by the material provided may result in a deferral of the Board's decision in the absence of a representative from the program. Please let us know by February 25, 2019 if you plan to be present.

After the Committee reviews the report, the Committee will develop a recommendation for presentation to the Board at its meeting on March 19, 2019.

Medical Solutions Academy Practical Nursing Program February 11, 2019 Page 2

The Committee will make one of the following recommendations to the Board:

To grant the request; or Request additional information; or To deny request.

The Board of Nursing will take action on the recommendation from the Committee. The procedure is consistent with the Board of Nursing Laws and Regulations and the Virginia Administrative Process Act in that it provides for an informal conference for the initial decision while allowing for the Board or a panel thereof to consider the matter in a formal hearing if agreement is not reached informally.

In any instance where an adverse recommendation is accepted by the Board of Nursing, within thirty-three (33) days of the date of the order/action, the program director may request a formal hearing before the Board or a panel thereof, in accordance with Virginia Code §2.2-4020 and §54.1-2400 (11).

Please contact me if you have any questions.

Sincerely,

Paula B. Saxby, R.N., Ph.D.

Deputy Executive Director

Cc: Education IFC Committee
Lakesha Reed- Curtis, Owner
Peter Blake, Director, SCHEV



COMMONWEALTH of VIRGINIA

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Virginia Board of Nursing Jay P. Douglas, MSM, RN, CSAC, FRE Executive Director

Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

MEMORANDUM

To:

Education IFC Members

From:

Paula B. Saxby, R.N., Ph.D.

Date:

January 24, 2019

Subject:

Medical Solutions Academy, Danville

Practical Nursing Education Program

Request to Increase Enrollment

Lakesha Reed-Curtis, owner of Medical Solutions Academy's practical nursing education program in Danville, has requested an increase in enrollment for their PN program beginning in April 2019. Attached are the following tabs:

- 1. Request to increase enrollment by adding an additional cohort of ten students with a start date in April 2019; A revised plan of study increasing the hours of PN 111 from 48 hours to 60 hours;
- 2. CV's for two new faculty members (Kenneth Hawker and Diane Guy);
- Emails regarding the request to increase enrollment;
- 4. Quarterly report and emails regarding quarterly report for January 2019;
- 5. Quarterly report and emails regarding quarterly report for October 2018;
- 6. Email regarding the quarterly report for July 2018;
- Email communication from Charlette Ridout in May 2018 regarding the requirements for quarterly reports;
- 8. Note to file, dated January 24, 2019, regarding the first clinical rotation that began on January 11, 2019; and
- 9. Initial approval letter dated May 21, 2018 granting approval to admit no more than 10 students every 13 months.

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306 Poplar Street Danville, Va 24541 Phone: 434-836-8393 Fax: 434-836-8394 medicalsolutionsacademy@gmail.com

Medical Solutions of America

To Whom It May Concern:

I, Lakesha Reed-Curtis, owner of Medical Solutions Academy, am requesting to start an April cohort of 10 Practical Nursing students. Initially we wanted to enroll every 13 months but due to the high demand, we are very capable of starting a cohort in April of 2019 and we will start our 3rd cohort in November of 2019 as originally planned. This will have us starting a cohort twice a year.

Schedule of Classes

Sept. 2018 cohort will graduate Oct. 2019

April 2019 class will graduate May 2020

Nov. 2019 cohort will graduate Dec. 2020

If we are approved to start in April the current cohort that is enrolled will be enrolled in Pharmacology and Mental Health at the time. This cohort comes to class on Tuesday and Thursday and the new cohort will come on Monday and Wednesday. There will be no overlapping of the classes. The Sept cohort will be in clinicals at Riverside Health Care and Southern Virginia Mental Health Institute at the time of the April cohort enrollment. Clinicals take place on Friday and Saturday. Once the April cohort starts clinicals, which will begin in July, the Sept. cohort will have advanced to Sovah Health, which is the hospital in Danville, Va. and the pediatric clinical sites. They will have also advanced to practicing their skills/scenarios at Southern Virginia Higher Education Center in South Boston, Va. with whom we have a contract with. At no time will the clinical sites or classroom time overlap. Carmen Collins, RN who teaches Mental Health and Charmaine Cockran BSN, RN who teaches OB/PEDs will never overlap in teaching their courses, as these are the only courses they teach in the PN program aside from clinicals if we should ever need them. We have hired two new instructors, one who is MSN prepared that is readily available and hired to teach Med/Surg, Fundamentals, and clinicals once we are approved for this second group. I, Lakesha Reed-Curtis, will instruct Nutrition and Medical Terminology and fill in if needed. Mrs. Williamson will be with the Sept. cohort. We have more than enough instructors. Medical Solutions does not have any other evening classes scheduled at the institution during the time that the two cohorts will be in place. The clinical sites are in place, due to the fact that two these two groups will not be there at the same time. There will be at least a 5-month gap between the two cohorts visiting any clinical site at any given time.

Overview:

Sept 2018 will have completed:

PN 101-Med Terminology

PN 110- Basic Nutrition

PN 111- Fundamentals of Nursing

PN 112- Pharmacology (this course will be in process once the April cohort starts)

This cohort will have also completed 152 hours of clinical at this time. The April cohort will not start clinical until July 13th. They will start there clinicals at Riverside Health Care Center and the Sept cohort will be attending clinicals at Sovah Health.

We have attached the new faculty roster as well as the resumes of both of the newly hired instructors.

If you have any questions or concerns, feel free to contact me or Mary Williamson MSN, RN at 434-836-8393.

With Regards,

Lakesha Reed-Curtis MSN, RN

Owner of Medical Solutions Academy

Lakeda Red-Certia MSU. RI

DEC 0 4 2018 DHP

306 Poplar Street
Danville, Va 24541
Phone: 434836-8393
Fax: 434-836-8394
medicalsolutionsacademy@gmail.com



Medical Solutions of America

To Whom It May Concern:

I am sending in the revised Plan of Study for Medical Solutions Academy's Practical Nursing Program. We increased the hours of lecture in PN 110 Basic Nutrition. We have also hired two additional part-time RN's to help with the PN program should we start a new cohort in April.

If you have any questions or concerns feel free to contact me or Mary Williamson MSN,RN at 434-836-8393.

Regards,

Lakesha Reed-Curtis MSN, RN

Red-Cevito MSU. PU

Plan of Study - Practical Nursing Program

Term 1	Credit Hours	Lecture Hours	Clinical Hours	Lab Hours
PN 101- Medical Terminology	1	15	0	0
PN 110- Basic Nutrition	3	60	0	0
PN 111- Fundamentals of Nursing	9	64	204	84
Term 2				
PN 112- Pharmacology	3	30	0	12
PN 113- Mental Health Nursing	3	40	40	0
PN 114- Medical Surgical Nursing 1	3	38	78	0
Term 3				
PN 115- OB/PEDS	3	20	27	0
PN 116- Medical – Surgical Nursing	2 3	24	56	0
PN 117- Trends of Practical Nursing	1	15	0	0

^{*}We increased the number of hours in PN 111- Nutrition from 48 hours of lecture to 60*

Kenneth Hawker

186 Capri Ct • Danville, VA 24541 • Phone: 434-334-2706 • E-Mail: Skippy2814@hotmail.com

Objective

I wish to pursue a teaching opportunity at the Medical Solutions Academy in Danville VA.

Experience

Third Shift Supervisor

April 2018 - Present

- I supervise the 90-bed facility of Gretna Health and Rehab. I supervise up to 3 nurses nightly and 6 CAN's and monitor the patients that come in and out of the building during the night for emergency treatment. I assist with running the codes in the facility, as I am usually the only RN in the building. I have to call the deaths and communicate this with the families and assist them and the funeral homes when arriving to the facility. I assist the nurses when they have incidents occur or need to send patients out for emergency treatment. I work the medication cart when staffing is short. I report nightly issues to the Director of nursing and the unit managers in the morning. I perform admission audits, chart audits, skin assessments audits, and various other audits to assist the unit managers with their duties. I assist with the preparation of the annual state survey.
- RN- Sovah Health

August 2017 - March 2018

- I worked on the med surg. Floor where I got to experience multiple things that I had not got to experience as an RN. The major difference was the hanging of high-risk drugs that was not allowed in the SNF setting. I had to learn the protocol for these drugs. I was already used to patient care, wound care, dealing with families, and medication administration. I did get to learn how to work with multiple physicians versus in the SNF setting we usually only had two to work with.
- Unit Manager- Medical Facilities of America March 2010 April 2018
 - Unit manager of a 60 bed skilled unit. I manage approximately 60 employees. As a unit manager I have to prepare CMI reports, QM reports, weekly weight reports, weekly wound reports, schedules, care plans, service concerns, and prepare for state surveys. The residents on our unit consist of long term, acute care, comfort care, and hospice. I have strong clinical strengths in time management, educating staff, leading others, IV therapy, wound care, medication administration, tracheostomy care, tube feedings, and blood draws.
- Bartender Texas Steakhouse

August 2007 - March 2010

- Provided customer service to tables and bar guest. Ensured guest were taken care and addressed any concerns they had with the management staff.
- Assistant Manager Ruby Tuesdays

February 2003 - August 2007

As an assistant manager I was in charge of the front of the house scheduling. I performed weekly and monthly inventory and
placed orders for the restaurant based off of the inventory reports. I was in charge of interviewing and training the new hires.
Addressed service concerns in house and those sent to our restaurant by corporate.

Education

Dan River High School - Advanced Diploma

Graduated 1999

Danville Community College - Associates of Science - LPN 2009-2010

Danville Community College - Associates of Science - RN 2010-2012



Walden University - Masters of Science - Nursing 2018-2016

South University - Post Masters Certificate - FNP 2017 - Present

Awards

Best Overall LPN Student - 2010

Employee of the Month - December 2010

Sigma Theta Tau - 2016

Walden University's Honor Society - 2016



alex_blue_house@yahoo.com | 434-836-3555 302 Vicar Rd, Danville, VA 24540

PROFESSIONAL SUMMARY

Register Nurse with over 20 years of experience in diverse hospital settings. Good judgment, great communication skills, and compassionate. Seeking position at Medical Solutions Academy in training students to become CNA's.

SKILLS

- · Able to manage emotions
- Caring and empathetic
- Great ability to multi-task

- Leadership skills
- Great interpersonal and communication skills
- Time-management ability

EXPERIENCE

RN Staff Nurse

Green Rock Correctional Center – Chatham, VA | January 2014 - January 2018

Attend to inmates sick calls, prepare medications to be given out at a certain time each day, assist MD, answer emergency calls from inmate housing and escorted to medical. Pass out medication. Reorder medication as needed and admit new inmates to the facility. Worked with Dr. Patel with psychiatric orders and call MD is needed. Send inmates out if emergency care is needed that I can not provide

RN Staff Nurse

UNC Rockingham Health Care – Eden, NC | June 2006 - November 2013
Worked on the 3rd floor. I started IV, giving blood, giving meds by use of Omnicell. Take care of GYN patients along with other types of patients.
Also did tube feedings assisting MD as needed.

EDUCATION

High school Diploma

Gwetna High School | Gretna, VA | June 1996

Practical Nursing

Danville Community College | Danville, VA | February 1988

Associate Degree

Patrick Henry Community College | Martinsville, VA | May 1994

Diane Guy	Part Time	Patrick Henry Community College	RN N	R	Clinical and Fundamentals	24	7	Multi-State 0001145656
Kenneth Hawker	Part Time	Danville MSN, Community	MSN,RN	MŜN	Med Surg 1& 2 and Clinical	00	2	Multi-State 0001250383

CURRENT FACULTY RANK/TITLE NAME	FULL TWEY PART TIME Date of Initial hire	COLLEGE/ UNIVERSITY	NURSING CREDENTIAL	HIGHEST DEGREE OBTAINED	MAJOR TEACHING RESPONSIBILITY	YEARS EXPERIENCE In NURSING PRACTICE	YEARS EXPERIENCE TEACHING In an academic setting	STATE OF LICENSURE LICENSE LICENSE NUMBER AND EXP. DATE
Mary Williamson/ Primary Instructor	Full Time 10-02-16	Capella University	RN, MSN	MSN	Pharmacology, Med Surg. 182, Fundamentals of Nursing, Medical Terminology/Basic Nutrition, and Trends of Practical Nursing/Clinic al Rotation.	43	5	VA 0001080662 12/31/2018
Lakesha:Reed / Primary Instructor	Full Time/ 04-2011	Winston- Salem State University	RN, MSN	MSN	Fill-In staff/ clinical	17	80	Multi-State 242855 07/31/2020
Carmen Collins / Instructor	Part Time/ 02-02-16	Memorial Hospital School of Nursing	RN	R	Mental Health	42	S)	Multi-State 0001061173 01/31/2020
Charmaine Cockran / Instructor	Part Time/ 07-31-2017	Memorial Hospital School of Nursing	RN, BSN	BSN	OB/PEDS	31	IU.	Multi-State 0001106459 11/30/2019
Ida Poteat/Instructor	Part Time/	Danville Regional Medical Center	RN,BSN	BSN	Fill-In staff/ clinical	28	15	Multi-State 0001197327



Saxby, Paula <paula.saxby@dhp.virginia.gov>

Re: report

Lakesha Reed <medicalsolutions.lakesha@gmail.com>
To: "Saxby, Paula B. (DHP)" <paula.saxby@dhp.virginia.gov>

Thu, Dec 6, 2018 at 3:39 PM

Thank you.

Lakesha Reed, RN,MSN Owner/Operator 434-836-8393

(804) 367-4597

On Thu, Dec 6, 2018 at 3:10 PM Saxby, Paula <paula.saxby@dhp.virginia.gov> wrote: That meeting has been cancelled. The next meeting is March 6, 2019. Paula B. Saxby, R.N., Ph.D. Deputy Executive Director Virginia Board of Nursing



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On Thu, Dec 6, 2018 at 2:06 PM Lakesha Reed <medicalsolutions.lakesha@gmail.com> wrote:

Okay, thank you. Quick question, what was the deadline for the Jan.16th meeting. I remember you saying forty day which is today. Am I too late for that meeting?

Lakesha Reed, RN,MSN Owner/Operator 434-836-8393

On Thu, Dec 6, 2018 at 1:39 PM Saxby, Paula <paula.saxby@dhp.virginia.gov> wrote:

Any increase in your student admissions will have to go to the Board at it's next meeting. The next meeting of the Education committee is not until March 6, 2019, so that will give me time to track down and review your request and ask for any additional information I might need. I am involved in interviews most of next week, so will try to get back to you by Friday of next week regarding what else ! might need from you.

Paula B. Saxby, R.N., Ph.D. Deputy Executive Director Virginia Board of Nursing (804) 367-4597



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On Thu, Dec 6, 2018 at 1:31 PM Lakesha Reed <medicalsolutions.lakesha@gmall.com> wrote:

it sent the updates for my annual review as well as the report to start an April cohort. You should have received it Friday of last week.

Sent from my iPhone

On Nov 15, 2018, at 4:46 PM, Saxby, Paula <paula.saxby@dhp.virginla.gov> wrote:

Yes. We will need to do another site visit before you can hold classes in the new location. Paula B. Saxby, R.N., Ph.D. Deputy Executive Director Virginia Board of Nursing (804) 367-4597



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On Thu, Nov 15, 2018 at 4:19 PM Lakesha Reed <medicalsolutions.lakesha@gmall.com> wrote;
Sorry... one more question... what is the process if we move to another building? Do I notify of the address and you have to conduct another site visit? I plan on moving mid 2019 to a bigger location.

Sent from my iPhone

On Nov 15, 2018, at 3:53 PM, Saxby, Paula <paula.saxby@dhp.virginia.gov> wrote:

The Board meets every other month and we need all information completed at least forty days before each Board meeting if they are to consider any information. Having said that, the Board (Education IFC) meets on the following dates:

January 16, 2019 March 6, 2019 May 9, 2019

They will also want to know the status of the group you currently have enrolled. What courses have they completed, where have they had clinical, etc. Board staff will also need time to review the materials before it is sent to the Board.

Paule B. Saxby, R.N., Ph.D. Deputy Executive Director Virginia Board of Nursing (804) 367-4597



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On Thu, Nov 15, 2018 at 3:47 PM Lakesha Reed <medicalsolutions.lakesha@gmall.com> wrote: Thank you. When is the next board meeting?

Sent from my iPhone

Please submit a request in writing with the details of your request. We will need to know when you plan to offer the classes with specific days and times, what will the access be for the skills lab for all your students (each cohort of PN students and nurse aide students). Who will be teaching. Where and when will you have clinical, etc. Documentation of clinical space availability across the life span

In a variety of settings for the additional ten students. The request and information will need to be presented at a meeting of the Education Special Conference Committee; the Board will determine if you will have approval for the additional cohort. Your program was approved for only 10 students at a time due to the space of the skills lab and clinical availability. You must have Board approval before you can increase your student population. Please contact me if you have any questions. Paula B. Saxby, R.N., Ph.D. Deputy Executive Director Virginia Board of Nursing (804) 367-4597



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On Thu, Nov 15, 2018 at 3:33 PM Lakesha Reed <medicalsolutions.lakesha@gmail.com> wrote: Hello,

I hope all is well. We at Medical Solutions Academy wish to start another cohort of 10 PN atudents in April, The interest is high in our area. Thanks

Sent from my iPhone

On Oct 10, 2018, at 3:40 PM, Saxby, Paula <paula.saxby@dhp.virginla.gov> wrote:

Great. Send it on when you can. Paula B. Saxby, R.N., Ph.D. Deputy Executive Director Virginia Board of Nursing (804) 367-4597



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On Wed, Oct 10, 2018 at 3:39 PM Lakesha Reed <medicalsolutions.lakesha@gmail.com> wrote:

Great. I also have a calendar. My computer (internet) is acting strange. I'm waiting for it to load so that I can send it to you.

Sent from my iPhone

On Oct 10, 2018, at 3:24 PM, Saxby, Paula <paula.saxby@dhp.virginla.gov>wrote:

Thank you. This is much easier to follow. I will review all the materials submitted and will let you know if I have further questions. Paula B. Saxby, R.N., Ph.D. Deputy Executive Director Virginia Board of Nursing (804) 367-4597



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On Wed, Oct 10, 2018 at 2:50 PM Lakesha Reed <medicalsolutions.lakesha@gmail.com> wrote: Hello.

There is another email to follow. Thanks

Sent from my iPhone

Begin forwarded message:

From: Medical Solutions Academy <medicalsolutionsacademy@gmail.com> Date: October 10, 2018 at 2:38:44 PM EDT To: Lakesha Reed <medicalsolutions.lakesha@ gmail.com>

"The Foundation Of Your Healthcare Career," Medical Solutions Academy 306 Poplar Street Danville, VA 24541 Phone: 434-836-8393 Fax: 434-836-8394



Saxby, Paula <paula.saxby@dhp.virglnla.gov>

Re: Quarterly Report for January 2019

1 message

Lakesha Reed <medicalsolutions.lakesha@gmail.com>
To: "Saxby, Paula" <paula.saxby@dhp.virginla.gov>

Thu, Jan 24, 2019 at 12:59 PM

Here you go. Thanks Lakesha Reed, RN,MSN Owner/Operator 434-836-8393

On Thu, Jan 24, 2019 at 12:40 PM Saxby, Paula <paula.saxby@dhp.virginia.gov> wrote:

You misunderstood my remark about the State of Licensure and that "multi-state" was not enough information. It is OK to have have VA - Multi-State Privilege, and NC - Multi-State privilege. Some people may have a license that is only valid in one State. So keep the Multi-State privilege and include what State it was issued from. Paula B. Saxby, R.N., Ph.D.

Deputy Executive Director Virginia Board of Nursing (804) 367-4597



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On Thu, Jan 24, 2019 at 11:23 AM Lakesha Reed <medicalsolutions.lakesha@gmail.com> wrote:

Here are the corrections. Lakesha Reed, RN,MSN Owner/Operator 434-836-8393

On Thu, Jan 24, 2019 at 11:05 AM Saxby, Paula <paula.saxby@dhp.virginia.gov> wrote:

Lakesha.

Please correct the faculty roster that you submitted as "corrected". Mary Williamson's RN license has an expiration date of 12/31/18. Please include the State where each faculty has an RN license (multi-State is not enough information).

Paula B. Saxby, R.N., Ph.D. Deputy Executive Director Virginia Board of Nursing (804) 367-4597



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On Wed, Jan 23, 2019 at 6:05 PM Lakesha Reed <medicalsolutions.lakesha@gmail.com> wrote:

Helio.

I have corrected it. My apologies for that.

Lakesha Reed, RN,MSN

Owner/Operator

434-836-8393

On Wed, Jan 23, 2019 at 6:02 PM Saxby, Paula <paula.saxby@dhp.virginia.gov> wrote:

Thank you for the updated information. I am still not sure what you mean by the primary instructor for the PN

program,

Paula B. Saxby, R.N., Ph.D.

Deputy Executive Director

Virginia Board of Nursing

(804) 367-4597



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Under no circumstances shall VBON, its members, officers, agents, or employees be liable for any actions taken or omissions made in reliance on any information contained in this e mail.

On Wed, Jan 23, 2019 at 5:52 PM Lakesha Reed <medicalsolutions.lakesha@gmail.com> wrote: Hellol

- 1) Jane Lindley is another person you can contact at Riverside Healthcare. Currently the students have completed 26 hours of clinical. They are doing assessments, documentation, blood glucose monitoring, feeding, bathing, and basic ADL's. On week four we will move into dressing changes, foley catheter care. peg tube care, trach care, and IV insertion and care,
- Mary Williamson is the Program Director. This is now corrected on the faculty roster.
- 3) My license is a North Carolina license.
- See updated faculty roster attached.

Lakesha Reed, RN,MSN Owner/Operator 434-836-8393

On Wed, Jan 23, 2019 at 3:33 PM Saxby, Paula <paula.saxby@dhp.virginia.gov> wrote:

I have reviewed the information from the quarterly report you submitted. I am requesting that you submit the additional information requested below.

- 1. Information about the clinical experience at Riverside Health and Rehabilitation Center. Rhonda Griffin, RN has not returned my calls regarding the student experience at that facility. Is there someone else at the facility who can answer my questions? Please identify what the students are doing at the facility and the specific skills they are demonstrating with the residents.
- 2. Mary Williamson is identified as the Primary Instructor on your faculty roster; this is not a practical nursing program faculty designation; that is for the nurse aide program;

3. What State is your RN license from?

4. Please correct the faculty roster form and expand the last column; it is difficult to read the license numbers and dates. Add the expiration date for the RN license of Ida Poteat. Please check the license number for Diane Guy; the number you submitted is not showing her as the licensee. Please include the expiration date for the RN license of Kenneth Hawker.

Let me know if you have questions.

Paula B. Saxby, R.N., Ph.D. Deputy Executive Director Virginia Board of Nursing (804) 367-4597



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Current_Faculty_roster (1).docx

CURRENT FACULTY RAWCTITLE	FULL TIME PART TIME Date of intital hire	COLLEGE/	CREDENTIAL	MGHEST DEGREE OBTAINED	ESPONSIBILITY	YEARS EXPENIENCE In NURSING PRACTICE	YEANS EXPENSE NG In an academ k	STATE OF LICENSURE LICENSE NUMBER AND EIO. DATE	
Mary Williamson/ Program	Full Time 10-02-16	Capella University	RN, MSN	NSN	Pharmacology, Med Surg. 1&2, Fundamentals of Nursing, Medical Terminology/B asic Nutrition, and Trends of Practical Nursing/Clinic al Rotation.	£3	51	VA 0001080662 12/31/2018	
Lakesha Reed / Instructor	Full Time/ 04-2011	Winston- Salem State University	RN, MSN	MSN	Fill-In staff/ clinical	17	80	Multi- State242855 07/31/2020	
Carmen Collins / Instructor	Part Time/ 02- 02-16	Memorial Hospital School of Nursing	R	RN N	Mental Health	42	ហ	Multi-State 0001061173 01/31/2020	
Charmaine Cockran / Instructor	Part Time/ 07-31-2017	Memorial Hospital School of Nursing	RN,BSN	BSN	OB/PEDS	31	ro.	Multi-State 0001106459 11/30/2019	
Ida Poteat/ Instructor	Part Time/ 10/2/2016	Danville Regional	RN,BSN	BSN	Fill-In staff/ clinical	28	15	Multi-State 0001197327	

		Medical Center						11/30/2019	
Diane Guy/Instructor 09/06/2018	Part Time	Patrick Henry Community College	R.	Z.	Clinical and Fundamentals	24	7	Multi-State 0001145652 5/31/2020	
Kenneth Hawker/Instructor 1/07/2019	Part Time	Danville Community College	MSN,RN	MSN	Med Surg 1& 2 and Clinical	00	7	Multi-State 0001250383 8/31/2019	
Avis Toomer/Instructor 1/07/2019	Part-Time	Danville Regional Medical Center	RN	A.	Pharmacology and Clinical	12	H	Multi-State 0001208399 10/31/2019	
Sandra Walters/Instructor 1/07/2019	Part-Time	A&T University	MSN,RN	MSN	Med Surg 1& 2 and Clinical- Fill-In Staff	30	13	Multi-State 0001194006 2/29/2020	



Saxby, Paula <paula.saxby@dhp.virginia.gov>

KMBT28220181227085839.pdf

1 message

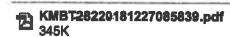
Lakesha Reed <medicalsolutions.lakesha@gmail.com>
To: paula.saxby@dhp.virglnla.gov

Thu, Dec 27, 2018 at 9:22 AM

Hello,

Attached is the quarterly report for Medical Solutions Academy. Happy New Year!!

Sent from my iPhone



December 20, 2018

To Whom It May Concern:

Medical Solutions Academy started their first cohort of 6 PN students on Sept. 17th. We initially had 8 applicants take and pass the Kaplan-PN entrance examination. Of the eight applicants, 6 enrolled. The name of the students are:

Cameron James

Susan Calaman

Kendra Wheeler

Jazmin Turner

Gale Durham

Carolyn Hairston.

These students started on Sept. 17th and they are currently enrolled in PN-111 Fundamentals of Nursing. Mary Williamson MSN, RN is currently teaching this course. The students have been enrolled for approximately 3 months. They have completed and successfully passed PN-101 Medical Terminology and PN-110 Basic Nutrition. This course is scheduled to be completed on March 14th. The students will be starting their clinical rotation on Jan. 11th at Riverside Health and Rehab Center.

The faculty roster as well as the clinical agency form is attached.

To date, the students are completing Kaplan and Saunders online NCLEX-PN test prep questions to help them better prepare for the NCLEX examination. The Fundamentals of Nursing exam will be administered online via Kaplan.

These courses will be taught in the second term.

PN 112- Basic Pharmacology (tentative start date Feb. 5th)

PN 113- Mental Health Nursing (tentative start date March 6th)

Laberto Reed Centro MELIRO

Mary Mulliomson NEVIEW

PN 114- Medical Surgical Nursing ! (will send with the April report)

These courses will be taught in the third term. Dates will be submitted with the April report.

PN 115- OB/Peds

PN 116- Medical Surgical Nursing II

PN 117- Trends of Practical Nursing

Regards,

Lakesha Reed-CurtIs MSN. RN

Mary Williamson MSN, RN

A STATE OF S

Kenneth Hawker Part Time Damville MSN, College	Diane Guy	Part Time	Patrick Henry Community College	Z	S.	Clinical and Fundamentals	77	7	Multi-State 000114565 6
	Hawker	Part Time	Danville Community College	MSN,RN	MSN	Med Surg 1.8.2 and Clinical	60	2	Multi-State 000125038 g\zi\

Table 1.4 - Program Clinical Site Information Form

	10 students per day/		10 Students per day		10 students per day		2 students per day/8 hours		2 students per classroom (6 hours per day)		5 students per day
	PN 111-Fundamentals of Nursing, PN 114, Medical Surgical 1, PN 115-	08/PEDS, PN 116-Medical Surgical Nursing 2	PN 111- Fundamentals of Nursing, PN-112- Pharmacology, PN 114	Medical Surpical Nursing 1, PN 116- Medical Surgical Nursing 2	PN 113- Mental Health Nursing	·	PN 115 Maternity and Pediatric Health Nursing		PN 115- Maternity and Pediatric Kealth Nursing	= 64	PN 115-Maternity and Pediatric Health
	9/7/2016	NA	12/5/2016	NA	8/10/15	NA	12/9/15	NA	1/26/16	N/A	4/2017 N/A
	Virginia Rich, RN, MSN 434-799-2100 Virginia Rich@izrt.net		Rhonda Griffin, RN 434-791-3800	EX No variantination	Pamela Meadows, RN,BSN 434-773-4244	pam.meadowa@dbhls.vlrginja.gov	Deana Crider deanacrider@yahoo.com 434-836-8953		Tara Martin 434-793-5710	martin@cicreadsfart.org	Angele Shelton 434-432-4443 ashahon@pathsinc.org
	1.Danville Regional Medical Center/TJC 2016/Good standards	Tendra .	2.Riverside Health and Rehabilitation Center Oct 2016/Good standing/TJC	■ Flokb	3. Southern Virginia Mental Health Institute/TJC 2015		4. Play – N-Pretend Department of Social Services/Nearch 2016/9cod Standardo-met all standards		5.Head Spart (CIC) Department of Social Services/2016/Good Standings		6.PATHS -CHATHAM LOCATION

			>	>	
STATE OF LICENSURE LICENSE NUMBER AND EXP. DATE	VA 0001080662 12/31/2020	NC 242855 07/31/2020	VA 0001061173 01/31/2020	VA 0001106459 11/30/2019	
YEARS EXPERIE NG IN AND IN AND AND IN AND IN AND IN AND IN AND IN AND IN AND IN AND IN AND AND AND IN AND AND AND IN AND AND IN AND AND AND IN AND AND AND A	15	60	r.	ro.	
YEARS EXPERIENCE In NURSING PRACTICE	43	17	42	31	
NAJOR TEACHING RESPONSIBILITY	Pharmacology, Med Surg. 182, Fundamentals of Nursing, Medical Terminology/B asic Nutrition, and Trends of Practical Nursing/Clinic al Rotation.	Fill-In staff/ clinical	Mental Health	OB/PEDS	Fill-In staff/
HAGHEST DEGREE OBTAINED	MSN	MSN	RN	BSN	
NURSING CREDENTIAL	RN, MSN	RN, MSN	RN.	RN, BSN	
COLLEGE	Capella University	Winston- Salem State University	Memorial Hospital School of Nursing	Memorial Hospital School of Nursing	
FULL TIME TIME Date of Initial live	Full Time 10-02-16	Full Time/ 04-2011	Part Time/ 02- 02-16	Part Time/ 07-31-2017	
CURRENT FACULTY RAINC/TITLE NAME	Mary Williamson/ Program Director	Lakesha Reed / Primary Instructor	Carmen Collins / Instructor	Charmaine Cockran / Instructor	

16 Danville Megional Medical Center	Part Time/ 10/2/2016
atrick H Commun College	Patrick Henry Community College
Danville Commun College	Danville Community College
Danville Regional Medical Center	Danville Regional Medical Center
\&T Jniversi	A&T University

STATE OF LICENSUME LICENSE NUMBER AND EOP. DATE	Multi-State VA 0001080662 12/31/2020	Multi-State NC 242855 07/31/2020	Multi-State VA 0001061173 01/31/2020	Multi-State VA 0001106459 11/30/2019
YEARS EQUELIE NG IN SERVING IN SE	15	60	I/I	ın
YEARS EDPERENCE IN NUISSING PRACTICE	£3	17	42	31
NESPONSIBILITY	Pharmacology, Med Surg. 1&2, Fundamentals of Nursing, Medical Terminology/B asic Nutrition, and Trends of Practical Nursing/Clinic al Rotation.	Fill-In staff/ clinical	Mental Health	OB/PEDS
HIGHEST DEGREE OBTAINED	MSN	MSN	RN	BSN
NURSING CREDENTIAL	RN, MSN	RN, MSN	RN	RN,BSN
COLLEGE/ UNIVERSITY	Capella University	Winston- Salem State University	Memorial Hospital School of Nursing	Memorial Hospital School of Nursing
FULL TRME/ PART TIME Date of Initial hire	Full Time 10-02-16	Full Time/ 04-2011	Part Time/ 02- 02-16	Part Time/ 07-31-2017
CURRENT FACULTY RANK/TITLE NAME	Mary Williamson/ Program Director	Lakesha Reed / Primary Instructor	Carmen Collins / Instructor	Charmaine Cockran / Instructor

Ida Poteat/ Instructor	Part Time/ 10/2/2016	Danville Regional Medical Center	RN,MSN	MSN	Fill-In staff/ clinical	28	15	Multi-State VA 0001197327 11/30/2019
Diane Guy 09/06/2018	Part Time	Patrick Henry Community College	NN .	Z.	Clinical and Fundamentals	24	7	Multi-State VA 0001145652 5/31/2020
Kenneth Hawker 1/07/2019	Part Time	Danville Community College	MSN,RN	MSN	Med Sung 1& 2 and Clinical	00	7	VA 0001250383 8/31/2019
Avis Toomer 1/07/2019	Part-Time	Danville Regional Medical Center	N.	S.	Pharmacology and Clinical	71	H	Multi-State VA 0001208399 10/31/2019
Sandra Walters 1/07/2019	Part-Time	A&T University	MSN,RN	MSN	Med Surg 1& 2 and Clinical- Fill-In Staff	30	13	Multi-State VA 0001194006 2/29/2020



Ridout, Charlette <charlette.ridout@dhp.virginia.gov>

Re: Medical Solutions Academy - Invitation to edit

1 message

Ridout, Charlette <charlette.ridout@dhp.virginla.gov>

Wed, Oct 3, 2018 at 4:14 PM

To: Lakesha Reed <medicalsolutions.lakesha@gmall.com>, Mary Williamson <medicalsolutions.mary@gmail.com>

Cc: Paula Saxby <paula.saxby@dhp.virginla.gov>

Ms. Willamson and Ms. Reed,

The quarterly report you have submitted for October 2018 regarding the practical nursing program at Medical Solutions Academy does not contain the information required to demonstrate the practical nursing program is compliant with the Regulations For Nursing Education Programs.

Please refer to the email sent to you on July 10, 2018 and on May 29, 2018 for a complete list of the Information that needs to be Included in the quarterly reports. The faculty roster and the clinical roster can be downloaded from the Board of Nursing website, Education tab at https://www.dhp.virginia.gov/nursing/edprogs.htm

This information must be submitted with each report, even if the information has not changed from the time the application was submitted.

Information regarding the currently courses being offered is also required.

A complete report with the required information needs to be provided to Dr. Saxby by October 12, 2018. Submit the report to:

Dr. Paula Saxby at paula.saxby@dhp.virginia.gov.

A hard copy is required and will need to be mailed to:

Department of Health Professions
Board of Nursing
9960 Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, VA 23233
Att: Paula Saxby

If you should have questions you may contact the nursing education office of the Board at 804-367-4473 or 804-367-4597.

Regards.

Charlette N. Ridout,RN,MS, CNE Senior Nursing Education Consultant Virginia Board of Nursing 804-367-4527



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On Mon, Oct 1, 2018 at 4:44 PM Lakesha Reed (via Google Sheets) < medical solutions.lakesha@gmail.com> wrote:

Lakesha Reed has invited you to edit the following spreadsheet:

Medical Solutions Academy

Open in Sheets

Lakesha Reed is outside your organization.

Google Sheets: Create and edit spreadsheets online.

Google LLC, 1600 Amphitheatre Parkway, Mountain View, CA 94043, USA

You have received this email because someone shared a spreadsheet with you from Google Sheets.



edical olutions cade my

306 Poplar Street
Danville, Va 24541
Phone: 434836-8393
Fax: 434-836-8394
medical-solutions accordency Germail.com

Medical Solutions of America

October 10, 2018

To Whom It May Concern:

Medical Solutions Academy started their first cohort of 6 PN students on Sept. 17th. We initially had 8 applicants take and pass the Kaplan-PN entrance examination. Of the eight applicants, 6 enrolled. The name of the students are:

Cameron James

Susan Calaman

Kendra Wheeler

Jazmin Turner

Gale Durham

Carolyn Hairston.

These students started on Sept. 17th and they are currently enrolled in PN-101 Medical Terminology and PN-110 Basic Nutrition. The students have been enrolled for four weeks. Lakesha Reed MSN, RN is currently teaching these two courses. These courses will be complete on November 20th. The students will then begin PN-111 Fundamentals of Nursing which will be taught by the Mary Williamson MSN, RN (Program Director). The students have not started any skills as of yet. This will start with the PN-111 Fundamentals of Nursing course which will start on November 27th. I have also included a timeline of the courses the students will take throughout the program. I have included the calendar for the nurse cohort.

The faculty roster as well as the clinical agency form is attached. The students have not started any clinicals at this time.

On Oct. 10th, the students are receiving an in-depth orientation to the Kaplan student portal to help with NCLEX-PN success. The students are also doing Saunders NCLEX-PN computerized test questions for the Nutrition course to help prepare them for success as well. The PN-110 Basic Nutrition exam will also be

online so that the students can get familiar with taking computerized testing which will also help with NCLEX success.

First term courses start dates and completion dates.

PN 101- Medical Terminology

Sept 17th-November 20th

PN 111- Basic Nutrition

Sept. 17th. November 20th

PN 111- Fundamentals of Nursing

November 27-February 21th

These courses will be taught in the second term. Dates will be submitted with the January report.

PN 112- Pharmacology

PN 113- Mental Health Nursing

PN 114- Medical Surgical Nursing I

These courses will be taught in the third term. Dates will be submitted with the April report.

PN 115- OB/Peds

PN 116- Medical Surgical Nursing II

PN 117- Trends of Practical Nursing

Regards,

Lakesha Reed-Curtis MSN, RN

& Read-Circles MSVIRV

Mary Hellesmoon, MSN, RN

Mary Williamson MSN, RN



Saxby, Paula <paula.saxby@dhp.virginia.gov>

Fwd: Virginia Board of Nursing

1 message

Lakesha Reed <medicalsolutions.lakesha@gmail.com> To: paula.saxby@dhp.vlrginia.gov

Wed, Oct 10, 2018 at 11:36 AM

This is the email. Sent from my IPhone

Begin forwarded message:

From: "Ridout, Charlette" <charlette.ridout@dhp.virginia.gov>

Date: July 10, 2018 at 12:36:33 PM EDT

To: Mary Williamson <medicalsolutions.mary@gmail.com>, Lakesha Reed <medicalsolutions.lakesha@

gmail.com>

Subject: Virginia Board of Nursing

The Board of Nursing has received the additional information for the July 2018 Quarterly Report as requested.

The next Quarterly Report will be due to the Board on the first Monday of October 2018.

The practical nursing program has initial approval. As required in 18VAC90-27-120 (B)(3), the program director will be required to submit quarterly reports.

Quarterly Reports are your opportunity to demonstrate the nursing program is compliant with current regulations and that the program is moving towards the requirements necessary to obtain full approval. Quarterly Reports are due to the Board on the first Monday of January, April , July and October.

Each Quarterly Report must include the following:

- Number of applicants
- Number of applicants to take the pre-admission test
- Number of applicants to pass the pre-admission test
- Number of admitted students
- · Names of each student admitted, date they started and the expected gradation date
- · Number of students to start on the first date of class
- Faculty roster
- Clinical agency form
- · Courses being offered
- Plan for NCLEX success
- Any information you would like the board to know
- Clinical tracking log, for each student by student name, to include location of clinical, the types of clinical experiences obtained and total hours completed da

Let me know should you have any questions.

Best Regards,

Charlette N. Ridout, RN, MS, CNE Senior Nursing Education Consultant Virginia Board of Nursing 804-367-4527



Saxby, Paula <paula.saxby@dhp.virginia.gov>

Fwd: Virginia Board of Nursing

1 message

Lakesha Reed <medicalsolutions.lakesha@gmail.com> To: paula.saxby@dhp.virginia.gov

Wed, Oct 10, 2018 at 11:36 AM

This is the email. Sent from my lPhone

Begin forwarded message:

From: "Ridout, Charlette" <charlette.ridout@dhp.virginia.gov>

Date: July 10, 2018 at 12:36:33 PM EDT

To: Mary Williamson <medicalsolutions.mary@gmail.com>, Lakesha Reed <medicalsolutions.lakesha@

gmail.com>

Subject: Virginia Board of Nursing

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- Clinical agency form
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- Plan for NCLEX success
- Any Information you would like the board to know
- Clinical tracking log, for each student by student name, to include location of clinical, the types of clinical experiences obtained and total hours completed da

Let me know should you have any questions.

Best Regards.

Charlette N. Ridout,RN,MS, CNE
Senior Nursing Education Consultant
Virginia Board of Nursing
804-367-4527



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Table 1.4 – Program Clinical Ste Information Form

Clinical Agency Name/ Unit name	Agency Contact phone number and email (person that will be able to	Date of Contract	Nursing course name/number and Type of	Number of students per clinical unit per day/ hrs on i Total number of students per term/
Accrediting Body, date and results of most recent accreditation visit	proside information regarding the student and faculty performance on the unit)	Date of last attendance	clinical experiences obtained	Total Hours in direct cleant / Indicate preceptor experiences with ₹
Example: 1. The Best Hospital, 4 South Activedited by Tab	May LouWho	3/10/2010	Medical Surgical I, NURS	e indents de de la selección
44 2 Y C 7				
1.Danville Ragional Medical Center/T.JC 2016/Good standards	Virginia Rich,RW,MSN 434-799-2100 Virginia.Rich@lpnt.net	9/7/2016	PN 111-Fundamentals of Nursing, PN 114, Medical Surgical 1, PN 115- 08/PEDS, PN 116-Medical Surgical Nursing 2	10 students per day/
2.Riverside Health and Rehabilitation Center Oct 2016/Good standing/TJC	Rhonda Griffin, RN 434-791-3800 rgriffith@mfa.net	12/5/2016	PN 111- Fundamentals of Nursing PN-112- Pharmacology, PN 114 Medical Surgical Nursing 1, PN 116- Medical Surgical Nursing 2	10 Students per day
3. Southern Virginia Mental Health Institute/TJC 2015	Pamela Meadows, RN,BSN 434-773-4244 pam.meadows@dbhds.virginia.gov	8/10/15	PN 113- Mental Health Nursing	10 students per day
4.Play -N-Pretend Department of Social Services/March 2016/Good Standards-met all standards	Deana Crider deanacrider@yahoo.com 434-836-8953	12/9/15	PN 115- Matemity and Pediatric Health Nursing	2 students per day/8 hours
5. Head Start (CIC) Department of Social Services/2016/Good Standings	Tara Martin 434-793-5710 tmartin@cicheadstart.org	1/26/16	PN 115- Maternity and Pediatric Health Nursing	2 students per classroom (6 hours per day)
6.PATHS —CHATHAM LOCATION	Angela Shelton 434-432-4443 ashelton@pathsinc.org	4/2017	PN 115- Maternity and Pediatric Health	5 students per day

FACULTY ROSTER

CURRENT FACULTY RANK/TITLE NAME	FULL TIME/ PART TIME Date of inttel hire	COLLEGE/ UNIVERSITY	NURSING	HIGHEST DEGREE OBTAINED	MAJOR TEACHING RESPONSIBILITY	YEARS DOPERIENCE IN NURSING PRACTICE	YEARS EOPENENCE TEACHING in an academic setting	STATE OF LICENSUIRE LICENSE NUMBER AND ERP. DATE
Mary Williamson/ Primary instructor	Full Time 10-02-16	Capella University	RN, MSN	MSN	Pharmacology, Med Surg. 18.2, Fundamentals of Nursing, Medical Terminology/B asic Nutrition, and Trends of Practical Nursing/Clinic al Rotation.	43	15	VA 000108066 2 12/31/2018
Lakesha Reed / Primary Instructor	Full Time/ 04-2011	Winston- Salem State University	RN, MSN	MSN	Fill-In staff/ clinical	17	60	Multi-State 242855 07/31/2020
Carmen Collins / Instructor	Part Time/ 02-02-16	Memorial Hospital School of Nursing	RN	RN	Mental Health	42	ın.	Multi-State 000106117 3 01/31/2020
Charmaine Cockran / Instructor	Part Time/ 07-31-2017	Memorial Hospital School of Nursing	RN,BSN	BSN	OB/PEDS	31	IO.	Multi-State 000110645 911/30/201 9
Ida Poteat/ Instructor	Part Time/	Danville Regional Medical Center	RN,BSN	BSN	Fill-In staff/ clinical	28	15	Multi-State 000119732 7

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Mary Williamson MS	Laborha Resed-Curtis	Carmen Collins, RN	E	
Mary Willamson	Lakesha Rased-Curtis	٤	E	
6 Mary Williamson	Labseha Raed-Curtis	Carm	Cherma	P. 10 410 11
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October 18th, 2019 6 Mary Williamson	Lakesha Rayol-Curtis	Carm	Cherman	
M138 Occober 18th, 2019 6 Mary Williamson	Laksaha Raed-Curts	Carm	Tempo -	
ber 18th, 2019 6 Mary Willemson	Lakesha Rasel-Curts	Carm	Tempo -	
Sept. 17th 2018 (October 18th, 2019)	Laksaha Rasel-Curts	Carm	Tempo -	l
E Sept 17th 2018 October 18th, 2019 6 Mary Willemson	UNITAL Cartes Cartes	Cem	Operation 1	l
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Ridout, Charlette <charlette.ridout@dhp.virginia.gov>

Virginia Board of Nursing

1 message

Ridout, Charlette <charlette.ridout@dhp.virginla.gov>

Tue, Jul 10, 2018 at 12:36 PM

To: Mary Williamson <medicalsolutions.mary@gmail.com>, Lakesha Reed <medicalsolutions.lakesha@gmail.com>

The Board of Nursing has received the additional information for the July 2018 Quarterly Report as requested. The next Quarterly Report will be due to the Board on the first Monday of October 2018.

The practical nursing program has initial approval. As required in 18VAC90-27-120 (B)(3), the program director will be required to submit quarterly reports.

Quarterly Reports are your opportunity to demonstrate the nursing program is compliant with current regulations and that the program is moving towards the requirements necessary to obtain full approval.

Quarterly Reports are due to the Board on the first Monday of January, April , July and October.

Each Quarterly Report must include the following:

- · Number of applicants
- · Number of applicants to take the pre-admission test
- Number of applicants to pass the pre-admission test
- Number of admitted students
- Names of each student admitted, date they started and the expected gradation date
- Number of students to start on the first date of class
- Faculty roster
- Clinical agency form
- · Courses being offered
- Plan for NCLEX success
- Any information you would like the board to know
- Clinical tracking log, for each student by student name, to include location of clinical, the types of clinical experiences
 obtained and total hours completed da

Let me know should you have any questions.

Best Regards.

Charlette N. Ridout,RN,MS, CNE Senior Nursing Education Consultant Virginia Board of Nursing 804-367-4527



Any and all statements provided herein shall not be construed as an official policy, position, opinion or statement of the Virginia Board of Nursing(VBON). VBON staff cannot and do not provide legal advice. VBON staff provide assistance to the public by providing reference to the VBON statutes and regulations; however, any such assistance provided by VBON staff shall not be construed as legal advice for any particular situation, nor shall any such assistance be construed to communicate all applicable laws and regulations governing any particular situation or occupation. Please consult an attorney regarding any legal questions related to state or federal laws and regulations, including the interpretation and application of the laws and regulations governing the VBON.

Under no circumstances shall VBON, its members, officers, agents, or employees be liable for any actions taken or omissions made in reliance on any information contained in this e mail.



Ridout, Charlette <charlette.rldout@dhp.virginia.gov>

Re: Information from the Virginia Board of Nursing

1 message

Lakesha Reed <medicalsolutions.lakesha@gmail.com>To: "Ridout, Charlette" <charlette.ridout@dhp.virginia.gov>

Wed, May 30, 2018 at 2:42 PM

Hello.

The contact email for Ms. Williamson is medical solutions.mary@gmail.com, her phone number is 434-836-8393. I would also like to continue to receive all notices related to the PN program. Thank you.

Lakesha Reed, RN,MSN Owner/Operator 434-836-8393

On Tue, May 29, 2018 at 2:21 PM, Ridout, Charlette <charlette.ridout@dhp.virginia.gov> wrote:

I am contacting you today to provide you with information needed for the practical nursing program at Medical Solutions Academy.

The Board is in need of the work email and phone number for the program director Ms. Mary Williamson. You will need to share the information in this email with the program director.

The Board communicates to the nursing program directors with information and official notification regarding the nursing programs. Additionally, Virginia Law § 54.1-3014.E allows for other people , typically administrative leadership and owners of the programs to be designated as someone who will be copied on official notifications and information regarding the program. I have copied the law below and provided a link to the complete law. If there is anyone other than the program director that you would like to receive information, you will need to provide their names, title and relationship to the practical nursing program, phone number, email address and mailing address.

"§ 54.1-3014. Survey of nursing education programs; discontinuance of program; due process requirements.

E. In addition to the program director, a nursing education program may designate one or more persons with whom the Board shall communicate for purposes of providing official notices, obtaining information, and responding to requests for information regarding the nursing education program; such persons need not be licensed nurses and need not maintain their primary place of business at the same address as the nursing education program." https://www.dhp.virginia.gov/nursing/nursing_laws_regs.htm#law

The practical nursing program has initial approval. As required in 18VAC90-27-120 (B)(3), the program director will be required to submit quarterly reports to the board that demonstrates evidence of progress toward full approval and other information as required. Quarterly Reports are due to the Board on the first Monday of January, April , July and October. You will not receive additional notification and reminders of these required reports. The report should include information and activities that have occurred in the immediate past 3 months. In example, a report submitted in January will cover the activities completed in October, November and December. Each quarterly report must include the following :

- Number of applicants
- Number of applicants to take the pre-admission test
- Number of applicants to pass the pre-admission test
- Number of admitted students
- · Names of each student admitted, date they started and the expected gradation date
- Number of students to start on the first date of class
- Faculty roster

- · Clinical agency form
- Courses being offered
- Plan for NCLEX success
- · any information you would like the board to know
- Clinical tracking log, for each student by student name, to include location of clinical, the types of clinical experiences obtained and total hours completed day

The first quarterly report will be due to the Board on the first Monday in July 2018. For purposes of meeting the required due date for the quarterly reports, electronic submissions can be sent to charlette.ridout@dhp.virginia.gov. If an electronic submission is sent, a hard copy of the report is also required and must be sent to

Department of Health Professions Perimeter Center 9960 Mayland Drive, suite 300 Henrico Virginia 23233 Attention: Charlette Ridout

You and the program director will need to be aware of all requirements in the Regulations For Nursing Education Programs. These regulations are different from the regulations that you submitted your application under and there are different regulation numbers. I have copied the links to the board website below.

I encourage you and the program director to become familiar with these regulations. Again, these regulations are different from when you submitted the application, so I encourage you to review each regulation to ensure the program is in regulatory compliance.

https://www.dhp.virginia.gov/nursing/nursing_laws_regs.htm#law Regulations for Nursing Education Programs - Revised 2-7-2018

Congratulations on obtaining initial approval for a practical nursing program. I wish you, the program director, the faculty and the students great success.

Please let me know if you have any questions.

Best regards.

Charlette N. Ridout, RN, MS, CNE Senior Nursing Education Consultant Virginia Board of Nursing 804-367-4527



Any and all statements provided herein shall not be construed as an official policy, position, opinion or statement of the Virginia Board of Nursing(VBON). VBON staff cannot and do not provide legal advice. VBON staff provide assistance to the public by providing reference to the VBON statutes and regulations; however, any such assistance provided by VBON staff shall not be construed as legal advice for any particular situation, nor shall any such assistance be construed to communicate all applicable laws and regulations governing any particular situation or occupation. Please consult an attorney regarding any legal questions related to state or federal laws and regulations, including the interpretation and application of the laws and regulations governing the VBON.

Under no circumstances shall VBON, its members, officers, agents, or employees be liable for any actions taken or omissions made in reliance on any information contained in this e mail.

January 24, 2019

Note to file for Medical Solutions Academy, Practical Nursing Program, Danville

Spoke with Jane Lindley, RN, Staff Education Coordinator, at Riverside Health and Rehabilitation Center today to verify the information that was submitted by Lakesha Reed in an email to me on January 23, 2019. I had previously left three voicemail message for the contact person listed on the Clinical Site Information Form that was submitted by Ms. Reed.

Ms. Lindley reported that the practical nursing students at Medical Solutions Academy have just started conducting clinicals at their facility this month. They are only there on Friday evening and Saturday. Ms. Reed reported that the students started their clinical rotation on January 11, 2019. I asked if the clinical faculty was Mary Williamson, the identified Program Director for the school, and she said "no", the only faculty person Ms. Lindley had seen was Kenneth Hawker, RN. According to the January 2019 Quarterly Report, Mr. Hawker was recently hired (January 7, 2019) and the faculty roster indicates he will be teaching Med Surg 1 & 2 and Clinical. Mary Williamson (Program Director) is identified on the faculty roster as teaching Fundamentals of Nursing, Medical Terminology, Basic Nutrition, Trends of Practical Nursing, and Clinical Rotation. Ms. Lindley stated that Mr. Hawker had worked at their facility when he was an LPN and currently works at a sister facility as an RN, so he is familiar with Riverside Health and Rehabilitation Center. It is unclear if he had an orientation as a faculty member of Medical Solutions Academy.

Ms. Lindley also reported that the students are only conducting head to toe assessments and working on their documentation with the faculty person. They do not have access to the files at the facility to document their care. Ms. Lindley also indicated that the students are not doing accuchecks or any other direct hands-on care, as was indicated by Lakesha Reed in the January 23, 2019 email. The students are not feeding, bathing, or providing basic ADL's to the residents at the facility. Ms. Lindley indicated that the students would not be performing the skills that Lakesha Reed identified until Ms. Lindley meets with the faculty and students of Medical Solutions Academy. They were supposed to meet last Friday (January 18, 2019), but this did not occur due to illness of Ms. Lindley. She stated that she is scheduled to meet with the faculty and students on February 1, 2019. It is unclear when and if the students will be performing dressing changes, foley catheter care, peg tube care, trach care, or IV insertion and care, as indicated by Ms. Reed.

It is also unclear why Lakesha Reed is submitting the Quarterly Reports and not Mary Williamson, the identified Program Director.

Submitted by: Paula B. Saxby, RN, Ph.D. January 24, 2019



COMMONWEALTH of VIRGINIA

David E. Brown, D.C. Director

Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginia.gov TEL (804) 367- 4400 FAX (804) 527- 4475

Virginia Board of Nursing
Jay P. Douglas, MSM, RN, CSAC, FRE
Executive Director

Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4639 FAX (804) 527-4455

May 21, 2018

Lakesha Reed, RN, MSN Medical Solutions Academy 306 Poplar Street Danville, Virginia 24541

RE: Application to establish a practical nursing education program

Dear Ms. Reed,

At its meeting on May 2, 2018, the Education Special Conference Committee of the Virginia Board of Nursing considered the application to establish a practical nursing education program at Medical Solutions Academy. The Committee made the following recommendation to the Board:

Recommend to grant initial approval of the practical nursing education program application, which includes, but is not limited to, the admission plan submitted by the program to enroll no more than 10 students every 13 months.

At its meeting on May 15, 2018, the Board voted to accept the Committee's recommendation as stated above. The practical nursing education program at Medical Solutions Academy is granted initial approval, effective May 15, 2018.

With the initial approval, the advertisement of the practical nursing education program is authorized. In addition, the admission of students is authorized, except that transfer students are not authorized to be admitted until the program has received full program approval. Further, the program director shall submit quarterly progress reports to the Board of Nursing that shall include evidence of progress toward full program approval and other information as required by the Board of Nursing.

The Board of Nursing is requesting a new program code from the National Council of State Boards of Nursing (NCSBN) for Medical Solutions Academy, practical nursing education program. Once we have received the new program code, we will inform you of the program

Medical Solutions Academy May 21, 2018 Page 2

code. The program code will be required by all graduates of the practical nursing education program that was approved on May 15, 2018 when applying to take the NCLEX-PN exam.

Charlette Ridout, Senior Nursing Education Consultant for the Board of Nursing will be in contact with the Program Director in the near future regarding maintaining initial approval and required quarterly reports. Please contact this office if you have any questions.

Sincerely,

Paula B. Saxby, R.N., Ph. D

Deputy Executive Director

Cc: Peter Blake, Director, SCHEV

Joseph Crooks, Certification Coordinator, SCHEV



COMMONWEALTH of VIRGINIA

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Revised
February 11, 2019

Suzanne Benfield, RN Interim Program Director Bryant & Stratton College 4410 Claiborne Square, Suite 233 Hampton, VA 23666

Program Code: US28409900

RE: Request to Change from a Day Program to an Evening Program

Dear Dr. Benfield:

This letter is sent as notification that the Education Informal Conference Committee of the Virginia Board of Nursing will consider the request to change from a day program to an evening program at Bryant and Stratton College, Hampton. The committee will meet at 9:00 a.m. on March 6, 2019 at Perimeter Center, 9960 Mayland Drive, Suite 201, Board Room 1, in Henrico.

In an effort to facilitate a more complete review of educational programs, the Board of Nursing has established the procedure which is reflected in this letter. This allows for a careful review of each request, the opportunity for you to be present, if you wish, and for you to participate in the process with the Committee.

While your attendance is not required, you may be present when the program is considered by the Committee. Attending the meeting will give you the opportunity to make comments about the request and respond to questions from the Committee. Questions from the Committee that cannot be answered by the material provided may result in a deferral of the Board's decision in the absence of a representative from the program. Please let us know by February 25, 2019 if you plan to be present.

After the Committee reviews the report, the Committee will develop a recommendation for presentation to the Board at its meeting on March 19, 2019.

Bryant & Stratton College, Hampton February 11, 2019 Page 2

The Committee will make one of the following recommendations to the Board:

To grant the request; or Request additional information; or To deny request.

The Board of Nursing will take action on the recommendation from the Committee. The procedure is consistent with the Board of Nursing Laws and Regulations and the Virginia Administrative Process Act in that it provides for an informal conference for the initial decision while allowing for the Board or a panel thereof to consider the matter in a formal hearing if agreement is not reached informally.

In any instance where an adverse recommendation is accepted by the Board of Nursing, within thirty-three (33) days of the date of the order/action, the program director may request a formal hearing before the Board or a panel thereof, in accordance with Virginia Code §2.2-4020 and §54.1-2400 (11).

Please contact me if you have any questions.

Sincerely,

Paula B. Saxby, R.N., Ph.D.
Paula B. Saxby, R.N., Ph.D.

Deputy Executive Director

Cc: Education IFC Committee
Jeff Thorud, Campus Director

Tina M. Stavredes, Ph.D., VP, Chief Academic Officer

Peter Blake, Director, SCHEV



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Virginia Board of Nursing Jay P. Douglas, MSM, RN, CSAC, FRE Executive Director

Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

January 31, 2019

Stephanie Terry, Ph.D., RN, CNE Program Director Bryant & Stratton College 4410 Claiborne Square, Suite 233 Hampton, VA 23666

Program Code: US28409900

RE: Request to Change from a Day Program to an Evening Program

Dear Dr. Terry:

This letter is sent as notification that the Education Informal Conference Committee of the Virginia Board of Nursing will consider the request to change from a day program to an evening program at Bryant and Stratton College, Hampton. The committee will meet at 9:00 p.m. on March 6, 2019 at Perimeter Center, 9960 Mayland Drive, Suite 201, Board Room 1, in Henrico.

In an effort to facilitate a more complete review of educational programs, the Board of Nursing has established the procedure which is reflected in this letter. This allows for a careful review of each request, the opportunity for you to be present, if you wish, and for you to participate in the process with the Committee.

While your attendance is not required, you may be present when the program is considered by the Committee. Attending the meeting will give you the opportunity to make comments about the request and respond to questions from the Committee. Questions from the Committee that cannot be answered by the material provided may result in a deferral of the Board's decision in the absence of a representative from the program. Please let us know by February 25, 2019 if you plan to be present.

After the Committee reviews the report, the Committee will develop a recommendation for presentation to the Board at its meeting on March 19, 2019.

Bryant & Stratton College; Hampton January 31, 2019
Page 2

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To grant the request; or Request additional information; or To deny request.

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In any instance where an adverse recommendation is accepted by the Board of Nursing, within thirty-three (33) days of the date of the order/action, the program director may request a formal hearing before the Board or a panel thereof, in accordance with Virginia Code §2.2-4020 and §54.1-2400 (11).

Please contact me if you have any questions.

Sincerely.

Paula B. Saxby, R.N., Ph.D. Paula B. Saxby, R.N., Ph.D.

Deputy Executive Director

Cc: Education IFC Committee
Jeff Thorud, Campus Director

Tina M. Stavredes, Ph.D., VP, Chief Academic Officer

Peter Blake, Director, SCHEV



Saxby, Paula <paula.saxby@dhp.virginia.gov>

Bryant & Stratton College Plan for an Evening Program

1 message

Terry, Stephanie <swterry@bryantstratton.edu>
To: "Saxby, Paula" <paula.saxby@dhp.virginia.gov>

Mon, Jan 28, 2019 at 5:39 PM

Good Evening Dr. Saxby,

Please see attached for Bryant & Stratton College, Hampton Campus plan to move the Associate Degree Nursing program from a Day program to an Evening program.

I will also be sending this via postal mail.

Thank you,

Stephanie

Stephanie W. Terry, Ph.D., RN, CNE

Program Director - Nursing

4410 E. Claiborne Square, Suite 233

Hampton, VA 23666

Office: 757-896-6001 Ext. 330

swterry@bryantstratton.edu

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BSC_Hampton Campus Evening Program Plan.docx 50K



January 28, 2019

Dr. Stephanie Terry, Ph.D., RN, CNE
Program Director – Nursing
Bryant & Stratton College – Hampton Campus
4410 E. Claiborne Square, Suite 233
Hampton, Virginia 23666
757-896-6001 Ext. 330
swterry@bryantstratton.edu

Dr. Paula Saxby, RN, Ph.D.
Deputy Executive Director
Virginia Board of Nursing
Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233

Dear Dr. Saxby,

I am writing on behalf of Bryant & Stratton College, Hampton Campus Associate Degree Nursing program. Currently the Associate Degree Nursing program has initial approval to run as a Day program accepting 20 students per semester (3 times a year). Bryant & Stratton College would like to move the Associate Degree Nursing program from a Day program to an Evening program starting in May 2019, Spring semester. Since the start of the nursing program, the College is seeing more interest in an evening program than days from prospective students, leading the College to believe there is a greater need in the area for an evening program.

The plan is to teach out the current four cohorts of Day students and begin accepting 20 students (per semester) for an Evening program. The Day program will phase out after Spring (May) 2020 semester is complete. Please note the following chart of the teach out process:

Students	Winter (Jan) 2019	(May) 2010	Fall 2019 (Sept)	(Jan) 2020	Spring 2020 (May)	Fall 2020 (Sept)	Winter (Jan) 2021
Cohort 1- (Day)	4 th semester	5 th semester- graduate 8/19					
Collect 2- (Day)	3 rd semester	4 th semester	5 th semester- graduate 12/19				
Cohort 3- (Bay)	2 nd semester	3 rd semester	4 th semester	5 th semester- graduate 4/20			
Cebort 4- (Day)	1 st semester	2 nd semester	3 rd semester	4 th semester	5th semester -graduate 08/20 End Day Program		
Cohert 5- (Evenings)		1" semester (20 students) Start evening program	2 nd semester	3 rd semester	4 th semester	5th semester - graduate 12/20	
Cobort (- (Evenings)			1 st semester (20 students)	2 nd semester	3 rd semester	4 th semester	5 th semester - graduate 04/21

Please contact me for questions.

Thank you,

Stephanie Terry



COMMONWEALTH of VIRGINIA

David E. Brown, D.C. Director

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Virginia Board of Nursing Jay P. Douglas, MSM, RN, CSAC, FRE Executive Director

Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

Revised February 11, 2019

Julie Siemers, DNP, MSN, RN
Program Director, Arlington Campus
Chamberlain University – College of Nursing
2450 Crystal Drive, Suite 319
Arlington, VA 22202

Program Code: US28500600

RE: Relocation of the Arlington Campus to Vienna Virginia

Dear Dr. Siemers:

This letter is sent as notification that the Education Informal Conference Committee of the Virginia Board of Nursing will consider the relocation information of the Ariington Campus to Vienna Virginia for Chamberlain University College of Nursing. The committee will meet at 9:00 a.m. on March 6, 2019 at Perimeter Center, 9960 Mayland Drive, Suite 201, Board Room 1, in Henrico.

In an effort to facilitate a more complete review of educational programs, the Board of Nursing has established the procedure which is reflected in this letter. This allows for a careful review of this information, the opportunity for you to be present, if you wish, and for you to participate in the process with the Committee.

While your attendance is not required, you may be present when the program is considered by the Committee. Attending the meeting will give you the opportunity to make comments about the request and respond to questions from the Committee. Questions from the Committee that cannot be answered by the material provided may result in a deferral of the Board's decision in the absence of a representative from the program. Please let us know by February 25, 2019 if you plan to be present.

After the Committee reviews the report, the Committee will develop a recommendation for presentation to the Board at its meeting on March 19, 2019.

Chamberlain University College of Nursing February 11, 2019
Page 2

The Committee will accept this report as information and take no action.

Please contact me if you have any questions.

Sincerely,

Paula B. Saxby, R.N., Ph.D.
Paula B. Saxby, R.N., Ph.D.

Deputy Executive Director

Cc: Education IFC Committee

Diane Smith Levine, Ed.D (c), M.H.A., MSN, BSN, RN, CNE

Lead Senior Manager State Licensing & Regulation

Nelda Webb, Licensing and Regulation

Karen Cox, PhD, RN, FACHE, FAAN, President

Peter Blake, Director, SCHEV



Saxby, Paula <paula.saxby@dhp.virginla.gov>

Chamberlain University College of Nursing

1 message

Smith-Levine, Diane < DSmith-Levine@chamberlain.edu>

Mon, Jan 7, 2019 at 2:07 PM

To: "Saxby, Paula" <paula.saxby@dhp.virginia.gov>

Cc: "Siemers, Julie D" <JSiemers@chamberlain.edu>, "Meredith, Cynthia Louise" <CMeredith@chamberlain.edu>

Good Afternoon Dr. Saxby,

Happy New Year.

Please find attached the relocation notification for the Arlington campus location. A hard copy is to follow. If you need anything further do not hesitate to contact myself of Dr. Siemers. We are happy to provide any additional information. The guidance document assisted in what we shared in the notification, but if after discussions, the Education Committee would request or desire additional documentation, just let us know. It is my understanding that this notice will be received at the March Education Committee meeting and communicated to the members at the regular Board meeting in April. Thank you for your assistance to Chamberlain in this relocation process. Have a great rest of your day. Diane

Diane Smith Levine Ed.D.(c), M.H.A., M.S.N., B.S.N., *R.N., C.N.E | Lead Sr. Manager State Licensing and Regulation

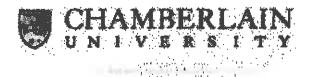
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CHAMBERLAIN UNIVERSITY

COLLEGE of NURSING

JAN 1 1 2019 DHP

January 7, 2019

Dr. Paula Saxby
Virginia Board of Nursing
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

Dear Dr. Saxby:

The purpose of this letter is to notify the Virginia Board of Nursing (Board) of Chamberlain University's College of Nursing (Chamberlain) recent decision to relocate the Arlington, Virginia campus. The campus is currently located at 2450 Crystal Drive, Arlington, Virginia 22202. Chamberlain executed a lease for a newly, remodeled campus at 1951 Kidwell Avenue Vienna, Virginia 22182 with a projected construction completion in December 2019. Chamberlain's new campus will be open to serve students on January 6, 2020. Chamberlain will also host a Board site visit at 1951 Kidwell Ave. once the new location is student ready and prior to the students' arrival on campus.

Per our phone conversation on November 8, 2018, Chamberlain presents this official notification that includes the requested information via your December 11, 2018 email. Chamberlain understands this letter and its related attachments fulfills the requirements of rule: 18VAC90-27-200 Program changes. A. The following shall be reported to the board within 10 days of the change or receipt of a report from an accrediting body: 4. Change in the physical location of the program. The curriculum will not change and the clinical partners will remain unchanged. A well-defined communications plan to students, colleagues, partners and other stakeholders is currently in development to ensure a smooth transition.

The new Chamberlain campus is approximately 16 miles west of Chamberlain's current location in the rapidly growing Tysons Corner area. At this time, approximately 48% of enrolled students reside in Virginia and 46% in Maryland. Approximately 25% of the students living in Maryland live in the western part of the state. The move will result in less commuting distance for these students. Chamberlain will continue to provide individualized student attention consistent with the Chamberlain Care[®] Model to ensure a smooth transition for all current and future students at the new campus location.

Rationale for Chamberlain's decision included:

- 1. Upcoming expiration of the lease at the current location.
- 2. Rising lease rates beyond what is deemed financially prudent for Chamberlain.
- 3. Planned campus expansion and refresh will be significantly streamlined with no construction related disruption during the student learning experience.
- 4. The new campus building is located just off of Interstate 495 providing easy access to the campus.
- 5. The new campus is accessible to public transportation, free parking, and access to building amenities.

2450 Cyrstal Drive | Aclington, VA 22202-3887 | 703.416,7300 | chamberlain.edu.



Page 2

The new campus buildout will be similar to the current location building specifications; however, will also include all "new campus" requirements providing an enhanced student learning environment based upon national level student and colleague feedback. Please refer to Attachment 1 for a list of square footage and space allocations at the new location. Architect drawings are forthcoming and can be shared upon request.

Chamberlain believes that the Board does not require any further documentation relative to this relocation notification. However, if you or the Board require additional information or have questions, please do not hesitate to contact me at isiemers@chamberlain.edu.

Sincerely,

Julie Siemers, DNP, MSN, RN

relie Sceners

Campus President

Attachment 1: List of Square Footage and Allotments for Student Space at the New Location

Cc: Tona Leiker, Director, Regulation and Accreditation Kacie Spencer, Sr. Director of Campus Operations

Diane Smith-Levine, Sr. Manager State Licensing and Regulation

Attachment 1: List of Square Footage and Allotments for Student Space at the New Location

Chamberlain University campus programmatic space requirements to academically serve a 500 student enrollment at the new location.

Reception Area 50	Simulation Care Center	Required Square Footage
Two 14' x 14' Simulation Bays 392 One 15' x 15 Simulation Bay 225 One Control Room for each bay 300 One Briefing Room for each bay 780 One Storage Room for each bay 150 Simulation Prep Area 250 General Storage 300 Compressor Room 100 Total Simulation Care Center Area 6,147 Sq. Ft. Classrooms 300 One Science Lab Classroom 350 One Science Lab Prep Room 350 One Science Lab Storage Room 350 Six Standard Classrooms 3,450 Total Classroom Area 5,250 Sq. Ft. Administrative and Faculty Offices 180 Campus President 180 Administrative Coordinator 40 Dean of Academic Affairs 120 Associate Dean of Faculty 120 Associate Dean of Faculty 120 Associate Dean of Academic Operations 100 SIMCare and Learning Commons Manager 100 Fulltime Faculty private offices - 7 offices at 75 sq. ft. each 525 <td>Reception Area</td> <td></td>	Reception Area	
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General Storage 300 Compressor Room 100 Total Simulation Care Center Area 6,147 Sq. Ft. Classrooms 1,100 One Science Lab Classroom 350 One Science Lab Prep Room 350 One Science Lab Storage Room 350 Six Standard Classrooms 3,450 Total Classroom Area 5,250 Sq. Ft. Administrative and Faculty Offices 180 Campus President 180 Administrative Coordinator 40 Dean of Campus Operations 120 Dean of Academic Affairs 120 Associate Dean of Faculty 120 Associate Dean of Faculty 120 Academic Administrative Coordinator 40 Associate Dean of Academic Operations 100 SIMCare and Learning Commons Manager 100 Fulltime Faculty private offices – 3 @ 100 sq. ft. each 300 Fulltime Faculty shared offices – 7 offices at 75 sq. ft. each 525 Visiting Professors/Adjunct Faculty 250 Four Lab Specialists 160	One Storage Room for each bay	150
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Administrative and Faculty Offices Campus President 180 Administrative Coordinator 40 Dean of Campus Operations 120 Dean of Academic Affairs 120 Associate Dean of General Education 120 Associate Dean of Faculty 120 Administrative Conference Room 180 Academic Administrative Coordinator 40 Associate Dean of Academic Operations 100 SIMCare and Learning Commons Manager 100 Fulltime Faculty private offices - 3 @ 100 sq. ft. each 300 Fulltime Faculty shared offices - 7 offices at 75 sq. ft. each 525 Visiting Professors/Adjunct Faculty 500 Four Lab Specialists 160	Six Standard Classrooms	3,450
Campus President180Administrative Coordinator40Dean of Campus Operations120Dean of Academic Affairs120Associate Dean of General Education120Associate Dean of Faculty120Administrative Conference Room180Academic Administrative Coordinator40Associate Dean of Academic Operations100SIMCare and Learning Commons Manager100Fulltime Faculty private offices 3 @ 100 sq. ft. each300Fulltime Faculty shared offices 7 offices at 75 sq. ft. each525Visiting Professors/Adjunct Faculty250Four Lab Specialists160	Total Classroom Area	5,250 Sq. Ft.
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Dean of Academic Affairs Associate Dean of General Education Associate Dean of Faculty 120 Administrative Conference Room Academic Administrative Coordinator Associate Dean of Academic Operations SIMCare and Learning Commons Manager Fulltime Faculty private offices - 3 @ 100 sq. ft. each Fulltime Faculty shared offices - 7 offices at 75 sq. ft. each Visiting Professors/Adjunct Faculty Four Lab Specialists	Administrative Coordinator	40
Associate Dean of General Education Associate Dean of Faculty Administrative Conference Room Academic Administrative Coordinator Associate Dean of Academic Operations SIMCare and Learning Commons Manager Fulltime Faculty private offices – 3 @ 100 sq. ft. each Fulltime Faculty shared offices – 7 offices at 75 sq. ft. each Visiting Professors/Adjunct Faculty Four Lab Specialists	Dean of Campus Operations	120
Associate Dean of Faculty Administrative Conference Room Academic Administrative Coordinator Associate Dean of Academic Operations SIMCare and Learning Commons Manager Fulltime Faculty private offices – 3 @ 100 sq. ft. each Fulltime Faculty shared offices – 7 offices at 75 sq. ft. each Visiting Professors/Adjunct Faculty Four Lab Specialists	Dean of Academic Affairs	120
Administrative Conference Room Academic Administrative Coordinator Associate Dean of Academic Operations SIMCare and Learning Commons Manager Fulltime Faculty private offices 3 @ 100 sq. ft. each Fulltime Faculty shared offices 7 offices at 75 sq. ft. each Visiting Professors/Adjunct Faculty Four Lab Specialists 180 40 40 40 40 40 40 40 40 40 40 40 40 40	Associate Dean of General Education	120
Academic Administrative Coordinator Associate Dean of Academic Operations SIMCare and Learning Commons Manager Fulltime Faculty private offices - 3 @ 100 sq. ft. each Fulltime Faculty shared offices - 7 offices at 75 sq. ft. each Visiting Professors/Adjunct Faculty Four Lab Specialists 40 40 40 40 50 100 51 525 525 Fulltime Faculty shared offices - 3 @ 100 sq. ft. each 525 525 526 527 528 529 520 520 520	Associate Dean of Faculty	120
Associate Dean of Academic Operations SIMCare and Learning Commons Manager Fulltime Faculty private offices – 3 @ 100 sq. ft. each Fulltime Faculty shared offices – 7 offices at 75 sq. ft. each Visiting Professors/Adjunct Faculty Four Lab Specialists 100 500 500 500 500 500 500 50	Administrative Conference Room	180
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Fulltime Faculty private offices - 3 @ 100 sq. ft. each Fulltime Faculty shared offices - 7 offices at 75 sq. ft. each Visiting Professors/Adjunct Faculty Four Lab Specialists 300 525 250 160		100
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Visiting Professors/Adjunct Faculty 250 Four Lab Specialists 160		
Four Lab Specialists 160		q. ft. each 525
Four Lab Specialists 160	Visiting Professors/Adjunct Faculty	250
Two Clinical Coordinator Specialists 84	Four Lab Specialists	160
	Two Clinical Coordinator Specialists	84

Page 2

Three Small Faculty Meeting Rooms	330
One Large Faculty Meeting Room	200
Faculty Break Room	200
Faculty Copy Room	120
IT Support Technician	100
Total Administrative and Faculty Offices Area	3,389 Sq. Ft.
Admissions Services Area	
Admission Reception Area	400
Director of Admissions	120
Three Admissions Advisors	300
Three Interview Rooms	360
One ADA Accessible Interview Room	150
Admissions Coat Closet	50
Admissions Storage	· 75
Total Admissions Services Area	1,455 Sq. Ft.
Testing Center Area	
Testing Room	225
Locker Area	75
Proctor	40
Total Testing Center Area	340 Sq. Ft.
Student Services Area	
Student Services Reception	300
Student Services Manager	120
Student Services Supervisor	120
One Student Services Coordinator	40
	· =
One Student Services Coordinator	40
One Student Services Coordinator Three Student Services Advisors Total Student Services Area Learning Commons	40 360
One Student Services Coordinator Three Student Services Advisors Total Student Services Area Learning Commons Library Reception/Check-In Kiosk	40 360
One Student Services Coordinator Three Student Services Advisors Total Student Services Area Learning Commons Library Reception/Check-In Kiosk Library	40 360 940 Sq. Ft. 80 1,500
One Student Services Coordinator Three Student Services Advisors Total Student Services Area Learning Commons Library Reception/Check-In Kiosk Library Large Group Study Area	40 360 940 Sq. Ft. 80 1,500 600
One Student Services Coordinator Three Student Services Advisors Total Student Services Area Learning Commons Library Reception/Check-In Kiosk Library Large Group Study Area Student Government Room	40 360 940 Sq. Ft. 80 1,500 600 120
One Student Services Coordinator Three Student Services Advisors Total Student Services Area Learning Commons Library Reception/Check-In Kiosk Library Large Group Study Area Student Government Room Two Group Study Rooms	40 360 940 Sq. Ft. 80 1,500 600 120 300
One Student Services Coordinator Three Student Services Advisors Total Student Services Area Learning Commons Library Reception/Check-In Kiosk Library Large Group Study Area Student Government Room	40 360 940 Sq. Ft. 80 1,500 600 120

Page 3

Center for Academic Success (CAS)	
CAS Administrative Coordinator	40
Career Services Advisor	40
Two Professional Nurse Tutors	200
Total Learning Commons Area	2,955 Sq. Ft.
Student Commons/Café	
One Student Commons/Café	1,000 Sq. Ft.
Campus Support Spaces	
Security Guard Station	100
Wellness Room	100
IT IDF Room	100
IT Server Room	100
Mail/Copy Room	200
Storage	100
Corridors/Circulation	7,128
Total Support Spaces Area	7,828 Sq. Ft.
Total Campus Programmatic Square Footage Required	29,404 Sg. Ft.



COMMONWEALTH of VIRGINIA

David E. Brown, D.C. Director

Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
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Virginia Board of Nursing Jay P. Douglas, MSM, RN, CSAC, FRE Executive Director

Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

February 14, 2019

Jacqueline Portnoy, RN
Director, Practical Nursing
Fairfax County School of Practical Nursing
6815 Edsall Road
Springfield, VA 22151

Program Code: US28108600

RE: Request to Increase the Length of Program

Dear Ms. Portnoy:

This letter is sent as notification that the Education Informal Conference Committee of the Virginia Board of Nursing will consider the request to increase the length of the practical nursing program at Fairfax County School for Practical Nursing, Springfield. The committee will meet at 9:00 a.m. on March 6, 2019 at Perimeter Center, 9960 Mayland Drive, Suite 201, Board Room 1, in Henrico.

In an effort to facilitate a more complete review of educational programs, the Board of Nursing has established the procedure which is reflected in this letter. This allows for a careful review of each request, the opportunity for you to be present, if you wish, and for you to participate in the process with the Committee.

While your attendance is not required, you may be present when the program is considered by the Committee. Attending the meeting will give you the opportunity to make comments about the request and respond to questions from the Committee. Questions from the Committee that cannot be answered by the material provided may result in a deferral of the Board's decision in the absence of a representative from the program. Please let us know by February 25, 2019 if you plan to be present.

After the Committee reviews the report, the Committee will develop a recommendation for presentation to the Board at its meeting on March 19, 2019.

Fairfax County School of Practical Nursing February 14, 2019 Page 2

The Committee will make one of the following recommendations to the Board:

To grant the request: or Request additional information; or To deny request.

The Board of Nursing will take action on the recommendation from the Committee. The procedure is consistent with the Board of Nursing Laws and Regulations and the Virginia Administrative Process Act in that it provides for an informal conference for the initial decision while allowing for the Board or a panel thereof to consider the matter in a formal hearing if agreement is not reached informally.

In any instance where an adverse recommendation is accepted by the Board of Nursing, within thirtythree (33) days of the date of the order/action, the program director may request a formal hearing before the Board or a panel thereof, in accordance with Virginia Code §2.2-4020 and §54.1-2400 (11).

Please contact me if you have any questions.

Sincerely,

Paula B. Layley, R.N., Ph.D. Paula B. Saxby, R.N., Ph.D.

Deputy Executive Director

Cc: **Education IFC Committee** Jennifer Alpers, M. Ed., Program Manager Health and Medical Sciences William McGreevy, Assistant Principal Dr. Scott S. Brabrand, Superintendent Beth Downey, CTE Coordinator

Michele Green-Wright, RN, M.Ed, Specialist, DOE



Instructional Services Department Career and Technical Education 8270 Willow Oaks Corporate Dr. Fairfax, VA 22031

December 3, 2018

DEC 1 2 2018

DHP

Dr. Paula Saxby Board of Nursing 9960 Mayland Drive, Suite 300 Henrico, VA 23233

Re: Proposed Changes to the Fairfax County School of Practical Nursing Program

Dear Dr. Saxby,

The purpose of this letter is to share with you and the Board of Nursing our desire to restructure the nursing pathway at Fairfax County Public Schools (FCPS). Our intention is to increase student access to nursing courses as well as the number of students who are eligible for nursing industry certifications such as: Certified Nurse Aide (application to be submitted), Patient Care Technician, and Licensed Practical Nurse by the end of high school their high school experience.

Currently, our Licensed Practical Nursing (LPN) program follows the Fairfax County Public Schools calendar over the course of two school years. This model is 23 months long from start to finish and requires students matriculating from LPN 2 to LPN 3 to return as a post-graduate. On average, only 5 to 6 of the approximately 130 high school students enrolled in the practical nursing program as seniors will matriculate to the post-secondary level and complete the LPN program. Our proposed model will give students the opportunity to complete the full LPN program during an accelerated and uninterrupted consecutive 15-month period, finishing the August after graduation.

Our proposed LPN program will be available to high school students only, and the expected number of students per year is a maximum of 40. Students will begin the LPN program in June after finishing their junior year and will meet for approximately 40 hours per week for designated weeks of summer. During senior year, students will meet every other day for five hours. Students will continue with the LPN program for approximately 40 hours per week for designated weeks of summer immediately following high school graduation, with the LPN program graduation slated for mid-August.

This 15-month program is designed to be 1017 hours total. Of the total program hours, the 400 minimum direct client-care hours will be completed over a seven-month period between January and July of senior year. There are no proposed changes to the actual curriculum or faculty.

This revised model of instruction for the LPN program will provide uninterrupted instruction for students. Additionally, this revised schedule will also allow program graduates to move on to four-year colleges or universities undelayedly or directly into the nursing workforce shortly after graduation.



Instructional Services Department Career and Technical Education 8270 Willow Oaks Corporate Dr. Fairfax, VA 22031

Please see enclosures for additional details regarding program hours, faculty and enrollment.

Thank you for your time and your consideration of proposed changes to our LPN program. We look forward to hearing back from you and to continuing this discussion at a future informal education review committee hearing.

Sincerely,

Beth Downey

Coordinator, Career and Technical Education

Fairfax County Public Schools

Proposal

Restructure the nursing partiway to increase access to nursing courses and increase the number of students who are eligible for the Certified Nurse Aide credential, Patient Care Technician certification, and Licensed Practical Nursing certification by the end of high school.

Background:

seniors will enroll in the FCPS post-secondary level of the LPN program. The restructured LPN program model will give students the opportunity to complete the full LPN sequence during a consecutive 15 month period, finishing the August after graduation, rather than a full school year beyond high school graduation. Students will be able to either begin work Currently, to complete the LPN program with FCPS, students must enroli full-time in Practical Nursing III for one complete school year following successful completion of Practical Nursing 1 and 2 during senior year and following high school graduation. On average, only 5 to 6 of the approximately 130 high school students enrolled in the LPN program as or continue their education in an RN or BSN program if they choose.

nursing experience in a less time consuming program during one year of high school. Additionally, the Patient Care Technician course and certification (available to students who Offering an Introduction to Nursing course with the Certified Nurse Aide (CNA) credential will allow the majority of students who want to enroll in an RN or BSN program to gain have earned a CNA) will be available to students who would like to pursue a two-year nursing sequence in junior and senior year of high school. This revised model of instruction for the LPN program will provide uninterrupted instruction for students and positions all students to enter the workforce as a licensed professional. Additionally, this revised schedule will also allow program graduates to move on to four year colleges or universities undelayed.

Course Description Licensed Practical Nursing (LPN):

- Practical Nursing ! (8357)- In the first semester of Practical Nursing, students will learn the fundamentals of nursing that include communication, human anatomy, body function, and nutrition, as related to patients/clients across the life cycle. Recommended prerequisite: introduction to Health and Medical Sciences (8302)
- Practical Nursing II (8358)- In the second semester of Practical Nursing, instruction will focus on basic nursing skills, medical asepsis, human development across the life cycle, and an introduction to pharmacology. Students will also apply basic nursing skills in interactive settings. Prerequisite: Practical Nursing I (83572).
- administration of medicines and advanced and complex client care across the life cycle. Students learn advanced anatomy, physiology, and human behavior as related to Practical Nursing III (8359)- This course provides classroom instruction and clinical training (a minimum of 400 direct client-care hours) in approved hospitals, clinics, icensed nursing homes, home-care settings, group homes, assisted living facilities, and/or schools under the direction of a nurse educator. Instruction emphasizes health and disease, including mental illness. Prerequisite: Practical Nursing I and II.

Proposed Prerequisites to revised LPN program model:

- Biology, Chemistry, and Algebra 2
- Passing score from the Test of Essential Academic Skills (TEAS), or other nursing school predictor
- administered in a standardized environment like a testing center or a school and is overseen by a proctor. 0
 - Standard evaluation of the academic readiness of applicants nursing programs.
 - Transportation to clinical sites
- Age 18 by January of senior year in order to complete 400 hours of clinical
 - Possible interview with LPN instructors

Proposed Schedule:

week for designated weeks of summer. During senior year, students will meet every other day for five hours (modeled after the residential construction, cosmetology and firefighting The new LPN program model will be available to high school students only. Students will begin in June of the summer after junior year, and will meet for approximately 40 hours per programs). Students will continue with the LPN program for approximately 40 hours per week for designated weeks of summer immediately following graduation, with program graduation slated for mid-August.

Expected Enrollment:

The expected number of students per year in the restructured Licensed Practical Nursing (LPN) program is a maximum of 50, while the Introduction to Nursing program with the Certified Nurse Aide credential will have a maximum of approximately 150.

Proposed	No Change	No change	June of 11th grade through August after graduation	 Biology, Chemistry, and Algebra 2. Passing score from the Test of Essential Academic Skills (TEAS), or other nursing school predictor Transportation to clinical sites Age 18 by January of senior year in order to complete 400 hours of clinical Possible interview with LPN instructors 	4 credits total	2th 15 months, uninterrupted	Move from 195 day contract to 218 day contract. The collective 4 teachers will teach Intro to Nursing, Patient Care and LPN	20- potential to grow to 40	No Change	SO- 5 hours every other day Combined with summer program below will meet the 980 hours requirement with 1017 hours which builds in the necessary flexibility for absence and classes being cancelled or not held due to base school conflicts	567 hours over two summers
Current	Practical Nursing 1, 2, and 3	The Plum Center	Level 1, 2: Grades 11 and 12 Level 3: Post-Graduate Year	Biology 1, Algebra 1, Exploring Health Sciences and Exploring the Language of Medicine are recommended but not required.	2 credits total (1 credit per semester course for Practical Nursing 1 & 2; 0 credits for Post-Graduate Practical Nursing 3)	1-3 School years interrupted by summer and 12th grade patient care technician course	4 FTE including Patient Cere Technician	Level 1 and 2: 120 Level 3: 16	Licensed Practical Nursing	Level 1 and 2: 270 hours, required hours are 560- not meeting state mandate everyday Level 3: 420 Total: 980 total requirement	N/A
	Course Title	Schools Offering	Grade Level(s)	Pre-requisite courses	Credits	Program Length	Staffing Needs	Student Enrollment	Certifications Available	School Year Hours	Summer Hours
Program	Licensed Practical Nursing										

Proposed	No Change
Current	Hospitals, clinics, physicians' offices, nursing homes, home healthcare
	Post-Secondary Options
Program	LPN

Certifications Available School Year Hours	Student Enrollment Certifications Availa	Staffing Needs	Program Length	Credits	Fredui	age Le	hools	Course Title	
railable	Ilment Available	spe	ength		Pre-requisite courses	Grade Level(s)	Schools Offering	Title	
		*							Current
Certified Nursing Assistant (CNA) 280	120 Certified Nursing Assistant (CNA)	1 FTE already included in LPN staffing above	One school year	2 (one credit each, coregistered)	Exploring the Language of Medicine is recommended but not required.	11 and 12	The Plum Center initially, expand to Chantilly, Falls Church and West Potomac Academies	Introduction to Nursing 1 and 2	Proposed

		Course Title Patient Care Technician	Schools Offering The Plum Center	Grade Level(s) 12	Pre-requisite courses Retified Nursing Assistant (currently only available in LPN 1 and 2)	Credits	Program Length One school year	Staffing Needs .33 FTE included in LPN staffing above	Student Enrollment 12	Certifications Available Certified Patient Care Technician	School Year Hours 36 weeks per VDOE	Summer Hours NJA	Post-Secondary Options Hospitals, urgent care facilities
	Сипеп	an			stant (currently only 1.2)			PN staffing above		Technician			facilities
Discussion	Desco	No Change	No Change	No Change	Introduction to Nursing 1 and 2 and Certifled Nursing Assistant	No Change	No Change	No change	120	Certified Patient Care Technician	No Change	No Change	Hospitals, urgent care facilities



FACULTY ROSTER

Program Name: Fairfax County School of Practical Nursing

Program Code US US28108600

CURRENT FACULTY RANK/TITLE NAME	FULL TIME, PART TIME Date of Initial hire	COLLEGE/ UNIVERSITY	NURSING	HIGHEST DEGREE OBTAINED	MAJOR TEACHING RESPONSIBILITY	YEARS EXPERIENCE IN NURSING PRACTICE	YEARS EXPERIENCE TEACHING In an academic	STATE OF UCENSURE LICENSE NUMBER AND EXP. DATE
Jacqueline Portnoy Director/Level 1 Instructor	Full Time 8/2012	Depaul Hospital SON	RN	Diploma	Level 1	25	7	VA 1098148
Catherine Corp Level 2 Instructor	Full Time 9/2012	SUNY Albany	RN, BSN	МРН	Level 2	43	14	VA 1105244
Janice Rayl Level 1 Instructor	Full Time	UVA	RN, BSN, CRNI	BSN	Level 1	42	4	VA 1097876
Cynthia Holland Level 2 Instructor	Full Time	NOVA	R	Associates Degree	Level 2	13	en en	VA 1196242
Patrice Chadbourne Clinical Instructor	Per Diem	Fitchburg State	RN, BSN	BSN	Clinical	28	m	VA 1103786 08/31/2020



Saxby, Paula <paula.saxby@dhp.virginia.gov>

RE: Permission to change LPN program

1 message

Thu, Feb 14, 2019 at 3:27 PM

Dr. Saxby.

Thank you for your phone call! Attached, please find the correspondence we discussed. The original letter included Beth Downey's signature- she is out of the office this afternoon, I can resend tomorrow with signature if you prefer.

We look forward to receiving an invitation to the Education Special Conference Committee meeting and discussing further on March 6th!

Thank you for your time,

Jennifer

Jennifer Alpers, M.Ed.

Program Manager, Health and Medical Sciences Fairfax County Public Schools

571-423-4555

From: Alpers, Jennifer L

Sent: Thursday, February 14, 2019 2:57 PM

To: 'paula.saxby@dhp.virginia.gov' <paula.saxby@dhp.virginia.gov>

Subject: Permission to change LPN program?

Good afternoon Dr. Saxby,

I am writing this afternoon to ask if you are in receipt of Fairfax County Public Schools' request to change our LPN program (from two school years to 15 months)? We have not heard from the Board regarding our request for permission and we are quickly approaching our deadline to be able to implement in June 2019.

Any information regarding the status of this request would be greatly appreclated!

Thank you so much for your time and continued support of our program.

Have a great day,

Jennifer (Makay, now Alpers)

Jennifer Alpers, M.Ed.

Program Manager, Health and Medical Sciences

Fairfax County Public Schools

8270 Willow Oaks Corporate Drive

Fairfax, VA 22031

571-423-4555

2 attachments



LPN proposed changes.docx



Copy of HMS Chart.pdf 101K



David E. Brown, D.C. Director

Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

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Virginia Board of Nursing Jay P. Douglas, MSM, RN, CSAC, FRE Executive Director

Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

MEMORANDUM

To:

Education Informal Conference Committee

From:

Jacquelyn Wilmoth, RN, MSN

Nursing Education Program Manager

Date:

February 22, 2019

Subject:

Applications to Establish a Nursing Program

The following currently have active applications to establish programs in Virginia:

Practice Nursing Program:

- 1. Salvation Academy, practical nursing program, Alexandria
- 2. American National University, practice nursing program, Salem,

Registered Nursing Program:

- 1. Stratford University, baccalaureate degree, Virginia Beach
- 2. Regent University, baccalaureate degree; received verbal notice that they will be withdrawing the application
- 3. American National University, associate degree, Salem
- 4. ECPI, baccalaureate degree, Norfolk



David E. Brown, D.C. Director

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Virginia Board of Nursing Jay P. Douglas, RN, MSM, CSAC, FRE Executive Director

Board of Nursing (804) 367-4515 FAX (804)527-4455

MEMORANDUM

To:

Education Informal Conference Committee

From:

Paula B. Saxby, R.N., Ph.D.

Deputy Executive Director

Date:

February 22, 2019

Subject:

2018 Nursing Programs with one year of NCLEX first time test taker pass rates

below 80%

Practical Nursing Programs:

Program Name	Program code	NCLEX Pass rate
High School or Technical Center	75.	
Fairfax County Public Schools	US28108600	76.92% (10/13)
Petersburg Public Schools	US28109400	75% (3/4)
Private/Proprietary Program		
America School of Allied Health	US28110100	75% (15/20)
Ultimate Health School	US28205000	70.59% (48/68)

Registered Nursing Programs:

Program Name	Program Code	NCLEX Pass rate
Associate Degree		
Private/Proprietary Program		
Fortis College Richmond (Closed)	US284023000	74.55% (41/55)
Fortis College Norfolk	US284095000	66.67% (2/3)

US28510000	71.43% (5/7)
US28500400	66.67% (2/3)

Letters will be sent to the program directors requesting the submission of a plan of correction as required in 18VAC90-27-210(B).



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February 25, 2019

Jacqueline Portnoy, RN
Director, Practical Nursing
Fairfax County School of Practical Nursing
6815 Edsall Road
Springfield, VA 22151

RE: Fairfax County School of Practical Nursing - US28108600

Dear Ms. Portnoy:

The Board of Nursing has noted the first time NCLEX rate pass for the 2018 calendar year for the Fairfax Public Schools practical nursing education program was below the required 80% at 76.92% (10 out of 13 passed.)

Pursuant to regulation 18VAC90-27-210 (B), if a nursing program falls below 80% for one year, the program shall submit a plan of correction. If a program falls below 80% for two consecutive years, the Board shall place the program on conditional approval and conduct a site visit.

Please submit the NLCEX plan of correction by April 22, 2019 to: Jacquelyn Wilmoth
Nursing Education Program Manager
Virginia Board of Nursing
9960 Mayland Drive
Henrico, Virginia 23233

Please feel free to contact this office via email at <u>jacquelyn.wilmoth@dhp.virginia.gov</u> or via phone at 804-367-4527 if you have any questions or need assistance with the NCLEX plan of correction.

Sincerely, Jacquelyn Walmelt

Jacquelyn Wilmoth, RN, MSN

Nursing Education Program Manager

Fairfax County School of Practical Nursing February 25, 2019 Page 2

CC: Jennifer Alpers, M.Ed.
Program Manager, Health & Medical Sciences
William McGreevy, Assistant Principal
Dr. Scott S. Brabrand, Superintendent
Beth Downey, CTE Coordinator
Michele R. Green-Wright, RN, M.Ed., DOE Program Specialist



David E. Brown, D.C. Director

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February 25, 2019

Safiya Goldston, BSN, RN Program Director, Practical Nursing Petersburg Public Schools 3101 Johnson Road Petersburg, VA 23805

RE: Petersburg Public Schools, School of Practical Nursing - US28109400

Dear Ms. Goldston:

The Board of Nursing has noted the first time NCLEX rate pass for the 2018 calendar year for the Petersburg Public Schools practical nursing education program was below the required 80% at 75.00% (3 out of 4 passed.)

Pursuant to regulation 18VAC90-27-210 (B), if a nursing program falls below 80% for one year, the program shall submit a plan of correction. If a program falls below 80% for two consecutive years, the Board shall place the program on conditional approval and conduct a site visit.

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Nursing Education Program Manager
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9960 Mayland Drive
Henrico, Virginia 23233

Please feel free to contact this office via email at jacquelyn.wilmoth@dhp.virginia.gov or via phone at 804-367-4527 if you have any questions or need assistance with the NCLEX plan of correction.

Sincerely.

Jacquelyn Wilmoth, RN, MSN

Nursing Education Program Manager

Petersburg Public Schools, School of Practical Nursing February 25, 2019 Page 2

CC: Dr. Marcus J. Newsome, Superintendent Dr. Ann Ifekunigwe, CTE Coordinator Michele R. Green-Wright, RN, M.ED,,VA DOE Program Specialist



David E. Brown, D.C. Director

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Executive Director

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February 25, 2019

Esi Gyenin, RN, MSN
Program Director
America School of Nursing & Allied Health
14910 Jefferson Davis Highway
Woodbridge, VA 22191

RE: America School of Nursing & Allied Health - US28110100

Dear Ms. Gyenin:

The Board of Nursing has noted the first time NCLEX rate pass for the 2018 calendar year for the America School of Nursing & Allied Health practical nursing education program was below the required 80% at 75.00% (15 out of 20 passed.)

Pursuant to regulation 18VAC90-27-210 (B), if a nursing program falls below 80% for one year, the program shall submit a plan of correction. If a program falls below 80% for two consecutive years, the Board shall place the program on conditional approval and conduct a site visit.

Please submit the NLCEX plan of correction by April 22, 2019 to: Jacquelyn Wilmoth Nursing Education Program Manager Virginia Board of Nursing 9960 Mayland Drive Henrico, Virginia 23233

Please feel free to contact this office via email at iacquelyn.wilmoth@dhp.virginia.gov or via phone at 804-367-4527 if you have any questions or need assistance with the NCLEX plan of correction.

Sincerely,

Jacquelyn Wilmoth, RN, MSN

poquelyn Wennes

Nursing Education Program Manager

America School of Nursing & Allied Health February 25, 2019 Page 2

CC: Peter Blake, Director, SCHEV



David E. Brown, D.C. Director

Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

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Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

February 25, 2019

Pamela A. Smith, DNP, RN, CEN, PCCN Director of Nursing and Education Ultimate Health School 7839 Ashton Avenue Manassas, VA 20109

RE: Ultimate Health School- US28205000

Dear Dr. Smith:

The Board of Nursing has noted the first time NCLEX rate pass for the 2018 calendar year for the Ultimate Health School practical nursing education program was below the required 80% at 70.59% (48 out of 68 passed.)

Pursuant to regulation 18VAC90-27-210 (B), if a nursing program falls below 80% for one year, the program shall submit a plan of correction. If a program falls below 80% for two consecutive years, the Board shall place the program on conditional approval and conduct a site visit.

Please submit the NLCEX plan of correction by April 22, 2019 to: Jacquelyn Wilmoth
Nursing Education Program Manager
Virginia Board of Nursing
9960 Mayland Drive
Henrico. Virginia 23233

Please feel free to contact this office via email at <u>jacquelyn.wilmoth@dhp.virginia.gov</u> or via phone at 804-367-4527 if you have any questions or need assistance with the NCLEX plan of correction.

Sincerely,

Jacquelyn Wilmoth, RN, MSN

Nursing Education Program Manager

Ultimate Health School February 25, 2019 Page 2

CC: Arangu Ngundam, President Peter Blake, Director, SCHEV



David E. Brown, D.C. Director Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginla.gov TEL (804) 367-4400 FAX (804) 527-4475

Virginia Board of Nursing Jay P. Douglas, MSM, RN, CSAC, FRE Executive Director Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

February 25, 2019

W. Richard Cowling, III, RN, PhD, AHN-BC, ANEF, FAAN Interim Dean of Nursing Fortis College, Norfolk, ADN Program 6300 Center Drive, #22 Maury Building Norfolk, VA 23502

RE: Fortis College, Norfolk- U\$28409500

Dear Dr. Cowling:

The Board of Nursing has noted the first time NCLEX rate pass for the 2018 calendar year for the Fortis College, Norfolk registered nursing education program was below the required 80% at 66.67% (2 out of 3 passed.)

Pursuant to regulation 18VAC90-27-210 (B), if a nursing program falls below 80% for one year, the program shall submit a pian of correction. If a program falls below 80% for two consecutive years, the Board shall place the program on conditional approval and conduct a site visit.

Please submit the NLCEX plan of correction by April 22, 2019 to: Jacquelyn Wilmoth Nursing Education Program Manager Virginia Board of Nursing 9960 Mayland Drive Henrico, Virginia 23233

Please feel free to contact this office via email at-<u>jacquelyn.wilmoth@dhp.virginia.gov</u> or via phone at 804-367-4527 if you have any questions or need assistance with the NCLEX plan of correction.

Sincerely, pegulyn Wilnet

Jacquelyn Wilmoth, RN, MSN

Nursing Education Program Manager

Fortis College, Norfolk February 25, 2019 Page 2

CC: Matt Albano, Campus President Peter Blake, Director, SCHEV



David E. Brown, D.C. Director

Department of Health Professions
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9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

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Virginia Board of Nursing
Jay P. Douglas, MSM, RN, CSAC, FRE
Executive Director

Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

February 25, 2019

Cheryl Oetjen, DNP, APRN
Interim Director, School of Nursing
George Mason University – Accelerated Second Degree
Mail Stop 3C4
4400 University Drive
Fairfax, VA 22030-444

RE: George Mason University - U\$28510000

Dear Dr. Oetjen:

The Board of Nursing has noted the first time NCLEX rate pass for the 2018 calendar year for the George Mason University – Accelerated Second Degree registered nursing education program was below the required 80% at 71.43% (5 out of 7 passed.)

Pursuant to regulation 18VAC90-27-210 (B), if a nursing program falls below 80% for one year, the program shall submit a plan of correction. If a program falls below 80% for two consecutive years, the Board shall place the program on conditional approval and conduct a site visit.

Please submit the NLCEX plan of correction by April 22, 2019 to:
Jacquelyn Wilmoth
Nursing Education Program Manager
Virginia Board of Nursing
9960 Mayland Drive
Henrico, Virginia 23233

Please feel free to contact this office via email at jacquelyn.wilmoth@dhp.virginia.gov or via phone at 804-367-4527 if you have any questions or need assistance with the NCLEX plan of correction.

Sincerely, preguelyn Wilmout

Jacquelyn Wilmoth, RN, MSN

Nursing Education Program Manager

George Mason University – Accelerated Second Degree February 25, 2019
Page 2

CC: Dr. Germaine Louis, Dean Peter Blake, Director, SCHEV



David E. Brown, D.C. Director

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Virginia Board of Nursing Jay P. Douglas, MSM, RN, CSAC, FRE Executive Director

Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

February 25, 2019

Dr. Shevellanie Lott Dean, School of Nursing Hampton University – Virginia Beach 253 Town Center Drive Virginia Beach, VA 23462

RE: Hampton University, Virginia Beach - US28500400

Dear Dr. Lott:

The Board of Nursing has noted the first time NCLEX rate pass for the 2018 calendar year for the Hampton University, Virginia Beach registered nursing education program was below the required 80% at 66.67% (2 out of 3 passed.)

Pursuant to regulation 18VAC90-27-210 (B), if a nursing program falls below 80% for one year, the program shall submit a plan of correction. If a program falls below 80% for two consecutive years, the Board shall place the program on conditional approval and conduct a site visit.

Please submit the NLCEX plan of correction by April 22, 2019 to: Jacquelyn Wilmoth Nursing Education Program Manager Virginia Board of Nursing 9960 Mayland Drive Henrico, Virginia 23233

Please feel free to contact this office via email at jacquelyn.wilmoth@dhp.virginia.gov or via phone at 804-367-4527 if you have any questions or need assistance with the NCLEX plan of correction.

Sincerely,

Jacquelyn Wilmoth, RN, MSN

Nursing Education Program Manager

Hampton University, Virginia Beach February 25, 2019 Page 2

CC:

Dr. William R. Harvey, President Dr. JoAnn W. Haysbert, Chancellor & Provost Peter Blake, Director, SCHEV

Practical Nursing and Registered Nursing Programs

Below 80% for One Year



Report 4 - Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions



NCSBN Confidential

NCLEX Education Program Jurisdiction » Virginia Board of Numbrg (28) Exam Series Code = NCLEX-PN Year = 2018

Printed By: Beth Yates
Report Date: 22-Jan-2019 10:50 AM
Date as of(CST): 22-Jan-2019 08:20 AM

Virginia Board of Nursing (28)

VA.-AMERICA SCHOOL OF NURSING AND ALLED HEALTH (US28110100)

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NCSBN Report 4 – Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions



NCSBN Confidential

VA - DABNEY'S LANCASTER COMMUNITY COLLEGE (US28/02300)

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NCSBN Report 4 – Jurisdiction Program Summary of all First-Time



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VA - FAIRFAX COUNTY SCHOOL OF PRACTICAL NUMBING (US28108800)

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NCSBN Report 4 – Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions



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VA.-PETERSBURG PUBLIC SCHOOL'S (US28109400)

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NCSBN Report 4 – Jurisdiction Program Summary of all First-Time



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VA - ULTIMATE HEALTH SCHOOL (US28208000)

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Report 4 – Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions



NCSBN Confidential

VA - EASTERN VIRGINIA CAREER COLLEGE - ADN (USZBJOZ600)

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Report 4 - Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions

NCSBN Confidential



VA - FORTIS COLLEGE - RICHMOND - ADN (USZB402300)

NOLEX-RN

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NCSBN Report 4 – Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions



MCSBN Confidential

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NCSBN Report 4 – Jurisdiction Program Summary of all First-Time



NGSBN Confidential

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NCSBN Report 4 – Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions



NCSBN Confidential

VA - HAMPTON UNIVERSITY SCHOOL OF NURSING OF VIRGINIA BEACH - BS (US28500400)

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David E. Brown, D.C. Director Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginia.gov TEL (804) 367- 4400 FAX (804) 527- 4475

Virginia Board of Nursing Jay P. Douglas, RN, MSM, CSAC, FRE Executive Director

Board of Nursing (804) 367-4515 FAX (804)527-4455

MEMORANDUM

To:

Education Informal Conference Committee

From:

Paula B. Saxby, R.N., Ph.D. Deputy Executive Director

Date:

February 22, 2019

Subject:

Nursing Programs with two years of NCLEX first time test taker pass rates below

80% (2017 and 2018)

Registered Nursing Programs:

Program Name	Program Code	NCLEX Pass Rate 2017	NCLEX Pass Rate 2018
ADN Private/Proprietary Program			
Eastern Virginia Career College	US28402500	71.88% (46/64)	74.55% (41/55)
Fortis College (LPN to RN) – Norfolk Closed February 2018	US28401800	76.92% (10/13)	67% (2/3)
Fortis College - Richmond	US28408900	50% (1/2)	68.42% (13/19)

Pursuant to 18 VAC 90-27-210(B), Eastern Virginia Career College and Fortis College – Richmond will be:

- 1. Placed on conditional approval with terms and conditions;
- 2. Requested to submit an updated NCLEX plan of correction;
- 3. Scheduled for an NCLEX Focused Site Visit to include required documents; and
- 4. Required to submit the fees for the site visit.



David E. Brown, D.C. Director

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Virginia Board of Nursing Jay P. Douglas, MSM, RN, CSAC, FRE Executive Director

Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

February 25, 2019

Kristina Kitchen, RN, MSN
Dean of Nurse Education Programs
Eastern Virginia Career College
10304 Spotsylvania Avenue, Suite 400
Fredericksburg, VA 22408

Re: Eastern Virginia Career College – Fredericksburg, ADN Program Program Code: US28402500

Dear Ms. Kitchen:

This letter is sent as notification that the NCLEX pass rate of the program listed above has been below 80% for the past two years:

- The 2017 NCLEX-RN pass rate for this program is 71.88% (46 out of 64 passed.)
- The 2018 NCLEX-RN pass rate for this program is 74.55% (41 out of 55 passed.)

Per regulation 18VAC 90-27-210(B), the Board has placed your program on Conditional Approval with terms and conditions, which will require your program to:

- 1. Submit a plan of correction within 45 days to the Board;
- 2. Submit to a site visit conducted by the Board and pay the required NCLEX Site Visit fee of \$1,500.00 prior to the site visit; and
- 3. The Board will consider the status of the program after the site visit and once the 2019 NCLEX results are available.

Eastern Virginia Career College February 25, 2019 Page 2

If you object to this action affecting your nursing education program, you may request an informal conference before a committee of the Board pursuant to 18 VAC 90-20-161 (C) of the Board of Nursing Regulations and Virginia Code §2.2-4019 and § 54.1-109. The written request for an informal conference must be received within 33 days of the date of this letter, otherwise this action will be considered final.

Please contact this office at <u>paula.saxby@dhp.virginia.gov</u> or via phone at 804-367-4597 if you have any questions regarding this Board Action.

Sincerely,

Paula B. Saxby, RN, Ph.D.

Deputy Executive Director

Cc: Christine Carroll, President
Jacquelyn Wilmoth, RN, MSN
Nursing Education Program Manager
Peter Blake, Director, SCHEV



David E. Brown, D.C. Director

Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
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Virginia Board of Nursing Jay P. Douglas, MSM, RN, CSAC, FRE Executive Director Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

February 25, 2019

Lucy Smith, RN, MS, CNS, PMHCNS-BC Dean of Nurse Education Programs Fortis College, Richmond 2000 Westmoreland Drive, Suite A Richmond, VA 23230

Re: Fortis College - Richmond, ADN Program Program Code: US28408900

Dear Ms. Smith:

This letter is sent as notification that the NCLEX pass rate of the program listed above has been below 80% for the past two years:

- The 2017 NCLEX-RN pass rate for this program is 50.00% (1 out of 2 passed.)
- The 2018 NCLEX-RN pass rate for this program is 68.42% (13 out of 19 passed.)

Per regulation 18VAC 90-27-210(B), the Board has placed your program on Conditional Approval with terms and conditions, which will require your program to:

- 1. Submit a plan of correction within 45 days to the Board;
- 2. Submit to a site visit conducted by the Board and pay the required NCLEX Site Visit fee of \$1,500.00 prior to the site visit; and
- 3. The Board will consider the status of the program after the site visit and once the 2019 NCLEX results are available.

Fortis College, Richmond February 25, 2019 Page 2

If you object to this action affecting your nursing education program, you may request an informal conference before a committee of the Board pursuant to 18 VAC 90-20-161 (C) of the Board of Nursing Regulations and Virginia Code §2.2-4019 and § 54.1-109. The written request for an informal conference must be received within 33 days of the date of this letter, otherwise this action will be considered final.

Please contact this office at paula.saxby@dhp.virginia.gov or via phone at 804-367-4597 if you have any questions regarding this Board Action.

Sincerely.

Paula B. Saxby PN DLD Paula B. Saxby, RN, Ph.D. **Deputy Executive Director**

Cc: Sheryl Delozier, President Jacquelyn Wilmoth, RN, MSN, Nursing Education Program Manager

Peter Blake, Director, SCHEV

Registered Nursing Programs

Below 80% for Two Years



Report 4 -- Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions



NCSBN Confidential

VA - FORTIS COLLEGE - RICHMOND - ADN (US28402300)

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The numbers included in the report reflect the most up-to-date and accurate numbers at the time the report was generated.



NCSBN Report 4 - Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions

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VA - FORTIS COLLEGE - RICHMOND, TRADITIONAL ADM (US28408900)

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Report 4 - Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions



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NCSBN Report 4 – Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions

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COMMONWEALTH of VIRGINIA

David E. Brown, D.C. Director

Department of Health Professions
Perimeter Center
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Virginia Board of Nursing Jay P. Douglas, RN, MSM, CSAC, FRE Executive Director

Board of Nursing (804) 367-4515 FAX (804)527-4455

MEMORANDUM

To:

Education Informal Conference Committee

From:

Paula B. Saxby, R.N., Ph.D.

Deputy Executive Director

Date:

February 22, 2019

Subject:

Nursing Programs with three or more years of NCLEX first time test taker pass

rates below 80% (2015, 2016, 2017 and 2018)

Practical Nursing Programs

Program Name (Board Orders)	Program Code	NCLEX Pass Rate 2015	NCLEX Pass Rate 2016	NCLEX Pass Rate 2017	NCLEX Pass Rate 2018
Centura College – Midlothian Closed 9/30/18	US28201300	66.67%	63.33% (19/30)	71.43% (10/14)	75% (6/8)
Centura College – Norfolk Compliance – Voluntary Closure	US28103800		66.67% (12/18)	20% (1/5)	66.67% (2/3)
Paul D. Camp Community College	US28110000	57.89%	68.18% (15/22)	78.3% (18/23)	54.55% (6/11)

Registered Nursing Programs on next page

Registered Nursing Programs

Program Name (Board Orders)	Program Code	NCLEX Pass Rate 2015	NCLEX Pass Rate 2016	NCLEX Pass Rate 2017	NCLEX Pass Rate 2018
Global Health College Closed 12/31/18	US28402000		61. 84 % (47/76)	54.84% (34/62)	66.67% (30/45)
Paul D. Camp Community College – Will be presented at the May 9 IFC	US28400500		74.07% (20/27)	77.27% (17/22)	78.57% (22/28)

IN RE:

CENTURA COLLEGE RICHMOND MIDLOTHIAN CAMPUS

PRACTICAL NURSING EDUCATION PROGRAM

Program Code:

US28201300

Case Number:

186352

RATIFICATION AND ORDER

On May 15, 2018, a panel of the Board met to receive and act upon the Recommended Decision of the Education Special Conference Committee. Centura College Richmond Midlothian Campus Practical Nursing Education Program was not present nor represented by legal counsel.

In consideration whereof, the Board of Nursing ACCEPTS the attached Recommended Findings of Fact and Conclusions of Law of the Education Special Conference Committee and ADOPTS the Recommended Order in its entirety.

Pursuant to Virginia Code § 54.1-2400.2, the signed original of this Order shall remain in the custody of the Department of Health Professions as a public record, and shall be made available for public inspection and copying upon request.

Pursuant to Virginia Code § 54.1-2400(10), Centura College Richmond Midlothian Campus Practical Nursing Education Program may, not later than 5:00 p.m., on June 27, 2018, notify Jay Douglas, Executive Director, Board of Nursing, 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233, in writing that it desires a formal administrative hearing before the Board. Upon the filing with the Executive Director of a request for the hearing, this Order shall be vacated.

Centura College Richmond Midlothian Campus Practical Nursing Education Program Page 2 of 2

Executive Director

Virginia Board of Nursing

ENTERED AND MAILED ON:

This Order shall become final on June 27, 2018, unless a request for a formal administrative

hearing is received as described above.

IN RE:

CENTURA COLLEGE RICHMOND MIDLOTHIAN CAMPUS

PRACTICAL NURSING EDUCATION PROGRAM

Program Code:

US28201300

Case Number:

186352

REPORT AND RECOMMENDATION OF THE EDUCATION SPECIAL CONFERENCE COMMITTEE

Jurisdiction and Procedural History

Pursuant to Virginia Code §§ 2.2-4019 and 54.1-2400(10), the Education Special Conference Committee ("Committee") of the Virginia Board of Nursing ("Board"), held an informal conference on May 2, 2018 in Henrico County, Virginia, to inquire into evidence that Centura College Richmond Midlothian Campus Practical Nursing Education Program (hereinafter, "Centura College Richmond PN") may have violated certain regulations governing the operation of practical nursing education programs in the Commonwealth of Virginia and to determine Centura College Richmond PN's approval status to operate a practical nursing education program.

Dr. Eunice Scott, Director of Nursing Education for Centura College Richmond, appeared at this proceeding on behalf of the program. Also present on behalf of the program were Mary Urbanski, Corporate Director of Education for Centura College, and Jeremiah Scarbrough, Regional Director of Centura College. The program was not represented by legal counsel.

Upon consideration of the evidence, the Committee makes the following Findings of Fact and Conclusions of Law and recommends that the Board adopt the following Order.

Notice

By letter dated April 3, 2018, the Board sent a Notice of Informal Conference ("Notice") to Centura College Richmond PN notifying it that an informal conference would be held on May 2, 2018. The Notice was sent by certified and first class mail to the legal address of record on file with the Board.

Recommended Findings of Fact and Conclusions of Law

- 1. Centura College Richmond Midlothian Campus Practical Nursing Education Program was approved to operate a practical nursing education program in March 2006. The program was placed on conditional approval in March 2017 following two years of NCLEX passage rates below 80%.
- 2. The program submitted an NCLEX improvement plan and the Board conducted an NCLEX site visit in May 2017.
- 3. Centura College Richmond PN violated 18 VAC 90-20-132(A)(1) and (10) and 18 VAC 90-20-151 of the Regulations Governing the Practice of Nursing (currently found at 18 VAC 90-27-140(A)(1) and (10) and 18 VAC 90-27-210 of the Regulations for Nursing Education Programs, effective February 24, 2017) ("Regulations") in that its pass rate for first-time test takers of the NCLEX-PN was below 80% for the past three calendar years.
 - a. In 2017, the pass rate was 71.43%.
 - b. In 2016, the pass rate was 63.33%.
 - c. In 2015, the pass rate was 66.67%.
- 4. Dr. Urbanski submitted a letter to the Board dated April 23, 2018, indicating that the program intended to close. At the informal conference, Ms. Scott clarified that closure will be as of September 20, 2018, when the five last remaining students will have completed the program.
- 5. At the informal conference, program representatives acknowledged the violation found in Finding of Fact/Conclusion of Law Number 3.

Recommended Order

Based on the foregoing Findings of Fact and Conclusions of Law, the Committee recommends that the Board issue an Order as follows:

- 1. The Board ACCEPTS the VOLUNTARY SURRENDER of Centura College Richmond PN's approval to operate a practical nursing education program, and such approval is WITHDRAWN effective September 30, 2018. The program shall cease operations no later than September 30, 2018, when all students shall either have graduated or transferred to an approved program.
- 2. From the date of entry of this Order until closure, Centura College Richmond PN shall comply with the following terms and conditions:
- a. The program shall comply with its NCLEX improvement plan and teach-out plan as submitted to the Board.
- b. The program shall comply with the Board's regulations for maintaining an approved practical nursing education program.
- c. No later than July 31, 2018, the program shall submit to the Board a report regarding its progress in meeting the regulations for closure and the status of all remaining students.
- Centura College Richmond PN shall comply with the requirements of 18 VAC 90-27 240 of the Regulations for closure of a nursing education program as follows:
 - a. The program shall not admit any new or transfer students.
- b. The program shall cease operations no later than September 30, 2018, when all students shall either have graduate or transferred to an approved program.
- c. In accordance with 18 VAC 90-27-240(B)(2) of the Regulations, the program shall provide to the Board a list of the names of students who have transferred to approved programs and the date on which the last student was transferred no later than October 31, 2018.
- d. In accordance with 18 VAC 90-27-240(C)(i) and (2) of the Regulations, the governing institution shall inform the Board of the arrangements made to safeguard the records and, if

Centura College Richmond Midlothian Campus Practical Nursing Education Program Page 4 of 4

the governing institution ceased to exist, the academic transcript of each student and graduate shall be transferred by the institution to the Board for safekeeping no later than October 31, 2018.

> Reviewed and determined to be consistent with the Education Special Conference Committee's Decision

Jodi P. Power, R.N., J.D. Deputy Executive Director

May 8, 2018

IN RE:

CENTURA COLLEGE, NORFOLK PRACTICAL NURSING EDUCATION

PROGRAM

Program Code: Case Numbers:

US28103800 173222, 174240

RATIFICATION AND ORDER

On November 15, 2016, a quorum of the Board met to receive and act upon the Recommended Decision of the Education Special Conference Committee. Centura College, Norfolk Practical Nursing Education Program ("Centura College PN") representatives were not present nor represented by legal counsel.

In consideration whereof, the Board of Nursing ACCEPTS the attached Recommended Findings of Fact and Conclusions of Law of the Education Special Conference Committee and ADOPTS the Recommended Order in its entirety.

Pursuant to Virginia Code § 54.1-2400.2, the signed original of this Order shall remain in the custody of the Department of Health Professions as a public record, and shall be made available for public inspection and copying upon request.

Pursuant to Virginia Code § 54.1-2400(10), Centura College PN may, not later than 5:00 p.m., on Month Day, Year, notify Jay P. Douglas, Executive Director, Board of Nursing, 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233, in writing that it desires a formal administrative hearing before the Board. Upon the filing with the Executive Director of a request for the hearing, this Order shall be vacated.

FOR THE BOARD

Jay Dougias, M.S.M.R.N., C.S.A.C., F.R.E.

Executive Director

Virginia Board of Nursing

ENTERED AND MAILED ON:

November 18 73016

This Order shall become final on December 22, 2016, unless a request for a formal administrative hearing is received as described above.

Certified True Copy

By Mahan Virginia Board Of Nursing

IN RE:

CENTURA COLLEGE, NORFOLK PRACTICAL NURSING EDUCATION

PROGRAM

Program Code:

US28103800

Case Numbers:

173222, 174240

REPORT AND RECOMMENDATION OF EDUCATION SPECIAL CONFERENCE COMMITTEE

Jurisdiction and Procedural History

Pursuant to Virginia Code §§ 2.2-4019, 2.2-4021, and 54.1-3014, the Education Special Conference Committee ("Committee") of the Virginia Board of Nursing ("Board"), held an informal conference on November 9, 2016 in Henrico County, Virginia, to inquire into evidence that Centura College, Norfolk Practical Nursing Education Program ("Centura College PN") may have violated certain laws and regulations governing the operation of a practical nursing education program in the Commonwealth of Virginia and certain terms and conditions of an Order of the Board entered September August 21, 2015, and to determine Centura College PN's approval status to operate a practical nursing education program.

Present on behalf of the program were Lorri Christiansen, Centura College Corporate Director of Allied Health, and Mary Urbanski, Corporate Director of Education. Also present was Mary Tidoe, current adjunct faculty and former Program Director. The current interim Program Director, Amelita Villarete, was not present due to health issues. The program was not represented by legal counsel.

Upon consideration of the evidence, the Committee makes the following Findings of Fact and Conclusions of Law and recommends that the Board adopt the following Order.

Notice

By letter dated October 21, 2016, the Board sent a Notice of Informal Conference ("Notice") to

Centura College PN notifying it that an informal conference would be held on November 9, 2016. The Notice was sent by certified and first class mail to the legal address of record on file with the Board.

Recommended Findings of Fact and Conclusions of Law

- 1. Centura College, Norfolk Practical Nursing Education Program (formerly Tidewater Tech/Beta Tech) received approval to operate a practical nursing education program in 2006. In September 2008, Centura College became the official name of the school. In March 2014, Centura College PN was placed on conditional approval after the release of NCLEX pass rate results for 2012 and 2013, both of which were below 80 percent. By Order entered August 21, 2015 ("Board's Order"), the Board withdrew the approval of Centura College PN to operate a practical nursing education program, stayed the withdrawal, and continued the program on conditional approval based on compliance with certain terms and conditions.
- 2. Term 2(c) of the Board's Order required Centura College PN to comply with its NCLEX success plan. The program's NCLEX success plan stated that simulation would be integrated throughout the program. Centura College PN violated Term No. 2(c) of the Board's Order in that, as program representatives acknowledged at the informal conference, simulation was not integrated throughout the program, and was used at the discretion of the faculty. Further, program representatives could not articulate an understanding of the use of simulation in lieu of direct client care.
- 3. The NCLEX passage rate for first-time test takers in Calendar Year 2015 was 80 percent. For the period January 1 September 30, 2016, the passage rate was 75 percent.
- 4. There are currently two students remaining in the program. They are expected to graduate in December 2016. The program intends to start admitting new students in February 2017. The corporate director of education stated that the program was focusing on hiring qualified faculty and raising admission standards. One condition of the Board's 2015 Order was that Centura College

was prohibited from admitting new students for one year, or until August 2016. The program chose not to admit new students after August 2016 in order to focus on improving their program.

Recommended Order

Based on the foregoing Findings of Fact and Conclusions of Law, the Education Special Conference Committee recommends that the Board issue an Order as follows:

- 1. The withdrawal of approval of Centura College PN is RESCINDED, and Centura College PN is placed on CONDITIONAL APPROVAL to operate a practical nursing education program in Virginia, subject to the following terms and conditions:
- a. Within 60 days of the entry of this Order, Centura College PN shall submit to the Board for review and approval a new improvement and NCLEX success plan, including a plan for hiring qualified faculty and a plan for the enrollment of new students. Thereafter, Centura College PN shall comply with its approved plan.
- b. Centura College PN shall provide reports demonstrating compliance with the terms and conditions of this Order every six months, with the first report due by August 1, 2017.
- c. Centura College PN shall notify all current and prospective students of its approval status.
- d. The NCLEX pass rate for first-time test takers in Calendar Year 2018 shall be 80 percent or above.
- e. Centura College PN shall comply with all of the Board's regulations for maintaining an approved practical nursing education program in Virginia.
- 2. The Board, at its discretion, may conduct site visits to determine Centura College PN's compliance with this Order. Centura College PN shall be responsible for any fees that may be required for review and approval, including but not limited to those fees associated with survey and site visits.

Centura College, Norfolk Practical Nursing Education Program
Page 4 of 4

3. After the results of the NCLEX passage rates for Calendar Year 2018 are made available, the Education Special Conference Committee will review Centura College PN's compliance with this Order and further consider the approval status of Centura College PN to operate a practical

nursing education program.

4. Any violation of the terms and conditions of this Order may constitute grounds for withdrawal of Centura College PN's approval to operate a practical nursing education program, and an informal conference shall be convened to determine whether approval shall be withdrawn.

Reviewed and approved on November 15, 2016 By Joyce A. Hahn, Ph.D., R.N., N.E.A.-B.C., F.N.A.P. Chair, Education Special Conference Committee

Certified True Copy

Virginia Board Of Nursing

IN RE:

PAUL D. CAMP COMMUNITY COLLEGE PRACTICAL NURSING

EDUCATION PROGRAM

Program Number: US28110000

Case Number:

186926

RATIFICATION AND ORDER

On September 18, 2018, a panel of the Board met to receive and act upon the Recommended

Decision of the Education Special Conference Committee. Paul D. Camp Community College

Practical Nursing Education Program ("Paul D. Camp PN") was present and was not represented by

legal counsel.

In consideration whereof, the Board of Nursing ACCEPTS the attached Recommended

Findings of Fact and Conclusions of Law of the Education Special Conference Committee and

ADOPTS the Recommended Order in its entirety.

Pursuant to Virginia Code § 54.1-2400.2, the signed original of this Order shall remain in the

custody of the Department of Health Professions as a public record, and shall be made available for

public inspection and copying upon request.

Pursuant to Virginia Code § 54.1-2400(10), Paul D. Camp PN may, not later than 5:00 p.m.,

on Month Day, 2018, notify Jay P. Douglas, R.N., M.S., C.S.A.C., F.R.E., Executive Director, Board

of Nursing, 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233, in writing that it desires a formal

administrative hearing before the Board. Upon the filing with the Executive Director of a request for

the hearing, this Order shall be vacated.

FOR THE BOARD

Jay Douglas, M.S.M., R.S., C.S.A.C., Executive Director

September 21 5018

Virginia Board of Nursing

ENTERED AND MAILED ON:

This Order shall become final on October 25, 2018, unless a request for a formal administrative hearing is received as described above.

IN RE:

PAUL D. CAMP COMMUNITY COLLEGE PRACTICAL NURSING

EDUCATION PROGRAM

Program Number: US28110000

Case Number:

186926

REPORT AND RECOMMENDATION OF THE EDUCATION SPECIAL CONFERENCE COMMITTEE

Jurisdiction and Procedural History

Pursuant to Virginia Code §§ 2.2-4019 and 54.1-2400(10), the Education Special Conference Committee ("Committee") of the Virginia Board of Nursing ("Board"), held an informal conference on September 5, 2018 in Henrico County, Virginia, to inquire into evidence that Paul D. Camp Community College Practical Nursing Education Program ("Paul D. Camp PN") may have violated certain laws and regulations governing the operation of a practical nursing education program in the Commonwealth of Virginia.

At the informal conference, Dan Lufkin, President of Paul D. Camp Community College, Deborah Hartman, Ed.D, M.S.N, R.N., Dean of the Nursing Program, and Laurel White, R.N., Lead Practical Nursing Instructor for Paul D. Camp PN, appeared at this proceeding on behalf of the program. The program was not represented by legal counsel.

Upon consideration of the evidence, the Education Special Conference Committee makes the following Findings of Fact and Conclusions of Law and recommends that the Board adopt the following Order.

Notice

By letter dated August 7, 2018, the Board sent a Notice of Informal Conference ("Notice") to Paul D. Camp PN notifying it that an informal conference would be held on September 5, 2018. The Notice was sent by certified and first class mail to the legal address of record on file with the Board.

Recommended Findings of Fact and Conclusions of Law

- 1. Paul D. Camp PN was granted provisional approval to operate a practical nursing education program in the Commonwealth of Virginia on May 21, 2014. In November 2015, the program status was changed to initial approval due to a change in Board regulations. The program was placed on conditional approval in 2017 after two years of consecutive NCLEX pass rates below 80 percent.
- 2. Paul D. Camp PN violated 18 VAC 90-20-132(A)(1) and (10) and 18 VAC 90-20-151 of the Regulations Governing Nursing Education Programs (currently found at 18 VAC 90-27-140(A)(1) and (10) and 18 VAC 90-27-210 of the Regulations for Nursing Education Programs, effective February 24, 2017) in that its pass rate for first-time test takers of the NCLEX-PN was below 80 percent for the past three calendar years.
 - a. In 2017, the pass rate was 78.26 percent;
 - b. In 2016, the pass rate was 68.18 percent:
 - c. In 2015, the pass rate was 57.89 percent.
- 3. As of the date of the informal conference, Paul D. Camp PN's NCLEX-PN pass rate for Calendar Year 2018 to date was 54.4 percent.
- 4. Seven students are currently enrolled in Paul D. Camp PN and are scheduled to graduate in May 2019. The program currently has one full time instructor, one part time instructor, and

one adjunct instructor. The community college president stated that the program has his full support and that he is committed to providing the program with the necessary resources to be successful,

5. The current full time instructor, who began in July 2017, is the program's first full time instructor whose position is funded by the college rather than by an outside grant. She has been proactive in taking steps to improve the program, including contacting other community college nursing programs to determine their methods for ensuring their students' success.

Recommended Order

Based on the foregoing Findings of Fact and Conclusions of Law, the Education Special Conference Committee recommends that the Board issue an Order as follows:

- 1. The approval of Paul D. Camp PN to operate a practical nursing education program is WITHDRAWN.
- 2. This withdrawal of approval shall be STAYED, and Paul D. Camp PN shall remain on conditional approval, contingent upon the following terms and conditions:
- a. Paul D. Camp PN may not admit any new or transfer students prior to August 2019.
- b. The NCLEX-PN pass rate for the cohort enrolled as of September 5, 2018, shall be 80 percent or above.
- c. Paul D. Camp PN shall comply with the Board's regulations for maintaining an approved practical nursing education program.
- d. Paul D. Camp PN shall notify all students in writing of this Board action within 15 days of entry of this Order.

At its discretion, the Board may conduct site visits to determine compliance with this Order. Paul D. Camp PN shall be responsible for any fees that may be required, including but not limited to those fees associated with survey and site visits.

Paul D. Camp PN shall provide a copy of this Order to all current students, to all faculty members, and to the nursing program's advisory board. Further, Paul D. Camp PN shall publish this Order on its website.

Any violation of the terms and conditions of this Order or of any law or regulation 3. affecting the operation of nursing education programs in the Commonwealth of Virginia shall constitute grounds for the rescission of the stay of withdrawn approval of Paul D. Camp PN, and an administrative proceeding shall be convened to determine whether such approval shall be withdrawn.

Upon receipt of evidence of Paul D. Camp PN's compliance with all terms and 4. conditions of this Order, the Committee, at its discretion, may waive Paul D. Camp PN's appearance before the Committee and conduct an administrative review of this matter to determine Paul D. Camp PN's approval status to operate a practical nursing education program.

> Reviewed and determined to be consistent with the Education Special Conference Committee's Decision

Lawyle Richart Paula B. Saxby, R.N., Ph.D.

Deputy Executive Director, Virginia Board of Nursing

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IN RE:

GLOBAL HEALTH COLLEGE ASSOCIATE DEGREE REGISTERED NURSING EDUCATION PROGRAM

Program Code:

US2840200

Case Number:

179535

AMENDED ORDER

JURISDICTION AND PROCEDURAL HISTORY

Pursuant to Virginia Code §§ 2.2-4020, 2.2-4024(F), and 54.1-2400(11), a panel of the Virginia Board of Nursing ("Board") held a formal administrative hearing on March 13, 2018, in Henrico County, Virginia, to inquire into evidence that Global Health College Associate Degree Registered Nursing Education Program ("Global Health College ADRN") may have violated certain regulations governing the operation of registered nursing education programs in the Commonwealth of Virginia.

A representative of Global Health College did not appear at this proceeding and the program was not represented by legal counsel.

Following the formal administrative hearing, the Board issued an Order on March 20, 2018. Subsequently, Global Health College ADRN requested that the Board modify certain terms of the Order. Pursuant to Virginia Code § 54.1-2400(13), a panel of the Board met on March 27, 2018 to consider the program's request for modification of the Order entered March 20, 2018. In consideration whereof, and upon consideration of the evidence, the Board adopts the following Findings of Fact and Conclusions of Law and issues the Order contained herein.

NOTICE

By letter dated October 17, 2017, the Board sent a Notice of a Formal Administrative Hearing ("Notice") to Global Health College ADRN notifying it that a formal administrative hearing would be held on November 15, 2017. The Notice was sent by certified and first class mail to the legal address of

record on file with the Board. The hearing was continued by the Board, and on February 8, 2018, the Board sent an Amended Notice of Formal Hearing by certified and first class mail to Global Health College ADRN notifying it that the hearing would be held on March 13, 2018. On March 12, 2018, the Board received telephonic and electronic communication from Mariata Kargbo, RN, MSN, BC-FNP, Program Director, Global Health College ADRN, that she would not be attending the formal hearing. The Panel Chair concluded that adequate notice was provided to Global Health College ADRN and the formal administrative hearing proceeded in its absence.

FINDINGS OF FACT

- 1. Global Health College Associate Degree Registered Nursing Education Program ("Global Health College ADRN") was approved to operate a registered nursing education program on February 26, 2010.
- 2. Global Health College ADRN's NCLEX-RN passage rates for first-time test-taking graduates for the calendar years 2014 2016 were below 80 percent, as evidenced by the following:
 - a. In 2014, the NCLEX-RN passage rate was 56.76 percent.
 - b. In 2015, the NCLEX-RN passage rate was 67.44 percent.
 - c. In 2016, the NCLEX-RN passage rate was 61.84 percent.
- 3. Global Health College RN was notified on November 28, 2016, that it was placed on conditional approval due to its NCLEX-RN passage rates being below 80 percent for 2014 and 2015. Representatives of the Board of Nursing completed a site visit on August 10, 2016 and submitted a report on February 23, 2017.
- 4. Global Health College ADRN's NCLEX-RN passage rate for calendar year 2017 was 54.84 percent.

- 5. The program director of Global Health submitted a letter to the Board requesting that the Board continue Global Health on conditional approval until December 2019. In the letter, she stated that the implementation of their strategies have yielded "very positive and exciting results," but she submitted no further evidence.
- 6. By letter dated February 15, 2018, the State Council of Higher Education for Virginia ("SCHEV") notified Global Health College ADRN that it was considering recommending revoking Global Health College ADRN's Certificate to Operate on the basis of the school's failure to maintain compliance with Virginia Code and regulation.

CONCLUSIONS OF LAW

Finding of Fact Number 2 constitutes a violation of 18 VAC 90-20-132(A)(1) and (10) and 18 VAC 90-20-151 of the Regulations Governing the Practice of Nursing (currently found at 18 VAC 90-27-140(A)(1) and (10) and 18 VAC 90-27-210 of the Regulations for Nursing Education Programs, effective February 24, 2017)

ORDER

Based on the foregoing Findings of Fact and Conclusions of Law, the Virginia Board of Nursing hereby ORDERS as follows:

- 1. The approval of Giobal Health College ADRN to operate a registered nursing education program is WITHDRAWN.
 - 2. The program shall close no later than December 31, 2018.
 - 3. Global Health College ADRN shall not admit any new students or transfer students.
- 4. Pursuant to 18 VAC 90-27-240(B)(2) of the Regulations, the program shall provide to the Board a list of the names of students who have transferred to approved programs and the date on which the last student was transferred no later than January 31, 2019.

5. Pursuant to 18 VAC 90-27-240(C) of the Regulations, the governing institution of Global Health College ADRN shall inform the Board of the arrangements made to safeguard the records of all students and graduates no later than January 31, 2019. If the governing institution ceases to exist, the academic record of each student and graduate shall be transferred to the Board for safekeeping.

Pursuant to Virginia Code § 54.1-2400.2, the signed original of this Order shall remain in the custody of the Department of Health Professions as a public record, and shall be made available for public inspection and copying upon request.

FOR THE BOARD

Jay Douglas, M.S.M., R.N., C.S.A.C., F.R.E.

Executive Director

Virginia Board of Nursing

ENTERED AND MAILED ON:

NOTICE OF RIGHT TO APPEAL

As provided by Rule 2A:2 of the Supreme Court of Virginia, Global Health College has 30 days from the date it is served with this Order in which to appeal this decision by filing a Notice of Appeal with Jay P. Douglas, Executive Director, Board of Nursing, 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233. The service date shall be defined as the date Global Health College actually received this decision or the date it was mailed to Global Health College, whichever occurred first. In the event this decision is served upon it by mail, three days are added to that period.

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Virginia Board Of Nursing

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Report 4 Year to Date – Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions

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Report 4 – Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions



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Report 4 Year to Date - Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions

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Report 4 Year to Date – Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions

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01 Oct 2016 to 31 Dec 2016

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Report 4 -- Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions



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NCSBN Report 4 – Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions



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Report 4 Year to Date - Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions

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| NCSBN Report 4 – Jurisdiction Program Summary of all First-Time



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Report 4 Year to Date - Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions

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01 Oct 2016 to 31 Dec 2016 NCSBN Confidential

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Report 4 – Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions



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Report 4 – Jurisdiction Program Summary of all First-Time Candidates Licensed in All Jurisdictions



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COMMONWEALTH of VIRGINIA

David E. Brown, D.C. Director

Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virglnia.gov TEL (804) 367- 4400 FAX (804) 527- 4475

Virginia Board of Nursing Jay P. Douglas, RN, MSM, CSAC, FRE Executive Director Board of Nursing (804) 367-4515 FAX (804)527-4455

MEMORANDUM

To:

Education Informal Conference Committee

From:

Paula B. Saxby, R.N., Ph.D. Deputy Executive Director

Jacquelyn Wilmoth, R.N., M.S.N. Nursing Education Program Manager

Date:

February 25, 2019

Subject:

2018 NCSBN NCLEX State and National Pass Rates

Attached is information regarding the 2018 NCLEX pass rates for first time test takers for Virginia and the National pass rate for practical nursing programs and registered nursing programs by type of program.

Year	Virginia	National
2018	84.15%	85.93%
2018	80.50%	83.84%
2016	78.76%	83.73%
2015	79.25%	81.89%
2014	79.21%	82.16%
2013	78.89%	84.63%
2012	74.97%	84.23%

Year	Virginia	National
2018	91.37%	88.30%
2017	89.16%	87.11%
2016	86.87%	84.57%
2015	87%	84.53%
2014	82.90%	81.78%
2013	83.06%	83.04%
2012	90.43%	90.34%
	NCSBN NCLEX Ye	

			NCLEX-		rates for	or 2012-201 pe)	8.		
Year	Dlp	oma	National		clates	National	Bach	elors	National
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	Fig. S			89.7	72%		93.1		
2017	Tested	Passed		Tested	Passed		Tested	Passed	
	21	18	90.23%	1818	1575	84.24%	2055	1879	90.04%
	85.	71%		86.	6%		91		
2016	Tested	Passed		Tested	Passed		Tested	Passed	men to
	51	45	86.39%	1864	1592	81.68%	1963	1732	87.8%
	88.	24%		85.4	1%		88.2		
2015		Passed		Tested	Passed		Tested	Passed	
		85.77%	% 2011 1708	82%	1884	1675	87.49%		
	94.7	4%		84.4	9%		88.9	9%	
2014	Tested	Passed	83.28%	Tested	Passed		Tested	Passed	-
	86	71		86	71	83.28%	1809	1553	84.93%
82.55%			79.2	6%		84.9	-	OH-OSP-MARK	
2013	Tested	Passed		Tested	Passed		Tested	Passed	
	193	165	83.42%	2156	1763	81.42%	1700	1435	85.18%
85.49%			81.7	7%		84.4	1%		
2012	Tested	Passed	THEFT	Tested	Passed	DE VAN	Tested	Passed	VELLEY.
	292	276	91.18%	2013	1794	89.32%	1573	1435	91.68%
1150	94.	5%		89.1	2%		91.23		



COMMONWEALTH of VIRGINIA

David E. Brown, D.C. Director

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Virginia Board of Nursing Jay P. Douglas, MSM, RN, CSAC, FRE Executive Director

Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

February 13, 2019

Deanne W. Mullins, RN
Program Director/Primary Instructor
Grace Health & Rehab of Greene County
355 William Mills Drive
Stanardsville, VA 22973

RE: Request to Establish a Hybrid Nurse Aide Education Program

Dear Ms. Mullins:

This letter is sent as notification that the Education Informal Conference Committee of the Virginia Board of Nursing will consider the request to establish a hybrid nurse aide education program at Grace Health & Rehab of Greene County, Stanardsville. The committee will meet at 9:00 a.m. on March 6, 2019 at Perimeter Center, 9960 Mayland Drive, Suite 201, Board Room 1, in Henrico.

In an effort to facilitate a more complete review of educational programs, the Board of Nursing has established the procedure which is reflected in this letter. This allows for a careful review of each request, the opportunity for you to be present, if you wish, and for you to participate in the process with the Committee.

While your attendance is not required, you may be present when the program is considered by the Committee. Attending the meeting will give you the opportunity to make comments about the request and respond to questions from the Committee. Questions from the Committee that cannot be answered by the material provided may result in a deferral of the Board's decision in the absence of a representative from the program. Please let us know by February 25, 2019 if you plan to be present.

After the Committee reviews the report, the Committee will develop a recommendation for presentation to the Board at its meeting on March 19, 2019.

Grace Health & Rehab of Greene County February 13, 2019 Page 2

The Committee will make one of the following recommendations to the Board:

To grant the request; or Request additional information; or To deny request.

The Board of Nursing will take action on the recommendation from the Committee. The procedure is consistent with the Board of Nursing Laws and Regulations and the Virginia Administrative Process Act in that it provides for an informal conference for the initial decision while allowing for the Board or a panel thereof to consider the matter in a formal hearing if agreement is not reached informally.

In any instance where an adverse recommendation is accepted by the Board of Nursing, within thirty-three (33) days of the date of the order/action, the program director may request a formal hearing before the Board or a panel thereof, in accordance with Virginia Code §2.2-4020 and §54.1-2400 (11).

Please contact me if you have any questions.

Sincerely,

Paula B. Saxby, R.N., Ph.D. Paula B. Saxby, R.N., Ph.D.

Deputy Executive Director

Cc: Education IFC Committee
Nancy Burandt, LNHA



COMMONWEALTH of VIRGINIA

David E. Brown, D.C. Director

Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

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Virginia Board of Nursing Jay P. Douglas, MSM, RN, CSAC, FRE Executive Director Board of Nursing (804) 367-4515 Nurse Aide Registry (804) 367-4569 FAX (804) 527-4455

MEMORANDUM

To:

Education IFC Members

From:

Paula B. Saxby, R.N., Ph.D.

Date:

February 25, 2019

Subject:

Grace Health and Rehab of Greene County

Application to Establish a "hybrid" Nurse Aide Education Program

Attached is the original application for the above program to offer a "hybrid" nurse aide education program that was submitted in December 2018. It is considered a "hybrid" program due to the online delivery of the nurse aide curriculum, and the skills lab availability, and direct client care clinical experience.

Board staff have reviewed the application and had some questions about the way they were going to deliver the program and who was in charge of the program. Included, is the letter that was sent to the program from Board staff dated January 24, 2019 asking for clarification. There is additional information that was submitted by the program (date stamped February 7, 2019) to address the questions referred to in the January 24, 2019 letter.

Board Action may be one of the following:

- 1. Approve the application to establish a "hybrid" nurse aide education program:
- 2. Approve the application pending additional information from the program documenting compliance with Board requirements; or
- 3. Denial the application to establish a "hybrid" nurse aide education program.



February 5, 2019

Paula Saxby RN PhD
Deputy Executive Director
Virginia Board of Nursing
Perimeter Center
9960 Maryland Drive
Suite 300
Henrico, Virginia 23233-1463

RE: GRACE HEALTH AND REHAB OF GREENE COUNTY NURSE AIDE EDUCATION APPLICATION

Dear Dr. Saxby;

Enclosed you will find all of the application materials for Grace Health and Rehab's nurse aide education program. The documents included in this package are:

- 1. Application
- 2. Organizational Chart
- 3. Contract with Straightaway Health Careers
- 4. Syllabus
- 5. Schedule
- 6. Navigating guidelines

Additionally, an electronic copy was sent to both you and Ann Hayes. I appreciate your patience and assistance in this process which, at times, has been difficult to navigate. If you require any further information, please do not hesitate to contact me. Thank you again.

Sincerely,

Deanne W Mullins RN

Program Director/Primary Instructor

Grace Health and Rehab Nurse Aide Education Program

Deance W. Mullis RN

355 William Mills Drive

Stanardsville, Virginia 22973

Mobile - 434-953-6016

Office - 434-985-4434

dmullins@greenecountyschools.com

355 William Mills Drive Stanardsville, VA 22973

COMMONWEALTH OF VIRGINIA DEPARTMENT OF HEALTH PROFESSIONS BOARD OF NURSING

Perimeter Center 9960 Mayland Drive, Suite 300 Richmond, Virginia 23233-1463 (804) 367-4639

Application to Establish A Nurse Aide Education Program (Please type)

1. Name and Address of Program Provider:

City: Stanardsville, VA		27519
Phone Number:	(434) 985-4434	(Zip Code)
(Area Code) e-mail Address:		
Administrative Officer of the Program:	Deanne Mullins, RN Name	Title
Program Coordinator (Must be a Registered 1	Nurse): Deanne Mullins, RN	
General Program Elements:		
Program Title: Grace Health and Rehab of G	reene County	<u>.</u>
Beginning Date of First Class: Upon approv	val by the Board of Nursing	
Frequency of program offering: Quarterly		
Maximum number of learners in each program	m session: 10	
Hours: Total 133.5; Classroom (including	Core Hours and Skills Lab) 93.5; Clini	cal <u>40</u>
Faculty to learner clinical ratio: 1:10 (max)		
Nursing facility based (licensed nursing home facility/unit): Yes X No	e or Medicare/Medicaid certified skille	d or intermediate o
	meet the Roam of Nursing Regulations	55

Financial support and resources sufficient to meet the Board of Nursing Regulations: The Grace Health and Rehab of Greene County Nurse Aide Training program will be run/operated by Grace Health & Rehab of Greene County skilled nursing facility. It is owned and operated by Grace Healthcare Support Services a privately-owned corporation consisting of 31 Skilled Nursing and Assisted Living Facilities. Grace Healthcare Support Services will provide financial backing to Grace Health & Rehab of Greene County to develop and conduct their Nurse Aide Training program. Grace Health & Rehab of Greene

Revised November 2017

County's mission is to make a positive impact on our residents, staff, and communities by investing in better recruitment, training, and support of our CNAs.

3.a.	Clinical Resource(s) used for	Clinical Learning	Experiences	of Students:
------	---------------------	------------	-------------------	-------------	--------------

Address	Type (licensed nursing home; Medicare/Medicaid certified units)
55 Williams Mills Drive, anardsville, VA 27519	Licensed Nursing Home
	5 Williams Mills Drive,

Identification:				
escribe how learners are	identified and re	ecognizable to clien	nts, visitors and staff	f when in the clinical sett
ent will be provided wi ne facility name, and t	th and required heir title "Nurse	to wear a badge Aide Student"	at all times in the	facility that includes th
nal Personnel:				
	escribe how learners are ent will be provided wit ne facility name, and t	escribe how learners are identified and recent will be provided with and required ne facility name, and their title "Nurse	escribe how learners are identified and recognizable to client will be provided with and required to wear a badge ne facility name, and their title "Nurse Aide Student"	escribe how learners are identified and recognizable to clients, visitors and staff ent will be provided with and required to wear a badge at all times in the ne facility name, and their title "Nurse Aide Student"

2. List work experiences as a Registered Nurse for the past five years and RN experience in long term care at any time

in your RN career.

II JOHL TELT OUT				
Dates	Employer, Address &	Туре	Туре	Duties/Responsibilities
From To	Phone Number	Facility	Clients	•
7/2017 to prese	Greene County Public Schools 40 Celt Rd, Stanardsville VA 22973 (434)939-9000	Tech Ed Center	CNA Students	Program Director and Primary Instruct Nurse Aide Students
9/2016-8/2017	UVA Medical Center Charlottesville, VA	Acute Care	Critical Care	Staff Nurse Trauma, Burn, Surgery
8/2015-9/2016	UVA Continuum Home Health	Post-Hospital	Home Health	Case Manager

3. Competence to teach adults

a. Course(s) beyond basic nursing education taken and completed in principles and methods of adult learning.

Dates From To	School & Location	Course Title & Description	Clock Hours	Credit Hours C.E.U.S.
09/28/17- 09/29/2017	VACE Training	Train the Trainer for Nurse Aide Instructors	10	10

b. Experience in teaching adult learners within the past five years.

Dates From To	Adult Learner Population(s) Taught	Agency & Location	Duties
07/2017- present	Nurse Aide Students	Greene County Public Schools 40 Celt Rd, Stanardsville VA 22973 (434)939-9000	Primary Instructor Program Coordinator

- * The primary instructor's role in the Grace Health & Rehab of Greene County Nurse Aide Training program will be as follows:
 - 1. Per the training program schedule, the instructor will be present in the classroom with students during the orientation on the first day (2 hours allotted).
 - 2. The student will then complete the theory portion of course on their own time, per the schedule guidelines. The instructor will spend approximately one hour per day during the theory portion to oversee the student's progress. This may include any of the following duties: 1) checking student progression in the course through the CNA Edge Learning Management System dashboard 2) monitoring student's scores on section quizzes, 3) contacting students and/or scheduling time to meet with any students who require additional instruction based on poor progress or poor performance on quizzes. 3) running reports of general course progress and outcomes. 4) assisting students with any technical support needed to run the course.
 - 3. The instructor will spend face-to-face time in the classroom with students during allotted laboratory times, and in the facility providing face-to-face clinical instruction to the students during the allotted clinical times, per the schedule.
 - 4. The instructor will make herself available to students requiring make-up hours and/or requiring any additional instruction once the course is complete prior to the competency evaluation, to maximize student success.
 - 5. As this is a hybrid program, coursework can be monitored 24/7 from any remote location. Additionally, since very little classroom instruction is required of this program as it is self paced, instructional time is minimal and will not conflict with Ms. Mullins's other commitments.

B. 1. Other Instructional Persons	iel (Registered Nurse)
a. Name:	Virginia R.N. license number:
or a copy of Multi-	State Privilege Compact License and number:
 b. Direct patient care experience a 	

Dates From To	Employer, Address & Phone Number	Direct Patient Care Experience	
		1	
<i>p</i> • • ■.			

c. Competence to teach adults:

1. Course(s) beyond basic nursing education taken and completed in principles and methods of adult learning

Dates From To	School & Location	Course Title & Description	Clock Hours	Credit Hours or C.E.U.S.

2. Experience in teaching adult learners within the past five years.

Dates	_	Adult Learner	Agency & Location	Duties	
From	То	Population(s) Taught			

a. Name:	On a court of Market Charles	to Deivileen Comment I	rirginia L.P.N. lice	ense numb	er:
		te Privilege Compact Lic	-		
b. Direct pa lates	atient care experience as an Employer, Address &	LPN for the past five ye	Direct Patient Care	<u> </u>	
rom To	Phone Number		Experience		
	nce to teach adults:				
1. Co	nce to teach adults: Durse(s) beyond basic nurs School & Location	ng education taken and Course Title of Description		iples and k Hours	Credit Hours or
	ourse(s) beyond basic nurs	Course Title			
1. Co Dates rom To	ourse(s) beyond basic nurs	Course Title Description	Cloc		Credit Hours or C.E.U.S.

B. 3. Other Instructional Personnel (Resource Personnel)

Name	Credential(s)	Role in Nurse Aide Program	Years of Experience in his/her field
er * w			

6. Classroom Facilities:

Describe classroom facilities including conditions of comfort, safety, lighting, space and equipment. (Include audio-visual equipment, teaching models, manikins, bed, bedside unit, hand washing stations, etc.).

Grace Health & Rehab of Greene County (GHRGC) will be using the didactic Nurse Aide Training curriculum, CNA Edge. Students can complete this portion of the course independently via computer or mobile device. An instructor will monitor oversight of each student's progress (detailed information attached). They will be notified prior to course starts of the need for personal access to a computer or mobile device on which to complete the training and will be oriented to the course on the first day of the course, in the facility's conference room. Students must be present at the facility for all skills and clinical portions of training. There are 2 handwashing stations available to students in the lab space during skills practice and attached is a complete list of equipment to be available for laboratory training.

GHRGC has licensed CNA Edge for use in its course. Straightaway, the creators of CNA Edge, do not own or run the Nurse Aide Training program instead have provided courseware to deliver the students and instructor during the theory portion of the course. As part of the contract between Straightaway and GHRGC, Straightaway will conduct an implementation training for the instructor and any other pertinent staff of the program prior to course start. The training will ensure that the instructor is familiar with the materials and competent to run the Learning Management System on which the course is housed. Any technical issues students face will be first directed to the instructor. If the instructor cannot solve the issue she will submit a support ticket to Straightaway's Client Care Department. All tickets are addressed within a minimum of 24 hours, but average within 1 hour.

The Greene County Tech Center Nurse Aide Program (10415 Spotswood Trail, Standardsville, VA 22973) will serve as the dedicated laboratory space for skills practice and includes a projector, smartboard, 12 beds, 3 mannequins, handicap access, restrooms, lockers, 10 wheelchairs, desk with chairs, refrigerator/microwave available for use. This space will also be used for the student orientation portion of theory training.

Students will have mandatory times to report to skills lab to meet with the Board of Nursing requirements.

Furthermore, students can make appointments with the instructor if additional time is desired in the lab. The skills lab will be open M-W-F from 1500 until 2100. Additional time can be afforded upon request and prior to board certification testing.

7. Records of Graduates' Performance:

a. Describe record keeping system for maintaining reports from the testing service of the overall (not individual) performance of graduates on the state approved competency evaluation and how frequently these reports will be reviewed with faculty and the curriculum adjusted as needed.

Electronic score reports from Pearson Vue will be printed and maintained in secure student records in a locked file in the Business Office at the facility. Collective scores will be reviewed by the Program Coordinator, Primary Instructor, and Administrator at each course end. At that time, the course outcomes will be reviewed by the Program Coordinator, Instructor, and Administrator and any adjustments needed to skills and clinical training and/or the course schedule will be determined and implemented prior to the next course. If there are specific changes desired within the CNA Edge course, GHRGC will notify Straightaway who will then work with the program to determine the feasibility of requested changes and provide the program with a timeframe for any changes to be made.

b. Briefly describe how skill records for individual graduates are maintained including providing a copy to graduates.

Skills will be monitored and recorded on the skills checklists (attached). A copy of each checklist will be placed in each student's file as well as copies given to students upon completion of the course.

8. Records of Disposition of Complaints:

Describe briefly the procedure and record keeping system used for showing disposition of complaints against the nurse aide education program

Students will be provided the attached policy outlining the student grievance procedure.

- 9. Curriculum Content: For each area of curriculum content listed below, please indicate the unit and page number in the topical outline or objectives where content is included.
 - * The following provides a Section, Unit, and Lesson number in which a topic is introduced in the course. However, due to the repetition that CNA Edge provides, there are multiple locations in which topics are presented. The space provided on this application is limited, therefore the attached document "CNA Edge Manual VA" includes a detailed crosswalk outlining where each Virginia BON regulations are located (pp 9-36)

1. Initi	al Core Curriculum (at least 16 hours).	Unit No. of Instruction	Page No. of Topical Outline
a.	Communication & interpersonal skills.	Section 1	Lesson 1
b.	Infection control.	Section 2	Lesson 4
c.	Safety and emergency measures, including		
	dealing with obstructed airways and fall prevention.	Section 1	Lesson 7
d.	Promoting client independence.	Section 1	Lessons 2, 3, 5
e.	Respecting clients' rights.	Section 1	Lesson 4, 5

2. Basic Skills.

a. Recognizing changes in body functioning and the

	importance of reporting such changes to a supervisor.	Section 1	Lesson 3
		Section 2	Lessons 3 & 4
Ъ.	Measuring and recording routine vital signs.	Section 2	Lesson 2
	Measuring and recording height and weight.	Section 3	Lesson 2
	Caring for the clients' environment.	Section 1	Lesson 7
	Measuring and recording fluid and food intake and output.	Section 5	Lesson 7
	9 9 9 5 2000 minute area onther	Section 6	
		Section 8	Lesson 6
f.	Performing basic emergency measures.	Section 1	Lesson 2
a a	Caring for client when death is imminent.	Section 7	Lesson 7
5.	Caring for chefit when death is iniminelit.	Section /	Lesson 8
3. Per	sonal Care Skills.		
a.	Bathing and oral hygiene.	Section 4	Lesson 3
		Section 6	Lesson 4
b.	Grooming.	Section 4	Lesson 3
	Dressing.	Section 6	Lesson 7
	Toileting.	Section 3	
	20100112	Section 6	Lesson 6
	Assisting with eating and hydration including	Section 6	Lesson 4
·	proper feeding techniques.	0-41-6	
	proper recumg techniques.	Section 5	Lesson 3
e	Coning for chin to include your still Contact	Section 6	Lesson 6
I,	Caring for skin, to include prevention of pressure ulcers.	Section 5	Lesson 6
_	TD - C 141 1 1 1 1	Section 6	Lesson 5
g.	Transfer, positioning and turning.	Section 2	Lesson 6
		Section 7	Lesson 6
(Curriculus	m content continued, #9)		
(Curricului	m content continued, #9)	Unit No. of	Page No. of
(Curriculus	m content continued, #9)		Page No. of
	, ,	Unit No. of Instruction	Page No. of Topical Outline
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5. Care of the Cognitively or sensory (visual and auditory) Impaired Client.

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ATTACH TO THIS APPLICATION A DESCRIPTION OF THE PROGRAM INCLUDING:

- 1. Program Objectives. (attached)
- 2. Unit Objectives (stated in behavioral terms including measurable performance criteria). (attached in CNA Edge Manual
- 3. Topical outline and sequence for each unit of instruction (attached lesson plans)
- 4. Classroom Schedule. (see lesson plan above)
- 5. Clinical Schedule. (see lesson plan above)
- 6. Teaching Methods. (see CNA Edge Manual
- 7. Evaluation Methods (classroom and clinical). (see lesson plan above)
- 8. Learner Skill Record.
- 9. Proof of financial support and resources sufficient to meet Board of Nursing requirements.
- 10. Evidence of providing each student a copy of applicable law regarding criminal history checks for employment in certain health care facilities, and a list of crimes which pose a barrier to such employment. (included in lesson plans)
- 11. Copy of Business License and Building/Zoning Permit.
- 12. Copy of signed Agreement of Cooperation for clinical experience/site

I certify that the information in this application, including attachments, accurately represents the nurse aide education program for which approval by the Virginia Board of Nursing is being requested.

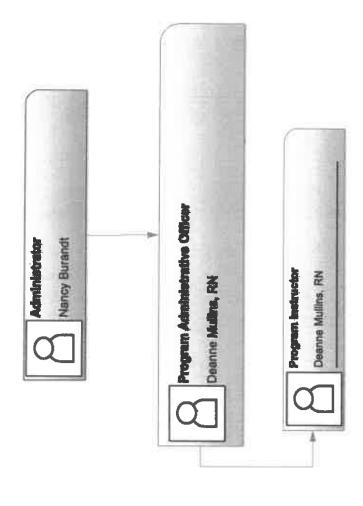
Date: 11/30.2018

Email: dmullins@greencountyschools.com

(Form may be copied)

Revised November 2017

Grace Health & Rehab of Greene County Nurse Aide Training Program Organizational Chart





111 Coming Rd, Suite 250 Cary, NC 27518 (434) 296-6333

Order Form and Master Services Agreement

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Nam	e Ashley Wilson	Name	Achley	Wilson	TENEL I	PARTIES DI
	1 801 Broad Street			oad Street		
	2 Suite 300	Address 2				
	p Chattanooga, TN 37402			nooga, TN 37	402	
	e (423) 424-1869			124-1869	102	
	e (423) 305-5355			305-5355		
	til ashlevw@gracehc.com			w@gracehc.c	om	,
Product and In	nplementation Fees				/	
	Product Description	Coun	- 10	Rate	Ann	ual Fee
	: TRAINING - Host Site	7	S	12,000.00		84,000
X CNA Edge	: TRAINING - Satellite Site	2	\$	6,000.00		12,000
	: SUPPORT	9	\$	1,000.00		Walved
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5/8/2018	Contract Term - Years Contract Effective Date			tal <i>per year</i> al Activation	-	96,000
6/30/2018	Contract Effective Date Contract Start Date (*RSRA)		ını	NI VCAARGOU		7.00
6/29/2019	Expiration Date (RSRA)			Total	\$	96,000

Notes

"Contract start date is the sooner of June 30th, 2018 or the date upon which RSRA (respective state regulatory approval) has been granted. See <u>Schedule A</u> for additional terms of this agreement. Implementation fees will be walved for all Grace Healthcare, LLC locations.

Important Notice

The Master Services Agreement terms and conditions that are attached to this Order Form are part of this Agreement and will become legally binding upon the execution of this Agreement. By signing this Agreement, you acknowledge and agree that you have read, understood and agree to comply with all the terms and conditions contained within this Agreement.

Accepted By Straightaway Health Careers, LLC Accepted by Licensee MINUS Mike Mutka Ma 8 2018) Approval Signature Client Signature Ashley M. Wilson Michael Mutka Print Name **Print Name Director of Human Resources Support** President **eltiT** Title May 8, 2018 May 8, 2018 Spencer Thomas Date Representative Date



111 Corning Rd, Suite 250 Cary, NC 27518 (434) 296-6333

Order Form and Master Services Agreement

Schedule A - Pilot with Opt-Out and Roll-Out.

THIS Schedule A supplements and amends, effective as of April 26th, 2018 (the "Effective Date"), that certain Order Form and Master Services Agreement dated April 26th, 2018 (the "Order Form and Master Services Agreement") entered into between Grace Healthcare, LLC on behalf of the facilities listed herein ("Licensee") and Straightaway Health Caraers, LLC ("SHC"). Any terms used but not defined in this Schedule A will have the meanings ascribed in the Order Form and Master Services Agreement.

1 Pilot Period. The parties hereby agree that the Services will initially be provided as part of pilot period for Licensee's Hoat Site and Satellite Site below (the "Pilot") during which Licensee will receive RSRA ("respective state regulatory approval") and commence Cohort 1 within 30 (thirty) days of receiving RSRA. Licensee shall submit applications for RSRA in Michigan, Florida and Virginia.

Host Site

Soddy-Daley Health Care 701 Sequoyah Road Soddy-Daley, TN 37379 Satellite Site

Grace Healthcare of Decatur 332 River Road Decatur, TN 37322

2 Roll-out Phase 1. Within 60 (sixty days) of the commencement of Cohort 1 at "Pilot" location, the parties hereby agree that the Services will be rolled out to Licensee's facilities located in Tennessee. SHC shall invoice Licensee after the RSRA is approved on a monthly basis for the Tennessee locations and Licensee shall have 45 days to make payment.

TN Fecilities

Host Sites

Grace Healthcare of Franklin Raintree Manor

Satalite Sites

Grace Healthcare of Whites Creek

Roll-out Phase 2. The parties hereby agree that the Services will be rolled out to Licensee's facilities located in Michigan, Florida and Virginia within 30 (thirty) days of RSRA. SHC shall invoice Licensee for these locations after RSRA is approved in the respective states on a monthly basis.

Mi. FL. VA Facilities

Host Sites Grace of Douglas (MI)

Riveridge Rehabilitiation and Healthcare Center (MI)

Grace Healthcare of Lake Wales (FL)

Grace Health and Rehabilitation Center of Greene County (VA)

- 3 Opt-Out. Licensee shall be entitled to forego the planned roll-out as outlined above by providing written notice of such decision on or before June 30, 2018. Upon opting out Licensee shall be responsible to continuing paying the annual fees for the pilot facilities on a monthly basis.
- 4 Should any host site become ineligible to deliver the CNA Edge training, due to regulatory survey results, the facility must notify Straightaway Health Careers with supporting documentation to suspend services indefinitely; including any affected Satellite Site. All Satellite sites, affected by Host Site Ineligibility, have the option to evaluate and determine eligibility, or feasibility, to become a host site. Any affected Host site has the option to evaluate and determine feasibility to become a Satellite site. If elected, the mutually exclusive options of transition will go into effect for the remainder of the original agreement term.
- 5 Except as amended by this Addendum, all of the terms, conditions and covenants of the Order Form and Master Services Agreement shall remain in full force and effect. Any inconsistencies between this Schedule A and the Order Form and Master Services Agreement shall be governed by this Schedule A.

IN WITNESS WHEREOF, each party hereto, by its representative, has executed this Schedule A as of the above written Schedule A Effective Date, and such party and its representative warrant that such representative is duly authorized to execute and deliver this Schedule A for and on behalf of such party.

Straightaway Health Careers, LLC

Mike Mutka May 8, 2018

Signature

May 8, 2018

Date

Grace Healthcare, LLC on behalf of the facilities listed herein

AShley M. Wilson
Ashley M. Wilson May 8, 2018

Signature

May 8, 2018

Date

MASTER SERVICES AGREEMENT

1. SERVICES.

- 1.1 <u>Generally</u>. Straightaway will provide to Client Subscription Services described in one or more document(s), regardless of name, (each, an "Order Form") executed by the parties, including providing software as a service (collectively, the "Services"). This Agreement shall apply to all of the Services from the Effective Date, whether or not an Order Form has been executed.
- 1.2 Order Forms. Each Order Form shall specify the Services to be performed, including subscription and other supplemental terms, the fees to be paid by Client and other business terms. In the event of a conflict between the terms of this Agreement and the terms of an Order Form, the terms of this Agreement shall prevail unless an Order Form expressly provides that certain provisions therein shall control.
- 1.3 <u>Control of Services</u>. Straightaway may subcontract all or any portion of the Services from time to time; <u>provided, however</u>, that Straightaway shall remain responsible hereunder to Client for performance of all such Services. Client hereby grants to such subcontractors all licenses, rights and authorizations granted to Straightaway in connection with this Agreement.
- 1.4 <u>Straightawav Property.</u> Notwithstanding anything to the contrary in this Agreement, Straightaway retains all right, title and interest, in and to any and all property (including, but not limited to, any software, course content, learning management systems or other intellectual property) owned, leased, or licensed by Straightaway in connection with the Services. After termination or expiration of an applicable Order Form or this Agreement, Client shall, at request of Straightaway, certify that Client has removed all Straightaway property from all Client systems.

2. CLIENT COOPERATION.

Cilent shall cooperate with Straightaway in the performance of the Services, Including, without limitation, by providing Straightaway with: (i) access to and support of qualified personnel; and (ii) accurate, reliable and timely information required by Straightaway for the performance of the Services ("Cilent Data"). Cilent warrants that it has all necessary rights or approvals for Straightaway to use or access all Cilent Data in connection with the performance of the Services. Cilent shall be responsible for the performance of its employees and agents, and acknowledges that any fallure or delay in providing such cooperation or Client Data may impact the delivery of the Services.

- 3. INTELLECTUAL PROPERTY; SUBSCRIPTION SERVICES.
- 3.1 <u>Grant of Use.</u> Subject to the terms of the Agreement, Straightaway grants to Client the right to access and use the LMS and <u>all</u> content described in the Order Form, solely

for its Internal business purposes and solely in connection with the personal training and education of Users.

- 3.2 <u>Straightawav Technology.</u> Straightaway has created, acquired or otherwise has rights in, and may, in connection with the performance of the Services hereunder, employ, provide, modify, create, acquire or otherwise obtain rights in, various data, technology, methods and methodologies, processes, know-how, Ideas, techniques, models, templates, algorithms, development tools, software code, documentation, tools, software and interfaces, utilities and routines, and logic, coherence and methods of operation of systems (collectively, the "Straightaway Technology"). All rights not expressly granted in this Agreement are reserved by Straightaway and its clients.
- 3.3 Ownership, Straightaway and its clients shall retain sole and exclusive ownership of, and all rights, title, and interest in, any courses, course materials, learning management systems (including the Straightaway Learning Management System (the "SLMS")), content or websites provided by Straightaway to Client in connection with the Services (the "Straightaway Resources"), in any form or medium. Straightaway shall retain and shall own exclusively all right, title and interest in and to all Straightaway Technology and derivative works thereof and all intellectual property rights inherent therein or appurtenant thereto.
- 3.4 <u>License</u>. Subject to Client's performance of all of its material obligations under this Agreement (including full payment of amounts due to Straightaway under this Agreement), Straightaway hereby grants to Client (I) a non-transferable, non-exclusive license to use the Straightaway Resources during the Term; and (ii) a non-transferable, non-exclusive, royalty-free license to use, solely in connection with Client's receipt of the Services, any Straightaway Technology contained in the Straightaway Resources.
- 3.5 <u>Authorized Users.</u> Client shall provide Straightaway with the required demographic data for all Users in the specified electronic format provided by Straightaway to complete the initial registration process. Periodic additions of Users, within the "Subscription Metrics" (as defined in section 4.2.), may be done manually or using the specified electronic format to bulk upload Users into the LMS. Client agrees not to activate and deactivate Users repeatedly as a method of keeping the number of Users within range of the Subscription Metrics stated in the Order Form. Straightaway will routinely monitor the system for patterns of activation/deactivation that are outside the range of what would be expected with normal use.
- 3.6 Acceptable Use. Client covenants that it will not sublicense, disclose, display, copy, distribute or use the Straightaway Technology for any other purpose than that described herein and will hold in strict confidence the Straightaway Technology. Neither Client, nor any third party, shall modify, adapt, translate, prepare derivative works from, decompile, reverse engineer, or, if applicable, otherwise attempt to derive the source code from the Straightaway Technology.

disclosure of same or becomes generally known to the public after such date through no breach of this Agreement or any other obligation of confidentiality; (ii) was known by the party receiving such information under this Agreement (the "Receiving Party") without any obligation to hold it in confidence at the time of disclosure; (iii) is received by the Receiving Party after the date of disclosure by the other party (the "Disclosing Party") hereunder from a third party without imposition, knowledge or breach of any obligation of confidentiality; (iv) is independently developed by the Receiving Party after the date of disclosure by the Receiving Party without access to Confidential Information of the Disclosing Party; or (v) is approved for release by written authorization of the Disclosing Party.

WARRANTIES.

- **6.1** Each party represents and warrants that it has the legal power and authority to enter into this Agreement.
- 6.2 Each party represents and warrants that it shall perform its responsibilities under this Agreement in a manner that does not infringe, or constitute an infringement or misappropriation of, any patent, invention, trade secret, copyright, trademark or other proprietary right of any third party.
- 6.3 Each party represents and warrants that it shall perform its obligations in a manner that complies, in all material respects, with all statutory and regulatory requirements applicable to their respective businesses.
- 6.4 THE LIMITED WARRANTIES SET FORTH IN THIS AGREEMENT ARE EXCLUSIVE AND ARE IN LIEU OF ALL OTHER WARRANTIES AND CONDITIONS, EXPRESS, IMPLIED, STATUTORY OR OTHERWISE WITH RESPECT TO THE SERVICES, OR AS TO THE RESULTS WHICH MAY BE OBTAINED THEREFROM, AND ALL IMPLIED WARRANTIES AND CONDITIONS OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE ARE EXPRESSLY DISCLAIMED.

7. INDEMNIFICATION.

- Indemnity by Straightaway. Straightaway shall indemnify, defend and hold harmless Client and its officers, directors and agents, and their respective successors and permitted assigns from and against any and all losses, liabilities, damages and claims and all related costs and expenses, including reasonable legal fees and disbursements and costs of investigation (collectively, "Losses"), incurred by such indemnitee arising out of or in connection with any third-party claims of infringement or misappropriation of any patent, invention, trade secret, copyright, trademark, or other proprietary rights alleged to have occurred because of systems, software or other resources provided to Client by Straightaway hereunder ("Straightaway Provided Systems") or based upon their use by Client, other than claims arising out of any combination, operation or use of Straightaway Provided Systems with systems, software or other resources not provided by Straightaway if combined, operated or used in a manner other than that to which the parties have agreed.
- 7.2 <u>Indemnity by Client</u>. Client shall indemnify, defend and hold harmless Straightaway and its officers, directors and agents, and their respective successors and assigns from and

against any and all Losses incurred by such indemnitee arising out of or in connection with (I) any act or omission of any User, and (II) any third-party claims of infringement or misappropriation of any patent, invention, trade secret, copyright, trademark, or other proprietary rights resulting from the use of any Client Data by Straightaway in the performance of the Services, other than claims based upon or arising out of any combination, operation or use of Client Data with systems, software or other resources not provided by Client if combined, operated or used in a manner other than that to which the parties have agreed.

- Indemnification Procedures. The party seeking Indemnification under this Agreement (the "Indemnified Party") shall notify the other party (the "indemnifying Party") promptly after the Indemnified Party receives notice of a claim for which indemnification is or may be sought under this Agreement, provided, however, that no failure to so notify the indemnifying Party shall relieve the Indemnifying Party of its Indemnification obligations under this Agreement except to the extent that it is materially prejudiced by such failure. The Indemnifying Party will have the right to control, in a manner not adverse to the Indemnified Party, the defense and settlement of any claim using counsel reasonably acceptable to the Indemnified Party. The Indemnified Party may employ counsel, at its own expense, with respect to any such claim (provided that if counsel is employed due to a conflict of interest or because the Indemnifying Party does not assume control of the defense, the Indemnifying Party will bear such expense). The Indemnifying Party will not enter into any settlement of a claim that affects the Indemnified Party's rights or interests without the Indemnified Party's prior written approval.
- 7.4 <u>Exclusive Remedy</u>. The indemnification rights of the indemnified Party under this Agreement shall be the exclusive remedy of the indemnified Party with respect to the claims to which such indemnification relates.

8. LIMITATION OF LIABILITY.

- 8.1 <u>Direct Damages</u>. Notwithstanding anything in this Agreement to the contrary, the maximum aggregate amount of Straightaway's liability hereunder for any and all Losses, damages and other similar amounts payable by Straightaway (whether or not paid by Straightaway) and arising in connection with an Order Form shall equal on a cumulative basis, as of any date, seventy-five percent (75%) of the total fees paid pursuant to such Order Form in the twelve (12) months immediately preceding the event giving rise to the first such claim.
- 8.2 <u>Consequential Damages</u>. TO THE MAXIMUM EXTENT PERMITTED BY APPLICABLE LAW, IN NO EVENT SHALL EITHER PARTY OR ITS AFFILIATES BE LIABLE TO THE OTHER PARTY FOR ANY INCIDENTAL, CONSEQUENTIAL, INDIRECT, SPECIAL, OR PUNITIVE DAMAGES (INCLUDING, BUT NOT LIMITED TO, LOST PROFITS (EXCEPT ON STRAIGHTAWAY'S FEES FOR SERVICES), BUSINESS INTERRUPTION, LOSS OF BUSINESS INFORMATION OR OTHER PECUNIARY LOSS, AND INCLUDING ANY OF SUCH ALLEGED TO RESULT FROM SUCH PARTY'S EXERCISE OF ITS RIGHTS UNDER THIS AGREEMENT, REGARDLESS OF WHETHER SUCH LIABILITY IS BASED ON BREACH OF CONTRACT, TORT (INCLUDING NEGLIGENCE), STRICT LIABILITY, BREACH OF

WARRANTIES, FAILURE OF ESSENTIAL PURPOSE OR OTHERWISE AND EVEN IF ADVISED OF THE POSSIBILITY OF SUCH DAMAGES.

9. TERM AND TERMINATION.

- 9.1 <u>Term.</u> This Agreement shall remain in effect from the Effective Date until the first anniversary thereof or until the expiration or termination of any outstanding Order Form hereunder, whichever is longer (the "Term"), unless earlier terminated in accordance with this Section 9. The term of any Order Form shall be as stated therein.
- 9.2 <u>Subscription Services Term.</u> The initial term of Subscription Services commences on the date specified in, and continues for the term set forth in, the Order Form. Following the end of the initial term, Subscription Services shall automatically renew for the same length as the initial term unless either party gives written notice at least sixty (60) days prior to the end of the initial term, or any renewal term, of its intention to terminate any of the Subscription Services. The pricing for the first twelve (12) months of any renewal term shall be provided by Straightaway in writing no less than sixty (60) days prior to the end of the initial term or any renewal term. The initial term and renewal term(s) are collectively referred to as the "Subscription Services Term".
- 9.3 <u>Termination</u>. Either Client or Straightaway may terminate an Order Form if the other party is in material breach or default of any obligation thereunder, which breach or default is not substantially cured within sixty (60) days of the giving of written notice of such breach.
- 9.4 <u>Suspension or Termination for Nonpayment.</u> In the event that Client fails to pay any material amount due Straightaway hereunder and does not cure such default within five (5) business days of being notified of such default, then Straightaway may, by giving written notice thereof to Client, at its discretion, suspend performance of the Services or terminate this Agreement, or the applicable Order Form, as of a date specified in such notice.
- 9.5 <u>Effect of Termination</u>. Without limiting the foregoing, Client's obligation to pay all amounts due and owing to Straightaway for all Services provided and expenses incurred as of the date of termination, and all costs and expenses related to any such expiration or termination, including any termination fees agreed upon in the Order Form, Sections 1.4, 3 to 9 and 12, and any provisions in an Order Form specified as surviving, shall survive any termination of this Agreement and termination or expiration of any Order Form.
- 10. NOTICES. All notices, authorizations, and requests in connection with this Agreement shall be deemed given on the day they are (i) deposited in the mails, postage prepaid, certified or registered, return receipt requested; or (ii) sent by air express courier, charges prepaid; and addressed to the other party at the address stated in the preamble hereto

or any other such address as such party has designated in writing; or (iii) delivered by hand.

11. MISCELLANEOUS.

- 11.1 Assignment. Straightaway may assign this Agreement and any or all of its rights and obligations herein without Client's approval. Client may not assign or transfer this Agreement without Straightaway's prior written consent. This Agreement shall apply to, inure to the benefit of, and be binding upon the parties hereto and upon their permitted successors in interest and permitted assigns. Any purported transfer, assignment, encumbrance or delegation in contradiction of this paragraph shall be null and void and of no force or effect.
- applicable Law. This Agreement shall be governed in accordance with the laws of the State of New York, without regard to its conflict of laws principles. Any action of any kind by any party against another party arising as a result of this Agreement must be commenced within one (1) year from the date the right, claim, demand, or cause of action shall first accrue.
- Agreement: Severability/Walver. This Agreement and the Order Forms constitute the entire agreement between Straightaway and Client, and merge all prior and contemporaneous communications, with respect to the Services provided hereunder. This Agreement can be modified only by a written agreement signed by both parties. If a court holds that any provision of this Agreement is illegal, invalid or unenforceable, the remaining provisions shall remain in full force and effect. No waiver of any breach of this Agreement shall be a waiver of any other breach, and no waiver shall be effective unless made in writing and signed by an authorized representative of the waiving party.
- 11.4 <u>Independent Contractor</u>. Each party shall act at all times as an independent contractor, and shall be responsible for any and all social security, unemployment, workers' compensation and other withholding taxes for any and all of its employees. Neither party shall have the authority to enter into any commitment on behalf of or otherwise bind the other party.
- for any default or delay in the performance of its obligations hereunder if and to the extent such default or delay is caused, directly or indirectly, by: fire, flood, earthquake, elements of nature or acts of God; riots, civil disorders, rebellions or revolutions in any country; strikes, lockouts, or labor difficulties; any failure in electrical or air conditioning equipment; unavailability of parts; or any other similar cause beyond the reasonable control of such party. Any party so delayed in its performance shall promptly notify the other by telephone, confirm in writing, and describe at a reasonable level of detail the circumstances causing such delay.



Grace Healthcare, LLC_SHC Agreement.2

Adobe Sign Document History

05/08/2018

Created:	05/07/2018
By:	Spencer Thomas (spencer@straightawayhealth.com)
Status:	Signed
Transaction ID:	CBUCHBCAABAAqc88UKHcZqfektn1e1pzA3pUmivBaEmA

"Grace Healthcare, LLC_SHC Agreement.2" History

- Document uploaded by Spencer Thomas (spencer@straightawayhealth.com) from Acrobat 05/07/2018 9:54:24 AM PDT- IP address: 69,245,16,46
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- Document e-signed by Mike Mutka (mlke@straightawayhealth.com)

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Teaching	Discussion	CNA Edge
Objectives - Students will be able to do the following:	Understand course expectations Understand how to be successful in Discussion course Understand the impact of criminal activity on their ability to be employed as a CNA Be familiar with the facility and classroom	Understand the course structure and how information is presented Gain familiarity with the presenters Understand the changes associated with aging
Vindinia Contant	18VAC90-26-110 Requirements for Understand course expectations intitlal certification as a certified Understand how to be successful ourse aide Understand the impact of crimin activity on their ability to be employed as a CNA Be familiar with the facility and classroom	18VAC90-26-40 A.8 18VACA90-26-40 A.B Identifying developmental tasks associated with aging process
Content	Intro to course Review of course/student expectations Review couse syllabus Discuss online study expectations Discuss online study best practices Review Guldance Doc 90-55 and sign acknowledgement Facility tour Requirements to become a Nurse Aide in VA	Introduction to the course stucture and assets 18VAC90-26-40 A.8 Introduction to the virtual faculty The role and responsibilities of the Nurse Aide developmental task Psychological, physical, and social changes of with aging process aging.
Assignment in CNA Edge	e/u	Lessons 1-3
Location	Orientation	Student self- paced instruction
DATE	Week 1 Day 1 2 theory hours	Week 1 Day 2 1.5 theory hours

Self-paced - CNA Edge	
Understand basic needs of residents	Communication with resident and families Understand legal and ethical responsibilities of Nurse Aides and their impact on practice Understand purpose of resident Bill of Rights Understant components of elder abuse and
18VAC90-26-40 A.1.a Understan Communication and interpersonal residents	18VAC90-25-140 A.8 Legal and regulatory aspects of practice 18VAC90-25-140 A.7.a Providing privacy and maintaining confidentiality 18VAC90-25-140 A.7.f Promoting the client's right to be free from abuse, mistreatment, and neglect 18VAC90-25-140 A.7.a-g Client's rights
	and their families and their families and their families and Ethical responsibilities of a Nurse Aide Resident's Bill of Rights Elder Abuse
Section 1 Lessons 4-5	
Student self- paced instruction	
Week 1 Student sellowy 3 paced 1.5 theory instruction	hours

CNA Edge	CNA Edge
Understand the different roles in long-term care and describe an interdisciplinary team : Describe the purpose and goals of long-term care Describe the steps to take in am emergency	Have an understanding of all Self-paced material presented in Section 1 and CNA Edge be prepared to take the end of section quiz.
emergency proceudres	
Common Roles in Long-term care interdiscipinary Teams Purposes and goals of long-term care What to do in an emergency	Test taking strategies Section 1 material overview
Lessons 6-7	Section 1 Lessons 8-9
Student self- paced instruction	Student self- paced instruction
Week 1 Day 4 1.5 theory hours	Week 1 Day 5 1.5 theory hours

Perform the following proficiently				
Evalution Methods	Guidance Doc 90-55	Activity: A CMA's Role 1) In most states, to become a CMA you must perticipate in a hands-on practicum, pass a multiple-choice exam, and: (check all that apply) 2) Nora, a fellow nursing assistant, hands you an assignment sheet and begins to review it with you. What should you do next? 3) In person, a doctor gives you verted orders for one of the resident's medical care. What should you do next?	Activities Self Apparement 1) I usually arrive 10-15 minutes early for work or school, because I want to make sure that I am prepared for the day: (Agree/Disagnee) 2) I always look nest, clean, and presentable when I go to work or a social function; (Agree/Disagnee) 3) When faced with a big project, such as an upcoming final exam (or planning a big event), I set goals, plan shead, and break the project down into small and manageable chunks so I can get everything done on time. (Agree/Disagnee) 4) As a CNA, I will be able to clean up vomit, faces (poop), and urine (pee), because I know that keeping my patients clean is an important part of the job. (Agree/Disagnee) 5) Healthcare workers should only be responsible for taking care of the physical (not emotional) well-being of patients. (Agree/Disagnee)	Activity: The Older Adult 1) Most people will lose their mental capacity or become senile in their old age. 2) An individual's physical abilities will most likely decline, as they age. 3) An older adult's reactions may slow down, causing them to slip and fall more easily. This is due to changes in the: 4) Many older adult's need to unfaite several times during the right because: 5) Of the following choices, which are physical changes that take place in the circulatory system during the aging process?

Activity. The Hraithcare Team	1) Which of the following positions is responsible for the hiring and recruitment of CMAs?

- A resident wants a change in the activities offered at your center. To whom should she request this change?
 Which of the following nursing center staff members do registered nurses supervise? (Select all that apply)

Activity: Introduction to Procedures

- What is the one thing that you must do before and after each procedure?
 Which of the following steps should you take before performing a procedure? (Check all that apply)
 Which of the following steps should you take AFTER performing every procedure; (check all that apply)

Activity: The Lang-Term Ore Environment

- Which type of long-term health center provides 24-hour nursing care?
 Medicald provides financial assistance for health care costs. Individuals that are eligible for this program...
 Which of the following is NOT part of the survey process of long-term care facilities?

Activity, Fire Safety and Disaster Planning

- 1) Of the following disaster guidelines, which one should you follow in all disasters?
- Where should you aim when using an extinguisher to put out a fire?
 Which of the following is not a potential fine hazard?

Activity: The Resident's Room

- The following are all areas where residents need access to a call light except:
 Which items should you avoid placing on top of the bedside stand or the overbed table? (select all that apply)

- What should a CNA do if he or she sees a small fire in an unoccupied patient room?
- Before entering a patient's room, a CNA should:
 What needs are found on the lowest level of Maslow's hierarchy of needs?
- 4) A patient's family asks the CNA caring for a loved one about the results of a recent blood test. What should the CNA
- 5) A patient is refusing to drink fluids even though he is beginning to show signs of dehydration (concentrated urine,
 - headache, sunken eyes, low energy). What should the CNA do?
- 6) if a pattent refuses treatment and the CNA performs this care on the patient anyway, what could happen to the CNA?
 - 7) Which is NOT a reason why a OVA should refuse an assignment?
 - 8) Which should the CNA NOT do as a healthcare professional?
- 9) While standing in the elevator, a CNA overhears his colleagues speaking about a resident's care. What is this a
 - - violation of?
- 10) How is residential nursing care paid for? 11) While helping a resident sip hot tea, the CNA slips and accidentally spills hot tea on the resident causing a burn. This
- 12) A CNA falsely reports that one of his colleagues accepted an expensive gift from the family of a resident. This is an example of:
- 13) Which of the following is NOT a normal part of changes in all older adults?
 - 14) When speaking with a resident, the CNA should NOT:

Activity: The Healthean Leam 1) Which of the following positions is responsible for the hiring and recruitment of CNAs? 2) A resident wants a change in the activities offered at your center, 10 whom should she request this change? 3) Which of the following nursing center staff members do registered nurses supervise? (Select all that apply)	
Activity: introduction to Procedures 1) What is the one thing that you must do before and after each procedure? 2) Which of the following steps should you take before performing a procedure? (Check all that apply) 3) Which of the following steps should you take AFTER performing every procedure: (check all that apply)	
Activity. The Long-Term Care Environment 1) Which type of long-term health center provides 24-hour nursing care? 2) Medicaid provides financial assistance for health care costs. Individuels that are eligible for this program 3) Which of the following is NOT part of the survey process of long-term care facilities?	
Activity: Fire Safety and Disastor Planning. 1) Of the following disaster guidelines, which one should you follow in all disasters? 2) Where should you aim when using an extinguisher to put out a fire? 3) Which of the following is not a potential fire hazard?	
Activity: The Resident's Room 1) The following are all areas where residents need access to a call light except: 2) Which Rens should you avoid placing on top of the bedside stand or the overbed table? (select all that apply)	
Activity: Practice Test 1A 1) What should a CN4 do if he or she sees a small fire in an unoccupied pattent room? 2) Before entering a patient's room, a CN4 should: 3) What needs are found on the lowest lovel of Maslow's hierarchy of needs? 4) A patient's family asks the CN4 caring for a loved one about the results of a recent blood test. What should the CN4	
say? 5) A patient is refusing to drink fluids even though he is beginning to show signs of dehydration (concentrated unine, headache, sunien eyes, low energy). What should the CNA do? 6) If a patient refuses treatment and the CNA performs this care on the patient anyway, what could happen to the CNA? 7) Which is NOT a reason why a CNA should refuse an assignment? 8) Which should the CNA NOT do as a healthcare professional? 9) While standing in the clevator, a CNA overhears his colleagues speading about a resident's care. What is this a	
wolation of? 10) How is residential nursing care paid for? 11) While helping a resident sip indites, the CIVA slips and accidentally spills not tea on the resident causing a burn. This is an example of:	
12) A CNA fatsety reports that one of his colleagues accepted an expensive gift from the family of a resident. This is an example of: 13) Which of the following is NOT a normal part of changes in all older adults? 14) When speeking with a resident, the CNA should NOT:	

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Teaching	Self-paced -	CNA Edge
Objectives - Students will be able to do Teaching the followings:	Understand the admissions process and Self-paced the CNA role in resident admissions CNA Edge	Understand the Importance of vital signs in the care of the resident and the CNA's role in monitoring vital signs. Understand the CNAs role in assisting with the physical exam
Vireinia Comtent		18VAC90-26-40 A.2.b Measuring and recording vital signs 18VAC90-26-40 A.2.a Recognizing changes I body functioning
Content	Admissions	Vital Signs Physical Exam
Assignment In CNA Edge	Section 2 Lesson 1	Section 2 Lesson 2
Location	Week 2 Day Student self- 1 paced 1.5 hours instruction	Week 2 Day Student self- 2 1.5 hours Instruction
DATE	Week 2 Day 1 1.5 hours	Week 2 Day 2 1.5 hours

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obstructred airways 18VAC90-26-40 A.1.b Understand how infection control providers can be residents. Define Infection purpose and unterproved	y care & Infection Control Part 1.	ection 2 Wounds & Infection Control Part 1 esson 4	
18VAC90-26-40 A.1.b Infection control	Control Part 2	ection 2 Infection Control Part 2 esson 5	Week 2 Day Student self- Section 2 Infection Control Part 2 5 paced Lesson 5 1.5 hours instruction

Evalution Methods	Perform the following proficiently	
Actuary, Applications: 1) Which of the following is information about a new resident that you should get from the nurse? (Select all that apply) 2) A person just admitted to the facility may have questions about: (Select the best choice) 3) Which of the following is your responsibility when admitting a new resident? (Select all that apply) 4) To make the resident comfortable, you should offer the resident and her family a beverage, help her unpack and display photos, or other personal touchers to make the room feel more like home. (True/False)		
Activity: Delegration Guidelines 1) The delegration foundables which of the following choices: (Select all that apply) 2) You may delegrate trasts to which of the following? 3) If you are not sure how to perform a tract that has been exsigned to you, you should: 4) When a CNA refuses a trask? (Select all that apply)		
Activities (Vital States) 1) What is the eastest and most common site for tailing a person's pulse? 2) The three processes – breathing, heart function, and producing heat – are measured by which four vital signs? 3) Which of the following measurements should you report to the nurse? (Select all that apply) 4) Older people have lower body temperatures than younger people. True or False? 5) For most adults, what is the normal range for a resting pulse? 6) A patient with a systolic pressure over 140 and a disatolic pressure over 90 is defined as having: 7) Your patient has finished smolding a digenetic five minutes ago. Which method of measuring his temperature should not be used?		
Activity: Processes in the Physical Evain. 1) Your role in supporting the physical exam includes which of the following? (Select all that apply) 2) The nurse asks you to help her move a patient into the dorsal recumbent position. Choose the picture displaying this position. 3) Before the physical examination, you may be asked to:		

Activity: The Symptoms, Infury, and Care of Maggalo-Spaletal Qiegrdars 1) Which of the following are care concerns and needs for someone who has had a joint replaced? (Select all that apply) 2) For people who have had his replacement surgery, which of the following are things that they must NOT do? 3) A person with activitis would have which of these symptoms in the effected joints? (Select all that apply) 4) A resident has just had joint replacement surgery. Which general approaches are used to treat the resident? (Select all that apply) 5) A resident surfers from osteoarthritis. Treatment for this includes: (Select all that apply) 6) What is a prosthesis?	p
Activity: Types of Wounds 1) A laceration is a: 2) Why should you pay special attention to wound care for elderly patients with chronic health conditions? (Select all that apply) 3) You can help prevent sish tears by. (Select all that apply) 4) A patient's wound has been healing for two weeks. What is this phase of healing called? Activity: Infection Preventation Methods 1) Preventable infections are a leading cause of death in long-term residential nursing care. True or False? 2) What are the two goals of medical asepsis? (Select all that apply) 3) What are the two goals of medical asepsis? (Select all that apply)	Handwashing
Activitive Identify infection Rides and Stars to be Treated 1) Which are after that a wound is becoming infected? (Select all that apply) 2) If a wound drains, this signals that it is healing properly. The or False? 3) Drainage has a variety of appearences depending on how the wound is healing. Which type of drainage is a clear, watery fluid?	

Teaching Methods		Self-paced - CNA Edge	Self-paced -	in taborationy with instructor
Objectives - Students will be able to do the following:	Understand how to support rehabilitative and restorative care Gain an introduction to transfers and movement of residents to facilitate their daily activities and care Gain an introduction to Range of Motion	Understand how to support rehabilitative Self-paced - and restorative care Gain an introduction to transfers and movement of residents to facilitate their daily activities and care	18VAC90-26-40 A.3.a Learn about restorative care and Bathing and oral hyglene procedures associated with it. 18VAC90-26-40 A.6.b Using Understand basics of transfers assistive devices Observe and understand a resident discharge process Have an understanding of all material presented in Section 2 and be prepared to take the end of section quiz.	
Virginia Content	18VACS0-26-40 A.6.c Understand how to suppositioning and positioning and restorative care 18VACS0-26-40 A.6.f Gain an introduction to assistive devices 18VACS0-26-40 A.6.b Gain an introduction to Gain an introduction to Gain an introduction to motion	18VAC90-26-40 A.6.c Understand how to sup Turning and positioning and restorative care 18VAC90-26-40 A.6.f Gain an introduction to Teaching client self-care movement of residents assistive devices 18VAC90-26-40 A.6.b Maintaining range of motion	18VAC90-26-40 A.3.a Bathing and oral hyglene 18VAC90-26-40 A.6.a Using assistive devices 18VAC90-26-40 A.6.b	
Contant	Positioning, Rehabilitative & Restorative Care Range of Motion	Positioning, Rehabilitative & Restorative Care	Bed Baths, Transfers, & Discharges Test taking strategies Section 2 material overview	
Assignment in CNA Edge	Section 2 Lesson 6	Section 2 Lesson 6 Continued	Section 2 Lessons7-9	
Location	Student self- paced instruction	Student self- paced instruction	Student self- paced instruction	SKILLS LAB onsite
DATE	Week 3 Day 1 1.5 hours	Week 3 Day 2 1.5 hours	Week 3 Day 3 1.5 hours	Week 3 S Day 4 c 2 hours

CNA Edge	
Understand the importance of documentation and effective communication in long-term care Gain an introduction to skills relateed to measuring weight and height.	
18VAC90-26-40 A.11 Observational and reporting techniques 18VAC90-26-40 A. 2.c Measuring and recording height and weight	
The Care Plan & Documentation Reporting & Recording Subjective and Objective Info Measuring Weight and Height Measuring Weight of a Non- Ambulatory Resident Resident	
Lesson 1-2	
Student seff- paced instruction	
Week 3 Day 5 1.5 hours	

Height and 1) The health team is meeting to decide whether or not your patient, Mr. Grafton has met his care plan goals. Which step of the nursing process is this?

You have been asked to participate in a resident's care plan meeting as a CMA. Which step of the nursing process are you participating in?
 You have been assigned to Frank Graffon. Before providing care, you read his care plan to identify necessary observations to report or record. Which step of

Weight

the nursing process if this?

1) Which of the following are reasons why health professionals document the care they provide to residents: (Select all that apply) Activity: Documentation

- 2) You have just measured how much fluid a pattent drank at breakfast. Where would you document this information?
 - 3) Progress notes should be written:

Activities Subjective or Objective Information

Mrs. Johnson complains that her shoulders are stiff and painful. (Subjective or Objective?)

- 2) After his regular walk, Mr. Munado's breathing was rapid and shallow. (Subjective or Objective?)
 - Mrs. Vaidez was in a bad mood after she took her medicine. (Subjective or Objective?)
- 4) On a pain scale from 0-10, Mr. Grafton reported that he felt pain in his lungs that was a 7. (Subjective or Objective?)
- 5) Mr. Grafton's blood pressure is 165/110. (Subjective or Objective?)

Activity: Reporting and Recording

1) You assisted a resident with his daily walk in the courtyard. How should you communicate the care you provided?

- 2) Mr. Gray says he is unable to get out of his dining chair without assistance. He was able to get out of bed independently this morning. How should you
 - communicate this information?
 - 3) How would you convert 4:00 PM to 24 hour time?
- 4) Ms. Diatio pressed her signal button because she was experiencing dizziness. You answered the call light at 8:35 AM. How would you record the time at

which you responded in 24 hour time?

s) What is missing from the failowing written note? "Ms. Maroun ate 100% of breakfast at 0730 and had difficulty swallowing. Report this to Beth Tomlinson,

What Information is missing from the note below?

Ms. Shaheed Room 300 Bed B

Assisted Ms. Shaheed to the bathroom at 1125. Ms. Shaheed was experiencing difficulties having a bowel movement. Afterwarts, there was some bright red

figuid noted in the tollet. The liquid was left in toilet for the nurse to see.

Activity: The Nursing Process 1) The heakin team is meeting to decide whether or not your patient, Mr. Grafton has met his care plan goals. Which step of the nursing process is this? 2) You have been asked to participate in a resident's care plan meeting as a CMA. Which step of the nursing process are you participating in? 3) You have been assigned to Frank Grafton. Before providing care, you read his care plan to identify necessary observations to report or record. Which step of the nursing process if this?	Meight and Weight
Activities Documentation 1) Which of the following are reasons why health professionals document the care they provide to residents: (Select all that apply) 2) You have just measured how much fluid a patient drank at breakfast. Where would you document this information? 3) Progress notes should be written:	
Activity: Subjective or Objective Information 1) Mrs. Johnson complains that her shoulders are stiff and painful. (Subjective or Objective?) 2) After his regular walk, Mr. Murador's breathing was rapid and shallow. (Subjective or Objective?) 3) Mrs. Valdez was in a had mood after she took her medicine. (Subjective or Objective?) 4) On a pain scale from 0-10, Mr. Grafton reported that he felt pain in his lungs that was a 7. (Subjective or Objective?) 5) Mr. Grafton's blood pressure is 165/110. (Subjective or Objective?)	
Activity: Reporting and Recording. 1) You essisted a resident with his daily walk in the courtyard. How should you communicate the care you provided? 2) Mr. Gray says he is unable to get out of his dailing chair without assistance. He was able to get out of bed independently this morning. How should you communicate this information?	
3) How would you convert 4:00 PM to 24 hour time? 4) Ms. Diallo pressed her signal button because she was experiencing dizziness. You answered the call light at 8:35 AM. How would you record the time at which you responded in 24 hour time? which you responded in 24 hour time? 5) What is missing from the following written note? "Ms. Maroun are 100% of breakfast at 0730 and had difficulty swallowing. Report this to Beth Tornfirson, sw. M.	
What information is missing from the note below? Ms. Shaheed Room 300 Bed B Assisted Ms. Shaheed to the bathroom at 1125. Ms. Shaheed was experiencing difficulties having a bowel movement. Afterwards, there was some bright red liquid noted in the toiler. The liquid was left in tollet for the nurse to see.	

Teaching Methods	Self-paced -	CNA Edge	CNA Edge
Objectives - Students will be able to do the following:	Become familiar with the repiratory system and ways to support residents who suffer from respiratory disorders Understand oygen therapy, settlings, and safety guidelines	Understand the effects of cardiovvascular disorders on residents and their signs and symptoms and care measures. Define isolation precautions and their use in long-term care. Understand the chain of infection and transmission based precautions.	Understand the complex nature of care for the bedridden residents and describe some of the care measures a CNA must employ. Gain an Introduction to sputum specimens, mouth care, denture care, elimination, and bedpan use.
Virginia Content		18VAC90-26-40 A.1.b Infection control 18VAC90-26-40 A.2.a Recognizing changes in body functioning	18VAC90-26-40 A.7.a Providing privacy and confidentiality 18VAC90-26-40 A.1.b Infection control 18VAC90-26-40 A.1.e Respecting cfent's rights 18VAC90-26-40 A.2.e Measuring and recording fluid and food intake and output 18VAC90-26-40 A.3.a Bathing and oral hygiene
Content	Respiratory system COPD Oxygen therapy safety and guidelines Deep breathing and coughing	Supporting Cardiovascular Care Compression Stockings Supporting Care for Cancer Isolation Precautions Chain of infection	Care for the Bedridden Resident Talding a Sputum Specimen Providing Mouth Care Denture Care Assisting with Elimination Assisting with Bedpan use Resident Dignity
Assignment in CVA Edge	Section 3 Lesson 3	Lesson 4-5	Section 3 Lesson 6
Location	Student self- paced instruction	Student self- paced instruction	Student self- paced instruction
DATE	Week 4 S Day 1 I.5 hours i	Week 4 Spay 2 Bay	Week 4 S Day 3 p L.5 hours in

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CNA Edge	Self-paced -
	and define hospice e care and their role care. patient choice and tages of grief the importance of the family's role and on them for client seented in Section 3 ared to take the end uiz.
18VAC90-26-40 A.7.a Providing Understand the complex nature privacy and confidentiality of care for the bedridden 18VAC90-26-40 A.1.b Infection residents and describe some of control the care measures a CNA must 18VAC90-26-40 A.1.e Respecting employ. Gain an introduction to sputum 18VAC90-26-40 A.2.e Measuring and specimens, mouth care, denture recording fluid and food intake and care, elimination, and bedpan output use.	18VAC90-26-40 A.3.f Basic Understand emergency measures and palliativa 1.9VAC90-26-40 A.3.g Caring for Cifert when death is imminent Understand Understand Sient's family for emotioning the Cifert's family for emotioning the Self-care chokes and to accomodate individual Define DNR needs Understand Understand Understand Understand Understand Self-care chokes and to accomodate individual Define DNR material pre support Have an unk material pre and be preg of section q
Care for the Bedridden Resident Taking a Sputum Specimen Providing Mouth Care Denture Care Assisting with Elimination Assisting with Bedpan use Resident Dignity	Hospice and Palliative Care Patient choice DNR Emergency and End of life Care Post-Mortem Care Working with Families Self-Care Test Preparation and Section 3 Review
Section 3 Lesson 6 continued	Section 3 Lesson 7-10
Student self- paced instruction	Student self- paced instruction
Week 4 Day 4 1.5 hours	Week 4 Day 5 1.5 hours

		continued			
Week 4 Day 6 2 heurs	Orritis LAB				in laboratory with instructor
Theory	572				
Cab	3				
Chrical	0				

Perform the following proficiently **Evalution Methods**

 is a sign of COPD & Preumonia, it is a bluish or purplish discoloration of the skin caused by a lack of oxygen in the blood. A person can have Tuberculosis (TB) but not exhibit any signs or symptoms. 	fection in her lung. One of the signs of the infection is that her lung is filled with fluid. What type of respiratory disorder does she Reculosis (TB) but not exhibit any signs or symptoms.
Activity. The Cardiovascular system and its Disorders 1) Blood flows through the droubtory system to bring to cells. 2) Frank Grafton has been diagnosed with Coronary Artery Disease (CAD). Based on this diagnosts, his care plan may include which of the following treatments: 3) A person who feels chest pain from reduced blood flow to the heart is experiencing which of the following:	
Activity: Applying Compression Stockings 1) What are some other names for compression stockings? (select all that apply) 2) You are assigned to apply pressure stockings to Mrs. Fung. When should you perform this procedure? 3) When applying anti-embolic stockings to a resident, check to make sure: (select all that apply)	
Activity, Chain of infection. 1) The chain of infection describes: 2) Which are the means of transmission of infectious diseases? (Select all that apply). 3) What are pathogens? 4) Standard precautions include: (Select all that apply). 5) What happens when the chain of infection is not broken?	
Activity: Cancer and Transmission Based Prezautions 1) A tumor is a mass or clump of cells. 2) What happers when cancer cells metastasize? 3) Mr. Farina is on droplet precautions. What type of PPE must you use every time you enter his room or care setting? 4) Ms. Davis has been placed on contact precautions. What types of precoudons should you take when providing care to this resident to prevent the	
The information presented in this section will be evaluated during skills lab instruction	Sputum Specimen Mouth Care Denture Care Bedpans

Bed baths Transfers	
	he doesn't want to learn about the riders at them and is often heard ing tubes, ventilators, and its Sam to become his health care is Sam to thecome his health care. Sam to thecome his health care.
rdion	Activity: Grief and Lace Responsibilities at the End of Life 1) Mrs. Theres has just been disposed with advanced breast cencer. When asked about her liness, she says that she docsart want to learn about the disease—this may make her even more upset. What stage of grief is she experiencing? 2) When discussing his wife's recent terminal liness disposed. Mr. Allen is often ruide to the health staff. He barks orders at them and is often heard 3) Wesidents are able to refuse care that may extend their fives. 4) A Establish it's not fail" when decussing his wife's condition. Which stage of grief is he experiencing? 5) Frank Gritton is no deep discussion with an old friend, Sam. He asks you to come over. He then tells you he wants Sam to become his health care 5) Frank Gritton is no deep discussion with an old friend, Sam. He asks you to come over. He then tells you he wants Sam to become his health care 7) Frank Gritton is no deep discussion with an old friend, Sam. He asks you to come over. He then talks you he wants Sam to become his health care 8) Frank Gritton is no deep discussion with an old friend, Sam. He asks you to come over. He then talks you he wants Sam to become his health care 9) Trank Gritton is no deep discussion with an old friend, Sam. He asks you to come over. He then talks you he wants Sam to become his health care 9) Trank Gritton is no deep discussion with an old friend, Sam. He asks you to come over. He then talks you he wants Sam to become his health care 9) Which of the following are signs and symptoms of having a heart attack. You notice that they have a do-not-resuscitate (DNR) bracelet on their 4) After you assist with postmortern care of the body, which of the following should you report? (Select all that apply)
The Information presented in this section will be evaluated during skills lab instruction	Activity: Galef and Lazel Responsibilities at the End of Life 1) Mrs. Tavares has just been diagnosed with advanced breast cancer. When asked about her illnes disease - this may make her even more upset. What stage of grief is she experiencing? 2) When discussing his wife's recent terminal illness diagnosis, Mr. Alfan is often rude to the health saying. "It's not fair!" when discussing his wife's condition. Which stage of grief is he experiencing? Is an advance che that may extend their lives. 3) Residents are able to refuse care that may extend their lives. 4) A. List an advance of rective that expresses a patient's preferred life-saving measurestration, in a life-or-death situation. 5) Frank Grafton is in a deep discussion with an old friend, Sam. He asks you to come over. He then proxy. What should you do? Activity: The Chain of Sarrival and Post Mortam Care 1) Frank Grafton is in a deep discussion with an old friend, Sam. He asks you to come over. He then proxy. What should you do? 2) You notice a resident who shows signs and symptoms of having a heart attack. You notice that the wrist. What is the next step you should take? 3) Which of the following are signs of cardiac arrest? (select all that apply) 4) After you assist with postmortem care of the body, which of the following should you report? (Same you assist with postmortem care of the body, which of the following should you report? (Same you assist with postmortem care of the body.
don presented in this section will b	Activity: Grief and Legal Responsibilities at the End of Life 1) Mrs. Tavares has just been diagnosed with advanced breast concer. Whi disease - this may make her even more upset. What stage of grief is she ex 2) When discussing his wife's recent terminal illness diagnosis, Mr. Aften is saying. "It's not fair!" when discussing his wife's condition. Which stage of 3) Residents are able to refuse care that may extend their fives. 4) A Lis an advance directive that expresses a patient's pressivation, in a life-or-death situation. 5) Frank Grafton is in a deep discussion with an old friend, Sam. He asks yo proxy. What should you do? 1) Frank Grafton is in a deep discussion with an old friend, Sam. He asks yo proxy. What should you do? 2) You notice a resident who shows signs and symptoms of having a heart wrist. What is the next step you should take? 3) Which of the following are signs of cardiac arreat? (select all that apply) 4) After you assist with postmortem care of the body, which of the following.
Тъе інfотта	Activitic Gris 1) Mrs. Tavel disease - this 2) When disc seying, "It's r 3) Residents 4) A Activity. The 1) Frank Graf proxy. What: 1) Frank Graf proxy. What: 2) You notice wrist. What b 3) Which of t 4) After you of

use for elemination?	
3) Which is the proper safety technique for a CNA to use when deaning a resident's dentures? 4) A resident receives cargen therapy through a face mask. When should the face mask be removed?	<i>y</i> • • • •
5) Which of the following is an objective sign or symptom and can be directly observed by a CMA? 6) A pulse owneter can be effective when attached to a person's: 7) When putting anti-embolism stockings on a pattent, the CMA should: 8) Which intervention will NOT help a partent with eleme?	*
 9) If a patternt is actively dying, how often should a CNA record his or her vital signs? 10) When a resident complains of chest pains, what should a CNA do? 11) Which device is used to transfer a resident from a bed to a stretcher? 12) Which of the following positions will assist a pattent who has difficulty with deep breathing? 	
13) What is the expected order of the five Stages of grief? 14) Which of the following is the goal of hospice care? 15) How should a CNA conduct oneself regarding a resident's religious beliefs? 16) A new resident is having difficulty getting dressed. The CNA helps the resident. Which document should the CNA use to record this information? 17) If a CNA makes a missiale recording a patient's temperature, what should he do to correct this notation? 18) Which of the following actions protects a resident's right to privacy? 19) Which of the following actions protects a resident's right to privacy? 19) A CNA is assigned a comatiose patient on a ventilator. The CNA has never provided care for a patient in this state. What should the CNA do?	
Skills check off	Sputure Specimen Mouth Care Denture Care Bedpans

18VAC90-26-40 A.1.a Communication and interpersonal skills 18VAC90-26-40 A.1.e Respecting Clients rights 18VAC90-26-40 A.a. Modifying behavior in response to clients 18VAC90-26-40 A.4. c Identifying principles of behavior management 18VAC90-26-40 A.4.d Demonstraing skills supporting age-appropriate behaviors 18VAC90-26-40 A.4.f Responding to client behavior 18VAC90-26-40 A.7.c Assistance resolving grievances and disputes
erpersonal skill 20-26-40 A.1.e. rights 20-26-40 A.4.e. 20-26-40 A.4.e. 20-26-40 A.4.d. pporting age-3 30-26-40 A.4.f. ehawlor 20-26-40 A.4.f. ehawlor 20-26-40 A.7.e. 8grievances a
rights 0-26-40 A.1.e 00-26-40 A.4.e ri in response 00-26-40 A.4.e so of behavior 00-26-40 A.4.e pporting age- ppor
18VAC90-26-40 A 3.b Grooming 18VAC90-26-40 A.3.a Bathing and oral hygiene 18VAC90-26-40 A.4.f Responding to client behavior 18VAC90-26-40 AA.a. Modifying beahvior in response to clients 18VAC90-26-40 AA.c. cleentis principles of behavior management

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CNA Edge
18VACS0-25-40 A.f. Responding to disorders and how to care for disorders and how to care for cash to the bealwing various mental health cannot be a disorders and how to care for cash to cash
18VAC90-26-40 A.1.b Infection control 18VAC90-26-40 A.4.f Responding to client behavior 18VAC90-26-40 A.4.c. Modifying bealwior in response to clients 18VAC30-26-40 A.4.c. Identifying principles of behavior management 18VAC30-26-40 A.10 Management of conflict
infection Cycle Working with Combative Residents Mental Health Disorders Substance Abuse Suicide
Lessons 4-6
Student self- Section 4 paced Lessons 4 instruction
Week 5 Day 3 1.5 hours

Self-paced -	
Understand common restraints and describe safe restraint use and avoidance of restraints Define OBRA Understand the CNA's legal responsibilities to report abuse or neglect Gain an Introduction to dementia and workign with clients with dementia presented in Section 4 and be presented in Section 4 and be presented to take the end of section quiz.	
18VAC90-26-40 A.8 Legal and cregulatory aspects of practice describe 18VAC90-26-40 A.7.a-d Care of the cognitivey or sensory impaired client Define (Understrights 18VAC90-26-40 A.7.g Avoiding need for respons restraints workign workign present present present present present present and a contract and a	
Nestraints and Resident Rights OBRA Lgal Rights and Responsibilities Mild Dementia Test Prep and Review of Section 4	
Section 4 Lessons 7-9	Section 4 Lessons 7-9 continued
Week 5 Day Student self- 4 paced 1.5 hours Instruction	
Week 5 Day 4 1.5 hours	

Clients rights	Blood Bugs Clients rights Hyperglycemia and Hypoglycemia 18VAC90-26-40 A.2.a Recognizing	Blood Bugs Hyperelycemia and Hypogh
reemia 18VAC90-26-40 A.2.a Recognizing changes in body functioning and reporting changes 18VAC90-26-40A.4.h Providing culturally sensitive care	ncompliant residents	Noncompliant residents

Perform the following proficiently	Activity: Mental Health Needs of Residents 1) Which of the following are characteristics of mental illness? (Select all that apply) 2) People with a serious mental libress are at a higher risk of experiencing chronic physical allments. 3) Which of these can be factors in causing mental health disorders? (Select all that apply) 4) Which are the most common treatments for mental health issues? (Select all that apply) 5) How can a CMA help residents who have mental health issues? (Select all that apply)	Activity: Elements of the immune System? (Select all that apply) 1) What is the function of the immune system? (Select all that apply) 2) Our skin is the immune system? first line of defense. 3) Which of the following are needed for maintaining the immune system? (Select all that apply) 4) Grave's disease, Lupus, and multiple sclerosts are which type of diseases?	ch hody fludes? (Select all that apply) s of HIV, then they do not have HIV. (True/False) s you at risk for infection. (True/False) n bloodborne pathogens when you are caring for:	Activity, Weathing Heir and Groomling. 1) What must you do when caring for residents' hygiene and gnorming needs? (Select all that apply) 2) Gnorming and hygiene care provide an opportunity to check for: (Select all that apply): 3) How are lice spread? 4) When shawing the face of a man who is taking anticoagulants, you should use: Adakeup Matkeup
Evalution Methods	Activity: Mental Health Needs of Retidents 1) Which of the following are characteristics of mental liness? (Select all that apply) 2) People with a serious mental liness are at a higher risk of experiencing chronic physical is 3) Which of these can be factors in causing mental health disorders? (Select all that apply) 4) Which are the most common treatments for mental health issues? (Select all that apply) 5) How can a CNA help residents who have mental health issues? (Select all that apply)	Activity: Elements of the immune System 1) What is the function of the immune system? (Select all that apply) 2) Our skin is the immune system's first line of defense. 3) Which of the following are needed for maintaining the immune system? (I) Grave's disease, Lupus, and multiple scierosis are which type of diseases?	Activity: What is the difference between HIV and AIDS? 2) What is the difference between HIV and AIDS? 2) HIV is transmitted through which body fluids? (Select all that apply) 3) If a person shows no symptoms of HIV, then they do not have HIV. (True/False) 4) Hugging a person with HIV puts you at risk for infection. (True/False) 5) You must protect yourself from bloodborne pathogens when you are caring for:	Activity, Washing Hair and Groomling. 1) What must you do when caring for residents' thygiene and groomling needs? [Select all 1, 2] Grooming and hygiene care provide an opportunity to check for: (Select all that apply): 3) How are lice spread? 4) When shaving the face of a man who is taking anticoagulants, you should use:

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Activity: An Immune System Under Stress 1) Which of these factors can cause a weakened immune system? (Select all that apply) 2) What is the number one reason HIV patients end up in intensive care? 3) Antibodies are proteins produced by the	Activition Pain and Medications 1) When can a CMA give medications to a petient? 2) What note does a CMA play in assisting with medications? (Select all that apply) 3) Which are possible side effects of medications? (Select all that apply) 4) What is it called when drug affects the function of another drug when simultoneously? 5) Which statements about pain (or discomfort) are correct? (Select all that apply)	Activity: Intection Control. Sharps 1) Bloodborne Pathogens (BBP) Standards include: (Select all that apply) 2) Choose the symbol that represents Blohazard: 3) Examples of sharps include: (Select all that apply) 4) What should you do with a dull disposable razor? 5) What is the first thing you would do if you were accidentally stuck by a used needle?	Activity: Clean ys. Dirty items I) It is possible to tell if an object or surface is clean by looking closely at it. (True/Felse) I) Which of the following are examples of infection control? (Select all that apply) 3) The three major hot zones in a home or facility are: (Select the three correct answers) 4) You have thoroughly scrubbed a surface twice with soap and water, the surface is:	Activities Bi-Polar Disorder disorders? (Select all that apply) 2) Which of these are true of bipolar disorders? (Select all that apply) 3) Which of the following are symptoms of depression? (Select all that apply) 4) Which is true about the period between manic and depressive episodes?	Activity. Mental thatth issues and Suicide 1) Which of the following are signs and Symptoms of a panic attack (Select all that apply) 2) Which two people are more likely to suffer from Post-Traumatic Stress Disorder (PTSD)? (Select the two best choices) 3) A person gets dizzy and their heart bests faster if they are in a confined space. This is: 4) Which statements about suicide are true? (Select all that apply) 5) Warning signs of suicide include which of the following? (Select all that apply)
Activity: An Immune System Under Stress 1) Which of these factors can cause a weakened immune system? (Select 2) What is the number one reason HIV patients end up in intensive care? 3) Antibodies are proteins produced by the	Activition Pain and Mesilization 1) When can a CNA give medications to a patient? 2) What role does a CNA play in assisting with medications? (Select all the 3) Which are possible side effects of medications? (Select all that apply) 4) What is it called when drug affects the function of another drug when 5) Which statements about pain (or discomfort) are correct? (Select all 1)	Activity: Infection Control: Sharps 1) Bloodborne Pathogens (BBP) Standards include: (Select all that apply) 2) Choose the symbol that represents Blohazard: 3) Examples of sharps include: (Select all that apply) 4) What should you do with a full disposable razor? 5) What is the first thing you would do if you were accidentally stuck by i	Activity: Clean vs. Dirty Itams 1) it is possible to tell if an object or sur 2) Which of the following are everuples 3) The three major hot sones in a home 4) You have thoroughly scrubbed a surf	Activitys Bi-Polar Disorgia: 1) Which of these are true of bipolar disorders? (Select all that apply) 2) Which of these are true a patient is having a manic episode? (Select all 3) Which of the following are symptoms of depression? (Select all that appl) 4) Which is true about the period between manic and depressive episodes?	Activity. Mental thatth Issues and Suicide 1) Which of the following are signs and symptoms of a panic attack 2) Which two people are more likely to suffer from Post-Traumatk 3) A person gets dizzy and their heart beats faster if they are in a c 4) Which soltements about suicide are true? (Select all that apply) 5) Warning signs of suicide include which of the following? (Select

Activity: Safe Restraint Use 2) Which of these items can be used as physical restraints? (Select all that apply) 2) Which of these propriate to use restraints? (Select all that apply) 3) There are ware fear risks associated with releasonations (Trans Research)	
4) Which of the following are OBRA regulations pertaining to restraints? (Select all that apply)	
Activity, Legal Rights and Responsibilities 1) OBRA was established primarily to: (Select all that apply)	
OBRA grants residents a broad range of rights, including: (Select all that apply) An Ombudsman: (Select all that apply)	
#) You suspect abuse or neglect - when do you report R?	
Activity, Practice Test 4	
1) A pattert says that he is depressed. What should the CNA say?	
2) if a CNA forgets to lock the wheels on a bed and a patient falls and gets injured as a result of this, what could the CNA be charged with?	
3) Which is a safety measure that a CNA should employ when helping a resident shower?	
4) How should a CNA speak to a patternt who is in an agritated state?	
5) What is one way to emotionally connect with your residents without crossing boundaries?	
6) When a resident is placed in restraints, which of the following statements is true:	
7) A resident refuses to wash his hair even though it is beginning to become tangled and visibly diny. What should the CNA do?	
8) Which of the following should a CNA do when shaving a resident?	
9) Which is the proper protocol for droplet precautions?	
10) Which of the following is a sign of depression in a pertent?	
11) Which of the following scenarios increases a petient's likelihood of catching an infection?	
12) All patients have the right to:	
13) Which of the following is the definition of the term sterile?	
14) Which of the following best describes standard precautions?	
15) Which of the following is MOT a sign of hypoxia?	
16) Which of the following is NOT a risk factor for suicide?	
17. A nurse is very busy working with a disruptive resident and asts you to give Mr. Smith, who is not your patient, two ibuprofen because, The has a	
headache." What should you do?	
m?	
19) A person hing on his abdomen with his head turned to one side is in the	
20) Which of the following is NOT true about the ombudsman program?	

1.) The enfocance system is make up or organs cancer general receipts a support to the cholorous shave in the body? 2.) What role do hormones have in the body? 3.) The pencreas is an organ of the endocrine system that releases insulin. What role does insulin play in the body? 4.) Diabetes is a disorder in which: 5.) Which of the following can be caused by complications from diabetes? (select all that apply) Activity. The Disestive System and its Disorders 1.) Where is most of the food that you set absorbed?
3) The periores is an organ of the endocrine system that releases insulin. What role does insulin play in the body? 4) Disbetes is a disorder in which: 5) Which of the following can be caused by complications from disbetes? (select all that apply) Activity: The Disestive System and its Disorders 1) Where is most of the food that you eat absorbed?
4) Diabetes is a disorder in which: 5) Which of the following can be caused by complications from diabetes? (select all that apply) Activity: The Disestive System and its Disorders 1) Where is most of the food that you ent alsorbed?
5) Which of the following can be caused by complications from diabetes? (select all that apply) Activity: The Disestive System and its Disorders 1) Where is most of the food that you est alsorbed?
Activity: The Disestive System and its Disorders: 1) Where is most of the food that you est absorbed?
1) Where is most of the food that you eat absorbed?
2) You see Mrs. Straus vomiting. You follow standard precautions and the bloodborne pathogen standard. What's next?
3) Ms. Wooton has been diagnosed with Gastro-Esophageari Reflux Disease (GERD). Of the following, which nursing measure will be included as part of her
Care plan?
4) Hepatits is the inflammation of the:
3) As a CNA, which of the following care measures for diverticalitis would you assist the nurse with? (select all that apply)

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Teaching Methods	Seff-paced -	CNA Edge
Objectives - Students will be able to do Teaching the following:	Understand the signifiance of mealtime in a resident's day. Gain and introduction to intake and output monitoring Deeper knowledge of diabettc's diet Gain and introductiont of foot care Describe importance of range of motion and exercise for the long-term care resident	Describe techniques for working with hearing or visually impaired residents.
Virginia Content	18VAC90-26-40 A.2.e Measuring and recording fluid intake and output 18VAC90-26-40 A.3.e.Assisting with earling and hydration 18VAC90-26-40 A.6.b Maintaining range of motion	18VAC90-26-40A-4.g Providing appropriate clinical care to the aged and disabled 18VAC90-26-40A-5.b Communicating with sensory Impaired clients 18VAC90-26-40 A.8 Legal and regulatory aspects of practice 18VAC90-26-40 A.9 Occupational health and safety measures 18VAC90-26-40 A.11 Observational and reporting techniques 18VAC90-26-40 A.1.C Safety and emergency procedures including falls prevention
Contant	Mealtimes, special diets, and nutrition Hydration Diabetic diet Mealtimes Monitoring I&O Nutrition and culture Foot care Exercise and ROM	Working with residents with hearing or visual impairments incidents and Accident Reports Risk Management mindset Polsons
Assignment in CNA Edge	Section 5 Lesson 3-4	Section 5 Lesson 5
Location	Student self- paced · instruction	Student self- paced instruction
DATE	Week 6 Day 1 1.5 hours	Week 6 Day 2 1.5 hours

CNA Edge	in leboratory with instructor
in helping pattent ansfers with	
18VACS0-26-40A.3.f Caring for skin bedsets and the CNA's role 18VACS0-26-40A.3.g Transfer, positioning and turning 18VACS0-26-40A6.a Using assistive in transferring in transferring devices in transferring mechanical life. Gain and introduction to transferring mechanical life. Cient's right to make personal choices Distinguish AM vs PiM care assistance to participate in groups and activities	
Pressure ulcers Pressure reducing devices Pressure sof dally living Cifent independence Chromic and acute illnesses Mechanical lift AM/PM care	
Section 5 Lesson 6-7	
Week 6 Student self- Section 5 Day 3 paced Lesson 6 1.5 hours instruction	SKILS LAB onsite
Week 6 Day 3 1.5 hours	Week 6 Day 4 2 hours

CNA Edge	in taboratery with instructor
Understand the care plan Describe shingles signs and symptoms Have an understanding of all material presented in Section 5 and be prepared to take the end of section quiz.	
and reporting techniques	
Test Prep and Review of Section 5 and reporting techniques	
Lesson 8-10	
Student seff- paced Instruction	SKILS LAB
Week 6 Day 5 1.5 hours	Week 6 Day 6 2 hours

Evalution Methods	following proficiently
Activity: A Diabetic's Diet. 1) What percentage should carbohydrates make up of a diabetic's total darly calorles? 2) Of the following choices of carbohydrates, which ones are the healthlest? (select all that apply) 3) Ms. Russtin, who is diabetic, at a very little of her meal. What is the next step you should take?	Range of Motion Postive Range of Motion
Activity: Monitoring intake and Output 1) Ms. Vance is served 8 oz of water, but she leaves 3 oz in the glass. How would you record this amount of fluid on the intake and output sheet? 2) Martha Vance completed all of her fish, almost all of her green beans, and half of an orange. What number could you record for the food that she ate at this meal?	**************************************
Activity: Caring for Diabetics: 1) How often should individuals with diabetes receive foot care? 2) Mr. Tram regularly walks to the dialog room. Today he says he would like to use a wheel chair. Which of the following would be an appropriate response?	
Activity: Working with Residents with Hearing and Vision Loss 1) Of the following guidelines, which ones can be used to provide care to a resident with hearing loss? (Select all that apply) 2) You need to remind a hard of hearing tesident that a doctor's appointment is at Apm. How could you communicate this to him? (select all that apply) 3) Hearing aids are a cure for hearing loss. True or False? 4) Before inserting an in-the-ear hearing aid, you should check that (select all that apply) 5) What can you do to assist residents with visual impairments? (select all that apply)	
Activity: Developing a Risk Management Mindset 1) You have been assigned to tidy Mrs. Mura's room. Which of the following should you attend in order to reduce her risk of falling? (Select all that apply) 2) Of the following, which are potential hazards that exist in rursing centers? (Select all that apply)	<i>x</i>

Activitive AMAPPM Certs, Meditarish Lifts, and Chronic and Actio Care 1) When should you assist a resident with denture care? 2) When is a mechanical lift useo? (select all that apply) 3) What is the minimum number of people needed to operate a mechanical lift? 4) Of the following, which is considered a chronic lifness? (Select all that apply) 5) Of the following, which are health risk behaviors that cause a majority of the illness, pain, and early death related to chronic diseases and conditions? (select all that apply)	
Stills check of	Tub badbs Whirlpool Showlering Washing Hair Grooming .

Activity: Shiriples 1) Shiriples can pass from one person to another. True or False? 2) The most common complication of shiriples is: 3) Which of the following treatments for shiriples are CNAs responsible for? (select all that apply)	
Activitive Practice Test EA. 1) Which of these procedures must you pay special attention to when helping a patient who has diabetes? 3) If a CIVA notices that a patient by the pay special attention to when helping a patient who has diabetes? 3) If a CIVA notices that a patient by the CIV spoke as a resident at the bath? 3) If a CIVA notices that a patient is help grevent pressure ulcers? 4) Symptoms of a stage ————————————————————————————————————	to the second se
Shills cheek off	Range of Motion Passive Bange of Motion Transfers with a

Teaching Methods	CNA Edge	Self-paced -	CNA Edge
Objectives - Students will be able to do the following:	Undersating resident sexuality and how to support its healthy expression as a CNA. Understand assisted living. Understand assisted living. Understand the nervous system Describe the causes, signs and symptoms of a strole. Understand the CNAs role in facility admissions.	Describe best practices for working with depressed residents Gain an introduction to making an occupied bed.	Gain an introduction to tolleting, bathing, catheter care, perineal care, and modified bed baths Understand residents needs with respect to urination and bowel elimination
Virginia Content	MAYACSO-26-40A1.e Respecting clents rights 18VACSO-26-40A2.a Recognizing changes in body function 18VACSO-26-40A.7.a Providing privacy and maintaining confidentiality	18VAC90-26-40A.4.a Modifying Describe best behavior in resonse to clients with depresse 18VAC90-26-40A.1.a Gain an introd Communication and interpersonal occupied bed, skills 18VAC90-26-40A.2.d Caring for the client's environment	18VACS0-26-40A.3.d Tolleting 18VACS0-26-40A 5.d Bowel and 18VACS0-26-40A 6.d Bowel and bladder training
Content	Resident Sexuality Assisted Living The service plan Resident privacy Stroke Assisting with Hospital Transfers The Nervous System Caring for residents with ALS & Spinal cord injuries Admissions	Working with depressed clents Malding an occupied bed	ADIS: Tolleting, bathling and catheter care Urhation and bowel elimination Perineal Care Bathing bedridden clients Modified Bed Baths
	Section 6 Lesson 1-2	Section 6 Lesson 3	Section 6 Lessons 4
	Student self- paced instruction	Week 7 Day Student self- 2 paced 1.5 hours instruction	Student self- paced instruction
DATE	Week 7 Day 1 1.5 hours	Week 7 Day 2 1.5 hours	Week 7 Day 3 1.5 hours

3 1.5 hours instruction	paced	l accorde 5.6	_		massage, sidn care	1971 575
			Massage			
			Skin Care	18VAC90-26-40A 3.e Assisting	Gain knowledge of the	
			Integumentary system		integumentary system and scables	
			Scables and Pediculosis	18VAC90-26-40A 6.c Turning and	and pediculosis.	
			Mealtimes	positioning		
			Serving meal trays			
			Promoting Nutrition and Safe Eating			
			Feeding clerts			
			Positioning during feeding	Т	and the second s	Colf-macard -
Wook 7 Day Str	Strictort coff.	Section 6	Rehabilitative & restorative care	18VAC90-26-40A.4.h Providing	Understand basks of restorative	Sell-bares
			Orthonic and Prosthetic devices	culturally sensitive care	and rehabilitative care	CAVA Edge
	naned	I I I I I I I I I I I I I I I I I I I	Section and Indescring nationic	18VAC90-26-40A.3.c Dressing	Gain an Intorduction to dressing and	P
Shours Inst	Instruction		Control of the Contro	19VAC90-26-40A6.f Teaching	undressing residents, orthotic	
			Controlling to Clear Jackson	clent self-care	devices, ambufation, and use of	
			Cross-culture of Communication	18VACOL-26-40A 6.a Usin	transfer belts.	
			Best practices for communicating with	Andrew de description	Gain a deposer understanding of	
			residents	BESSELVE GEVELOR WILLIAMS	communication with residents and	
				ambulation, eating, and pressing	COMBINITION AND AND AND AND AND AND AND AND AND AN	
				18VAC90-26-40A. 6.e Caring for	providing culturally sensitive care.	
				prosthetic and orthotic devices		
				100/ACON 25 40A 1 2		
				neron or or or or		
				Communication and Interpersonal		
				skills		
				18VAC90-26-40A.1.d Promoting		
				Allent independence		
_						

Evaluation Methods Activitive Assisted tivine	Perform the following proficiently	
1) Select the services offered at most assisted living facilities; (Select all that apply) 2) A resident wants to take part in developing his Service Plan. Which of his rights is he exercising? 3) A Service Plan: (Select all that apply)		
Activity: Resident Sexuality 1) David Reed, a resident at your facility, touches you in an inappropriate and sexual way. You should: 2) You walk into a resident's room to find that he's having sex with another resident. One way to avoid this situation in the future is to: 3) You notice that Mr. Jones, a resident with Abhelmer's, is masturbating in a common area. What should you do? (Select all that apply)		
Activity: Nervous System Disordery/Strokes 1) When a person is having a stroke, they may show the following signs and symptoms: (select all that apply) 2) One of your residents is having a stroke. Your first actions will be to: (select all that apply) 3) Survivors of a stroke may need help with activities for daily living, including feeding and communicating. 4) Mr. Hiller, one of your residents, recently had a stroke. As a CNA, you may be assigned to care for him in the following ways: (select all that apply)		
Activitiv Depression 1) Depression is not a problem for older adults to worry about. (True/False) 2) Mrs. Lewis is not participating and no longer seems interested in group activities. What other signs and symptoms might Mrs. Lewis present that would lead to a diagnosis of depression? (select all that apply) 3) As a CIMA, you can help Mrs. Lewis by: (select all that apply)	Making an occupled bed	
Activitiv. Telesting. 1) A bedfast resident recovering from major surgery needs help using the tollet. Which tool will you most likely use? 2) A fracture bedgen is smaller than a standard bedgen. It is typically used for: (select all that apply) 3) What is the item pictured below? 4) A side board allows a person in a wheelchair to use the tollet. When would you likely use a slide board? (select all that apply) 5) The following are effective ways of providing perineal care: (select all that apply) 6) While providing perineal care to a resident, you notice and record some redness in her genital area. What else should you record and report? (select all that apply)	Toilecting Bathing bedridden cikents Perineal Care Modified Bed baths Perineal Care	

Mouth Care Denture Care Bedpon	Dressing and Undressing Residents
The information presented in this section will be evaluated during skills lab instruction	Activitive Bast Practices For Convenuescribes With Residents 1) A resident's culture has a great influence on how they communicate. (True/False) 2) One of your resident's, Mrs. Jones, is explaining a struction to you. You are facing her, giving good eye contact, and nodding when appropriate. This is practicing good communication. 3) in your role as a CNA, you should practice the following methods of effective communication: (select all that apply) 3) in your role as a CNA, you should practice the following methods of effective communication: (select all that apply)

Teaching Methods	CNA Edge
Objectives - Students will be able to do Teaching the following:	Have an understanding of all material presented in Section 6 and be prepared to take the end of section quiz.
Virginia Content	
Arginia	
Content	Test-taking strategies and Review of Section 6
Assignment In CNA Edga	Lesson 8-9
Location	Week 8 Student self- Day 1 paced 1.5 hours instruction
	Week 8 Day 1 1.5 hours

CNA Edge	CNA Edge
Understand Dementia and Alzhelmer's and how to communicate and care for cognitively imparied clients Undersatind strategies to prevent resident elopement	Understand ways to manage sexual aggression Understand caring for moderate and severe dementia Understand techniques to avoid burnout Define chemical restraints and describe the dangers of restraints
Introduction to Alzheimer's 18VAC30-26-40A.5.a-c Care of and Dementia the cognitively or sensory the cognitively or sensory impaired client Alzheimer's Communicating with Cognitively impaired Clients Preventing Elopement	18VACS0-26-40A.5.a-c Care of the cognitively or sensory impaired client 18VACS0-26-40A.4.f Responding to aggressive behavior 18VACS0-26-40A.4.g Providing appropriate clinical care for aged and disabled 18VACS0-26-40A.6.c Turning and Positioning 18VACS0-26-40A.6.c Turning and meed for restraints
Introduction to Alzheimer's and Dementia Care for Moderate Alzheimer's Communicating with Cognitively Impaired Clients Preventing Elopement	Care for Moderate Abbelmers Sexual aggression Care for Severe Abheimer's Burnout Restraints Repositioning in a chair
Section 7 Lesson 1-2	Section 7 Lessons 3-5
Student self- Section 7 paced Lesson 1-:	Student self- paced Instruction
Week 8 Day 2 1.5 hours	Week 8 Day 3 1.5 hours

Seff-paced -	Self-paced -	
Understand how to care for patients in late stages of disease and dementia Gain introduction to feeding tubes and locs and PCCs	Understand the role of the CNA when a resident dies Have an understanding of all material presented in Section 7 and be prepared to take the end of section quiz.	
18VAC90-26-40A.5.a-c Care of the cognitively or sensory impaired client 18VAC90-26-40A.6.d Bowel and Bladder training	18VAC90-26-40A.2,g Caring for patient when death is imminent 18VAC90-26-40A.4.e Utilizing client's family as source of emotional support	
Severe Alzheimer's Enteral Feeding Feeding Tubes IV and PCCs Bowel and Bladder Care	Death CNA role with the dying patient Supporting grieving Test-taking strategies and Review of Section 7	
Section 7 Lessons 6-7	Section 7 Lesson 8-10	
Student self. Section 7 paced lessons 6 instruction	Student self- Section 7 paced Lesson 8-1 instruction	
Week 8 Day 3 1.5 hours	Week 8 Day 5 1.5 hours	

	In faboratory with instructor
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Section 7 Lesson 8-10 continued	
	SKILLS-L/28 onsite
	Week 8 Day 6 2 hours

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Perform the

Evalution Methods	ă.	Ē
	r	ľ.
1) When cleaning a patient's perimeal area, the CNA should be sure to wipe the resident:		

4) Which of the following actions should a nursing assistant always perform when helping a resident to use a bedpan?

Gloves should always be worn as personal protective equipment (PPE) when:

Before bringing a tray into a patient's room, a CNA should:

- 5) Which actions help control the spread of infection?
- 6) When making a resident's bed, what is the final action a CNA should take?
- 8) A CMA needs to obtain a resident's oral temperature. The resident is drinking a cold cup of water. What should the CMA do? 7) in what order should the CNA put on personal protective equipment (PPE)?
- 10) Your patient had a stroke, or CVA, three years ago. He still has weakness on the right side of his body. You are about to transfer the resident from the bed to a 9) A drainage bag must be positioned lower than the bladder:
 - 11) A resident is choking. What procedure should a nursing assistant use to help him? wheelchair. The wheelchair should be positioned at the
- 12) A resident has just suffered a stroke, or a CVA, and has limited mobility. How often should you turn her to prevent skin breakdown?
 - 13) Which of the following steps should the nursing assistant take to care for a resident with a condom catheter?
 - 34) Which of the following is a vehicle of transmission?
- 15) In addition to calling 911, what is one of the first things a nursing assistant should do when a resident is showing signs that she may be experiencing a stroke?
 - 16) When transferring a resident using a gait belt, where should you stand in relation to the resident?
 - 17) How should a CNA encourage residents' independence?
- 18) Patients who lose mobility due to a stroke or an injury often esperience:
- 19) You are assigned to provide care to a new South Astan resident who is Hindu. You are not familiar with Hindulsm. How can you go about facilitating good
 - communication with this resident?
- 20) Which method is most effective for communicating with a patient who has aphasia?
- (22) A widowed client eaks if you could assist her in scheduling some "alone time" with another client in the facility. You should: 2.1) How should a CNA speak with a resident about his bowel movements (frequency, consistency, etc.)?
- 23) A resident with diabetes needs to lower her blood glucose levels, and this goal is part of her care plan. You see her eating cupcakes in her room. What should you
- 24) CMAs work in a variety of health care settings. If a CMA works in a long-term care facility where residents need minimal assistance with activities for daily living
 - (ADLs), what type of health care setting is this?
- 25) Which of the following tasks may the CNA legally perform?

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Ly what is the reaconsing on ween cememon and Azhemer's disease? 2) Which are symptoms of mild Azhemer's disease? (select all that apply)	
3) What is it called when dementia patients gather and stockpile things?	
(i) People with moderate Alzheimer's may exhibit the following characteristics: (select all that apply)	
5) People with severe Alzheimer's disease may: (select all that apply)	
Activity: Wandering and Environmental Hazards	
1) Why do people with dementia wander? (select all that apply)	
2) To reduce the likelihood of residents wandering, you should: (select all that apply)	
3) What is elopement? (select all that apply)	
4) To create a sine, calming, and commortative environment; (select all that apply)	
5) What should you do if a resident is attempting to elope?	
Activity, Communicating with the Atheimse's Patient	
1) When speaking with a person with dementia, you should: (select all that apply)	
2) As Alzheimer's progresses, which techniques become more important? (select all that apply)	
3) When asking dementia petitents questions, you should: (select all that apply)	
4) What should you do when a dementia partient tells you a file? (select all that apply)	
5) Effective techniques for communication with a dementia patient include: (select all that apply)	
Activity: Strategies for Handling Sexual Agencesion	
1) if patients act sexually inappropriate with your (select all that apply)	
2) To prevent misunderstandings with a pastent, you should: (select all that apply)	
3) Behavior that seems sexual is always intentionally sexual. (True or false)	
4) Why might a person with dementia be undressed? (select all that apply)	
5) You are responsible for a patient's inappropriate behavior. (True or false)	
Activity: Working with Residents Who Have Moderate Akheimer's	
1) When does sundowning occur?	
2) Which of the following are symptoms of moderate Abrheimer's? (select all that apply)	
3) Diversions can be especially helpful when a resident it: (select all that apply)	
4) A person with dementia no longer needs privacy. (True or false)	
AND AND AND AND AND AND AND AND AND AND	
2) With are more and more runsing homes eliminating restraints? (select all that apply)	
3) Which of these can be used as chemical restraints? (select all that apply)	
4) Use of physical restraints increases the risk of: (select all that apply)	

Activity: Cering for Unresponsive Patients 1) When caring for unconscious residents, you should: (select all that apply) 2) You should explain each step of a procedure to an unconscious person. True or false? 3) Unconscious patients are at risk for: (select all that apply)	
Activity: Feeding Tubes 1) What is another term for enteral nutrition? 2) Which medical conditions lead to the need for enteral nutrition? (select all that apply)	
 3) What is it called when a paraent is red at spectric tries or one cay using a resulting that apply) 4) Which of these is among the leading causes of death in tube-fed patients? (Select all that apply) 5) The cleanliness of which of the following specifically impacts a patient with a feeding tube? 	
Activity: Elimination 1) What is the name for an injection of fluid into the rectum to cause a bowel movement? 3) What is the involuntary leakage of unities or fecas called? 3) It is a commensated to refer the inferior as flavors. This are fallow?	
4) You can assist a resident with diarrhee by: (select all that apply) 5) Which factors affect bowel elimination? (select all that apply)	
Activity, CNA's state in Death and Dying 1) What does it mean when a patient's one shifts from curative to pallative? (Select all that apply) 1) What does it mean when a patient's one shifts from curative to pallative? (Select all that apply)	
4.) What is one thing you could do if you cannot respect a resident's decisions, religious beliefs, or cultural values? 4) When is one thing you could do if you cannot respect a resident's decisions, religious beliefs, or cultural values? 4) When caring for a dying resident, what can you do to make them comfortable? (Select all that apply)	

A threatest leaved. 2 When it is that hat, Potter, that he begins arounding and refleces to take begins arounding and refleces to take he begins arounding and refleces to take he begins arounding and refleces to take the begins arounding and refleces to take the begins arounding and reflect to take the begins arounding and the performance of the begins arounding and t	Bank Br Anna Br		
These stages of Anthemiers Seases accomposited by specific symptomics. Which stage is matched with correct season and stages accomposited by specific symptomics. Which stage is matched within correct season. When it is your ment stage? It is female pedicent who has urisary and fecal inconstituence. How should you provide partnered care and hygiene to this pagient? As a Secondarial world within the proper way to dispose of this equipment? Sent of the way to continue and a secondarial verifiator for his respirationly needs. During a storm one night, the electric power is lock in the nursing is the first thing that you should do for Mr. Song? Se first thing that you should do for Mr. Song? The description of a page of the stage of the secondarial verifiator for his respiration of these proceautions can help protect patients from wandering into animals of master stages, are prone to wandering. Which of these proceautions can help protect patients from wandering into animals of a continue it is the rehabilitation/frestorative care area of your facility. He was in a serious billing accident. The MOST if an the patient is to: Is collumally aware: Is a collumally aware: Is a collumally an existent with a resident with memory loss? Is the following mass of OW report framediately in memory loss? In the following mass of OW report framediately in a nare? It is any task the close not want any lifecanting necessars to be taken in the event that he stope breathing. What should be noted in his medical reports are and is haring difficulty feeding herself. She will be getting assisting devices to help her eart. Which of the following healthcare workers will other the devices.	1) You are about to bethe Mr. Potter, but he begins screaming and refuses to take his evening bath. What should you do? 2) When a patient consistently ignores the urge to defeate, which of the following can develop? 3) One of a CNA's responsibilities is to record and total residents' intake and output. How other should this be done? 4) A resident has left side weakness as a result of a stroke four years ago. She is ready to be transferred from her bed to a wheelchair, positioned at: 5) When a patient is sundowning, what should a CNA be especially aware of? 6) When a doctor orders a patient to be placed in restraints, what should the CNA NOT do? 7) Which of these symptoms is a sign that a person is about to die? 8) Where do you tape the catheter on a male patient to make sure it stays in place when you turn him over? 9) Mrs. Bornstein is a resident with Adzheimer's disease. You notice she is confused. What can you do to reduce her confusion? 10) The nurse on duty asks you to empty a urinary drainage bag for a resident. What should you do?	The wheelchair should be	
	13) Rebow are three stages of Athelemen's disease accompanied by specific symmotoms. Which stage is matched with its cornect symmon 12) his to the end of your shift, not but measured the 8-hour unstancy output, of your patient and there are 21 aunoses of unive. What is yet also were with a female patient who has urinary and fetal incontinence. How should you provide perimeal care and hygiene to this p 13) You are with a female patient who has urinary and fetal incontinence. How should you provide perimeal care and hygiene to this p 13) An uruze has discontinued the use of a Foley cultienter for a patient. What is the foreber why to dispose of this equipment? 15) Mr. Song carnot breathe on his own and needs a mechanical ventificator for his respiratory needs. During a storm one night, the election of the set string into your should do for Mr. Song? 17) Patients with dementia, especially Athelemer's disease, are prone to wandering. Which of these precautions can help protect patie downgrous situations? 18) You are carn'ng for a teemager with broken arms and legs in the rehabilitation/restorative care area of your facility. He was in a serial likely care goal for the patient is to: 19) Mncho of the patient is to: 20) Angina is: 21) A common sign of a panic disorder is: 22) Angina is: 23) The wife of a resident why to specification of a particular processed's body alone before it to store all bodies in the morgue. What is the best way to communicate with a resident with memory loss? 23) Which is the best way to communicate with a resident with memory loss? 24) Which is the best way to communicate with a resident with memory loss? 25) Mncho of the following must a CDM report immediately to a nurse? 26) fif a resident asks the CDM for time alone with his wife, what should the CDM do? 27) A resident asks the CDM of the alone with his wife, what should the CDM do? 28) The wife of a resident has decided that he does not wart any lifesaning measures to be physician, who should the CDM report the devices? 2	ms? We next step? Ciric power is lost in the nursing ciric power is lost in the nursing Ms from wandering into Ms bilding accident. The MOST Aus bilding accident. The MOST did he noted in his medical record did he noted in his medical record if belowing healthcare workers will	
	with check off	Maki occur bed Tolled Perin Care	aking an cupied of ileting rineal

Teaching Methods	CNA Edge	Self-paced -	Self-paced -	in laboratory with
Objectives - Students will be able to do the following:	Understand the role of the CNA in working with patients who have developmental disabilities Understand common coping mechanisms for residents may use to deal with stress Understand the urinary system and common urinary disorders Gain and introduction to measuring urlnary output. Describe common special diets in long-term care.	Understand the urinary system and common urinary disorders Gain and introduction to measuring urinary output. Describe common special diets in long-term care.	Understand caerf measures that a CNA can offer to Self-paced help patient siwth iddney failure and other unlary CNA Edge disorders Understand the issues of abuse and neglect in long term care Know what to do per Virginia law when you suspect a resident in being abused or neglected.	
Virginia Content	18VACS0-26-40A. 4.g Providing appropriate clinical care to aged and disabled 18VACS0-26-40A.2 e Measuring and recording fluid 18.0 18VACS0-26-40A.1 a Communication and Interpersonal skills 18VACS0-26-40A.5.c Demonstrating and understanding of and responding to behavior of cognitivitely Impaired	18VACSO-26-40A-2 e Measuring and recording fluid I&O		
Content	Intro to developmental disabilites Coping Mechanisms Understanding Steep Urinary system Urineary Ouput Diarrhea and bacterial infections Special diets	Urinary system Urineary Ouput Diarrhea and bacterial infections Special diets	Dialysis Kidney disease Urinary Disorders Suspected Abuse and Neglect Reporting abuse Legal Recrouse and Obligation to report Code of Virginia 63.2-1606- Mandatory and Voluntary	
Assignment In CVA Edge	Section 8 Lesson 1-2	Section 8 Lesson 2 continued	Section 8 Lessons 3-5	
Location	Student self-paced instruction	Student self-paced. instruction	Student self-paced instruction	SKILLS LAN
DATE	Week 9 Day 1 1.5 hours	Week 9 Day 2 1.5 hours	Week 9 Day 3	West 9 Day 4 2 bours

CNA Edge	
Have an understanding of all material presented in Self-paced - Section 8 and be prepared to take the end of CINA Edge section quiz.	
Test taking strategles and review of Section 5	
Lessons 6-7	
Student instruction instruction	0 12
Week 9 Day 5 1.5 hours	Lab Clinical

Perform the following profidently	Measuring urinory input			Dressing an Undressing Bathing earther Clents
Evalution Methods	Activity: Understanding Steep 1) if you notice that one of your residents tan't getting the right amount and quality of sleep you should: 2) You think one of your residents, Mrs. Smith, may have a sleep disorder because you notice she has: (Select all that apply) 9) The nurse talls you that Mr. Jones suffers from insommia. This means that: 9) To promote good sleep habits for your residents, you may assist them with releasation exercises and help them by: (Select all that apply) 1) To promote good sleep habits for your residents, you may assist them with releasation exercises and help them by: (Select all that apply)	Activity: The Urhary System is to remove waste products from the blood. 1) One of the jobs of the unhary system is to remove waste products from the blood. 2) How does the unhary system, what carries unhe to the bladder? 3) in the unhary system, what carries unhe to the bladder?	Activity: Ultimary Disorders & Dislynis 1) Which of the following are disorders of the univery system? (Select all that apply) 2) Common causes of univery tract infections include catherdzation, unalogical exams, intercourse as well as: (Select all that apply) 3) You notice there's a bad odor in the patient's urine. To confirm that the patient may have cystibs, a serious infection of the urinary system, what other symptoms could you look for? (Select all that apply) 4) Ridhey stones and kidney failure are the same thing. (True/Faise) 5) The nurse asis you to help with a patient who has chronic iddney failure. This person is most filtely on:	Skills check and:

While providing oral care, a CNA notices a fruity odor in an elderly patient's mouth. What should the CNA do?

- 2) A resident who had a stroke a few years ago needs help getting dressed. The resident chooses to wear a long-sleeved shirt with buttons. How should you help the resident?
 - 3) Which of the following foods would be best for a patient with diarrhea?
- Which of the following best defines constipation?
- 5) How much sleep do other adults typically require?
- 6) What is the first thing a CNA must do before transferring a resident from a bed to a wheelchair?
- 8) Which of the following is the most important step a CNA can take to prevent a resident from falling out of bed? 7) Which is an example of neplect?
- 9) Ms. Miller has fragle skin and has experienced skin tears in the past. The CNA is getting ready to transfer her from her bed to a chair. What should the CNA do?
 - 10) What physical symptom is common for a CNA to provide comfort measures for when patients near the end of their lives?
 - 11) A resident's ostorny drainage bag needs to be changed. What should you do first?
- 12) After emptying a urinary drainage bag, which of the following substances should you use to clean its drain tip?
 - 13) Which of the following is an example of neglect?
- 14) When disposing of emests, what protective equipment should be worn?
- 15) Which of the following is NOT considered appropriate handling of linens?
- 16) You are monitoring the urine of a resident; he may be suffering from urinary retention. Urinary retention refers to:
- 17) You are emptying urhnary draknage bags for patients who need their output recorded. Where are you most likely to document the amount of urhnary output?
 - 18) To prevent the spread of Infection, contaminated surfaces should be cleaned at the following times, except
 - 19) A resident has unhary incontinence. This same resident wears glasses and needs a hearing ald. Which of the following increases her risk of falling?
 - 20) Providing restorative care includes:
- 23) You are helping a resident who had a stroke a year ago. She requires the use of a galt belt when trying to stand. Which of the following should you do when using a gait belt with the resident?
 - 22) A patitent thigs the call bell for the fourth time in the first 40 minutes of a CNA's shift. What should the CNA do?
- 23) A resident's health is getting worse, and she fears that she is going to die alone. Her family does not come to visit often, but they are aware of her health situation. What can the CNA do for the
- 24) You are caring for a patient whose IV flow rate is too slow. What should you do next?
- 25) Threatening to withhold treatment and/or making fun of a resident are examples of which type of abuse?
- 26) A resident who is near the end of her life asis a CNA to pray with her. The CNA is not comfortable praying with the resident. What should the CNA do?
- 27) When a CNA cares for a patient with darrhea, which of the following should the CNA record?
- 28) A patient's care plan states: "Help the patient to the bedside commode PRN." When should the patient receive assistance to the commode?
 - 29) Which of the following is the right terminology when referring to residents with developmental disabilibes?
- 31) A mursing assistant answers a call at the nursing station from a friend of Mr. Long a resident at the facility. The friend asks how Mr. Long is doing. The CNA tells the caller that Mr. Long's
 - condition is declining without determining if Mr. Long wants his medical information shared with the friend. The CNA has:
- 32) Although the patient refused the procedure, the nursing assistant insisted and inserted the urinary catheter. The nursing assistant is guilty of which of the following? 33) The RN has assigned you the task of emptying urinary drainage bags for a group of patients. You should take which of the following actions?
- 34) You are caring for Ms. Hemandez, a resident who has trouble talking as a result of a stroke she experienced several months ago. Which of the following health team members would be
- assigned to provide treatment for this difficulty?
- 35) You and your co-worker are working together to remove a bag contaminated with bodfly fluids from a resident's room. Which is the contect process for removing the contaminated bag?

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Toaching Methods	CNA Edge
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Objectives - Students will be able to do the following:	
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Section 10 Lesson 1-2 continued		REVIEW previous sections or incomplete sections as needed
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uninkary imput proficiently Measuring 5) The most common treatment for pain is medication. There are also many non-drug-related treatments to help manage pain. Which of the following are 3) Mr. Milanos is going into surgery to remove his galibladder. Which factors may influence his experience with the pain caused by the surgery? (select all 2) Which of the following do health care providers massure to assess a newborn's APGAR SCORE, an immediate gauge of a newborn's health? (select all 4) You will be providing care for a patient who just came from the recovery room. What signs and symptoms might you expect to address or manage? 2) You are assigned to help Mr. Joseph prepare for surgery. Which of the following nursing care measures would a CIM provide? (select all that apply) 1) Which of the following signs or symptoms that occur in pregnant women should prompt a call to the health team? (select all that apply) 4) Ms. Wilson grabs her back and tells you that she is in pain. What questions should you ask her about her pain? (select all that apply) .) Which part of the female reproductive system holds the eggs and produces the female hormones estrogen and progesterone? 3) Which of the following procedures is a CNA responsible for when caring for a pregnant woman? (select all that apply) 1) Ms. Juarez is in her 1st trimester. Which of the following signs or symptoms should prompt a cell to her health team? 3) A daughter in tears comes up to you with questions about her mother's upcoming surgery. How should you respond? Which part of the male reproductive system produces sperm cells and the male hormone testosterone? Arthritis causes pain that continues for a long time and may come and go. This type of pain is called __ 4) if two people are having oral sex without a barrier, who is the one at higher risk of catching an STD? 1) Which of the following do healthcare providers use to assess a newborn's health? 3) How do CNAs provide care for veginal disorders? (select all that apply) 1) Before an operation, the anesthesiologist meets with the patient to: Activity: The Reproductive System and Sexually Transmitted Diseases 5) Older adults do not need information and education about STDs. examples of non-drug treatments for pain? (select all that apply) We all experience and express pain in the same ways. Activity, immediate Care Measures After the Birth Activity: Pain and Pain Management Activity: The Phases of Surgery Evalution Methods (select all that apply) Activity: 9 Months that apply) that apply)

Perform the

following

Activity: Shift Change

Activity: Practice Test 9.8 1) A patient is scheduled to have surgery later in the day. What kind of food would you expect the person to have for breakfast?		_
 CNAs care for many personal needs of residents except: When bathing a resident, privacy and safety are two of the most important things to consider. What is prother important thing that you must alweys 		
40? A Fey many residence mealtime and earline can present several challenaes. Which of the following is not a common challenge faced by residents in	p 1	
relation to mean terminal and entire and entire and the hard that case. "ANDO" if he time for hard Mr. Galt sals for sour, saled, late, and coffee.		
D) Mr. Gattis on a rigular direct but you see a ago one has seen that should you serve him?		
 You are caring for a resident who cannot have a tab bath or shower. Her care pan recommends compared bed beaus. What should the bean when temperature be? 		
7) Adolescence consists of which of the following range of years?		
8) The study of pediatric development and growth is focused around which of the following?		
9) Which of the following are effective for the prevention of plantar flexion?		
10) What sign(s) will a child exhibit if she is hering a grand mal seizure?		
11) The sexually transmitted disease (STD) is caused by bacteria and is curable. Signs and symptoms of this disease include: lower peak part,		
discharge from the pents or vegina, and a burning sensation during urhedion.		_
12) Naturally acquired passive immunity is present in:		
13) Sexually transmitted diseases (STDs) are most common in which age group?		
14) The pressure of a person's heart during a contraction is called:		
15) Which of the following is the term that describes the transmission of an infection during a medical procedure?		
16) When taking a patient's blood pressure, what is the name of the artery located at the bend of the elbow where you place the cuff?		
17) Shingles is caused by the same virus that causes which disease?		
18) When taking a patient's oral temperature, which of the following steps should you take first?		
19) When taking an adiliary temperature, all of the following are true EXCEPT:		
20) When measuring blood pressure, you wrop a curt around the upper portion or the patient's entit. When the current		

- 21) When taking a chert's blood pressure, after wrapping the cuff around the upper portion of the arm, where should the arm be resting?
 - 22) Which restorative nursing procedure may you be asked to perform on a resident who has cyanosis?
 - 23) Which statement best describes a characteristic of pain?
- 24) You are caring for a patient in a coma. You should be concerned that your patient is at risk for all of the following EXCEPT:
 - 25) It is the end of your shift and you notice Mrs. Martinez crying. What should you do?
- 26) You are caring for Mr. Pryce and he suddenly tries to strike you. What should you do?
- 27) The elderly can experience many changes in their lives, such as retherment, becoming grandparents, and becoming increasingly dependent on others. These are examples of which kind of changes?
- 28) Mrs. Krissa is at the end of life. Over the past few weeks, you notice that Mrs. Krissa is giving away her personal possessions to her friends when they come to visit her. Yesterday, you saw her giving away her favorite necidace. What should you do?
- 29) A new resident, Mr. Pilipo, arrives at your facility from another country. Many of his customs, behaviors, and religious practices seem very unusual to you. What should you do?
- 30) Mr. Dinch's family visits him often and you have gotten to know them well. When you are with Mr. Dinch's family, you should:
- 3.1) Your patient is trying to tell you that she is in pain, but she is unable to speak. Which of the following non-verbal expressions would most likely indicate
- 33) A patient who has decided not to breastiteed her baby feels tendemess in her breasts. What is an example of an appropriate care measure for this 32) When providing care to an unconscious resident, you should:
- 34) What is Medicare?
- 35) A resident falls to the ground and is hurt as a result of a CNA forgetting to lock the wheels of his wheelchair. The CNA could be charged with which
- 36) Mrs. Bartun is a former model with diabetes. She is very concerned about her appearance. She tells you that her toenalis are too long and need trimming. What should you do?
- 37) Which of the following care measures can a home nursing aide perform?
- 38) There are situations in which a CNA can refuse to perform a task. Which of the following is a situation in which a CNA can refuse a task?
 - 39) in all healthcare facilities, who is at the center of care?
- (40) When a patient care meeting is held, who should be invited?

11) When giving a resident a bed bath, which of the following should the nursing assistant perform first? 4) Which of the following is NOT part of the recording responsibilities of a CNA? Which of the following is NOT part of oral care for an uncorradous person? Which of the following is the correct temperature for a resident's both? Restorative nursing care helps the patient with all of the following except: Which of the following is true about a patient's medical record? 6) Which of the following is NOT one of the five stages of grief? 10) Which of the following demonstrates neglect of a resident? Which of the following is NOT part of standard precautions? 7) Which of the following is true about the use of gloves? 8) Which of the following is an acute disorder or litness?

13) Which of the following is true about a patient with diabetes?

12) Which of the following is a strategy for preventing decibitus ulcass?

- 14) Asepsis means:
- 15) Which of the following tasks can a nursing assistant legally perform?
 - 16) A nursing assistant may legally.
- 17) You are caring for a 90-year-old, frail resident named Mr. Jenkins. Mr. Jenkins suffers from dementia, and he sometimes gets confused at right. He occasionally thinks that his mother is calling him in for dinner when it gets dark. What physical problem places Mr. Jendus at risk for falls?
 - 18) Which of the following is a best practice when helping a patient perform ROM exercises?
- 19) A nurse requests that you take a resident's pulse at the apical site. What should you do? When shaving a male resident's nect, in which direction should you move the razor?
- The chain of infection includes the following:
- 22) Which of the following is NOT a resident's right?
- 23) Which of the following is NOT a cause of dehydration?
- [24] When providing perheal care for a male resident with an uncircumosed penis, the nursing assistant should:
- [25] if the patient ignores the urge to have a bowel movement, which of the following could happen?
 26) You are caring for Mrs. Tenley, a resident who has a urinary drainage bag. You empty Mrs. Tenley's bag and notice that your gloves look clean, as if you just pulled them out of the box. There is not even a spot on them. You now need to go help Mr. Fowler with a bed beth. What should you do?
- 27) Which of the following is NOT a sign of depression? 28) Which of the following is a risk factor for falls?
- 30) You are taking care of a patient who is on airborne precoutions. The patient is in a special room and you must wear a HEPA mask when you enter the 29) A nurse just changed a bandage on a patient's wound and has asked you to dispose of the used bandage. How should you go about doing this?
 - room. You need to transport the resident from his room to the lab for testing. How should you transport him to prevent the spread of infection?

Practice Test 18A Continued

- 31) When tailding to a resident about her grandchildren, you notice that she grimaces and rubs her shoulder as she speaks to you. This could be a sign of: 32) Which of the following should the CNA do when performing a massage?

 - 33) A new resident who is Muslim enters the facility and wants to know if there is a place where he can pray quietly five times per day. As a nursing assistant, what should you do?
 - 34) You are caring for an 85-year-old man who has stiffness and pain in his joints, and he does not like to move because of this pain. What kind of treatment might be most appropriate for his condition?
- 35) The fire alarm begins to ring in the facility in which you work. You cannot see nor smelt the fire and none of your patients are in immediate danger. What should you do?
- 36) Which type of care focuses on comfort and support for a dying person and that person's family?
- 37) Which of the following is true about high-performing healthcare teams?
- 38) In Maslow's Herarchy of needs, which of the following needs is at the top of the pyramid?
 - 39) The most common reseson for inappropriate behavior in residential nursing care is:
 - 40) Which of the following is an open-ended question?
- 43) The nursing assistant leaves a pattent's room for a 20-minute break, does not tell her colleagues, and leaves the bed rais down on the resident's bed. The care plan states that the bed rails should be raised for this resident. Five minutes later, the patient fails out of bed and breaks his hip. Who is
 - 42) A resident had half of an 8-ounce glass of water and 3 ounces of Jell-O. What should the CNA record in the I and O sheet? responsible for this?
 - 43) Which of the following is a systemic sign of infection?
- 44) Which of the following healthcare team members help residents learn or retain skills needed to perform daily activities?
 - 45) if one of your colleagues comes to work under the influence of drugs and/or alcohol, what should you do?
- 46) Which of the following healthcare providers assists patients who have had a stroke to communicate more effectively?
 - 47) The Resident's Bill of Rights is posted near the front entrance to the facility. What does this document contain?
 - 48) Which is the proper order of operations to perform when using a fine extinguisher to put out a fine?
 - (4) Which of the following practices opens up a line of communication with a resident?

Skills check off skills not practiced practiced	54) Which of the following does not contribute to skin breakdown? 55) A nursing easistant finds a patient unconscious and on the floor. Of the following patient needs, which is the greatest priority? 56) Many healthcare facilities are moring toward the goal of a restraint-free setting. Which of the following is the best way to achieve this goal? 57) What is the universal sign for choking? 58) What is the universal sign for choking? 59) What is the universal sign for choking? 50) What is the universal sign for choking? 50) What is the universal sign for choking? 51) What is the universal sign for choking? 52) What is elopement? 53) Which of the following is true about the ombudenian? 54) What is elopement? 55) Which of the following is true about the ombudenian? 56) What is elopement? 57) A runsing assistant is gaing to help Mr. Fowles with a beth. She knocks on the door and waits a moment. Suddenly, Mr. Fowles books up at her, curses in the case as shoe at her. What should the nursing assistant do? 51) A runsing assistant is gaing to help Mr. Fowles with a beth. She knocks of poor or inappropriate behavior in a healthcare setting is to: 51) A runsing assistant with Mr. Neel and have recently begun weights thin each day. Vesterday, Mr. Neal weight and many and have recently begun weights then each day. Vesterday, Mr. Neal weight a partial beth, which of the following is a mistake of commission? 51) Which of the following is NOT an example of objective information? 53) Which of the following is NOT an example of objective information? 54) You near working with a partial beth, which of the following is NOT essential? 56) Which of the following is NOT an example of objective information? 53) Which statement is true about patient identification? 54) Which statement is true about patient identification? 55) Which statement is true about patient identification?	S.) When caring for a patient's dentures, which of the following statements is false? S.) What is the purpose of reporting? S.) What is the purpose of reporting? S.) What is the purpose of reporting? S.) Must be the delowing does not contribute to slin breakdown? S.) Must be the delowing constructions and on the floor. Of the following patient needs, which is the greatest priority? S.) Must be the delowing sees not contribute to slin breakdown? S.) Must be the universal sign for choking? S.) What is the universal sign for choking? S.) What is the universal sign for choking? S.) What is the universal sign for choking? S.) What is the universal sign for choking? S.) What is the universal sign for choking? S.) What is the universal sign for choking? S.) What is the universal sign for choking? S.) What is the universal sign for choking? S.) A nursing assistant is purpor the combustonan? S.) A nursing assistant is purpor the combustonan? S.) A nursing assistant is purpor the company that is the mode of the investment. Suddenty, Mr. Fowles tooks up at the course of the investment, and it is slift rade it slop pounds. You are working with measurement, and it sail rade it slop pounds. What is the most likely cause of this weight measurement, and it sail rade it slop pounds. You rade will help keep him from failing out of his bed? S.) Which of the following is a mistake of commission? S.) Which of the following is a partial bath, which of the following is NOT an example of objective information? S.) Which of the following is NOT an example of objective information? S.) Which of the following is to are working with a partial bath, which of the following is NOT an example of objective information? S.) Which of the following is true about patient identification? S.) Which of the following is true about patient identification? T.) Which statement is true about patient identification?	
	Skills check off		Complete all skills not previously practiced

Complete all skills not previously practiced Skills check off

In telepromotery Skills check off Controllers all with instructor previously previously practiced proficiently following Evalution Methods Self-paced -CNA Edge Self-paced -CNA Edge Self-paced -ČNA Edge Self-paced -Teaching Methods CNA Edge Objectives - Students will be Master the content in each section Master the content in each section Master the content in each Master the content in each able to do the following: section Virginia Content previous sections and lessons as needed previous sections and lessons as previous sections and lessons as needed previous sections and lessons as needed Combent needed in CNA Edge Incomplete sections as Assignement incomplete ncomplete Incomplete sections as sections as sections as sections or sections or sections or sections or previous previous previous REVIEW REVIEW REVIEW needed previous needed needed REVIEW needed Student self-Student self-Student selfinsturctor as Insturctor as Insturctor as Student seff-Instruction SKILLS LAB instruction Instruction instruction and meet and meet and meet needed. needed. Location needed. with the with the with the paced paced onsite paced paced Week 11. 1.5 hours 1.5 hours 1.5 hours Week 11 Week 11 Week 11 Z trounts Day 3 Day 2 Day 1 DATE Som

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DATE	Location	the following: Methods	Methods	Methods	Perform the following proficiently
Week 12	Facility	Perform the	Instructor	Skills check off Hand Hygiene	Hand Hygiene
Day 1		skii	supervised		Donning and Removing PPE (Gown and Gloves)
8 hours		proficiently	clinical		Measures and Records Electronic Blood Pressure
		with critical	training		Counts and Records Radial Pulse
		elements			Counts and Records Respirations
		mastered.			Measures and Records Manual Blood Pressure
Week 12	Facility	Perform the	Instructor	Skills check off	Skills check off Applies One Knee-High Elastic Stocking
Day 2		Skill	supervised		Assists to Ambulate Using Transfer Belt
8 hours			clinical		Feeds Client Who Cannot Feed Self
		with critical	training		Measures and Records Weight of Ambulatory Clent
		elements			Transfer From Bed to Wheelchair Using Transfer Belt
		mastered.			
Week 12	Facility	Perform the	Instructor	Skills check off	Skills check off Measures and Records Urinary Output
Day 3		skill	supervised		Assist With Use of Bedpan
8 hours		proficiently	clinical		Provides Perineal Care (Peri-care) for Fernale
		with critical	training		Provides Catheter Care for Female
		elements			
		mastered.			
Week 12	Facility	Perform the	Instructor	Skills check off	Gives Modified Bed Bath (Face and One Arm, Hand, and Underarm)
Day 4		skill	supervised		Performs Modified Passive Range of Motion (PROM) for One Knee and One Ankle
8 hours		proficiently	clinical		Performs Mouthled Passive Range of Motion (PROM) for One Shoulder
		with critical	training		Dress Clent With Affected (Weak) Right Arm
		elements			
		mastered.			
Week 12	Facility	Perform the	Instructor	Skills check off	Skills check off Cleans Upper of Lower Denture
Day 5		skill	supervised		Positions on Side
8 hourss		proficiently	dlnical		Provides Foot Care on One Foot
		with critical	training		Provides Mouth Care
		elements			
		mastered.			Any skills not previously checked off
Theory	0				

TOTAL COURSE HOURS

75.5	a	9	
PROST.	e		
B		10	

Mountainview 12 Week Course Summary Total Course Hours: 133.5 Theory: 75.5 Lab: 18 Clinical: 40

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	Facility Orienterion	Section 1:	Section 1:	Section 1	Section 1	
Wilek 1 Orientation: 2 Theory: 636	& Class introduction (2 hours) Breek: 30 minutes	a Lessons 1- 3 (1.5 hours)	• Lessons 4-5 (1.5 hours)	• Lessons 5- 7 (1.5 hours)	• Lessons 8-9 (1.5 hours)	1000
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	Section 2:	Section 2	Section 2	Section 2	Section 2	
WEEK 2 Theory: 7.5	• Lesson 1 (1.5 hours)	• Lesson 2 (1.5 hours)	• Lasson 3 (1.5 hours)	• Lesson 4 (1.5 hours)	• Lasson 5 (1.5 hours)	
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
WEEK 3 Theory: 6	Section 2 • Lasson 6 (1.5 hours)	Section 2 Lesson 6 obstinued	Section 2 Lessons 7-9 (1.5 hours)	LAB/Skills Session 81. (2 hours)	Section 3 • Lessons 1-2	
tab: 2	(1.3 Houls)	(1.5 hours)	(T'S MONIS)	Brenk: 30 minutes	(1.5 haurs)	
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
WEEK 4 Theory: 7.5 Lab: 2	Section 3 • Lasson 3 (1,5 hours)	Section 3 • Lessons 4- 5 (1.5 hours)	Section 3 • Lamon 6 (1.5 hours)	Section 3 Lesson 6 continued (1.5 hours)	Section 3 • Lessons 7- 10 (1.5 hours)	LAB/Skills Session #2 (2 hours) Break: 30 minutes
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
WEEK 5 Theory: 7.5	Section 4 • Lessons 1- 2 (1.5 hours)	Section 4 • Leason 3 (1.5 hours)	Section 4 Lessons 4-6 (1.5 hours)	Section 4 • Esseons 7- 9 {1.5 hours}	Section 5 • Lessons 1-2 (1.5 höurs)	
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
WEEK 6 Theory: 6 Lab: 4	Section 5 • Leasons 3- 4 (1.5 hours)	Section 5 • Lesson 5 (1.5 hours)	Section 5 • Lessons 6-7 (1.5 hours)	LAB/Skills Session 49 (2 tusurs) Break; 30 minutes	Section 5 • Lessons 8- 10 (1.5 hours)	LAB/Sidia Session #4 (2 hours) Brank: 30 colmutes
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
WEEK 7 Theory: 7.5	Section 6 • Lettons 1- 2 (1.5 hours)	Section 6 • Lesson 3 (1.5 hours)	Section 6 Lemons 4 (1.5 hours)	Section 6 • Lessons 5- 6 (1.5 hours)	Section 6 • tesson 7 (1.5 hours)	
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
WEEK \$ Thuory: 7.5 Lub: 2	Section 6 * Lessons 8- 9 (1.5 hours)	Section 7 Lessons 1- 2 (1.5 hours)	Section 7 • Lessons 3-5 (1.5 hours)	Section 7 Lessons 6- 7 (1.5 hours)	Section 7 • Lessons 8- 10 (1.5 hours)	LAB/Skilks Session #5 (2 hours) Break: 30 minutes
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	Section 8	Section 8	Section 8	LAB/Skills Session	Section 8	
WEEK 9 Theory: 6 Lab: 2	• Lessons 1- 2 (1.5 hours)	 Lesson 2 continued (1.5 hours) 	• Leasons 3-5 (1.5 hours)	#6 (2-ficure) Break: 30 minutes	• Lessons 6-7 (1.5 hours)	

Mountainview 12 Week Course Summary Total Course Hours: 133.5 Theory: 75.5 Lab: 18 Clinical: 40

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SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Weller att- Thanks at a Labo &	Section 9	Section 9 Lessons 4 (1.5 telera)	Section 10 Lessons 8.2 (2.3 hours)	LAB/Skills Session 87	REVIEW: self months instruction & classification as control instructor as control in the control	LAB/Skills Session
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Navigating Guidelines

- 1. Go to CNA Edge site: https://mancusohomes.training.straightawayhealth.com
- 2. Login with any of the following credentials:

User ID: Virginia

Password: Welcome123

- 1. If prompted click "Remind me later" rather than Get Started, if prompted.
- 2. You are now viewing the instructor's dashboard. To view the course, click "Back to Learner" in the top left-hand corner.
- 3. "Current Lesson" indicates where you are in the course. To start from the beginning, you can click "Start here" and you will progress through the course in order it's presented.
- 4. To move around the course, go to Syllabus and click on "Go to Syllabus".
- 5. There are 10 SECTIONS, based around the story of each fictional character in a nursing facility.
- 6. Click on Details in each section to expand and show you the LESSONS which indicate the topics covered.
- 7. Click on a Lesson to expand and show you the ASSETS presented in each lesson.

The CNA Edge alignment document indicates where each standard is covered.

For example: 4.6.2 corresponds to Section 4 ("Helen"), Lesson 6 (Helen's Manic Episode"), Asset #2 ("Episode 27 Ghost Bird").

Due to frequent updates the **Asset number may appear slightly out of numerical order, but should be easily located by title.



COMMONWEALTH of VIRGINIA

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Virginia Board of Nursing Jay P. Douglas, RN, MSM, CSAC, FRE Executive Director

Board of Nursing (804) 662-9909 Nurse Aide Registry (804) 662-7310 FAX (804) 662-9512

January 24, 2019

Nancy Burandt, LNHA
Grace Health and Rehabilitation Center of Greene County
355 Williams Mills Drive
Stanardsville, Virginia 27519

Dear Ms. Burandt:

The Board of Nursing received an application for a nurse aide education program from you on December 11, 2018. The application has been reviewed and we are requesting additional information before we can proceed with the application approval.

- 1. Clarification of the name of the agency; the application states Grace Healthcare and Rehabilitaiton center of Greene County and the Virginia Department of Health's license indicates Grace Health and Rehab of Greene County as the official name;
- Clarification of the phone number submitted with the application. Board staff called the number asking to speak to Deanne Mullins, who has been identified as the program coordinator and primary instructor, and staff was told we had the wrong number;
- 3. An explanation about the difference in the agency name and the program title; it is unclear what the relationship is between Grace Health and Rehabilitation Center of Greene County and Mountainview Nurse Aide Training;
- 4. The application suggests that "Grace Healthcare" is seeking approval for 31 of their skilled facilities to offer a nurse aide program; this application is only for the location in Stanardsville;
- 5. Clarification of the role of Deanne Mullins. It is difficult to determine when and how she will interact and instruct the nurse aide students with the on-line format, skills time, and clinical time. It is also noted that she is the primary instructor for another nurse aide education program; how will she manage the oversight for two programs at the same time? Please submit a detailed description and outline of how she will interact with the students throughout the program;
- 6. Clarification of the relationship between Grace Health and Rehab, CNAEDGE, Straightaway Health Careers, and Greene County Tech Center; please submit affiliation agreements and the responsibilities of each entity;
- 7. What kind of access will the students have to the skills lab?;

Grace Health and Rehabilitation Center of Greene County January 24, 2019 Page 2

- 8. There is indication on the application that the curriculum will be reviewed and adjustments made as needed; what entity will make those changes?;
- 9. Complete pages 7, 8, and 9 of the application indicating where the Board of Nursing regulations can be found in the materials included with CNAEDGE.;
- 10. There is a reference in the application material regarding "In classroom assessment will be administered to assess the student's mastery of the course"; please be specific on how that will occur;
- 11. Revise the calendar and clarify "course knowledge based questions Activities", Content regarding "advanced certified nurse aide" (this application is for a basic nurse aide program); include a master schedule that shows the theory hours, skills lab hours, and clinical hours in one place; list all days of skills lab in one place and what will be taught during each skills lab day; and
- 12. Re-set access to CNA EDGE, as staff was not able to access.

If you want this application to be considered before the Education Informal Conference Committee on March 6, 2019, please submit the additional information to me by February 6, 2019.

If you have any questions, please contact me at (804) 367-4597 or paula.saxby@dhp.virginia.gov.

Sincerely,

Paula B. Saxby, R.N., Ph.D.

Deputy Executive Director

C: Deanne Mullins, RN, Program Coordinator and Primary Instructor



December 6, 2018

Virginia Board of Nursing

Attention Dr. Paula Saxby 9960 Mayland Drive #300

Henrico, Va. 23233

Dear Dr. Saxby,

Please find enclosed the application to establish a Nurse Aide Education Program at Grace Health and Rehab of Greene County located in Stanardsville, VA. Due to the interest that has been received for this program, it would be greatly appreciated if the Board could review this application at the January Board meeting. I realize this is a hybrid program, but I strongly feel that this program will be successful due to all of the support and resources that are available to us and to the students. If you have any questions, please feel free to give me a call.

Sincerely,

Nancy Burandt, LNHA

Administrator



December 4, 2018

Commonwealth of Virginia Department of Health Professions

Board of Nursing

Perimeter Center

9960 Mayland Drive, Suite 300

Richmond, Virginia 23233-1463

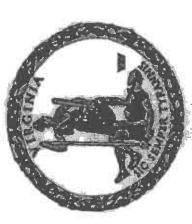
To whom it may concern:

Grace Healthcare is the parent company of Grace Health and Rehab of Greene County and will support Grace Health and Rehab in providing resources for the nurse alde education program.

Grace Health and Rehab of Greene County will provide the financial support and resources for the nurse aide education program sufficient to meet the Board of Nursing requirements.

Nancy Burandt, LNHA

Administrator



Commonwealth of Virginia Virginia Department of Health

Nursing Home License Number: NH2551

In accordance with the provisions of Title 32.1. Chapter 5, Article 1, of the Code of Vriginia 1950, as amended.

Stanardsville Healthcare, LLC

(Operator)

is Authorized to Operate,

Grace Health and Rehab of Greene County

(Name of Conganization)

a-Nursing Home, located at:

355 William Mills Drive, Stanardsville, Virginia 22973

Approved Capacity 90 Beds

Expiration 12/31/2018

12/31/2019 per VDH

Erik O. Bodin, Director
Office of Licensure and Certification

Marissa J. Levine, MD, MPH
State Health Commissioner

COMMONWEALTH OF VIRGINIA DEPARTMENT OF HEALTH PROFESSIONS BOARD OF NURSING

Perimeter Center 9960 Mayland Drive, Suite 300 Richmond, Virginia 23233-1463 (804) 367-4639

Application to Establish A Nurse Aide Education Program (Please type)

1. Name and Address of Program Provider:

City: Standardsville, VA		27519
Phone Number:	(434) 334-3002	(Zip Code)
(Area Code) -mail Address:		
Administrative Officer of the Program:	Deanne Mullins, RN	
	Name	Title
General Program Elements: Program Title: Mountainview Nurse Aide Tra	ining //lless is this	boated?)
Reginning Date of First Class: Upon approva		
Prequency of program offering: Quarterly		
Maximum number of learners in each program	session: 10	
Hours: Total 133.5; Classroom (including C	ore Hours and Skills Lab) 93.5; C	linical <u>40</u>
Faculty to learner clinical ratio: 1:10 (max)		

Financial support and resources sufficient to meet the Board of Nursing Regulations: Mountainview Nurse
Aide Training will be run/operated by Grace Healthcare & Rehabilitation of Greene County which is
owned and operated by Grace Healthcare Support Services, a privately-owned corporation consisting
of 31 Skilled Nursing and Assisted Living Facilities. As such each facility within Grace Healthcare is
seeking to develop and conduct Nurse Aide Training programs has been provided the financial

Revised November 2017

resources and support to do so. Grace Healthcare's mission is to make a positive impact on our residents, staff, and communities by investing in better recruitment, training, and support of our CNAs.

3.a. Clinical Resource(s) used for Clinical Learning Experiences of Students:

Name of Agency	Address	Type (licensed nursing home; Medicare/Medicaid certified units)
Grace Healthcare and Rehabilitation of Greene County	355 Williams Mills Drive, Standardsville, VA 27519	Licensed Nursing Home

penalties as provided in 42 CFR 48315	or clinical learning experiences of students been subject to penalty or 1(b)(2) (Medicare and Medicaid Programs, Nurse Aide Training and ctive April 1, 1992) during the past two years? Yes No X
If "yes", state name of agency.	
4. Learner Identification:	
Briefly describe how learners are identified	fied and recognizable to clients, visitors and staff when in the clinical setting
All student will be provided with and name, the facility name, and their title	required to wear a badge at all times in the facility that includes theile "Nurse Aide Student"
. Instructional Personnel:	need to understand der vole
A. Primary Instructor	les role
1. Name: Deanne Mullins, RN	Virginia R.N. license number: 0001232409 Privilege Compact License and number

How is all going to program ears and RN arms

2. List work experiences as a Registered Nurse for the past five years and RN experience in long term care at any time in your RN career.

Dates	Employer, Address &	Type	Type	Duties/Responsibilities
From To	Phone Number	Facility	Clients	
7/2017 to preser	Greene County Public Schools 40 Celt Rd, Standardsville VA 22973 (434)939-9000	Tech Ed Center	CNA Students	Program Director and Primary Instruct Nurse Aide Students
9/2016-8/2017	UVA Medical Center Charlottesville, VA	Acute Care	Critical Care	Staff Nurse Trauma, Burn, Surgery
8/2015-9/2016	UVA Continuum Home Health	Post-Hospital	Home Health	Case Manager

3. Competence to teach adults

a. Course(s) beyond basic nursing education taken and completed in principles and methods of adult learning.

Dates From To	School & Location	Course Title & Description	Clock Hours	Credit Hours
09/28/17- 09/29/2017	VACE Training	Train the Trainer for Nurse Aide Instructors	10	10

b. Experience in teaching adult learners within the past five years.

Dates From To	Adult Learner Population(s) Taught	Agency & Location	Duties
07/2017- present	Nurse Aide Students	Greene County Public Schools 40 Celt Rd, Standardsville VA 22973 (434)939-9000	Primary Instructor Program Coordinator

B. 1. Other Instructional Personnel (Registered Nurse)

a. Name:	Virginia R.N. license number:
	or a copy of Multi-State Privilege Compact License and number:

b. Direct patient care experience as an R.N. for the past five years.

Dates	Employer, Address &	Direct Patient Care	
From To	Phone Number	Experience	

					-7
	ence to teach adults: urse(s) beyond basic nursing School & Location	education taken a Course Ti Description	tle & Clo	ciples and r	nethods of adult learning Credit Hours or C.E.U.S.
2. Exp	erience in teaching adult learn	ers within the past		Duties	
	Population(s) Taught		Tā.		
B. 2. Other a. Name:	Instructional Personnel (Lie	censed Practical	Nurse) Virginia L.P.N.	license num	her:
	or a copy of Multi-State		ct License and numb		
b. Direct Dates	eatient care experience as an L Employer, Address & Phone Number	PN for the past fiv	Direct Patient Co	are	

	<u> </u>			-5-
	ence to teach adults: Course(s) beyond basic nursi	ng education taken and com	pleted in principles an	d methods of edult learn
Dates From To	School & Location	Course Title & Description	Clock Hours	Credit Hours or C.E.U.S.

2. Experience in teaching adult learners within the past five years.

Dates From To	Adult Learner Population(s) Taught	Agency & Location	Duties	

B. 3. Other Instructional Personnel (Resource Personnel)

Name	Credential(s)	Role in Nurse Aide Program	Years of Experience in his/her field

I.	
1	

Classroom Facilities: 6.

Describe classroom facilities including conditions of comfort, safety, lighting, space and equipment. (Include audio-visual equipment, teaching models, manikins, bed, bedside unit, hand washing stations, etc.).

Grace Healthcare has partnered to use CNA Edge, a Nurse Alde Training program course that students can complete independently via computer or mobile device. An instructor will monitor oversight of each student's progress (detailed information attached). They will be notified prior to course starts of the need for personal access to a computer or mobile device on which to complete the training and will be oriented to the course on the first day of the course, in the facility's conference room. Students must be present at the facility for all skills and clinical portions of training. There are 2 handwashing stations available to students in the lab space during skills practice and attached is a complete list of equipment to be available for laboratory training.

The Greene County Tech Center Nurse Aide Program (10415 Spotswood Trail, Standardsville, VA 22973) will serve as the dedicated laboratory space for skills practice and includes a projector, smartboard, 12 beds, 3 mannequins, handicap access, restrooms, lockers, 10 wheelchairs, desk with chairs, refrigerator/microwave available for use. This space will also be used for the student orientation portion of theory training.

7. Records of Graduates' Performance:

a. Describe record keeping system for maintaining reports from the testing service of the overall (not individual) performance of graduates on the state approved competency evaluation and how frequently these reports will be reviewed with faculty and the curriculum adjusted as needed.

Electronic score reports from Pearson Vue will be printed and maintained in secure student records in a locked file in the Business Office at the facility. Collective scores will be reviewed by the Program Coordinator, Primary Instructor, and Administrator at each course end. At that time, curriculum will be reviewed and any adjustments needed to skills training and/or the curriculum and its presentation will be determined prior to the next course.

b. Briefly describe how skill records for individual graduates are maintained including providing a copy to graduates.

Skills will be monitored and recorded on the skills checklists (attached). A copy of each checklist will be placed in each student's file as well as copies given to students upon completion of the course.

Records of Disposition of Complaints: 8.

Describe briefly the procedure and record keeping system used for showing disposition of complaints against the nurse aide education program

Students will be provided the attached policy outlining the student grievance procedure.

Curriculum Content: For each area of curriculum content listed below, please indicate the unit and page number 9.

To: Individuals/Facilities interested in establishing a nurse aide education program

From: Paula B. Saxby, R.N., Ph.D., Deputy Executive Director Virginia Board of Nursing

Subject: Instructions for completing the Application to Establish a Nurse Aide Education Program

The attached Application to Establish a Nurse Aide Education Program has been developed to assist individuals/facilities who want to establish a nurse aide education program. Information provided on the form must be legible; please type or print. Please use the Virginia Board of Nursing approved designation of "Nurse Aide" when completing this application.

Page 1 of the application:

- 1) Provide the complete address of the proposed program, including Suite number or building number, as appropriate.
- 2) The "Beginning Date of First Class" may not be before the Board of Nursing approval of the application.
- 3) Check "No" for "Nursing facility based" if the individual/facility providing the nurse aide education program is not part of an organization that is also a licensed nursing home or Medicare/Medicaid certified skilled/intermediate care facility.

Page 2 of the application:

- 1) Identify the name, complete address and type of facility for the clinical facility where the students will have their clinical experience. Regulations require that at least 35 hours of the required 40 hours of direct client care clinical experience must be in a nursing home located in Virginia and licensed by the Virginia Department of Health. Assisted living facilities do not meet this requirement, but may be used for clinical hours above 35 hours.
- 2) When describing how learners are identified and recognizable include a description of the name badge students will wear, including the title Nurse Aide Student, as well as their attire during their clinical experience.

Page 3, 4, and 5 of the application:

- 1) For each instructor complete the appropriate Instructional Personnel Form, Primary Instructor, Other Instructional Personnel (RN), Other Instructional Personnel (LPN). A curriculum vitae or resumé does <u>not</u> replace the Instructional Personnel form which <u>must</u> be included with the application.
- 2) Primary Instructor:
 - a) must be a Registered Nurse who holds a current unrestricted license in Virginia or a multistate licensure privilege
 - b) have two years' experience as a registered nurse within the previous five years
 - c) have at least one year experience in the provision of long-term care experience or one year previous teaching experience in a nurse aide education program or one year experience supervising nursing students in a nursing facility
- 3) Other Instructional Personnel (RN)
 - a) must be a Registered Nurse who holds a current unrestricted license in Virginia or a multistate licensure privilege
 - b) have at least one year direct patient care experience as a registered nurse
- 4) Other Instructional Personnel (LPN)
 - a) must be a licensed practical nurse with a current, unrestricted Virginia license or a multistate licensure privilege
 - b) graduated from a state-approved practical nursing program
 - c) have at least two years direct patient care experience as a licensed practical nurse
- 5) <u>All Instructional Personnel:</u>
 - a) satisfactory completion of a course in teaching adults, such as a Train-the-Trainer for Nurse Aide instructors. Include a copy of the completion certificate with the nurse aide education program application.
 - b) or, have experience teaching adults or high school students

Page 6 of the application:

- 1) Classroom facilities:
 - a) provide a description of all the equipment and supplies available for students and instructors. A list of supplies and audiovisuals may be attached to the application.
 - b) identify how many hand washing stations with running water are available in the skills lab.

- 2) Records' of Graduates Performance:
 - a) describe how the nurse aide program will store the NNAAP exam scores that are received electronically from the testing service whenever a graduate takes the NNAAP exam
 - b) identify how frequently the faculty will review the NNAAP test results with the goal of adjusting the curriculum to provide more assistance on the skills that are most frequently failed
 - c) describe how the program will maintain the Skills Record for each graduate, including how long the Skills Record will be kept
 - d) identify what documents the graduate is given at the completion of the program (certificate of completion and copy of Skills Record)

Page 7 of the application:

- 1) Records of Disposition of Complaints
 - a) briefly describe the process for students, clients, client families to lodge a complaint regarding the nurse aide education program
 - b) describe how the nurse aide education program will maintain a file for complaints against the program
 - c) provide a copy of the Grievance/Complaint Policy with the final application to establish a nurse aide education program

Curriculum Content on Page 7 of the application:

- 1) If the nurse aide program is going to use the Virginia Board of Nursing approved nurse aide curriculum, do not complete Section 9, Curriculum Content. Instead of completing this section, provide a detailed document (e.g. syllabus or calendar) that identifies how the approved curriculum will be presented to the students. Identify the curriculum content (Unit number and page number of the approved curriculum) to be taught each day of the program. You may re-arrange the approved curriculum to meet the needs of your program, however documentation that all of the approved curriculum content is presented to the students must accompany the application to establish a nurse aide program.
- 2) If the nurse aide program opts not to use the Virginia Board of Nursing approved curriculum and chooses to write its own curriculum, complete Section 9, Curriculum Content. Using the Requirements for the Curriculum, per regulation 18VAC90-26-40 found on page 7 of the "Regulations for Nurse Aide Education Programs" (available for download at http://www.dhp.virginia.gov/nursing) create a detailed topical outline of material to be taught to your students. Write an objective for each of the curriculum requirements that correspond to the content in your topical outline. Write the number of the Unit of Instruction on the first line of Section 9 and the page of the topical outline where the content is located on the second line. Do not write the page number of a textbook on the second line in Section 9.

Attachment 1 - Program Objectives:

 provide the objectives for the nurse aide program, including that graduates of the nurse aide program will be eligible to take the NNAAP examination. These are not student objectives. Rather these are the reason you want to provide a nurse aide education program.

Attachment 2 – Unit Objectives

- 1) if the nurse aide program opts to use the Board approved curriculum, this attachment does <u>not</u> need to be included with the final application
- if the nurse aide program chooses to write its own curriculum, include the objectives for each unit of instruction

Attachment 3 - Topical Outline

- 1) if the nurse aide program opts to use the Board approved curriculum, this attachment does <u>not</u> need to be included with the final application
- 2) if the nurse aide program chooses to write its own curriculum, include the topical outline for each unit of instruction. The unit objectives may be in the same document as the topical outline.

Attachment 4 - Classroom Schedule

- 1) using a calendar or syllabus format, provide documentation of the beginning and ending time for each class
- 2) when calculating hours for the curriculum, do not include mealtime
- 3) for each day of instruction include the topics to be taught
- 4) identify skills lab time

Attachment 5 - Clinical Schedule

- 1) using a calendar format, provide documentation of the beginning and ending time for each clinical session
- 2) when calculating hours for clinical experience, do not include mealtime

Attachment 6 - Teaching Methods

- 1) describe how the primary instructor will present content to the students (e.g. lecture, discussion, videos, etc.)
- 2) include "demonstration and return demonstration in skills lab and in clinical"

Attachment 7 – Evaluation Methods (class and clinical)

- 1) describe how students will be graded in class
 - a) grading scale
 - b) passing grade
 - c) must student pass classroom to enter clinical and/or to successfully complete the program?
- 2) skills lab
 - a) how will student be graded
 - b) must student pass skills lab to enter clinical?
- 3) clinical
 - a) how will student be graded
 - b) must student pass clinical to successfully complete the program?

Attachment 8 - Learner Skill Record

- 1) if the nurse aide program opts to use the Board approved Skills Record, this attachment does <u>not</u> need to be included with the final application
- 2) if the nurse aide program chooses to create its own Skills Record provide a copy of the program's Skill Record
- 3) include a section for skill check-off in the skills lab and a section for skill check-off during the clinical experience
- 4) include the name of the nurse aide education program and the name of the student on every page of the Skill Record
- 5) have a signature page at the end of the Skill Record for the instructor and the student to sign and date the completed record at the end of the clinical experience

Attachment 9 - Proof of financial support

1) provide a letter, on letterhead, from the Administrator of the parent organization stating that the parent organization will provide financial support and resources sufficient to meet the Board of Nursing requirements

Attachment 10 – Guidance Document 90-55

1) provide documentation (e.g. a signature page), that each student has received, read and understands Guidance Document 90-55 (available at http://www.dhp.yirginia.gov/nursing)

Attachment 11 – Licenses and Permits

- 1) provide current copy of business license
- 2) provide current copy of building/zoning permit

Attachment 12 - Agreement of Cooperation

1) provide copy of signed Agreement of Cooperation with the clinical facility where students will go for their clinical experience

If you have any questions as you are working on this application to establish a nurse aide program please contact the office of Dr. Paula Saxby. You may e-mail any questions to Ann Hayes, RN at ann.hayes@dhp.virginia.gov.

Revised February 2018

in the topical outline or objectives where content is included.

The attached documentation (Lesson Plans and CNA Edge Manual) outlines how and where the program will deliver all of Virginia's required curriculum content.

		Unit No. of	Page No. of
1. Initia	al Core Curriculum (at least 16 hours).	<u>Instruction</u>	Topical Outline
a.	Communication & interpersonal skills.	0	T
b.	Infection control.		Vurd a
c.	Safety and emergency measures, including	11/2	NO AP J
	dealing with obstructed airways and fall prevention.	1:1	Y W Ch.
d.	Promoting client independence.	ly .	. 10
	Respecting clients' rights.		1 Pharmail
		1.	N
2. Bas	ic Skills.	X	(A) A.
a.	Recognizing changes in body functioning and the		" MA
	importance of reporting such changes to a supervisor.		\ \
Ъ.	Measuring and recording routine vital signs.		
C.	Measuring and recording height and weight.		1/20
d.	Caring for the clients' environment.		
e.	Measuring and recording fluid and food intake and output.		
f.	Performing basic emergency measures.		
g.	Caring for client when death is imminent.		-
3. Pen	sonal Care Skills.		
я.	Bathing and oral hygiene.		
b.	Grooming.		
c.	Dressing.		
d.	Toileting.		
е.	A 1 1 2 12 12 12 12 12 12 12 12 12 12 12		
•	proper feeding techniques.		
f.	Caring for skin, to include prevention of pressure ulcers.		
g.	Transfer, positioning and turning.		
(Curriculus	m content continued, #9)		
		TT-14 NT C	Dans No. of
		Unit No. of	Page No. of
		Instruction	Topical Outline
	ividual Client's Needs Including Mental Health		
and	1 Social Service Needs.		
a.	Modifying the aide's behavior in response to		
	behavior of clients.		
b .	Identifying developmental tasks associated with		
	the aging process.		
c.	Demonstrating principles of behavior management by		
	reinforcing appropriate behavior and causing		
	inappropriate behavior to be reduced or eliminated.		
d.	The state of the s		

by allowing the client to make personal choices, and by providing and reinforcing other behavior consistent with clients' dignity.		
Utilizing client's family or concerned others as a source		
Responding appropriately to client's behavior; including,		
Providing appropriate clinical care to the aged and disabled.		
Providing culturally sensitive care.		-
e of the Cognitively or sensory (visual and auditory) Impaired C	lient.	
Using techniques for addressing the unique needs		
impaired residents.		
Demonstrating an understanding of and responding		
cognitive impairment.		
Is for Basic Restorative Services.		
Using assistive devices in transferring ambulation		
		-
abilities as directed by a supervisor.		
ents' Rights.		
		-
		· ·
		-
• •		
current protessional standards.		
egal and regulatory aspects of practice as a certified pure side		
	providing and reinforcing other behavior consistent with clients' dignity. Utilizing client's family or concerned others as a source of emotional support. Responding appropriately to client's behavior; including, but not limited to, aggressive behavior and language. Providing appropriate clinical care to the aged and disabled. Providing culturally sensitive care. e of the Cognitively or sensory (visual and auditory) Impaired Communications of individuals with dementia (Alzheimer's and others). Communicating with cognitively or sensory impaired residents. Demonstrating an understanding of and responding appropriately to the behavior of cognitively or sensory impaired clients. Using methods to reduce the effects of cognitive impairment. Its for Basic Restorative Services. Using assistive devices in transferring, ambulation, eating and dressing. Maintaining range of motion. Turning and positioning, both in bed and chair. Bowel and bladder training. Caring for and using prosthetic and orthotic devices. Teaching the client in self-care according to the client's	providing and reinforcing other behavior consistent with clients' dignity. Utilizing client's family or concerned others as a source of emotional support. Responding appropriately to client's behavior; including, but not limited to, aggressive behavior and language. Providing appropriate clinical care to the aged and disabled. Providing culturally sensitive care. e of the Cognitively or sensory (visual and auditory) Impaired Client. Using techniques for addressing the unique needs And behaviors of individuals with dementia (Alzheimer's and others). Communicating with cognitively or sensory impaired residents. Demonstrating an understanding of and responding appropriately to the behavior of cognitively or sensory impaired clients. Using methods to reduce the effects of cognitive impairment. Ils for Basic Restorative Services. Using assistive devices in transferring, ambulation, eating and dressing. Maintaining range of motion. Turning and positioning, both in bed and chair. Bowel and bladder training. Caring for and using prosthetic and orthotic devices. Teaching the client in self-care according to the client's abilities as directed by a supervisor. Int's Rights. Providing privacy and maintaining confidentiality. Promoting the client's right to make personal choices to accommodate individual needs. Giving assistance in resolving grievances and disputes. Providing privacy and maintaining confidentiality. Promoting the resident's rights to be free from abuse, mistreatment and neglect and the need to report any instances of such treatment to appropriate staff. Avoiding the need for restraints in accordance with current professional standards.

9. Occupational health and safety measures.	·	
10. Appropriate management of conflict.		

ATTACH TO THIS APPLICATION A DESCRIPTION OF THE PROGRAM INCLUDING:

- 1. Program Objectives. (attached)
- 2. Unit Objectives (stated in behavioral terms including measurable performance criteria). (attached in CNA Edge Manual
- 3. Topical outline and sequence for each unit of instruction (attached lesson plans)
- 4. Classroom Schedule. (see lesson plan above)
- 5. Clinical Schedule. (see lesson plan above)
- 6. Teaching Methods. (see CNA Edge Manual
- 7. Evaluation Methods (classroom and clinical). (see lesson plan above)
- 8. Learner Skill Record.
- 9. Proof of financial support and resources sufficient to meet Board of Nursing requirements.
- 10. Evidence of providing each student a copy of applicable law regarding criminal history checks for employment in certain health care facilities, and a list of crimes which pose a barrier to such employment. (included in lesson plans)
- 11. Copy of Business License and Building/Zoning Permit.
- 12. Copy of signed Agreement of Cooperation for clinical experience/site

I certify that the information in this application, including attachments, accurately represents the nurse aide education program for which approval by the Virginia Board of Nursing is being requested.

Danew. Mulian KN
Signature of Administrative Officer or Program Coordinator

Phone Number: (434) 953-6016 (cell)

(Form may be copied)

Revised November 2017

Date: 11/30.2018

Email: dmullins@greencountyschools.com

The Mountainview Nurse Aide Training Program will be conducted by Grace Healthcare of Greene County Healthcare and Rehabilitation in Stanardsville, VA.

Program Purpose

The purpose of the training program is to expand the field of well-qualified and well-trained individuals capable of providing caring and competent care within long-term care. Our aim is to offer a learning environment that fully prepares students for the realities, demand, and rewards of the job, with an emphasis on the resident and caregiver relationship. Graduates of Mountainview Nurse Aide training Program will be prepared to take the NNAAP Certification Exam.

Program Goals

This course has been designed to meet the Nurse Aide Training Program curriculum and course requirements outlined by the Virginia State Board of Nursing (https://www.dhp.virginia.gov/nursing/). The goal of the program is to prepare with the knowledge, skills and Judgement necessary to execute the Job of a CNA. After completion of the course, students will be prepared to take the NNAAP Certification Exam and become competent and caring members of the healthcare team.

Student Objectives

Upon completion of the course students will be able to

- 1. Describe and demonstrate the skills necessary to the role of the CNA in long-term care, including communication, professionalism, recording and reporting, ethics, and legal responsibilities.
- 2. Identify responsibilities of the healthcare team in a long-term care setting.
- 3. Demonstrate proficiency in basic medical knowledge and terminology as it relates to the role of the CNA in patient/resident care.
- 4. Demonstrate ethical and moral behavior in the provision of patient/resident care.
- 5. Demonstrate proficiency with clinical skills required for state certification .
- 6. Students will be eligible to take the Virginia state NNAAP certification exam.

Additional Info

Laboratory

All nurse assistant students must demonstrate proficiency of the skills listed on Skills Record form. These skills are evaluated by the instructor during laboratory hours. The skills practiced will be those tested as part of the NNAAP Certification Exam in Virginia. Skills are outlined the Candidate Handbook by PearsonVue, which will be provided to students prior to laboratory.

Teaching methods:

Instructor description

Instructor demonstration

Student demonstration on mannikin

Student demonstration on fellow students

Evaluation methods:

Once the skill is demonstrated by the student for the instructor, a grade of Satisfactory or Unsatisfactory will be noted on the Skills Record under "Lab".

practice skills in lab and then will be assigned to assist residents at the Grace Healthcare of Green County skilled nursing facility. Activities of daily living and rehabilitation procedures will be emphasized.

Teaching methods:

Instructor description
Instructor demonstration
Student demonstration on mannikin
Student demonstration on fellow students

Evaluation methods:

Once the skill is demonstrated by the student for the instructor, a grade of Satisfactory or Unsatisfactory will be noted on the Skills Record under "Clinical". The clinical grade will be based upon clinical performance, participation, and instructor evaluation. A student must receive a Pass grade by completing all Virginia Candidate Handbook skills with a satisfactory evaluation.

Students must pass both the theory and the clinical portions of training to become eligible to take the Virginia NNAAP Certification Exam.



- be made to provide 24/7 technical support for the students? Straightaway Health Careers' Client Care Department functions as the technical and program support for students and instructors. Instructors can submit support tickets and a Client Support Specialist will work to resolve their issues immediately and is available 7 days per week. Student concerns will be addressed first by their instructor. If the instructor cannot resolve the issue, the Client Care Department will work with the instructor to resolve the issue. Straightaway Health Careers is available to visit programs onsite for implementation and/or other assistance.
- 2) How will you determine the hours in the classroom portion of your NAEP?

 The CNA Edge course is approximately 60 hours in length. This, paired with at least 20 hours of laboratory/skills training will serve to meet the required 80 hours of classroom/skills training in VA.
- 3)How will you determine how much time a student should spend on each topic? The lesson plans/syllabus outline the time spent on each topic.
- 4) How will you assure that the student has completed the required number of classroom hours?
 - a. For example, how will you know that the student was actually in front of and engaged with the computer/mobile device and did not just turn it on and then walk away; or
 - b. Have someone else at the computer/mobile device?

The following will prevent fraudulent activity: 1) Students will have a secure login, 2) the instructor will monitor student progress on the SLMS dashboard and through live check-ins. The instructor will responsible for maintaining communication with each student to ensure that the student is taking the course and to reaffirm their learning 3) the student is unable to advance through the courseware without completing the prior content assets, including knowledge checkpoints and quizzes (20 section tests and a final exam) 4) Classroom assessment will be

5) else		will you verify master	y of the	e classroom material by the student (and not someone
In c	lassr	oom assessments will	be ad	Iministered to assess the student's mastery of the
cou	rse.		77	how & when

6) I will need to verify that the CNA Edge curriculum meets the curriculum requirements for Virginia. How will I and the BON access that Information?

The attached CNA Edge Alignment that was previously sent to you by Jill Morris at Straightaway maps how and where all Virginia required curriculum content is covered.

Market of the content is covered to the content of

Student Grievance Policy

Mountainview Nurse Aide Training Program supports the policy of guaranteeing every student the rights to grieve or appeal any official action or incident that, in the judgment of the affected student, is unfair or precludes his/her full realization of equal education opportunities.

All complaints/grievances about the program should first be referred to the Program Instructor. If reasonable attempts to resolve complaints/grievances, concerns persist the student may appeal to the facility Administrator at Grace Healthcare and Rehabilitation of Green County. The student should put their complaint/grievance in writing and send to:

Administrator
Grace Healthcare and Rehabilitation of Greene County
355 William Mills Dr
Standardsville, VA 22973

All staff will address complaints after receipt within 24 hours with the student. All complaints or grievances not resolved must be escalated within 24 hours.
The Administrator at Grace Healthcare and Rehabilitation of Greene County will have final determination on an escalated complaint/grievance and notify the student and instructor in writing of the outcome.
I have read and understand the Mountainview Nurse Aide Training Program Grievance Policy
Student Signature

Date

Mountainview

Nurse Aide Training Program

Guidance Doc 90-55 Acknowledgement

I, [name]		have
received a copy of the Virginia Guidance Docume convictions may have on my potential employment		the impact that criminal
Student Signature	Print Name	
Date		
Instructor Signature	Print Name	e e
	·	

Mountainview Nurse Aide Education Program Skills Record

Student Name	Facility Name
Rating Scale:	S – satisfactory (student can perform the skill accurately with a minimum
	of prompting)
	U – unsatisfactory (student requires significant prompting to perform the
	skill accurately)

* - skill identified in the Virginia Nurse Aide Candidate Handbook

Procedure	Skills Lab		Clinical .		
	Lab Practice Date	Instructor Initial	Demo Date	S/U	Instructor Initial
Baths a. bed bath					
b. tub bath					
c. shower					
d. partial bath					
e. modified bed bath*					
Hygiene a. back care					
b. hair care					
c. nail care					
d. foot care*					
e. perineal care*					
f. catheter care*					
g. incontinent care .					
h. shampoo					
Oral Care a. provide mouth care*					
b. clean dentures*					
Dressing a. dresses client with weak side*					
5. Bedmaking a. closed bed					
b. open bed	\				
c. occupied bed					

Mountainview Nurse Aide Education Program

Student Name

Procedure	Skills Lab		Clini		
	Lab Practice Date	Instructor Initial	Demo Date	S/U	Instructor Initial
6. Nutrition and Hydration					
a. feed dependent client*					
b. assist client with feeding					
c. check and serve tray					
7 Comfort Measures a. transfers bed to chair using transfer belt*					
b. positions on side in bed*					
c. assist client with wheelchair					
d. assist with use of bedpan*					
8. Infection Control a. wash hands*					
b. don/remove gloves*					
c. don/remove mask					
d. don/remove gown*					
Measure and Record a. temperature					
b. pulse*					
c. respirations*					
d. blood pressure*					
e. height					
f. weight*					
g. intake and output*		71			
h. food intake					

Mountainview Nurse Aide Education Program

Student Name	
Student Name	

Procedure	Skills	Lab	Clini	ical	
	Lab Practice Date	Instructor Initial	Demo Date	S/U	Instructor Initial
10. Safety-Emergency					
a. use restraint alternatives					
b. side rails as ordered					
c. CPR (optional)					
d. dealing with obstructed airway					
11. Restorative Care					
a. apply knee-high					
elastic stocking*					
b. assist client to ambulate					
c. ambulate client using					
transfer belt*					
d. passive range of motion					
for knee and ankle*					
e. passive range of motion for shoulder*					
12. Post-mortem Care					
13. Attitudes of a Nurse Aide					
a. arrives on time			1 1		
b. uniform is complete					
c. neat and clean					
d. use appropriate					
medical terminology					
e. use appropriate					
language					
f. report to nursing staff					
before leaving unit					
g. report to instructor					
before leaving unit					

Mountainview Nurse Aide Education Program

Student Name		
	Skills Record Con	nments
Instructor Comments:		
Instructor Signature		Date
Students Comments:		
Student Signature		Date

following proficiently		2	2
Evalutions Methods	90-55	Course Innowledge based questions - "Activities"	Course Innowledge based questions - "Activities"
Teaching Methods	Discussion	Self-paced - CNA Edge	Self-paced -
Objectives - Students will be able to do the following:	Understand course expectations Lecture Understand how to be successful in Discussion course Understand the impact of criminal activity on their ability to be employed as a CNA Be familiar with the facility and classroom	Understand the course structure and how information is presented Gain familiarity with the presenters Understand the changes associated with aging	Understand basic needs of residents Demonstrate effective communication with resident and families Understand legal and ethical responsibilities of Nurse Aides and their Impact on practice Understand purpose of resident Bill of Rights Understant components of elder abuse and
Virginia Content	18VAC90-26-110 Requirements for initial certification as an advanced certified nurse aide	18VACS0-26-40 A.8 18VACAS0-26-40 A.4. b Identifying developmental tasks associated with aging process	18VAC90-25-40 A.1.a Communication and interpersonal skills 18VAC90-25-140 A.8 Legal and regulatory aspects of practice 18VAC90-25-140 A.7.a Providing privacy and maintaining confidentiality 18VAC90-25-140 A.7.f Promoting the client's right to be free from abuse, mistreatment, and neglect 18VAC90-25-140 A.7.a-g Client's rights
Content	Intro to course Review of course/student expectations Review couse syllabus Discuss online study expectations Discuss online study best practices Review Guidance Doc 90-55 and sign acknowledgement Facility tour Requirements to become a Nurse Aide in VA	Introduction to the course stucture and assets introduction to the virtual faculty The role and responsibilities of the Nurse Alde Psychological, physical, and social changes of aging	Maslow's Hirerarchy of Needs HIPPA and Confidentiality Communication best practices with residents and their families Legal and Ethical responsibilities of a Nurse Aide Resident's Bill of Rights Elder Abuse
Assignment In CNA Edge	n/a	Section 1 Lessons 1-3	Section 1 Lessons 4-5
Location	Orientation	Student self- paced instruction	Student self- paced instruction
DATE	Week 1 Day 1 2 theory hours	Week 1 Day 2 1.5 theory hours	Week 1 Day 3 1.5 theory hours

Perform the

Week 1 Day 4 1.5 theory hours	Student self- paced instruction	Section 1 Lessons 6-7	Common Roles in Long-term care Interdiscipinary Teams Purposes and goals of long-term care What to do in an emergency	18VAC90-26-40 A.1.c Safety and emergency proceudres	Understand the different roles in long-term care and describe an interdisciplinary team Describe the purpose and goals of long-term care Describe the steps to take in am emergency	Self-paced - CNA Edge	Course knowledge based questions - "Activities"	
Week 1 Day 5 1.5 theory hours	Student self- Section 1 paced Lessons 8 instruction	Section 1 Lessons 8-9	Test taking strategles Section 1 material overview		Have an understanding of all Seff-paced material presented in Section 1 and CNA Edge be prepared to take the end of section quiz.	Self-paced -	Section 1 Quiz multiple choice	
Median in	() () () () () () () () () ()	Ö	C Smoth					

Handwashing proficiently following knowledge based knowledge based knowledge based knowledge based knowledge based questions questions questions questions questions -'Activities" "Activities" Activities "Activities" 'Activities" Evalutions Methods Course Course Course Course Course Self-paced -CNA Edge Self-paced -CNA Edge Self-paced -CNA Edge Understand the importance of vital Self-paced signs in the care of the resident and the CNA Edge Self-paced. CNA Edge Methods Objectives - Students will be able to do Teaching Understand the admissions process and providers can help to prevent wounds in surgery, musculoskeletal disorders, and Understand ways to precent he spread types of wounds and how healthcare Understand the CNAs role in assisting Understand how to Identify different purpose and understanding basics of How to provide emergency care and the CNA role in resident admissions CNA's role in monitoring vital signs. Gain an understanding of injuries, Define infection controls and It's of infections in long-term care with the physical exam rescue breathing and emergency, dealing with their treatment. the following: handwashing residents. Recognizing changes in body 18VAC90-26-40 A.1.c Safety Recognizing changes I body Measuring and recording 18VAC90-26-40 A.1.b 18VAC90-26-40 A.2.b 18VAC90-26-40 A.2.a 18VAC90-26-40 A.2.a 18VAC90-26-40 A.1.b obstructred airways Infection control Infection control Virginia Content functioning unctioning vital signs Wounds & Infection Control Part 1 Injuries, Surgery & Musculoskeletal Infection Control Part 2 Emergency care Physical Bram Admissions Vital Signs Disorders Content In CNA Edge **Assignment** Section 2 Lesson 4 Section 2 Section 2 Section 2 Section 2 Lesson 3 Lesson 5 Lesson 2 Lesson 1 Student self-Week 2 Day Student self-Student self-Student self-Student selfinstruction Instruction instruction instruction instruction Location baced paced paced paced paced Week 2 Day Week 2 Day Week 2 Day Week 2 Day 1.5 hours 1.5 hours 1.5 hours 1.5 hours 1.5 hours Theory DATE qq

Perform the

proficiently			Bed baths Transfers		HandwashingBed baths Transfers	J. Son
Methods	Course knowledge based questions - "Activities"	Course knowledge based questions - "Activities"	Section 2 Quitz B multiple choice 7		Skells check off H	0000
Methods		Self-paced	Self-paced -	1	in laboratory with instructor	
the following:	Understand how to support rehabilitaitve Self-paced and restorative care and restorative care Gain an introduction to 'transfers and movement of residents to facilitate their daily activities and care Gain an introduction to Range of Motion	Understand how to support rehabilitative Self-paced and restorative care Gain an introduction to transfers and movement of residents to facilitate their daily activities and care	18VAC90-26-40 A.3.a Learn about restorative care and Bathing and oral hygiene procedures associated with It. 18VAC90-26-40 A.6.a Using Understand basics of transfers assistive devices Observe and understand a resident discharge process	Have an understanding of all material presented in Section 2 and be prepared to take the end of section quiz.		A STATE OF THE STA
Virginia Content	18VAC90-26-40 A.6.c Understand how to support turning and positioning and restorative care 18VAC90-26-40 A.6.f Gain an introduction to 18VAC90-26-40 A.6.a Using daily activities and care assistive devices Gain an introduction to 18VAC90-26-40 A.6.b Maintaining range of motion	18VAC90-26-40 A.6.c Understand how to sup Turning and positioning and restorative care 18VAC90-26-40 A.6.f Gain an introduction to Teaching client self-care movement of residents 18VAC90-26-40 A.6.a Using daily activities and care assistive devices 18VAC90-26-40 A.6.b Maintaining range of motion	18VAC90-26-40 A.3.a Bathing and oral hyglene 18VAC90-26-40 A.6.a Using assistive devices 18VAC90-26-40 A.6.b			2 3
Content	Positioning, Rehabilitative & Restorative Care Range of Motion	Positioning, Rehabilitative & Restorative Care	Bed Baths, Transfers, & Discharges Test taking strategies Section 2 material overview			The swamp of
CNA Edge	Section 2 Lesson 6	Section 2 Lesson 6 Continued	Section 2: Lessons7-9			3
Location	Student self- paced instruction	Student self- paced instruction	Student self- paced Instruction		SKILLS LAB	San San San San San San San San San San
DATE	Week 3 Day 1 1.5 hours	Week 3 Day 2 1.5 hours	Week 3 Day 3 1.5 hours		Week 3 Day 4 2 hours	35

	Student self- Section 3	Section 3	The Care Plan & Documentation	18VAC90-26-40 A.11	Understand the importance of	Self-paced - Course	Course	Measuring
Day 5 pa	paced	Lesson 1-2	Reporting & Recording Subjective and Observational and	Observational and	documentation and effective	CNA Edge	knowledge	Height and
1.5 hours instruction	struction		Objective Info	reporting techniques	communication in long-term care		pased	Weight
			Measuring Weight and Height	18VAC90-26-40 A. 2c	Gain an introduction to skills relateed to		questions -	
			Measuring Weight of a Non-	Measuring and recording	measuring weight and height	,	Activities	
			Ambulatory Resident	height and weight				
			Measuring Weight of an Ambulatory					
			Resident					

Clinical

			es es
following			Sputum Specimen Mouth Care Denture Care Bedpons
Evalutions Methods	Course knowledge based questions - "Activities"	Course Innowledge based questions - "Activities"	Course knowledge based questions - "Activities"
Teaching Methods	Self-paced -	CNA Edge	CNA Edge
Objectives - Students will be able to do the following:	Become familiar with the repiratory system and ways to support relidents who suffer from respiratory disorders Understand oygen therapy, settings, and safety guidelines	Understand the effects of cardiovvascular disorders on residents and their signs and symptoms and care measures. Define isolation precautions and their use in long-term care Understand the chain of infection and transmission based precautions	Understand the complex nature of care for the bedridden residents and describe some of the care measures a CNA must employ. Gain an introduction to sputum specimens, mouth care, denture care, efimination, and bedpanuse.
Virzinia Content		18VACSO-26-40 A.1.b Infection control 18VACSO-26-40 A.2.a Recognizing changes in body functioning	18VAC90-26-40 A.7.a Providing phracy and confidentiality of care for the bedridden 18VAC90-26-40 A.1.b infection control control 18VAC90-26-40 A.1.e Respecting employ. 18VAC90-26-40 A.1.e Respecting employ. Gient's rights and food intake and care, efimination, and bedran output care, a Bathing and care, efimination, and bedran output use.
Content	Respiratory system COPD Oxygen therapy safety and guidelines Deep breathing and coughing	Supporting Cardiovascular Care. Compression Stockings Supporting Care for Cancer Isolation Precautions Chain of Infection	Care for the Bedridden Resident Taking a Sputum Specimen Providing Mouth Care Denture Care Assisting with Elimination Assisting with Bedpan use Resident Dignity
Assignment In OVA Edge	Section 3 Lesson 3	Section 3 Lesson 4-5	Section 3 Lesson 6
Locartion	Student self- paced instruction	Student self- paced instruction	Student self- paced Instruction
DATE	Week 4 Day 1 1.5 hours	Week 4 Day 2 1.5 hours	Week 4 Day 3 1.5 hours

Perform the

		Eg.	
Bed baths Transfers		Skilk check off Sputum Specimen Mouth Care Denture Care Bedpans	
Course krowledge based questions - "Activities"	Course frankledge based duestions - "Activities" Section 3 Quiz muhtiple choice	skills check off	
Self-paced -	CNA Edge	in laboratory with instruction	
Understand the complex nature of care for the bedridden residents and describe some of the care measures a CNA must employ. Gain an Introduction to sputum specimens, mouth care, denture care, elimination, and bedpan use.	Understand and define hospice and palliative care and their role in long-term care. Understand patient choice and dignity. Define the stages of grief Understand the importance of self-care Define DNR Understand the family's role and how to rely on them for client support Have an understanding of all material presented in Section 3 and be prepared to take the end of section quiz.		
18VACS0-26-40 A.7.a Providing privacy and confidentiality 18VACS0-26-40 A.1.b Infection control 18VACS0-26-40 A.1.e Respecting client's rights 18VACS0-26-40 A.2.e Measuring and recording fluid and food intake and output 18VACS0-26-40 A.3.a Bathing and ord hygiene	18VACS0-26-40 A.3.f Basic Understand emergency measures 18VACS0-26-40 A.3.g Caring for In long-term client when death is imminent 18VACS0-26-40 A.7.b Promoting Self-care choices and to accomodate individual Define DNR needs Understand Understand Support Have an uns material pre and be prep of section quality and be prep or section quality and prepared to the prepared		
Care for the Bedridden Resident Taking a Sputum Specimen Providing Mouth Care Denture Care Assisting with Elimination Assident Dignity	Hospice and Palliative Care Patient choice DNR Emergency and End of life Care Post-Mortem Care Working with Families Self-care Test Preparation and Section 3 Review		
Section 3 Lesson 6 continued	Section 3 Lesson 7-10		
Student self- paced instruction	Student self- paced Instruction	SKILLS LAB	73
Week 4 Day 4 1.5 hours	Week 4 Day 5 1.5 hours	Week 4 Day 6 2 hours	Throny.



DATE	Location	Assignment in OVA Edge	Content	Virginia Content	Objectives - Students will be able to do the following:	Teaching Methods	Evalutions Methods	following profidently
S Day	Student self- paced instruction	Lesson 1-2	Challenging Patients HIV Resident Behaviors Mental Health Needs Defense Mechanisms Discrimination Grievances and Disputes The Immune System Blood Borne Pathogens PPE	18VAC90-26-40 A.1.a Communication and interpersonal skills 18VAC90-26-40 A.1.e Respecting Clients rights 18VAC90-26-40 A.a. Modifying behavior in response to clients 18VAC90-26-40 A.4.c Identifying principles of behavior management 18VAC90-26-40 A.4.d Demonstraing skills supporting age-appropriate behaviors 18VAC90-26-40 A.4.f Responding to client behavior 18VAC90-26-40 A.7.c Assistance	Understand how to respond and dmanage difficult resident behavior Understand mental health needs of clients Understand discrimination and its effect on residents Understand how to handle complaints and grievances Gain and introdution to PPE and donning/removing PPE	Self-paced -	Course knowledge based questions - "Activities"	Donning and removing PPE
Week 5 Day 2 1.5 hours	Student self- paced instruction	Section 4 Lesson 3	Grooming Bathing and Showering Depression Hair care	18VAC30-26-40 A 3.b Grooming 18VAC30-26-40 A.3.a Bathing and oral 18VAC30-26-40 A.3.a Bathing and oral 18VAC30-26-40 A.4.f Responding to client behavior 18VAC30-26-40 A.a. Modifying bealwlor in response to clients 18VAC30-26-40 A.4. c Identifying principles of behavior management	Understand how appropriate grooming helps clients feel good Galn an intro to bathling, showering, grooming, halr care, and shaving Describe signs and symptoms of depression and techniques for workign with depressed residents.	CNA Edge	Course knowledge based questions - "Activities"	Tub baths Whirtpool Showering Washing Hair Grooming Facial Hair & Makeup
Week 5 Day 3 1.5 hours	Student self- paced instruction	Section 4 Lessons 4-6	Immune System Infection Cycle Working with Combative Residents Mental Health Disorders Substance Abuse Suicide	18VAC90-26-40 A.1.b infection control 18VAC90-26-40 A.4.f Responding to client behavior 18VAC90-26-40 A4.a. Modifying beahvior in response to clients 18VAC90-26-40 A.4.c identifying principles of behavior management 18VAC90-26-40 A.10 Management of conflict	Understanding various mental health disorders and how to care for residents with them Describe techniques to work with combative or aggressive residents Define common mental health disorders and their symptoms Describe signs and symptoms of substance abuse Understand the immune system and cycle of Infection and infection	CNA Edge	knowledge based questions - "Activities"	

Perform the

67	Week 5 Day Student self- Section 4 4 paced Lessons 7-9 1.5 hours instruction Section 5 5 paced Lesson 1-2 1.5 hours Instruction Instruction	Restraints and Resident Rights 18VAC90-26-40 A.8 Legal and Confirmon restraints and Self-paced - Section 4 Quit CBRA regulatory aspects of practice describe safe restraint use and CRA Edge multiple choice 1gal Rights and Responsibilities to sersory impaired client Understand the CRA's legal responsibilities to report abuse or regident Understands and Review of Section 4 18VAC90-26-40 A.7.f Promoting client Understand the CRA's legal rights responsibilities to report abuse or 18VAC90-26-40 A.7.g Avoiding need for regident responsibilities to report abuse or restraints restraints restraints and restraints presented in Section 4 and be presented to take the end of section quitz.	Diabetes & Obesity The Endocrine system The Endocri
	struction struction struction struction struction struction	on.	8

	ou ou		8
following proficiently	Range of Motion Passive Range of Motion		Transfers with a mechanical lift
Evaluations Methods	Course knowledge based questions - "Activities"	Course Innowledge based questions - "Activities"	Course knowledge based questions - "Activities"
Teaching Methods	CNA Edge	CNA Edge	CNA Edge
Objectives - Students will be able to do Teaching the following:	Understand the signifiance of mealtime in a resident's day. Gain and introduction to Intake and output monitoring Deeper knowledge of diabetic's diet Gain and introductiont of foot care Describe importance of range of motion and exercise for the long-term care resident	Describe techniques for working with hearing or visually impaired residents.	Understand the CNA's role in helping patients with ADL. Describe ways to promote patient independence can and introduction to transfers with mechanical lifts. Distinguish AM vs PM care
Virginia Content	18VAC90-26-40 A.2.e Measuring and recording fluid intake and output 18VAC90-26-40 A.3.e.Assisting with eating and hydration 18VAC90-26-40 A.6.b Maintaining range of motion	18VAC90-26-40A.4.g Providing appropriate clinical care to the aged and disabled 18VAC90-26-40A.5.b Communicating with sensory impaired clients 18VAC90-26-40 A.8 Legal and regulatory aspects of practice 18VAC90-26-40 A.9 Occupational health and safety measures 18VAC90-26-40 A.11 Observational and reporting techniques 18VAC90-26-40 A.11 Observational and reporting techniques 18VAC90-26-40 A.1.c Safety and emergency procedures including falls prevention	18VAC90-26-40A.3.g Transfer, 18VAC90-26-40A.3.g Transfer, positioning and turning 18VAC90-26-40A6.a Using assistive devices in transferring 18VAC90-26-40A.7.b Promoting client's right to make personal choices 18VAC90-26-40A.7.d Providing assistance to participate in groups and activities
Content	Mealtimes, special diets, and nutrition Hydration Diabetic diet Mealtimes Monitoring I&O Nutrition and culture Foot care Exercise and ROM	Working with residents with hearing or visual impairments incidents and Accident Reports Risk Management mindset. Poisons	Pressure ulcers Pressure reducing devices Activities of dally living Cilent independence Chromic and acute illnesses Mechanical lift AM/PM care
Assignment in CNA Edge	Lesson 3-4	Section 5	Section 5 Lesson 6-7
Location	Student self- paced instruction	Student self- paced instruction	Student self- paced instruction
DATE	Week 6 Day 1 1.5 hours	Week 6 Day 2 1.5 hours	Week 6 Day 3 1.5 hours

Perform the

Week 6 Day 4 2 hours	SKILIS LAB onsite				pr ss.	in laboratory with instructor	with instructor with instructor with instructor Whirthood Shøwening Washing H Greoming Facial Hair	Tub baths Whirpool Shewering Washing Hair Greoming Facial Hair &
Week 6 Day 5 1.5 hours	Student self- paced instruction	Section 5 Lesson 8-10	Revisiting the care plan Test Prep and Review of Section 5	18VAC90-26-40A.11 Observational and reporting techniques	Understand the care plan Describe shingles signs and symptoms Have an understanding of all material presented in Section 5 and be prepared to take the end of section quiz.	Self-paced -	Course knowledge based questions - "Activities" Section 5 Quiz multiple choice	
Week 6 Day 6 2 hours	onsite					in taboratory with instructor	Skills check off	Skills check off Range of Motion Peisthe Range of Motion Trensfers with a mechanical lift
Theory	0.14							

		Assignment in			Objectives - Students will be able	Teaching	Evalutions	Perform the following
DATE	Location	CNA Edge	Content	Virginia Content	to do the following:		Methods	proficiently
Week 7 Day 1. 1.5 hours	Week 7 Day Student self- Section 6 1 paced Lesson 1-1.5 hours instruction	Section 6 Lesson 1-2	Resident Sexuality Assisted Living The service plan Resident privacy Stroke Assisting with Hospital Transfers The Nervous System Caring for residents with ALS & Spinal cord injuries	18VAC90-26-40A1.e Respecting clients rights 18VAC90-26-40A2.a Recognizing changes in body function 18VAC90-26-40A.7.a Providing privacy and maintaining confidentiality	Undersatnd resident sexuality and how to support its healthy expression as a CNA Understand assisted living Undersatnd the nervous system Describe the causes, signs and symptoms of a stroke Understand the CNAs role in facility admissions	Self-paced -	knowledge based questions - "Activities"	
Week 7 Day 2 1.5 hours	Week 7 Day Student self- 2 paced 1.5 hours instruction	Section 6 Lesson 3	with depressed clients an occupied bed	18VAC90-26-40A.4.a Modifying Describe best behavior in resonse to clients with depresse 18VAC90-26-40A.1.a Gain an introc Communication and interpersonal occupied bed. skills 18VAC90-26-40A.2.d Caring for the client's environment	Describe best practices for working with depressed residents Gain an introduction to making an occupied bed.	Self-paced -	Course knowledge based questions - "Activities"	Making an occupied bed
Week 7 Day 3 1.5 hours	Student self- paced Instruction	Section 6 Lessons 4	ADLS: Toileting, bathing and catheter care Urhation and bowel elimination Perineal Care Bathing bedridden clients Modified Bed Baths	18VAC90-26-40A.3.d Tolleting 18VAC90-26-40A 3.a Bathing 18VAC90-26-40A 6.d Bowel and bladder training	Gain an introduction to tolleting, bathing, catheter care, perineal care, and modified bed baths Understand residents needs with respect to urination and bowel elimination	CNA Edge	Course knowledge based questions - "Activities"	Toileting Bathing bedridden clients Perheal Care Modified Bed baths
Week 7 Day 3 1.5 hours	Week 7 Day Student self- 3 paced 1.5 hours instruction	Section 6 Lessons 5-6	ADLs: Skin and Nail Care Massage Skin Care Integumentary system Scables and Pediculosis Mealtimes Serving meal trays Promoting Nutrition and Safe Eating Feeding clients Positioning during feeding	18VAC90-26-40A 3.f Caring for skin 18VAC90-26-40A 3.e Assisting with eating and hydration 18VAC90-26-40A 6.c Turning and positioning	Understand the CMAs rols in massage, skin care Gain knowledge of the integumentary system and scables and pediculosis	CNA Edge	Course knowledge based questions - "Activities"	Mouth Care Denture Care Bedpan

משמ	- Jo														_			
Dressing and	Undressing	Residents																
Course	knowledge	pased	questions -	"Activities"														
Self-paced-	CNA Edge																	
Understand basics of restorative	and rehabilitative care	Gain an intorduction to dressing and	undressing residents, orthotic	devices, ambulation, and use of	transfer befts.	Gain a deeper understanding of	communication with residents and	providing culturally sensitive care.										
18VAC90-26-40A.4.h Providing	culturally sensitive care	18VAC90-26-40A.3.c Dressing	18VAC90-26-40A6.f Teaching	client self-care	18VAC90-26-40A.6.a Usin	assistive devices in transferring,	ambulation, eating, and dressing	18VAC90-26-40A. 6.e Caring for	prosthetic and orthotic devices	18VAC90-26-40A.1.a	Communication and interpersonal	statis	18VAC90-26-40A.1.d Promoting	citent independence				
Rehabilitative & restorative care	Orthotic and Prosthetic devices	Dressing and Undressing patients	Trasner belts for ambulation	Cross-cultural communication	Best practices for communicating with	residents												
Section 6	Lesson 7																	
Week 7 Day Student self- Section 6	paced	instruction																The second second
Week / Day	2	1.5 hours																The second second second

Perform the following proficiently				
Evalutions Methods	Section 6 Quiz multiple choice	Course knowledge based questions - "Activities"	Course knowledge based questions - "Activities"	Course knowledge based questions - "Activities"
Teaching Methods	Self-paced - CNA Edge	Self-paced -	CNA Edge	Self-paced - CNA Edge
Objectives - Students will be able to do the following:	Have an understanding of all material presented in Section 6 and be prepared to take the end of section quiz.	Understand Dementia and Alzheimer's and how to communicate and care for cognitively imparied clients Undersatind strategies to prevent resident elopement	Understand ways to manage sexual aggression Understand caring for moderate and severe dementia Understand techniques to avoid burnout Define chemical restraints and describe the dangers of restraints	Understand how to care for patients in late stages of disease and dementia Galn introduction to feeding tubes and hs and PCCs
Virginia Content		18VAC90-26-40A.5.a-c Care of the cognitively or sensory impaired client	18VACSO-26-40A.5.a-c Care of the cognitively or sensory impaired client 18VACSO-26-40A.4.f Responding to aggressive behavior 18VACSO-26-40A.4.g Providing appropriate clinical care for aged and disabled 18VACSO-26-40A.6.c Turning and Positioning 18VACSO-26-40A.7.g Avoiding need for restraints	18VAC90-26-40A.5.a-c Care of the cognitively or sensory impaired client 18VAC90-26-40A.6.d Bowel and Bladder training
Content	Test-taking strategles and Review of Section 6	Introduction to Alzheimer's and Dementa Care for Moderate Alzheimer's Communicating with Cognitively Impaired Clients Preventing Elopement	Care for Moderate Alzheimers Sexuel aggression Care for Severe Alzheimer's Burnout Restraints Repositioning in a chair	Severe Alzhelmer's Enteral Feeding Feeding Tubes IV and PCCs Bowel and Bladder Care
Assignment in CNA Edge	Section 6 Lesson 8-9	Section 7 Lesson 1-2	Section 7 Lessons 3-5	Section 7 Lessons 6-7
Location	Student self- Section 6 paced Lesson 8-9 instruction	Student self. paced instruction	Student self- Section 7 paced Lessons 3 instruction	Student self- Section 7 paced Lessons 6 instruction
DATE	Week 8 Day 1 1.5 hours	Week 8 Day 2 1.5 hours	Week 8 Day 3 1.5 hours	Week 8 Day 3 1.5 hours

	Making an occupied bed Tollecting Perineal
Course knowledge based questions - "Activities" Section 7 Quiz multiple choice	In laboratory Skills, check off with lastructor
	in laboratory with instructor
18VAC90-26-40A.2.g Caring for Understand the role of the CNA when a Self-paced patient when death is imminent resident dies 18VAC90-26-40A.4.e Utilizing CINA Edge CINA Edge CINA Edge CINA Edge CINA Edge CINA Edge cineti's family as source of presented in Section 7 and be prepared to take the end of section quiz. !	
18VAC90-26-40A.2.g Caring for Understand to partient when death is imminent resident dies 18VAC90-26-40A.4.e Utilizing dient's family as source of emotional support presented in to take the entitle of the control of	
Death CNA role with the dying patient Supporting grieving Test-taking strategies and Review of Section 7	
Week 8 Student self- Section 7 Day 5 paced Lesson 8-10 1.5 hours instruction	SIGILS LAB
Week 8 Day 5 1.5 hours	Week 8 Day 6 2 hours

following proficiently	Measuring urinary input			Stats check off Dressing and Undressing Resident Modified Bed baths Bathing bedridden clents
Evalutions Methods	Course knowledge based questions - "Activities"	Course knowledge based questions - "Activities"	Course knowledge based questions - "Activities"	
Teaching Methods	CNA Edge	Self-paced - CNA Edge	Self-paced -	In laboratory with instructor
Objectives - Students will be able to do the following:	Understand the role of the CNA in working with patients who have developmental disabilities. Understand common coping mechanisms for residents may use to deal with stress. Understand the urinary system and common urinary disorders. Gain and introduction to measuring urinary output. Describe common special diets in long-term care.	Understand the urinary system and common urinary disorders Gain and introduction to measuring urinary output. Describe common special diets in long-term care.	Understand caerf measures that a CNA can offer to Self-paced help pattent shirth lidney failure and other urinary CNA Edge disorders Understand the issues of abuse and neglect in long term care Know what to do per Virginia law when you suspect a resident in being abused or neglected.	
Virginia Content	18VACSO-26-40A4.g Providing appropriate clinical care to aged and disabled 18VACSO-26-40A.2.e Measuring and recording fluid I&O 18VACSO-26-40A.1.a Communication and interpersonal skills 18VACSO-26-40A.5.c Demonstrating and understanding of and responding to behavior of cognitively impaired	18VAC90-26-40A.2.e Measuring and recording fluid I&O		
Content	intro to developmental disabilities Coping Mechanisms Understanding Sleep Urineary System Urineary Ouput Diarrhea and bacterial infections Special diets	Urinary system Urineary Ouput Diarrhea and bacterial infections Special diets	Dialysis Kidney disease Urinary Disorders Suspected Abuse and Neglect Reporting abuse Legal Recrouse and Obligation to report Code of Virginia 63.2-1606- Mandatory and Voluntary reporting	
Assignment in CNA Edge	Section 8 Lesson 1-2	Section 8 Lesson 2 continued	Section 8 Lessons 3-5	
Location	Student self-paced instruction	Student self-paced instruction	Student self-paced instruction	SKILLS LAB
DATE	Week 9 Day 1 1.5 hours	Week 9 Day 2 1.5 hours	Week 9 Day 3 1.5 hours	Week 9 Day 4 2: hours

Week 9 Student Day 5 self-paced 1.5 hours Instruction	Section 8 Lessons 6-7	Student Section 8 Test taking strategies and self-paced Lessons 6-7 review of Section 5 Instruction	Have an understanding of all material presented in Self-paced - Section 8 Quiz. Section 8 and be prepared to take the end of CNA Edge multiple section quiz.	Self-paced - Se CNA Edge m	Section 8 Quiz multiple choice
Theory	100				
1150	lev!				
Chinesis	120				

m the ing ently	ring r input			ette all ot ssky ed		ete all sty sd	
Perform the following proficiently	Measuring urinary input			Skills not previously practiced		Complete all skills not previously practiced	
Evalutions Methods	Course knowledge based questions - "Activities"	Course knowledge based questions - "Activities"	Course knowledge based questions - "Activities"	Skills check off		Sidils check off	
Teaching Methods	Self-paced - CNA Edge	Self-paced - CNA Edge	Self-paced -	In taboratory with instructor	Self-paced -	In laboratory with instructor	
Objectives - Students will be able to do the following:			Master the content in each section		Master the content in each section		
Virginia Content							
Content			previous sections and lessons as needed		previous sections and lessons as needed		
Assignment in CNA Edge	Section 9 Lesson 1-2	Section 10 Lesson 1-2	REVIEW previous sections or incomplete sections as needed		REVIEW Previous sections or incomplete sections as needed		
Location	Student self- paced instruction	Student self- paced instruction	Student self- paced instruction	onsite	Student self- paced instruction and meet with the instructor as, needed.	SKILS LAB	9
DATE	Week 10 Day 1 1.5 hours	Week 10 Day 2 1.5 hours	Week 10 Day 3 1.5 hours	Week 10 Day 4 2 hours	Week 10 Day 5 1.5 hours	Week 10 Day 6 2 hours	Theory

DATE	Location	Assignment in OVA Edge	Content	Vinginia Content	Objectives - Students will be able to do the following:	Teaching Methods	Evalutions Methods	following proficiently
Week 10 Day 1 1.5 hours	Student self- paced instruction and meet with the insturctor as	REVIEW previous sections or incomplete sections as needed	previous sections and lessons as needed		Master the content in each section	Self-paced -		
Week 10 Day 2 1.5 hours	Student self- paced instruction and meet with the insturctor as needed.	REVIEW previous sections or incomplete sections as needed	previous sections and lessons as needed		Master the content in each section	Self-paced		
Week 10 Day 3 1.5 hours	Student self- paced instruction and meet with the instructor as needed.	REVIEW previous sections or incomplete sections as needed	previous sections and lessons as needed		Master the content in each section	Self-paced - CNA Edge		
Week 10 Day 4	Week 10 Skits LAB Day 4 onsite 2 hours					In laboratory with instructor	Statis check off.	Complete all skills not previously previously practiced
Week 10 Day 5 1.5 hours	Student self- paced instruction	REVIEW previous sections or incomplete sections as needed	previous sections and lessons as needed		Master the content in each section	Self-paced		
Thusbroom	120							

Parform the following proficiently Evalutions Methods be able to do Teaching the folllowing: Methods Objectives -Students will Location DATE

Week 12	Facility	Perform the	Instructor	Skills check off Hand Hyglene	Hand Hyglene
Day 1		skill	supervised		Donning and Removing PPE (Gown and Gloves)
8 hours		proficiently	dinical		Measures and Records Electronic Blood Pressure
		with critical	training		Counts and Records Radial Pulse
		elements			Counts and Records Respirations
		mastered.			Measures and Records Manual Blood Pressure
Week 12	Facility	Perform the	Instructor	Skills check off	Skills check off Applies One Knee-High Elastic Stocking
Day 2		skill	supervised		Assists to Ambulate Using Transfer Belt
8 hours		proficiently	dinical		Feeds Client Who Cannot Feed Self
		with critical	training		Measures and Records Weight of Ambulatory Client
		elements			Transfer From Bed to Wheelchair Using Transfer Belt
		mastered.			
Week 12	Facility	Perform the	Instructor	Skills check off	Skills check off Measures and Records Urinary Output
Day 3		skill	supervised		Assist With Use of Bedpan
8 hours		proficiently	clinical		Provides Perineal Care (Peri-care) for Female
		with critical	training		Provides Catheter Care for Fernale
		elements			
		mastered.			
Week 12	Facility	Perform the	Instructor	Skills check off	
Day 4		skill	supervised		Performs Modified Passive Range of Motion (PROM) for One Knee and One Ankle
8 hours		proficiently	clinical		Performs Modified Passive Range of Motion (PROM) for One Shoulder
		with critical	training		Dress Client With Affected (Weak) Right Arm
		elements			
		mastered.			
Week 12	Facility	Perform the	Instructor	Skills check off	Skills check off Cleans Upper of Lower Denture
Day 5		skill	supervised		Positions on Side
8 hourss		proficiently	clinical		Provides foot Care on One Foot
		with critical	training		Provides Mouth Care
		elements			
		mastered.			Any skills not previously checked off
Theory	0				

Clinical 40

TOTAL COURSE HOURS
The cory
Lab
Cinical

23.5 Samuel 23.5



You are probably acutely aware of the effects of nurse aide turnover in long-term care and the system strains that result from chronic shortages of well-trained staff. These challenges were the reason Straightaway Health Careers (SHC) was founded. As you read in our forward, it's personal for us.

With a mission to help skilled nursing facilities reduce CNA turnover, SHC created CNA Edge, a toolset to help facilities recruit, train, and retain CNAs.



Prep

CNA Edge: PREP is a series of videos that: -allow ensployers to attract CNA traintees and give those applicants an opportunity to determine whether the role of a

CNA is a good till for thera.



Training

CNA Edge: TRAINING is a groundbreaking digital course that is: algored to propose CNIA tradition for holf: the job and the state competency evaluation.



Support

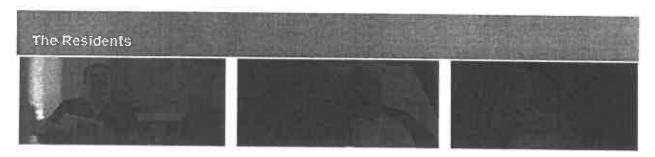
CNA Edge: SUPPORT in a stalls of took that helps exaptoyers retain their new CNAs during their first 90 days on the job. The suite include -a feadership course for naise **SERVINOIS** -a chack-in tool to survey new

One aspect of product, CNA Edge Training, will help instructors deliver the classroom portion of Virginia's state required curriculum content in an engaging, fun way for learners. It prepares nurse aide candidates for the realities and demands of the job, while arming instructors with resources to more effectively engage students. A more engaged student will then retain more information and be more likely to pass the competency exam and is more likely to stay on the job as a CNA.

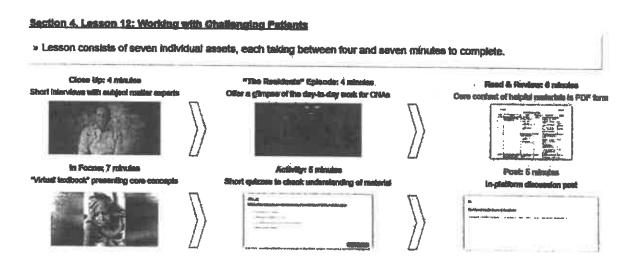
Something unique to CNA Edge Training is the mini-series called "The Residents". CNA Edge uses industry-recognized adult-learning concepts, including storytelling, to more effectively engage students and increase learner retention. Because the content covered in CNA Edge Training is organized around the story of "The Residents", your state's content may appear in a different format or in a slightly different order:

The adult learning concepts used in CNA Edge include:

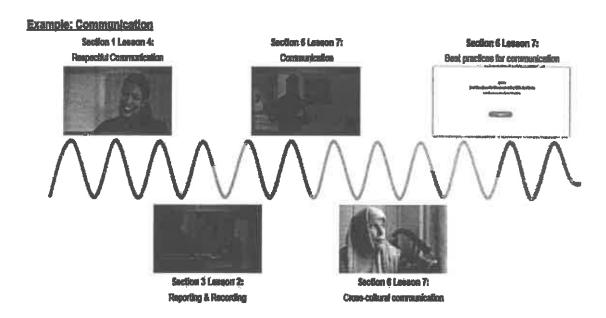
Storvtelling: People have an innate love of stories. As such, CNA Edge is centered around a mini-series, "The Residents", which follows Marissa, a new CNA, as she interacts with residents and their family members. The story is engaging, but also gives students a good sense of what they will see, feel, and truly experience when they begin work as a CNA.



<u>Chūńking</u>: Students retain material best when it is delivered in small, digestible pieces. Content throughout CNA Edge is delivered in short, grouped bits that are no longer than 8-9 minutes. This will keep students' attention and make it easier for them to commit the information to memory as they move throughout the course.



<u>Spiraling</u>: Often, students must hear things multiple times. CNA Edge leverages the spiraling concept as it presents important topics, such as handwashing and communication, throughout the course. The material is presented in a different context each time so students can see the practical, real-world applications.



To keep things engaging for the students, content is delivered through a variety of mediums, including videos, interviews with experts, quizzes, and documents. The content asset types are described below.



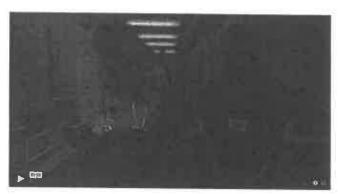
In Focus

The In-Focus presentations house the core content for CNA Edge. These presentations use auditory and visual content to appeal to adult learners' various learning styles.

Close Up

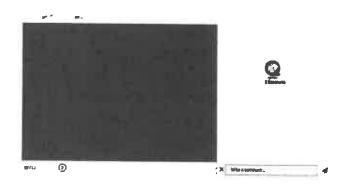
The Close-Up videos are short interviews with experts, including MDs, RNs, administrators, and CNAs. These assets complement the In-Focus presentations and help students to understand how each topic is relevant to the work they will do as a CNA.





Episode

Episodes of "The Residents" are a Hollywood caliber mini-series offering a glimpse into situations that CNAs will encounter on the job. Leveraging story, students will better remember material and experience some of the emotions they will encounter on the job. "The Residents" follows Marissa, a brand-new CNA as she interacts with residents and their family members as they are faced with challenging health situations.



<u>Post</u>

Posts are a place for students to respond to a topic and interact with one-another in a discussion thread.

Activity and Practice Test

Throughout each lesson, there are several 3-5 question quizzes to check for student engagement and understanding. At the end of each section, students will complete one graded Practice Test.

What is the easiest and most common site for taking a person's pulse?

Throbial pulse

Tachol pulse

TED HOSE		
。 [1] [1] [1] [2] [2] [3] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4	RATIONALE	
1. Do initial steps.		
Observe sidn prior to applying the stockings for any reduces, warmth, swelling, excessive dryness, or open area. Notify nurse if absormation present. Continue procedure only if instructed.	2. Provides passe with information to seems resident's condition and needs.	
 Apply the base before resident gets out of bed. 	Hose should be applied before veins become distended and adema (swalling) occurs.	
 Hold heel of stocking and gather the rest in your hand turning hose inside out to mid foot area. 		

Read and Review

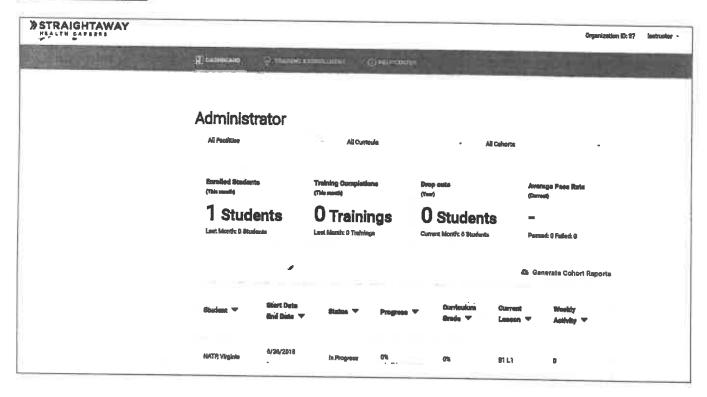
Read and Review content assets are also core content for the course and tend to be helpful review materials for students. Along with the classroom instructor teaching the skill, this is where the Virginia CNA Skills are documented.

Information for Hybrid/Online Delivery

Student Oversight

Course instructors are responsible for maintaining communication with each student to ensure that the student is completing the course on schedule and to reaffirm their learning. Instructors monitor students' progression in the course and their scores on end-of-section practice tests through their CNA Edge dashboard. They are encouraged to communicate with students directly when questions or concern arise. Students can comment on posts and interact with both the instructor and other class members on various topics throughout the course.

Dashboard Example:



Technical Assistance

Access to the course requires secure password protected logins for both students and instructors. Straightaway Health Careers' Client Care Department functions as the technical and program support for all users. Instructors can submit support tickets and a Client Support Specialist will work to resolve their issues immediately. All student concerns will be addressed with their instructor. If the instructor cannot resolve the issue, they can submit a support ticket to Straightaway Health Careers whose Client Care Department will work to resolve the issue. All support tickets are addressed within 24 hours.

Navigating CNA EDGE

The best way to understand the navigation of CNA Edge is to arrange a brief tutorial with Straightaway Health. We are available in-person and via web call. Contact Jill Morris at (919) 694-0431 to schedule a time.

- 1. Go to CNA Edge site: https://mancusohomes.training.straightawayhealth.com
- 2. Login with the following credentials:

User ID: virginia

Password: welcome123

case sensitive

1234



- 3. If prompted click "Remind me later" rather than Get Started.
- 4. You are now viewing the Instructor's dashboard. To view the course, Change the tab in the top righthand corner from "Instructor" to "Learner" in the dropdown.
- 5. "Current Lesson" indicates where you are in the course. To start from the beginning, you can click "Start here" and you will progress through the course in order it's presented.
- 6. To move around the course, go to Syllabus and click on "Go to Syllabus"
- 7. There are 10 SECTIONS, based around the story of each fictional character in a nursing facility.
- 8. Click on Details in each section to expand and show you the LESSONS which Indicate the topics covered.
- 9. Click on a Lesson to expand and show you the **ASSETS** presented in each lesson.
- 10. The **Resources** tab houses Washington state skills checklist. Any other resources can be added at the instructor's discretion.

The CNA Edge alignment document indicates where each standard is covered.

For example: 4.6.2 corresponds to Section 4 ("Helen"), Lesson 6 (Helen's Manic Episode"), Asset #2 ("Episode 27 Ghost Bird").

Due to frequent updates the **Asset number may appear slightly out of numerical order, but should be easily located by title.

CNA Edge Alignment with Virginia State Standards

The following pages illustrate how CNA Edge meets the required content standards for Virginia state curriculum.



HEALTH CAREERS

Key

Numbering of Assets: The numbering at the beginning of each asset designates the location in CNA Edge. So, for example 1.2.1 tells the reader that the asset in question resides in Section 1, Lesson 2, Activity 1. Additionally, if the asset has a letter at the end of the code like: 1.2.1a, then the asset immediately follows the asset at 1.2.1.

- Asset Types: There are a variety of asset types in CNA Edge. They are denoted with one of the following tags:
 - In Focus: The "In-Focus" presentations comprise the "virtual textbook" in the course.
 These assets house the core content for CNA Edge.
 - Close-Up: The Close-Up videos are short interviews with subject matter experts in the field. These assets complement the In-Focus presentations by offering the perspective of health care professionals.
 - o <u>The Residents</u>: These videos are the case-based vignettes in CNA Edge. These videos offer a glimpse of the day-to-day work of CNAs and the people that they care for.
 - Activity: The assets with an "Activity" moniker are short quizzes/assessments, which help the students check their understanding of the material.
 - Read and Review: Assets with the "Read and Review" heading are PDF files that either act as core
 content for the course, or helpful review materials for the students.
 - Simulation: Assets with the "Simulation" heading are active step-by-step guides which
 cover the general care measures of some of the most common procedures that nurse
 aides must master.
 - Post: The "post" tag means that the asset is an in-platform discussion post (which can also be used live in the classroom)

Highlighted assets indicate state-specific content

VA Standards

Relevant Assets from CNA Edge

Unit I - The Nurse Aide in Long-Term Care

- Provide an overview of health care organizations and long-term care facilities and the methods used for payment of the services that clients receive;
- Discuss the role of the Nurse Aide in long-term care per OBRA requirements;
- Explain delegation as it relates to the Nurse Aide;
- Explain the impact of <u>Guidance</u>
 <u>Document 90-55</u> on potential employment for a Nurse Aide.

- In Class: Explain the impact of Guidance Document 90-55 on potential employment as a nurse aide.
- 1.2.1 Close-Up: You Are Critical to Patients Families and Healthcare
- 1.2.2 in-Focus: Becoming a Certified Nursing Assistant
- 1.2.3 In-Focus: A CNA's Roles and Responsibilities
- 1.2.3a Read and Review: Roles and Responsibilities (VA Tailoring)
- 1.2.4 Activity: A CNA's Role
- 1.2.4 Framing: Common Health Care Organizations (VA Tailoring)
- 1.2.5 Close-Up: Defining Excellent Health Care
- 1.2.6 In-Focus: An Exceptional CNA
- 1.2.7 in-Focus: Being A Professional
- 1.2.8 Activity: Self-Assessment
- 1.2.8 Framing: Important Considerations for Applying for a Role as a Nurse Aide (VA Tailoring)
- 1.2.8a Read and Review: Virginia Guidance Document 90-55 (VA Tailoring)
- 1.4.3 Close-Up: The CNA is Critical to Patients and Families
- 1.4.4 In-Focus: Respectful Communication
- 1.4.6 In-Focus: Patient Confidentiality and HIPAA
- 1.4.7 Activity: Communication
- 1.4.8 Episode 1: The Residents
- 1.5.4 In-Focus: Boundaries
- 1.6.1 Close-Up: The Healthcare Team
- 1.6.1a Read and Review: Effective and Ineffective Teams (VA Tailoring)
- 1.6.2 Activity: The Health Care Team
- 1.6.3 in-Focus: The Interdisciplinary Team
- 1.6.4 in-Focus: Procedures
- 1.6.5 Activity: Introduction to Procedures
- 1.7.1 In-Focus: Purposes and Goals of Long-Term Care
- 1.7.1a Read and Review: The Long-Term Care Facility as Home (VA Tailoring)
- 1.7.2 In-Focus: Affordable Care
- 1.7.3 Activity: The Long-Term Care Environment
- 1.7.4 In-Focus: Understanding the Survey Process

- 1.7.8 Close-Up: Taking Care of Yourself
- 1.7.9 Post: How do you "de-stress"?
- 2.1.5 In-Focus: Delegation Guidelines
- 2.1.6 Activity: Delegation Guidelines
- 2.2.14 Episode 4: Introductions
- 2.4.1 In-Focus: The Care Plan
- 3.1.8 Activity: Documentation
- 3.2.1 Episode 9: Old Man River
- 3.2.2 In-Focus: What Do You See?
- 3.2.3 Activity: Subjective or Objective Information
- 3.2.4 Post: Subjective and Objective Information
- 3.2.5 Read and Review: Basic Observations
- 3.2.6 In-Focus: Reporting vs. Recording
- 3.2.7 Activity: Reporting and Recording
- 3.2.7a Read and Review: Common Medical Abbreviations (VA Tailoring)
- 3.6.4 Episode 16: Dignity
- 3.8.8 In-Focus: Self-Care
- 4.7.3 In-Focus: Omnibus Budget Reconciliation Act
- 6.1.3 In-Focus: Assisted Living
- 6.1.4 In-Focus: The Service Plan
- 6.1.5 Read and Review: Timothy's Service Plan
- 6.1.6 Activity: Assisted Living
- 7.5.2a Read and Review: Burnout (VA Tailoring)
- 8.1.2a Read and Review: Coping (VA Tailoring)
- 8.1.3 Post: Asking for Assistance
- 9.5.1 In-Focus: Shift Change
- 9.5.2 Activity: Shift Change

Unit II - Communication and Interpersonal Skills

- Understand the importance of written, verbal and non-verbal communication.
- Identify barriers to communication.
- Demonstrate methods used by the Health Care Team to communicate among themselves.
- Demonstrate techniques to communicate with the sensoryimpaired client
- Demonstrate techniques to communicate with the families of clients.
- Develop interpersonal skills to use while functioning as a nurse aide.

- 1.4.1 in-Focus: Maslow's Hierarchy of Needs
- 1.4.2 Activity: Maslow's Hierarchy of Needs
- 1.4.4 In-Focus: Respectful Communication
- 1.4.5 Read and Review: Phone Skills
- 1.4.5 Framing: Call Light (VA Tailoring)
- 1.4.7 Activity: Communication
- 1.4.7 Framing: Message, Sender, Receiver (VA Tailoring)
- 1.4.8 Episode 1: The Residents
- 1.6.1 Close-Up: The Healthcare Team
- 1.6.1a Read and Review: Effective and Ineffective Teams (VA Tailoring)
- 1.6.2 Activity: The Health Care Team
- 1.6.3 In-Focus: The Interdisciplinary Team
- 1.6.4 In-Focus: Procedures
- 1.6.5 Activity: Introduction to Procedures
- 2.1.2 Episode 2: 28 Minutes to the Top
- 2.1.5 In-Focus: Delegation Guidelines
- 2.1.6 Activity: Delegation Guidelines

- Demonstrate conflict management strategies.
- 2.2.14 Episode 4: Introductions
- 2.4.1 in-Focus: The Care Plan
- 2.5.6 Episode 6: Stuck in Traction
- 2.7.8 In-Focus: Resident Discharge
- 2.7.9 Episode 7: The Long Road Back ['
- 3.1.3 In-Focus: A Closer Look Into the Nursing Process
- 3.1.4 Activity: The Nursing Process
- 3.1.5 Episode 8: Meet Frank
- 3.1.7 In-Focus: Recording and Reporting
- 3.1.8 Activity: Documentation
- 3.2.1 Episode 9: Old Man River
- 3.2.2 In-Focus: What Do You See?
- 3.2.3 Activity: Subjective or Objective Information
- 3.2.4 Post: Subjective and Objective Information
- 3.2.5 Read and Review: Basic Observations
- 3.2.6 In-Focus: Reporting vs. Recording
- 3.2.7 Activity: Reporting and Recording
- 3.2.7a Read and Review: Common Medical Abbreviations (VA Tailoring)
- 3.2.8 Episode 10: The Physical
- 3.3.3 Episode 11: C.O.P.D.
- 3.3.7 Episode 12: Oxygen
- 3.4.2 Episode 12: Panther Mount
- 3.6.1 Episode 15: The Specimen
- 3.6.4 Episode 16: Dignity
- 3.6.6 in-Focus: Positive Thinking
- 3.6.7 Post: Positive Thinking
- 4.1.2 Episode 21: Polar Bear's Disease
- 4.1.2a Read and Review: Resident Behavior (VA Tailoring)
- 4.1.3 Read and Review: Helen's Care Plan
- 4.1.4 Episode 22: Life is Art
- 4.1.6 Activity: Mental Health Needs of Residents
- 4.1.6a Read and Review: Defense Mechanisms (VA Tailoring)
- 4.2.2 Episode 23: Discrimination
- 4.2.2a Read and Review: Resolving Grievances and Disputes (VA Tailoring)
- 4.2.3 in-Focus: Addressing Discrimination
- 4.4.1Episode 25: On the inside
- 4.4.2 Post: Any advice?
- 4.6.1 Episode 27: Ghost Bird
- 4.6.2 Post: Working with Combative Residents
- 4.6.3 In-Focus: Riding the Emotional Roller Coaster
- 4.7.5 Episode 28: Long Lost Sisters
- 4.7.6 In-Focus: It's Easy to Forget: Mild Dementia
- 5.1.2 Episode 29: Martha and Celly
- 5.2.4 Episode 30: Blood Bugs
- 5.2.7 Post: How Would You Help Martha?
- 5.3.4 Episode 31: Mealtime
- 5.4.5 Episode 32: Giddy Up!

- 5.4.6 Post: Glddy Up!
- 5.5.4 Episode 34: Falling Apart
- 5.5.5 Close-Up: Working with Visually Impaired Patients
- 5.5.6 In-Focus: Hearing and Visual Impairment
- 5.5.7 Activity: Working with Residents with Hearing and Vision Loss
- 5.5.7a Read and Review: Working with Residents Who Have Lost a Sense of Touch, Smell, or Taste (VA Tailoring)
- 5.7.1 Episode 35: ADL With Martha
- 5.7.2 Post: A "Beginner's Mistake"
- 5.8.3 Episode 36: Anniversary
- 5.8.5 Post: Will Martha Meet Her Goals?
- 6.1.2 Episode 37: Timothy and Simone
- 6.1.7 Episode 38: Always Knock
- 6.1.8 In-Focus: Resident Sexuality
- 6.1.9 Activity: Residents' Sexuality
- 6.3.6 Episode 41: Caring for Timothy
- 6.7.6 Episode 44: To Make a Difference
- 6.7.7 In-Focus: Communication
- 6.7.8 In-Focus: Cross Cultural Communication
- 6.7.8a Read and Review: Providing Culturally Sensitive Care to Residents (VA Tailoring)
- 6.7.9 Activity: Best Practices for Communicating with Residents
- 7.2.7 In-Focus: It's Not What You Say, But How You Say It
- 7.2.8 In-Focus: Instead of Correcting, Try Redirecting
- 7.2.9 Activity: Communicating with the Alzheimer's Patient
- 7.2.9a Read and Review: Communicating with Cognitively Impaired Residents (VA Tailoring)
- 7.2.9a Framing: Validation Techniques and Reality Orientation (VA Tailoring)
- 7.5.2a Read and Review: Burnout (VA Tailoring)
- 7.5.2a Framing: Resources to Assist with Stress Management (VA TailorIng)
- 8.1.2 Episode 55: Michelle and Her Brother
- 8.1.3 Post: Asking for Assistance
- 8.1.4 Close-Up: Introduction to Developmental Disabilities
- 8.1.5 In-Focus: Developmental Disabilities
- 8.2.1 Episode 56: Incontinence
- 9.1.2 Episode 61: Beth and Malik
- 9.2.5 Episode 62: Prepping for Birth
- 9.3.2 Episode 63: A New Life
- 9.4.3 In-Focus: Pain
- 9.4.5 Activity: Pain and Pain Management
- 9.4.5 Post: Your Experience of Pain
- 9.5.1 In-Focus: Shift Change
- 9.5.2 Activity: Shift Change
- 9.5.11 Episode 64: Little Frankie

Unit III - Infection Control

- Describe the chain of infection.
- Identify factors contributing to occurrence of infections.
- Explain the early signs and symptoms of infection.
- Describe Standard Precautions.
- Demonstrate proper hand washing technique.
- Demonstrate proper technique for donning and removing personal protective equipment.
- Describe the proper disposal of infectious waste materials in the health care facility.

- 2.4.2 Episode 5: Observe and Report
- 2.4.5 In-Focus: Signs of Infections in Wounds
- 2.4.6 In-Focus: Introduction to Infection Control
- 2.4.7 Activity: Infection Prevention Methods
- 2.4.8 in-Focus: Introduction to Hand Washing
- 2.4.9 Close-Up: Handwashing
- 2.4.9a Read and Review: Hand Hygiene (Hand Washing) (VA Skill)
- 2.5.1 Close-Up: Infection Control
- 2.5.1 Framing: Most Common Infections in Health Care Facilities (VA Tailoring)
- 2.5.2 Activity: Identify Infection Risks and Signs to be Treated
- 2.5.3 In-Focus Blood Borne Pathogens
- 2.5.4 Close-Up: Clean and Sterile Gloving
- 2.5.5 Simulation Activity: Putting On & Taking Off Gloves
- 2.5.6 Episode 6: Stuck in Traction
- 2.5.7 Post: Name One Thing You Will Pay Special Attention
 To
- 3.5.1 In-Focus: Frank's Cancer
- 3.5.2 Episode 14: Infection Control
- 3.5.3 In-Focus: Isolation Precautions
- 3.5.3a Read and Review: Psychological Effects of Isolation (VA Talloring)
- 3.5.4 Activity: Chain of Infection
- 3.5.5 Activity: Cancer and Transmission Based Precautions
- 4.2.4 In-Focus: The Immune System
- 4.2.5 Activity: Elements of the Immune System
- 4.2.5 Framing: Nosocomial Infections (VA Tailoring)
- 4.2.6 In-Focus: The Human immunodeficiency Virus
- 4.2.7 Activity: What are HIV and AIDS?
- 4.2.8 Close-up: Review of Blood Borne Pathogens and Sharps Disposal
- 4.2.9 in-Focus: Personal Protective Equipment
- 4.2.9a Read and Review: Donning and Removing PPE (Gown and Gloves) (VA Skills)
- 4.4.1 Episode 25: On the Inside
- 4.4.2 Post: Any advice?
- 4.4.3 in-Focus: An Immune System to the Rescue...or Maybe Not
- 4.4.4 Activity: An Immune System Under Stress
- 4.4.6 Close-Up: Compromised Immune System
- 4.5.1 Episode 26: Signs of Infection
- 4.5.2 In-Focus: The Infection Cycle
- 4.5.3 Activity: Infection Control: Sharps
- 4.5.4 Close-Up: Why is Cleanliness of the Facility So important and What You Can Do About It
- 4.5.5 In-Focus: Sanitize and Clean All Unseen Germs
- 4.5.6 Activity: Clean vs. Dirty
- 4.5.7 Post: Teach Infection Prevention or Control

- 4.5.7 Framing: Parasites (VA Tailoring)
- 6.6.1 In-Focus: Mealtimes and Preventing Foodborne Illnesses
- 8.2.1 Episode 56: Incontinence
- 8.2.9 In-Focus: Urine Testing
- 8.2.10 In-Focus: Diarrhea and Bacterial Infections
- 8.2.11 Simulation Activity: Double Bagging Infectious Waste
- 9.5.5 Activity: Infection Control
- In Class Activity: Review Facility's Infection Prevention and Control Program

Unit IV - Safety Measures

- Explain the OSHA Bloodborne Pathogen Standards.
- Identify risk factors for common accidents in health care facilities.
- Identify safety measures to prevent falls in health care facilities.
- Discuss measures to prevent various common accidents in health care facilities.
- Demonstrate how to deal with an obstructed airway.
- Discuss how to avoid the need for restraints in accordance with current professional standards.
- Demonstrate how to use good body mechanics when caring for clients.
- Discuss how to prevent and react to fire and other disasters in a health care facility.

- 1.7.5 In-Focus: In an Emergency
- 1.7.5a Read and Review: Emergency Evacuations (VA Tailoring)
- 1.7.5b Read and Review: Fire Extinguishers (VA Tailoring)
- 1.7.5c Read and Review: Burn Risks (VA Tailoring)
- 1.7.5c Framing: Burn Prevention (VA Tailoring)
- 1.7.6 Activity: Fire Safety & Disaster Planning
- In Class Activity Tour of the Facility with a Focus on Safety and Emergency Procedures
- 2.3.2 Close-Up: Traumatic Accidents & Emergency Care
- 2.3.3 In-Focus: Basic Emergency Care
- 2.3.4 In-Focus: Rescue Breathing
- 2.3.4a Read and Review: Cardiopulmonary Resuscitation (CPR)
- 2.3.6 In-Focus: Fractures
- 2.6.14 Close-Up: Body Mechanics
- 2.7.3 In-Focus: Basic Transfers
- 4.2.8 Close-up: Review of Blood Borne Pathogens and Sharps Disposal
- 4.2.9 In-Focus: Personal Protective Equipment
- 4.2.9a Read and Review: Donning and Removing PPE (Gown & Glove) (VA Skills)
- 4.5.4 Close-Up: Why is Cleanliness of the Facility So Important and What You Can Do About it
- 4.5.5 In-Focus: Sanitize and Clean All Unseen Germs
- 4.5.6 Activity: Clean vs. Dirty
- 4.7.1 In-Focus: Restraints
- 4.7.2 Activity: Safe Restraint Use
- 5.5.1 Episode 33: Black Spots
- 5.5.2 In-Focus: Fails
- 5.5.2a Read and Review: Incident and Accident Reports (VA Tailoring)
- 5.5.3 Simulation Activity: Stopping a Fall
- 5.5.4 Episode 34: Falling Apart
- 5.5.5 Close-Up: Working with Visually impaired Patients
- 5.5.6 In-Focus: Hearing and Visual Impairment

- 5.5.7 Activity: Working with Residents with Hearing and Vision Loss
- 5.5.7a Read and Review: Working with Residents Who Have Lost a Sense of Touch, Smell, or Taste (VA Tailoring)
- 5.5.9 In-Focus: The Risk Management Mindset
- 5.5.10 Activity: Developing a Risk Management Mindset
- 5.5.11 Read & Review: Poisons
- 6.6.8 Close-Up: Heimlich Maneuver
- 6.6.9 Post: Mealtimes
- 7.5.4 Episode 51: Chemical Restraint
- 7.5.5 Activity: Dangers of Restraints

Unit V - Emergency Measures

- Identify the basic steps a nurse aide should take in any emergency
- situation.
- Identify client symptoms indicative of an emergency.
- Demonstrate how a nurse aide responds to an unconscious client.
- Identify the signs/symptoms of various client medical emergencies.
- Demonstrate the appropriate nurse aide response to various client medical emergencies
- (optional) Demonstrate how to perform CPR on an adult client.

- 1.3.2 In-Focus: Getting Older
- 1.3.3 Activity: The Older Adult
- 1.7.5 In-Focus: In an Emergency
- 1.7.5a Read and Review: Emergency Evacuations (VA Tailoring)
- 1.7.5a Framing: MSDS (VA Tailoring)
- 1.7.6 Activity: Fire Safety & Disaster Planning
- 1.7.6a Read and Review: Fire Extinguishers (VA Tailoring)
- 1.7.6b Read and Review Smoking Safety (VA Tailoring)
- 1.7.6c Read and Review: Burn Risks (VA Tailoring)
- 2.3.2 Close-Up: Traumatic Accidents & Emergency Care
- 2.3.3 In-Focus: Basic Emergency Care
- 2.3.3a Post: Nosebleeds and Bleeding (VA Tailoring)
- 2.3.3a: Framing: Stopping a Nosebleed (VA Tailoring)
- 2.3.4 In-Focus: Rescue Breathing
- 2.3.4a Read and Review: Cardiopulmonary Resuscitation (CPR)
- 2.3.6 In-Focus: Fractures
- 3.4.1 Close-Up: Cardiovascular Disease Inside the Body
- 3.4.4 in-Focus: Care for Cardiovascular Disorders
- 3.4.5 Activity: The Cardiovascular System and its Disorders
- 3.8.2 Close-Up: Signs and Symptoms of a Heart Attack
- 5.1.4 in-Focus: The Endocrine System
- 5.1.5 in-Focus: Understanding Diabetes
- 5.1.6 Activity: The Endocrine System and Diabetes Overview
- 5.2.6 Review: An Overview of Hyperglycemia and Hypoglycemia
- 5.5.2 In-Focus: Falls
- 5.5.3 Simulation Activity: Stopping a Fall
- 6.2.1 Episode 39: Stroke
- 6.2.2 In-Focus: Strokes: Definition, Warning Signs, and Treatment
- 6.2.3 Read & Review: Signs and Symptoms of a Stroke
- 6.2.4 Close-Up: The Nervous System
- 6.2.5 Activity: Nervous System Disorders/Strokes
- 6.6.8 Close-Up: Heimlich Maneuver

6.6.8a Read and Review: Clearing the Obstructed Airway,
 The Unconscious Adult (VA Tailoring)

Unit VI - Client Rights

- Identify the basic rights of all clients.
- Identify specific rights of clients in longterm care facilities.
- Explain how HiPAA effects practice of the nurse aide.
- Demonstrate actions of the nurse aide that promote client rights in long-term care facilities.
- Discuss strategles to provide privacy and maintain confidentiality.
- Identify actions the nurse alde can take to avoid accusations of abuse, mistreatment and neglect toward clients.
- Describe the consequences of a report of abuse, mistreatment or neglect against a nurse aide.
- Describe strategies the nurse aide can use to promote client independence.
- Explain how the nurse aide can modify care of the client to promote culturally sensitive care.
- Identify developmental tasks for each age group.
- Discuss how the changes of late adulthood effect the psychosocial and physical care of the client in long-term care.

- 1.2.1 Close-Up: You Are Critical to Patients Families and Healthcare
- 1.2.6 In-Focus: An Exceptional CNA
- 1.2.7 In-Focus: Being A Professional
- 1.2.8 Activity: Self-Assessment
- 1.3.2 In-Focus: Getting Older
- 1.3.2a Read and Review: Normal Age-Related Changes (VA Tailoring)
- 1.3.3 Activity: The Older Adult
- 1.3.4 Post: Think About Yourself at Age 85 Again
- 1.4.6 In-Focus: Patient Confidentiality and HIPAA
- 1.5.1 in-Focus: Legal and Ethical Responsibilities
- 1.5.2 Post: Was Evy Justified? Why? Why Not?
- 1.5.3 In-Focus: Resident Rights and Legal Responsibilities
- 1.5.3a Read and Post: Residents' Rights (VA Tailoring)
- 1.5.4 In-Focus: Boundaries
- 1.5.5 Activity: Residents' Rights
- 1.5.6 In-Focus: Your Legal and Ethical Responsibilities Regarding Abuse
- 1.5.7 In-Focus: Ethical Responsibilities
- 1.5.8 Activity: Elder Abuse
- 1.7.1 in-Focus: Purposes and Goals of Long-Term Care
- 1.7.1a Read and Review: The Long-Term Care Facility as Home (VA Talloring)
- 1.7.3 Activity: The Long-Term Care Environment
- 1.7.4 In-Focus: Understanding the Survey Process
- 3.3.4 In-Focus: Take a Deep Breath
- 4.7.3 In-Focus: Omnibus Budget Reconciliation Act
- 4.7.4 Activity: Legal Rights and Responsibilities
- 6.7.8 In-Focus: Cross Cultural Communication
- 6.7.8a Read and Review: Providing Culturally Sensitive Care to Residents (VA Tailoring)
- 8.4.1 Episode 59: Bruises
- 8.4.2 Post: What would you do?
- 8.4.3 Close-Up: Neglect and Abuse
- 8.4.4 In-Focus: There's No Excuse for Resident Abuse
- 8.5.1 Episode 60: Consequences
- 8.5.2 Post: Another Outcome
- 8.5.3 In-Focus: Abuse: Legal Recourse and Obligation to Report
- 8.5.4 Close-Up: Reporting Requirements for Neglect and Abuse

- Explain the beginning and ending steps for the nurse alde when providing care to a client.
- Recognize changes in body functioning and the importance of reporting these to the appropriate supervisor.
- Describe how the nurse aide should care for the client's room and his environment in the long-term care facility
- Demonstrate how to correctly make an occupied and an unoccupied bed, including disposal of linen.
- Demonstrate how to accurately measure, record and report vital signs, height and weight
- Demonstrate various methods to identify and report client pain.
- Demonstrate accurate measurement, recording and reporting fluid intake and output.
- Demonstrate accurate measurement and recording of food intake.

Beginning and Ending Steps

- 1.6.4 In-Focus: Procedures
- 1.6.5 Activity: Introduction to Procedures

Changes in Body Functioning

- 1.3.2 In-Focus: Getting Older
- 1.3.2a Read and Review: Normal Age-Related Changes (VA Tailoring)
- 2.3.8 in-Focus: Care for Musculoskeletal Disorders
- 2.3.7a Read and Review: Anatomy of the Musculoskeletal System (VA Talloring)
- 2.3.8 Activity: Symptoms, Injury, and Care of Musculoskeletal Disorders
- 2.4.2 Episode 5: Observe and Report
- 2.4.5 in-Focus: Signs of Infections in Wounds
- 2.5.6 Episode 6: Stuck in Traction
- 2.5.7 Post: Name One Thing You Will Pay Special Attention
 To
- 3.1.2 In-Focus: Frank
- 3.2.1 Episode 9: Old Man River
- 3.2.2 In-Focus: What Do You See?
- 3.2.3 Activity: Subjective or Objective Information
- 3.2.4 Post: Subjective and Objective Information
- 3.2.5 Read and Review: Basic Observations
- 3.2.6 In-Focus: Reporting vs. Recording
- 3.2.7 Activity: Reporting and Recording
- 3.3.1 In-Focus: The Respiratory System & Its Disorders
- 3.3.2 Activity: The Respiratory System & Its Disorders
- 3.3.3 Episode 11: C.O.P.D.
- 3.3.4 In-Focus: Take a Deep Breath
- 3.3.7 Episode 12: Oxygen
- 3.4.1 Close-Up: Cardiovascular Disease Inside the Body
- 3.4.5a Read and Review: The Structure and Function of the Heart (VA Tailoring)
- 3.4.4 In-Focus: Care for Cardiovascular Disorders
- 3.4.5 Activity: The Cardiovascular System and its Disorders
- 3.5.1 In-Focus: Frank's Cancer
- 3.5.2 Episode 14: Infection Control
- 3.6.1 Episode 15: The Specimen
- 3.6.2 In-Focus: Taking A Sputum Specimen
- 3.6.3 Simulation Activity: Collecting a Sputum Specimen
- 3.7.2 In-Focus: IV Therapy and Chest Tubes
- 3.7.3 Close-Up: Care for Patients with Chest Tubes
- 3.8.2 Close-Up: Signs and Symptoms of a Heart Attack
- 3.8.3. In-Focus: I'm the One
- 4.1.2 Episode 21: Poiar Bear's Disease
- 4.1.3 Read and Review: Helen's Care Plan
- 4.1.4 Episode 22: Life is Art
- 4.2.4 (n-Focus: The Immune System
- 4.2.5 Activity: Elements of the Immune System

- 4.2.6 In-Focus: The Human Immunodeficiency Virus
- 4.4.1 Episode 25: On the Inside
- 4.4.2 Post: Any advice?
- 4.5.1 Episode 26: Signs of Infection
- 4.6.1 Episode 27: Ghost Bird
- 4.6.5 In-Focus: Mental Health Issues: Anxiety and Substance Abuse
- 4.6.6 Close-Up: The Effects of Drug and Alcohol Abuse on the Body
- 4.6.7 In-Focus: Suicide
- 4.7.5 Episode 28: Long Lost Sisters
- 4.7.6 in-Focus: It's Easy to Forget: Mild Dementia
- 5.1.2 Episode 29: Martha and Celly
- 5.1.3 Close-Up: Overview of Diabetes and Obesity
- 5.1.4 In-Focus: The Endocrine System
- 5.1.5 In-Focus: Understanding Diabetes
- 5.1.6 Activity: The Endocrine System and Diabetes Overview
- 5.2.1 In-Focus: Digestive System Disorders
- 5.2.2 Read & Review: An Overview of Digestive System Disorders
- 5.2.3 Activity: The Digestive System and Its Disorders
- 5.2.6 Review: An Overview of Hyperglycemia and Hypoglycemia
- 5.3.2 in-Focus: Food Guidelines for Diabetics
- 5.3.3 Activity: A Diabetic's Diet
- 5.5.1 Episode 33: Black Spots
- 5.5.2 In-Focus: Falls
- 5.5.5 Close-Up: Working with Visually impaired Patients
- 5.5.6 In-Focus: Hearing and Visual Impairment
- 5.5.7 Activity: Working with Residents with Hearing and Vision Loss
- 5.5.9 In-Focus: The Risk Management Mindset
- 5.5.10 Activity: Developing a Risk Management Mindset
- 5.5.11 Read & Review: Poisons
- 5.6.1 In-Focus: Pressure Ulcers Stages and Treatment
- 5.6.2 Close-Up: Pressure Ulcers
- 5.6.3 In-Focus: Pressure Ulcer: Prevention and Treatment
- 5.6.3a Read and Review: Pressure Reducing Devices (VA Tailoring)
- 5.6.4 Activity: Pressure Ulcers
- 5.7.6 In-Focus: Chronic and Acute Illness
- 5.8.4 In-Focus: How Am i Doing?
- 5.8.5 Post: Will Martha Meet Her Goals?
- 6.2.1 Episode 39: Stroke
- 6.2.2 In-Focus: Strokes: Definition, Warning Signs, and Treatment
- 6.2.3 Read & Review: Signs and Symptoms of a Stroke
- 6.2.4 Close-Up: The Nervous System
- 6.6.7 In-Focus: Aspiration
- 7.1.2 Close-Up: Introduction to Dementia and Alzheimer's

- 7.1.4 Close-Up: Introduction to Mild Dementia or Alzheimer's
- 7.2.1 Close-Up: Introduction to Moderate Dementia or Alzheimer's
- 7.5.1 Close-Up: Introduction to Severe Dementia or Alzheimer's
- 7.6.2 In-Focus: Caring for Unresponsive Patients
- 7.6.5 In-Focus: Enteral Nutrition Feeding Tubes
- 7.6.5a Read and Review: Feeding Tubes (VA Tailoring)
- 7.6.5b Read and Review: IV Therapy and Peripherally Inserted Central Catheters (PICC) (VA Tailoring)
- 7.6.6 Activity: Feeding Tubes
- 7.8.2 In-Focus: Final Days Recognizing the Signs of Death
- 8.2.2 In-Focus: The Urinary System
- 8.2.4 In-Focus: Other Urinary Disorders
- 8.2.10 In-Focus: Diarrhea and Bacterial Infections
- 8.3.2 Close-Up: Kidney Disease and Dialysis
- 8.3.4 Activity: Urinary Disorders & Dialysis
- 8.3.5 Post: Care for Michelle
- 8.4.4 In-Focus: There's No Excuse for Resident Abuse
- 8.5.4 Close-Up: Reporting Requirements for Neglect and Abuse
- 9.1.3 In-Focus: The Reproductive System and its Disorders
- 9.1.4 In-Focus: Sexually Transmitted Diseases
- 9.1.5 In Focus: The Enlarged Prostate
- 9.1.6 Activity: The Reproductive System and Sexuality Transmitted Diseases
- 9.2.1 Close-Up: Overview of Pregnancy
- 9.2.2 In-Focus: 9 Months
- 9.2.3 In Focus: Your Role in Pregnancy
- 9.2.4 Activity: 9 Months
- 9.4.1 In-Focus: Neonatal Care

The Resident's Room and the Long-Term Care Environment

- 1.7.1 In-Focus: Purposes and Goals of Long-Term Care
- 1.7.1a Read and Review: The Long-Term Care Facility as Home (VA Tailoring)
- 1.7.3 Activity: The Long-Term Care Environment
- 1.7.7 Activity: The Resident's Room
- 2.1.3 In-Focus: Admissions
- 2.1.4 Activity: Admissions
- 4.5.4 Close-Up: Why is Cleanliness of the Facility So important and What You Can Do About it
- 4.5.5 In-Focus: Sanitize and Clean All Unseen Germs
- 6.2.2 In-Focus: Admissions

Bed Making

- 2.1.7 In-Focus: Changing Bed Linens
- 2.1.11 Simulation Activity: Making an Unoccupied Bed
- 2.5.6 Episode 6: Stuck in Traction
- 3.6.5 In-Focus: Bed Rails

- 3.6.5 Framing: Measures to Prevent Suffocation (VA Talloring)
- 3.6.5a Read and Review: Entrapment (VA Tailoring)
- 5.6.3a Read and Review: Pressure Reducing Devices (VA Tailoring)
- 6.3.7 in-Focus: Making an Occupied Bed
- 6.3.8 Simulation Activity: Making an Occupied Bed

Vital Signs and Height and Weight

- 2.2.1 Close-Up: Introduction to Vital Signs
- 2.2.2 In-Focus: Introduction to Vital Signs
- 2.2.3 Activity: Vital Signs
- 2.2.4 In-Focus: Temperature
- 2.2.5 Simulation Activity: Measuring and Recording Temperature
- 2.2.6 In-Focus: Pulse
- 2.2.6a Read and Review: Counts and Records Radial Pulse (VA Skills)
- 2.2.7 In-Focus: Respiration
- 2.2.7a Read and Review: Counts and Records Respirations (VA Skills)
- 2.2.9 in-Focus: Blood Pressure
- 2.2.9a Read and Review: Measures and Records Manual Blood Pressure (VA Skill)
- 2.2.9b Read and Review: Alternative Blood Pressure Measurements (VA Tailoring)
- 2.2.9b Framing: Important Considerations for Blood Pressure Readings (VA Tailoring)
- 2.2.11 Episode 3: The Exam
- 2.2.12 In-Focus: Physical Exam
- 2.2.13 Activity: Processes in the Physical Exam
- 3.2.8 Episode 10: The Physical
- 3.2.9 Simulation Activity: Measuring Weight and Height
- 3.2.9a Read and Review: Measure the Height of a Resident in Bed (VA Tailoring)
- 3.2.9b Read and Review: Measure the Weight of a Non-Ambulatory Resident (VA Tailoring)
- 3.2.9c Read and Review: Measures and Records Weight of Ambulatory Client (VA Skills)
- 3.4.1 Close-Up: Cardlovascular Disease Inside the Body
- 3.4.1a Read and Review: The Structure and Function of the Heart (VA Skills)
- 3.4.4 In-Focus: Care for Cardiovascular Disorders
- 3.4.5 Activity: The Cardiovascular System and its Disorders

Pain

- 9.4.3 In-Focus: Pain
- 9.4.3a Read and Review: Pain and Discomfort (VA Tailoring)
- 9.4.4 Activity: Pain and Pain Management
- 9.4.5 Post: Your Experience of Pain
- 9.5.6 In-Focus: Care for the Mother

9.5.7 Activity: Care for the Mother

Food and Fluid Intake and Output

- 5.3.1 In-Focus: Food is Medicine
- 5.3.5 in-Focus: Procedure for Monitoring Intake and Output
- 5.3.6 Activity: Monitoring Intake and Output
- 5.3.6 Framing: An important Note for Urinary Output (VA Tailoring)
- 6.6.4 in-Focus: Feeding a Resident
- 6.6.4a Read and Review: Promoting Nutrition and Safe Eating (VA Tailoring)
- 6.6.4b Read and Review: Feeds Client Who Cannot Feed Self (VA Skills)
- 6.6.4b Framing: Calculating Amount Eaten (VA Talloring)
- 6.7.8 In-Focus: Cross Cultural Communication
- 6.7.8a Read and Review: Providing Culturally Sensitive Care to Residents (VA Talloring)
- 8.2.5 In-Focus: Measure and Record Urinary Output
- 8.2.5a Read and Review: Measures and Records Urlnary
 Output (VA Skills)
- 9.5.9 In-Focus: Breast/Bottle Feeding
- 9.5.10 Activity: Feed the Baby

Unit VIII - Personal Care Skills

- Identify the components of personal care.
- Explain routine personal care for both morning and bedtime.
- Describe the guidelines for assisting the client with personal care.
- Demonstrate how to provide a modified bed bath.
- Demonstrate how to provide mouth care.
- Demonstrate how to clean upper or lower dentures.
- Demonstrate proper grooming of a client.
- Demonstrate how to provide fingernail care.
- Demonstrate how to provide foot care.

Components of Personal Care and AM/PM Care

- 1.3.2 in-Focus: Getting Older
- 1.3.3 Activity: The Older Adult
- 1.3.4 Post: Think About Yourself at Age 85 Again.
- 1.6.4 In-Focus: Procedures
- 1.6.5 Activity: Introduction to Procedures
- 5.7.1 Episode 35: ADL With Martha
- 5.7.3 Morning Afternoon and Night

Bathing

- 2.7.1 In-Focus: Bed Baths
- 4.3.2 In-Focus: Assisting with a Bath or Shower
- 4.3.2 Framing: Diaphoresis (VA Tailoring)
- 4.3.3 Simulation Activity: Assisting with a Tub Bath
- 4.3.4 Simulation Activity: Assisting with a Shower
- 4.3.4a Read and Review: Whiripool Bath (VA Tailoring)
- 6.4.8 In-Focus: Bathing for Bedridden Residents
- 6.4.8a Read and Review: Gives Modified Bed Bath (Face and One Arm, Hand and Underarm) (VA Skills)
- 9.4.2 Simulation Activity: Giving a Baby a Bath

Mouth Care

- 3.6.8 In-Focus; Mirror, Mirror
- 3.6.8a Read and Review: Provides Mouth Care (VA Skills)

- Demonstrate how to dress client with weak side.
- Demonstrate how to provide perineal care for a female client
- Demonstrate how to measure and record urine output.
- Demonstrate how to provide catheter care for a female client
- Demonstrate how to assist the client with a bedpan.
- Describe how to collect urine and stool specimens.
- Demonstrate how to feed client who cannot feed self.
- Measure and record food intake
- Accurately describe actions of the nurse aide to prevent client dehydration.
- Discuss pressure sores, including formation, staging, prevention and reporting responsibilities of the nurse aide.
- Demonstrate the various positions for the client in bed.
- Demonstrate moving and positioning a client in bed with and without a drawsheet.
- Demonstrate transfer of client from be to wheelchair using a transfer belt.
- Demonstrate assisting the client to ambulate using transfer belt.

- 3.6.8a Framing: Pay Attention to the Resident's Teeth and Gums (VA Tailoring)
- 3.6.8b Read and Review: Cleans Upper and Lower Denture (VA Skills)
- 3.6.10 Simulation Activity: Flossing Teeth
- 3.6.12 Simulation Activity: Oral Care for an Unconscious Persons
- 3.6.12 Framing: Lemon Glycerin Swab, Stomatitis, Dental Caries, Partial Plate, and Mouth Care for the Edentulous Client (VA Tailoring)

Grooming

- 3.6.8 In-Focus; Mirror, Mirror
- 4.3.5 In-Focus: Groom in Your Room
- 4:3.5a Read and Review: Caring for Facial Hair and Applying Make-Up (VA Tailoring)
- 4.3.5a Framing: important Reminders for Shaving (VA Tailoring)
- 4.3.6 Activity: Washing Hair and Grooming
- 4.3.7 Simulation Activity: Washing Hair

Nail Care and Foot Care

- 5.4.1 Close-Up: Diabetic Foot Care
- 5.4.2 In-Focus: Foot Care
- 5.4.2a Read and Review: Provides Foot Care on One Foot (VA Skills)
- 6.4.5 In-Focus: Nail Care
- 6.5.3 Close-Up: Skin Care for Older Adults

Dressing and Undressing

- 6.7.2 Close-Up: Dressing and Undressing Patients
- 6.7.2 Framing: Important Reminders for Dressing (VA Tailoring)
- 6.7.2a Read and Review: Dresses Client with Affected (Weak) Right Arm (VA Skills)
- 6.7.2b Read and Review: Assistive Devices for Dressing (VA Talloring)

Perineal Care and Catheter Care

- 6.4.1 Close-Up: Urination & Bowel Elimination
- 6.4.2. In-Focus: Toileting Aids
- 6.4.3 In-Focus: Perineal Care
- 6.4.3a Read and Review: Provides Perineal Care (Peri-Care) for Female (VA Skills)
- 6.4.4 Activity: Toileting
- 6.4.5 Simulation Activity: Perineal Care for Males
- 6.4.9 In-Focus: Catheter Care
- 6.4.9a Read and Review: Provides Catheter Care for Female (VA Skills)
- 6.4.11 Simulation Activity: Applying a Condom Catheter

Measure and Record Urine Output

- 8.2.5 In-Focus: Measure and Record Urinary Output
- 8.2.5a Read and Review: Measures and Records Urinary Output (VA Skills)

Bedpan

- 3.6.13 In-Focus: Assisting with Elimination
- 3.6.13a Read and Review: Assists with Use of a Bedpan (VA Skill)
- 3.6.15 Simulation Activity: Assisting with a Commode
- 6.4.1 Close-Up: Urination & Bowel Elimination
- 6.4.2. In-Focus: Toileting Aids

Urine and Stool Specimens and Bowel and Bladder Care

- 7.7.1 inFocus: Care of Bodily Functions: Bowel Elimination
- 7.7.2 Simulation Activity: Giving A Commercially Prepared Enema
- 7.7.4: In Focus: Urinary and Bowel Incontinence
- 7.7.5 Activity: Elimination
- 7.7.5 Framing: Common Reasons for a Colostomy (VA Tailoring)
- 7.7.6 Read and Review: Stool Specimens
- 8.2.1 Episode 56: Incontinence
- 8.2.2 in-Focus: The Urinary System
- 8.2.4 in-Focus: Other Urinary Disorders
- 8.2.6 Simulation Activity: Collecting a Routine Urine Specimen
- 8.2.7 Simulation Activity: Collecting a Clean Catch Urine Specimen
- 8.2.8 Simulation Activity: Emptying a Urinary Drainage Bag
- 8.2.9 In-Focus: Urine Testing
- 8.2.10 In-Focus: Diarrhea and Bacterial Infections
- 8.2.11 Simulation Activity: Double Bagging Infectious Waste
- 8.3.1 Episode 58: Dialysis
- 8.3.2 Close-Up: Kidney Disease and Dialysis
- 8.3.3 Activity: Urinary Disorders & Dialysis
- 8.3.4 Post: Care for Michelle
- 8.3.4 Framing: Reminders About Kidney Disease (VA Tailoring)

Feeding the Dependent Resident/ Food Intake/ Hydration (Dehydration)

- 5.3.1 In-Focus: Food is Medicine
- 5.3.1a Read and Review: Hydration (VA Tailoring)
- 5.3.1a Framing: Dehydration and Over Hydration (VA Tailoring)
- 5.3.2 In-Focus: Food Guidelines for Diabetics
- 5.3.3 Activity: A Diabetic's Diet
- 5.3.5 In-Focus: Procedure for Monitoring intake and Output
- 5.3.6 Activity: Monitoring Intake and Output

- 6.6.1 In-Focus: Mealtimes and Preventing Foodborne
 Illnesses
- 6.6.2 Simulation Activity: Serving Meal Trays
- 6.6.3 Episode 42: Patience
- 6.6.4 In-Focus: Feeding a Resident
- 6.6.4a Read and Review: Promoting Nutrition and Safe Eating (VA Tailoring)
- 6.6.4b Read and Review: Feeds Client Who Cannot Feed Self (VA Skills)
- 6.6.6 Read and Review: Proper Positioning During Mealtimes
- 6.6.7 In-Focus: Aspiration
- 6.6.8 Close-Up: Heimlich Maneuver
- 7.6.5 In-Focus: Enteral Nutrition Feeding Tubes
- 7.6.6 Activity: Feeding Tubes
- 8.2.12 Episode 57: Michelle's Special Diet
- 8.2.12a Read and Review: Special Diets (VA Tailoring)

Pressure Sores

- 5.6.1 In-Focus: Pressure Ulcers: Stages and Treatment
- 5.6.2 Close-Up: Pressure Ulcers
- 5.6.3 In-Focus: Pressure Ulcer: Prevention and Treatment
- 5.6.3a Read and Review: Pressure Reduction Devices (VA Tailoring)
- 5.6.4 Activity: Pressure Ulcers
- 6.5.3 Close-Up: Skin Care for Older Adults
- 9.5.3 In Focus: Wound Care
- 9.5.4 Activity: Wound Care
- 6.5.3a Read and Review: Integumentary System (VA Tailoring)

Positioning

- 2.6.4 Close-Up: Positioning Patient in Bed
- 2.6.4a Read and Review: Positioning and Rehabilitative Devices (VA Tailoring)
- 2.6.4b Read and Review: Positions on Side (VA Skills)
- 2.6.5 In-Focus: Positioning Residents in Bed
- 2.6.6 In-Focus: How to Move a Resident Up In a Bed
- 2.6.7 Simulation Activity: Raising a Person's Head and Shoulders
- 2.6.8 Simulation Activity: Helping a Patient Move Up in Bed When the Resident Can Help
- 2.6.9 Simulation Activity: Moving the Person Up in Bed with a Trapeze
- 2.6.10 In-Focus: Moving a Resident from Side to Side in Bed
- 2.6.11 Simulation Activity: Moving the Resident to the Side of the Bed When the Person Can Help
- 2.6.13 Simulation Activity: Logrolling a Person
- 2.6.14 Close-Up: Body Mechanics
- 7.6.3a Read and Review: Review of Positioning (VA Tailoring)

Transfers

- 2.6.2 In-Focus: How to Move a Person to and from a Stretcher
- 2.6.3 Simulation Activity: Moving a Person to a Stretcher
- 2.7.3 In-Focus: Basic Transfers
- 2.7.4 Close-Up: Transferring a Patient from a Bed to a Wheelchair
- 2.7.4a Read and Review: Transfers from Bed to Wheelchair Using Transfer Belt (VA Skills)
- 2.7.5 In-Focus: Wheelchairs, Walkers, and Crutches
- 2.7.7 Simulation Activity: Transferring a Person from a Wheelchair to a Bed
- 2.7.8 Simulation Activity: Transferring a Person to and from the Tollet

Ambulation

- 2.7.5 In-Focus: Wheelchairs, Walkers, and Crutches
- 2.7.9 Episode 7: The Long Road Back
- 6.7.3 Episode 43: Moving Timothy
- 6.7.4 Close-Up: Gait Belts: Assisting with Ambulation
- 6.7.4a Read and Review: Assists to Ambulate Using Transfer Belt (VA Skills)

Unit IX - Individual Client's Needs, including Mental Health and Social Service Needs

- Identify basic needs of clients, including physical and psychosocial needs.
- Demonstrate guidelines for the nurse aide to assist the client to meet his psychosocial needs.
- Demonstrate way the nurse aide can modify his behavior in response to the behavior of clients.
- Demonstrate principles of behavior management by reinforcing appropriate behavior and causing inappropriate behavior to be reduced or eliminated.
- Demonstrate skills supporting ageappropriate behavior by allowing the client to make personal choices and by providing and reinforcing other behavior consistent with the client's dignity.

- 1.3.2 In-Focus: Getting Older
- 1.3.2a Read and Review: Normal Age-Related Changes (VA Tailoring)
- 1.3.3 Activity: The Older Adult
- 1.3.4 Post: Think About Yourself at Age 85 Again.
- 1.4.1 in-Focus: Maslow's Hierarchy of Needs
- 1.4.2 Activity: Maslow's Hierarchy of Needs
- 1.4.2 Framing: Erickson's Developmental Stages (VA Tailoring)
- 1.5.4 In-Focus: Boundaries
- 2.1.3 In-Focus: Admissions
- 2.2.14 Episode 4: Introductions
- 3.2.1 Episode 9: Old Man River
- 3.3.3. Episode 11: C.O.P.D.
- 3.3.7 Episode 12: Oxygen
- 3.4.2 Episode 13: Panther Mount
- 3.6.4 Episode 16: Dignity
- 3.7.1 Episode 17: Frank's Decision
- 3.7.4 Episode 18: Frank in Hospice
- 3.7.5 In-Focus: Hospice and Pailiative Care
- 3.7.6 In-Focus: The Five Stages of Grief
- 3.7.7 Activity: Grief and Legal Responsibilities at the End of Life
- 3.8.1 Episode 19: Do Not Resuscitate

- Demonstrate appropriate responses to client behavior, including aggressive behavior, anger, combative behavior, inappropriate language, confusion, and inappropriate sexual behavior.
- Utilize the client's family/concerned others as a source of emotional support.
- Demonstrate strategies to provide appropriate clinical care to the aged and the disabled.

- 3.8.6 Episode 20: Family
- 3.8.7 Post: If You Were Working with Frank
- 4.1.2 Episode 21: Polar Bear's Disease
- 4.1.4 Episode 22: Life is Art
- 4.1.4a Read and Review: Defense Mechanisms (VA Tailoring)
- 4.1.5 In-Focus: Mind over Matter
- 4.1.5a Read and Review: Schlzophrenia (VA Tailoring)
- 4.1.6 Activity: Mental Health Needs of Residents
- 4.2.2a Read and Review: Resolving Grievances and Disputes (VA Talloring)
- 4.2.2a Framing: Conflict Involving Client (VA Tailoring)
- 4.3.1 Episode 24: Depression
- 4.4.1 Episode 25: On the Inside
- 4.6.1 Episode 27 Ghost Bird
- 4.6.3 In-Focus: Riding the Emotional Roller Coaster
- 4.6.4 Activity: Bi-Polar Disorder
- 4.6.5 In-Focus Mental Health Issues: Anxiety and Substance Abuse
- 4.6.7 In-Focus: Suicide
- 4.6.8 Activity: Mental Health Issues and Suicide
- 4.7.5 Episode 28: Long Lost Sisters
- 5.1.2 Episode 29: Martha and Ceily
- 5.3.4 Episode 31: Mealtime
- 5.4.5 Episode 32: Giddy Upl
- 5.4.6 Post: Giddy Up1
- 5.5.4 Episode 34: Failing Apart
- 5.8.3 Episode 36: Anniversary
- 6.1.7 Episode 38: Always Knock
- 6.1.8 In-Focus: Resident Sexuality
- 6.1.9 Activity: Residents' Sexuality
- 6.3.1 Episode 40: A Great Man
- 6.3.2 Close-Up: Working with a Depressed Patient
- 6.3.3 In-Focus Depression
- 6.3.4 Activity: Depression
- 7.1.2 Close-Up: Introduction to dementia and Alzheimer's
- 7.1.3 Episode 45: Stuart and His Family
- 7.1.4 Close-Up: Introduction to Mild Dementia or Alzheimer's
- 7.1.5 In-Focus: The Mind Cannot Remember Though the Heart Never Forgets
- 7.1.6 Activity: Signs and Symptoms of Dementia and Alzheimer's
- 7.2.1 Close-Up: Introduction to Moderate Dementia or Aizheimer's
- 7.2.2 Episode 46: Personality Changes Part I
- 7.2.6 Episode 47: Personality Changes Part II
- 7.2.7 In-Focus: It's Not What You Say, But How You Say It
- 7.3.1 Episode 48: Sexual Aggression Part 1
- 7.3.2 in-Focus: Interpreting and Managing Resident Behavior

- 7.3.3 Close-Up: Managing Sexual Aggression
- 7.3.4 Activity: Strategies for Handling Sexual Aggression
- 7.3.6 Episode 49: Sexual Aggression Part 2
- 7.4.1 in-Focus: R-E-S-P-E-C-T Find Out What It Means to Me
- 7.4.3 Close-Up: Working with Patients Who Have Moderate Dementia or Alzheimer's
- 7.4.4 Activity: Working with Residents Who Have Moderate Alzheimer's
- 7.5.1 Close-Up: Introduction to Severe Dementia or Alzheimer's
- 7.5.2 Episode 50: Severe Aizheimer's
- 7.5.4 Episode 51: Chemical Restraint
- 7.5.5 Activity: Dangers of Restraints
- 7.5.6 Close-Up: The Impact of Dementia or Alzheimer's on the Family
- 7.5.7 Close-Up: Working with Residents with Severe Dementia or Alzheimer's Disease
- 7.8.1 Episode 53: Last Breath
- 7.8.2 In-Focus: Final Days Recognizing the Signs of Death
- 7.8.3 Activity: CNA's Role in Death and Dying
- 7.8.4 Episode 54: The Conversation
- 7.8.6 In-Focus: Helping the Family
- 8.1.2 Episode 55: Michelle and Her Brother
- 8.1.2a Read and Review: Coping Mechanisms (VA Tailoring)
- 8.1.4 Close-Up: Introduction to Developmental Disabilities
- 8.1.5 In-Focus: Developmental Disabilities
- 9.6.1 Close-Up: Overview of Child Development
- 9.6.2 In Focus: The CNA in Pediatric Care
- 9.6.3 Activity: The CNA in Pediatric Care
- 9.6.4 in Focus: Infants, Toddlers & Preschoolers
- 9.6.5 Activity: Infants, Toddlers & Preschoolers
- 9.7.1 In-Focus: Childhood
- 9.7.2 Close-Up: The CAN's Role in Working with Adolescents
- 9.7.3 In Focus: Adolescence

Unit X - Special Needs Clients

- Describe age-related changes of the nervous system.
- Discuss common disorders of the nervous system, including the care of the client.
- Describe age-related changes to the eye.
- Discuss common disorders of the eye, including the care of the client.

The Nervous System

- 6.2.1 Episode 39: Stroke
- 6.2.2 In-Focus: Strokes: Definition, Warning Signs, and Treatment
- 6.2.3 Read & Review: Signs and Symptoms of a Stroke
- 6.2.4 Close-Up: The Nervous System
- 6.2.5 Activity: Nervous System Disorders/Strokes
- 6.2.5 Framing: Signs and Symptoms of Parkinson's and MS (VA Tailoring)
- 6.2.5a Read and Review: Nervous System (VA Tailoring)
- 6.2.5b Read and Review: Care for Residents with ALS and Spinal Cord Injuries (VA Tailoring)

- Demonstrate understanding of behavior of the visually impaired client, including how to respond to this behavior.
- Describe age-related changes of the ear.
- Discuss common disorders of the ear, including care of the client.
- Demonstrate understanding of behavior of the hearing-impaired client, including how to respond to this behavior.
- Demonstrate understanding of behavior of the cognitively impaired client, including how to respond to this behavior.
- Demonstrate how to communicate with the cognitively impaired client.
- Demonstrate techniques for addressing the unique needs and behaviors of cognitively impaired clients.
- Demonstrate methods to reduce the effects of cognitive impairment.
- Describe complications of diabetes mellitus, include care of the client.
- Describe care of the client experiencing hypoglycemia and hyperglycemia.
- Describe care of the client experiencing hypothyroidism and hyperthyroidism

 6.2.5b Framing: Signs and Symptoms: Head and Spinal Cord Injuries (VA Tailoring)

Care for Clients with Sensory Impairments (eyes/ears)

- 1.3.2 In-Focus: Getting Older
- 1.3.2a Read and Review: Normal Age-Related Changes (VA Tailoring)
- 1.3.3 Activity: The Older Adult
- 5.5.1 Episode 33: Black Spots
- 5.5.5 Close-Up: Working with Visually Impaired Patients
- 5.5.6 In-Focus: Hearing and Visual impairment
- 5.5.6a Read and Review: Anatomy, Physiology and Disorders of the Ear (VA Talloring)
- 5.5.7 Activity: Working with Residents with Hearing and Vision Loss
- 5.5.8 In-Focus: Care of Residents with Eyeglasses, Contact Lenses, and Artificial Eyes
- 5.5.9 In-Focus: The Risk Management Mindset
- 5.5.10 Activity: Developing a Risk Management Mindset

The Cognitively Impaired Client

- 4.7.5 Episode 28: Long Lost Sisters
- 4.7.6 In-Focus: It's Easy to Forget: Mild Dementia
- 7.1.2 Close-Up: Introduction to Dementia and Alzheimer's
- 7.1.3 Episode 45: Stuart and His Family
- 7.1.4 Close-Up: Introduction to Mild Dementia or Alzheimer's
- 7.1.4a Read and Review: Care of Cognitively Impaired Residents (VA Tailoring)
- 7.1.5 in-Focus: The Mind Cannot Remember Though the Heart Never Forgets
- 7.1.6 Activity: Signs and Symptoms of Dementia and Alzhelmer's
- 7.2.1 Close-Up: Introduction to Moderate Dementia or Alzheimer's
- 7.2.2 Episode 46: Personality Changes Part I
- 7.2.4 In-Focus: It's a Wanderful Life
- 7.2.4a Read and Review: Elopement Prevention (VA Tailoring)
- 7.2.5 Activity: Wandering and Environmental Hazards
- 7.2.5 Framing: Pillaging, Rummaging and Hoarding (VA Tailoring)
- 7.2.6 Episode 47: Personality Changes Part II
- 7.2.7 In-Focus: It's Not What You Say, But How You Say It
- 7.2.8 In-Focus: Instead of Correcting, Try Redirecting
- 7.2.9 Activity: Communicating with the Alzheimer's Patient
- 7.3.1 Episode 48: Sexual Aggression Part 1
- 7.3.2 In-Focus: Interpreting and Managing Resident Behavior
- 7.3.3 Close-Up: Managing Sexual Aggression

- 7.3.4 Activity: Strategies for Handling Sexual Aggression
- 7.4.1 In-Focus: R-E-S-P-E-C-T Find Out What It Means to Me
- 7.3.5 Post: If You Were Marissa
- 7.3.6 Episode 49: Sexual Aggression Part 2
- 7.4.2 What Would You do?
- 7.4.3 Close-Up: Working with Residents with Moderate Dementia or Alzheimer's
- 7.4.4 Activity: Working with Resident Who Have Moderate Alzheimer's
- 7.5.1 Close-Up: Introduction to Severe Dementia or Alzheimer's
- 7.5.2 Episode 50: Severe Alzheimer's
- 7.5.3 In focus: Sundowning: The Wanderers of the Night
- 7.5.4 Episode 51: Chemical Restraint
- 7.5.5 Activity: Dangers of Restraints
- 7.5.6 Close-Up: The impact of Dementia or Alzheimer's on the Family
- 7.5.7 Close-Up: Working with Residents with Severe Dementia or Aizhelmer's Disease
- 7.6.1 Episode 52: Comatose
- 7.6.2 In-Focus: Caring for Unresponsive Patients
- 7.6.3 Close-Up: Care for Unresponsive Patients
- 7.6.4 Activity: Caring for Unresponsive Patients
- 7.8.1 Episode 53: Last Breath
- 7.8.4 Episode 54: The Conversation
- 7.8.5 Post: Supporting the Grieving Process
- 7.8.6 In-Focus: Helping the Family

Care for the Client with Diabetes

- 5.1.2 Episode 29: Martha and Celly
- 5.1.3 Close-Up: Overview of Diabetes and Obesity
- 5.1.4 In-Focus: The Endocrine System
- 5.1.4a Read and Review: Hypothyroidism and Hyperthyroidism (VA Tailoring)
- 5.1.5 In-Focus: Understanding Diabetes
- 5.1.6 Activity: The Endocrine System and Diabetes Overview
- 5.1.6 Framing: Glands (VA Talloring)
- 5.2.4 Episode 30: Blood Bugs
- 5.2.5 In-Focus: A Balancing Act
- 5.2.6 Review: An Overview of Hyperglycemia and Hypoglycemia
- 5.3.2 in-Focus: Food Guidelines for Diabetics
- 5.3.3 Activity: A Diabetic's Diet
- 5.3.4 Episode 31: Mealtime
- 5.3.5 In-Focus: Procedure for Monitoring Intake and Output
- 5.4.1 Close-Up: Diabetic Foot Care
- 5.4.3 In-Focus: Exercise
- 5.4.4 Activity: Caring for Diabetics
- 5.5.1 Episode 33: Black Spots
- 5.5.4 Episode 34: Falling Apart

- 5.7.1 Episode 35: ADL With Martha
- 5.8.5 Post: Will Martha Meet Her Goals?

Unit XI - Basic Restorative Services

- Discuss the role of the nurse aide in rehabilitation and restorative care.
- Describe ways to teach, with supervision, a client to participate in self-care.
- Demonstrate the use of assistive devices when transferring client from bed to chair or bed to stretcher.
- Discuss the assistive devices the client may use when ambulating
- Identify assistive devices the client may have to help with eating.
- Identify assistive devices the client may have to help with dressing.
- Demonstrate passive range of motion for the knee and ankle.
- Demonstrate passive range of motion for the shoulder.
- Discuss observations the nurse aide should report to the supervisor when performing passive range of motion exercises.
- Identify positioning devices the nurse aide may use when turning and positioning a client.
- Demonstrate positioning a client on his side in bed.
- Demonstrate positioning a client in the chair.
- Describe caring for and using prosthetic devices.
- Describe caring for and using orthotic devices.

- 2.1.2 Episode 2: 28 Minutes to the Top
- 2.2.11 Episode 3: The Exam
- 2.2.14 Episode 4: Introductions
- 2.3.1 Post: Have You Ever Had Surgery?
- 9.3.3 In Focus: The Phases of Surgery
- 9.3.4 Activity: The Phases of Surgery
- 2.3.2 Close-Up: Traumatic Accidents & Emergency Care
- 2.3.5 Close-Up: Overview of Surgery and Rehabilitation
- 9.3.1 Close-Up: Overview of Labor and Delivery
- 9.3.5 In Focus: After the Birth
- 9.3.6 Activity: Immediate Care Measures After the Birth
- 2.3.7 In-Focus: Care for Musculoskeletal Disorders
- 2.3.7a Read and Review: Anatomy of the Muscuioskeletal System (VA Tailoring)
- 2.3.8 Activity: Symptoms, Injury, and Care of Musculoskeletal Disorders
- 9.5.8 Read and Review: Sitz Bath
- 2.3.9 In-Focus: Hot and Cold Compresses
- 2.4.11 Read and Review: Sections of Lilly's Care Plan
- 2.5.6 Episode 6: Stuck in Traction
- 2.6.1 Close-Up: What is Rehabilitative Care and Why is it Important?
- 2.6.2 In-Focus: How to Move a Person to and from a Stretcher
- 2.6.4 Close-Up: Positioning Patients in Bed
- 2.6.4a Read and Review: Positioning and Rehabilitative Devices (VA Talloring)
- 2.6.4b Read and Review: Positions on Side (VA Skilis)
- 2.6.5 In-Focus: Positioning Residents in Bed
- 2.6.6 In-Focus: How to Move a Resident Up In a Bed
- 2.6.7 Simulation Activity: Raising a Person's Head and Shoulders
- 2.6.8 Simulation Activity: Helping a Patient Move Up in Bed
 When the Resident Can Help
- 2.6.9 Simulation Activity: Moving the Person Up in Bed with a Trapeze
- 2.6.10 In-Focus: Moving a Resident from Side to Side in Bed
- 2.6.11 Simulation Activity: Moving the Resident to the Side of the Bed When the Person Can Help
- 2.6.12 Simulation Activity: Turning and Repositioning a Person to Their Side for Personal Care
- 2.6.13 Simulation Activity: Logrolling a Person
- 2.6.14 Close-Up: Body Mechanics
- 2.6.15 In-Focus: Range of Motion Exercises
- 2.7.3 In-Focus: Basic Transfers

- Demonstrate how to put elastic stockings on the client.
- Describe the role of the nurse aide in bladder training.
- Describe the role of the nurse aide in bowel training.
- 2.7.4 Close-Up: Transferring a Patient from a Bed to a Wheelchair
- 2.7.4a Read and Review: Transfers from Bed to Wheelchair Using Transfer Belt (VA Skill)
- 2.7.5 In-Focus: Wheelchairs, Walkers, and Crutches
- 2.7.7 Simulation Activity: Transferring a Person from a Wheelchair to a Bed
- 2.7.8 Simulation Activity: Transferring a Person to and from the Tollet
- 2.7.9 Episode 7: The Long Road Back
- 3.3.5 Simulation Activity: Assisting Deep Breathing and Coughing
- 3.3.6 Simulation Activity: Incentive Spirometer
- 3.4.2 Episode 12: Panther Mount
- 3.4.4 In-Focus: Care for Cardiovascular Disorders
- 3.4.5 Activity: The Cardiovascular System and its Disorders
- 3.4.6 In-Focus: Compression Stockings
- 3.4.7 Close-Up: Applying Elastic Stockings
- 3.4.7a Read and Review: Applies One Knee-High Elastic Stocking (VA Skills)
- 3.4.8 Activity: Applying Compression Stockings
- 3.6.5 in-Focus: Bed Rails
- 3.6.5a Entrapment Zones (VA Tailoring)
- 3.6.13 In-Focus: Assisting with Elimination
- 3.6.13a Read and Review: Assists with Use of Bedpan (VA Skills)
- 5.4.3 In-Focus: Exercise
- 5.4.7 Close-Up: Range of Motion Exercises
- 5.4.7a Read and Review: Performs Modified Passive Range of Motion (PROM) for One Knee and One Ankle (VA Skilis)
- 5.4.7b Read and Review: Performs Modified Passive Range of Motion (PROM) for One Shoulder (VA Skills)
- 5.7.4 In-Focus: Transferring Patients Using a Mechanical Lift
- 5.7.5 Simulation Activity: Moving a Person with a Mechanical Lift
- 6.4.1 Close-Up: Urination & Bowel Elimination
- 6.4.2. In-Focus: Toileting Aids
- 6.4.4 Activity: Tolleting
- 6.6.1 In-Focus: Mealtimes and Preventing Foodborne Illnesses
- 6.6.4a Read and Review: Promoting Nutrition and Safe Eating (VA Tailoring)
- 6.7.1 In-Focus: Rehabilitative and Restorative Care
- 6.7.1a Read and Review: Orthotic Devices (VA Tailoring)
- 6.7.1a Framing: Care for Orthotic Devices (VA Tailoring)
- 6.7.2 Close-Up: Dressing and Undressing Patients
- 6.7.2a Read and Review: Dresses Client with Affected (Weak) Right Arm (VA Skills)
- 6.7.2b Read and Review: Assistive Devices for Dressing (VA Tailoring)
- 6.7.3 Episode 43: Moving Timothy

- 6.7.6 Episode 44: To Make a Difference
- 6.7.4 Close-Up: Galt Belts: Assisting with Ambulation
- 6.7.4a Read and Review: Assist to Ambulate Using a Transfer Belt (VA Skill)
- 7.5.8 In-Focus: Repositioning a Person in a Chair
- 7.5.9 Simulation Activity: Repositioning a Person in a Chair
- 7.6.3a Read and Review: Review of Positioning (VA Tailoring)
- 7.6.6 In-Focus: A Deep Devotion to Range of Motion
- 7.7.1 InFocus: Care of Bodily Functions: Bowei Elimination
- 7.7.4: In Focus: Urinary and Bowel Incontinence
- 7.7.5 Activity: Elimination
- 7.7.5a Read and Review: Bowel and Bladder Training (VA Tailoring)
- 8.2.12 Episode 57: Michelle's Special Diet
- 8.2.12a Read and Review: Special Diets (VA Tailoring)

Unit XII - Care of the Client When Death is Imminent

- Discuss care of client with a common respiratory disorder, including what the nurse aide would report to the appropriate supervisor.
- Describe care of the client receiving oxygen therapy.
- Discuss care of client with a common circulatory disorder, including what the nurse aide would report to the appropriate supervisor.
- Discuss HIV/AIDS, including signs and symptoms and nursing care.
- Identify the American Cancer Society signs of cancer.
- Discuss cancer, including nursing care for the client with a diagnosis of cancer.
- Discuss how attitudes about death may affect the nurse aide providing care to the dying client.
- Identify the stages of grief.
- List the physical changes that occur when death is imminent.

- 3.1.2 In-Focus: Frank
- 3.1.5 Episode 8: Meet Frank
- 3.3.1 In-Focus: The Respiratory System & Its Disorders
- 3.3.2 Activity: The Respiratory System & its Disorders
- 3.3.3 Episode 11: C.O.P.D.
- 3.3.4 In-Focus: Take a Deep Breath
- 3.3.5 Simulation Activity: Assisting Deep Breathing and Coughing
- 3.3.6 Simulation Activity: Incentive Spirometer
- 3.3.7 Episode 12: Oxygen
- 3.3.8 In-Focus: Oxygen Therapy
- 3.3.8a Read and Review: Oxygen Therapy (VA Tailoring)
- 3.3.9 Simulation Activity: Setting Up for Oxygen Administration
- 3.3.10 Read and Review: Assisting with Oxygen Therapy
- 3.4.1 Close-Up: Cardiovascular Disease Inside the Body
- 3.4.2 Episode 13: Panther Mount
- 3.4.3 In-Focus: The Circulatory System
- 3.4.4 In-Focus: Care for Cardiovascular Disorders
- 3.4.5 Activity: The Cardiovascular System and its Disorders
- 3.4.5 Framing: Peripheral Vascular Disease (VA Tailoring)
- 3.4.5a Read and Review: The Structure and Function of the Heart (VA Tailoring)
- 3.4.6 in-Focus: Compression Stockings
- 3.4.7 Close-Up: Applying Elastic Stockings
- 3.4.7a Read and Review: Applies One Knee-High Elastic Stocking (VA Skills)
- 3.4.8 Activity: Applying Compression Stockings
- 3.5.1 In-Focus: Frank's Cancer
- 3.5.1a Framing: Signs of Cancer from the American Cancer Society (VA Tailoring)

- Discuss care measures, including physical and psychosocial measures, for the client when death is imminent.
- Discuss care measure for the family when death is imminent.
- Demonstrate postmortem care.
- 3.5.2 Episode 14: Infection Control
- 3.5.3 In-Focus: Isolation Precautions
- 3.5.3a Read and Review: The Psychological Effects of Isolation (VA Tailoring)
- 3.5.4 Activity: Chain of Infection
- 3.5.5 Activity: Cancer and Transmission Based Precautions
- 3.7.1 Episode 17: Frank's Decision
- 3.7.2 In-Focus: IV Therapy and Chest Tubes
- 3.7.3 Close-Up: Care for Patients with Chest Tubes
- 3.7.4 Episode 18: Frank in Hospice
- 3.7.5 In-Focus: Hospice and Palliative Care
- 3.7.5 Framing: Culture, Religion and Death (VA Tailoring)
- 3.7.6 In-Focus: The Five Stages of Grief
- 3.7.7 Activity: Grief and Legal Responsibilities at the End of Life
- 3.8.1 Episode 19: Do Not Resuscitate
- 3.8.2 Close-Up: Signs and Symptoms of a Heart Attack
- 3.8.3 in-Focus: I'm the One
- 3.8.4 In-Focus: Post Mortem Care
- 3.8.5 Activity: The Chain of Survival and Post Mortem Care
- 3.8.6 Episode 20: Family
- 3.8.7 Post: If You Were Working with Frank
- 4.2.4 In-Focus: The Immune System
- 4.2.5 Activity: Elements of the Immune System
- 4.2.6 In-Focus: The Human Immunodeficiency Virus
- 4.2.7 Activity: What are HIV and AIDS?
- 7.8.1 Episode 53: Last Breath
- 7.8.2 In-Focus: Final Days, Recognizing the Signs and Symptoms of Death
- 7.8.3 Activity: A CNAs Role in Death and Dying
- 7.8.5 Post: Supporting the Grieving Process
- 7.8.6 in-Focus: Helping the Family
- 9.5.5 Activity: Infection Control

Unit XIII - Admission, Transfer and Discharge

- Describe preparation of the client room prior to admission.
- identify areas of orientation that must be provided to the client during the admission process.
- Describe how to care for client's personal belongings.
- Discuss the observations that the nurse aide should make during the admission process.

- 1.6.4 In-Focus: Procedures
- 1.6.5 Activity: Introduction to Procedures
- 1.7.1 In-Focus: Purposes and Goals of Long-Term Care
- 1.7.1a Read and Review: The Long-Term Care Facility as Home (VA Tailoring)
- 1.7.3 Activity: The Long-Term Care Environment
- 1.7.7 Activity: The Resident's Room
- 2.1.3 in-Focus: Admissions
- 2.1.4 Activity: Admissions
- 2.2.11 Episode 3: The Exam
- 2.2.12 In-Focus: Physical Exam
- 2.2.13 Activity: Processes in the Physical Exam
- 2.7.8 In-Focus: Resident Discharge
- 2.7.9 Episode 7: The Long Road Back

- Document the admissions process, including care of client's personal belongings, observations and vital signs.
- Demonstrate preparing client for transfer.
- Identify responsibilities of nurse aide during the discharge of the client.
- Demonstrate discharge of the client, including care of personal belongings and assisting to transport to the pickup area

- 3.1.3 In-Focus: A Closer Look into the Nursing Process
- 3.1.4 Activity: The Nursing Process
- 3.2.8 Episode 10: The Physical
- 6.2.6 In-Focus: Admissions
- 6.2.6 a Read and Review: Assisting with Hospital Transfers (VA Tailoring)

Unit XIV - Legal and Regulatory Aspects of Practice for the Certified Nurse Aide

- Discuss professional behaviors of the nurse alde.
- Review methods of conflict management.
- Discuss the role of the Virginia Board of Nursing.
- Discuss the OBRA requirements.
- Discuss the different types of abuse, including the signs of abuse.
- Discuss inappropriate nurse aide behavior, including abuse, neglect and misappropriation of client property.
- Describe strategies the nurse aide may use to avoid inappropriate behavior.
- Discuss the role of the mandated reporter as described in the Code of Virginia.
- List reasons for the Virginia Board of Nursing to begin disciplinary proceedings for a certified nurse aide as identified in Regulation 18VAC90-25-100.

- In Class: Orientation to VA Board of Nursing, Disciplinary Actions, and the VA NAAP Exam
- 1.2.2 In-Focus: Becoming a Certified Nursing Assistant
- 1.2.2 Framing: Responsibilities and Requirements of Certified Nurse Aldes per Virginia Board of Nursing (VA Tailoring)
- 1.2.6 In-Focus: An Exceptional CNA
- 1.2.7 In-Focus: Being A Professional
- 1.2.8 Activity: Self-Assessment
- 1.4.4 In-Focus: Respectful Communication
- 1.4.5 Read and Review: Phone Skills
- 1.4.7 Activity: Communication
- 1.3.2 In-Focus: Getting Older
- 1.4.1 In-Focus: Maslow's Hierarchy of Needs
- 1.4.2 Activity: Maslow's Hierarchy of Needs
- 1.4.4 In-Focus: Respectful Communication
- 1.4.7 Activity: Communication
- 1.5.1 In-Focus: Legal and Ethical Responsibilities
- 1.5.2 Post: Was Evy Justified? Why? Why Not?
- 1.5.3 In-Focus: Resident Rights and Legal Responsibilities
- 1.5.3a Read and Review: Resident Bill of Rights (VA Tailoring)
- 1.5.3a Framing: Personal Choices (VA Talloring)
- 1.5.3b Post: Residents' Rights (VA Tailoring)
- 1.5.4 In-Focus: Boundaries
- 1.5.6 In-Focus: Your Legal and Ethical Responsibilities Regarding Abuse
- 1.5.7 In-Focus: Ethical Responsibilities
- 4.7.3 In-Focus: Omnibus Budget Reconciliation Act
- 4.7.4 Activity: Legal Rights and Responsibilities
- 4.2.2a Read and Review: Resolving Grievances and Disputes
 (VA Tailoring)

- Identify the consequences of abuse, neglect and/or misappropriation of client property for a nurse aide
- Discuss responsibilities of the certified nurse aide to the Virginia Board of Nursing.
- Discuss responsibilities of employers of certified nurse aides to the Virginia Board of Nursing.
- Describe the application process for the NNAAP exam.
- Describe what the nurse aide graduate is required to bring to the NNAAP test site the day of the test.

- 7.5.2a Read and Review: Burnout (VA Tailoring)
- 7.2.7 In-Focus: It's Not What You Say, But How You Say It
- 8.1.2a Read and Review: Coping (VA Tailoring)
- 8.4.3 Close-Up: Neglect and Abuse
- 8.4.4 In-Focus: There's No Excuse for Resident Abuse
- 8.5.1 Episode 60: Consequences
- 8.5.2 Post: Another Outcome
- 8.5.3 In-Focus: Abuse: Legal Recourse and Obligation to Report
- 8.5.3a Read and Review: Code of Virginia §63.2-1606 —
 Mandated and Voluntary Reporting (VA Tailoring)
- 8.5.4 Close-Up: Reporting Requirements for Neglect and Abuse

Unit Objectives

1. Training program must have behaviorally stated objectives for each unit of instructions

Section 1 - Orientation

An introduction to the course, as well as some initial information on health care, the long-term care environment, the role of the nurse aide, and the physical changes in older adults.

Lesson 1 – Welcome to the Course: Learn about your course experience, meet your virtual faculty and get familiar with this platform.

Lesson 2 – Your Role: A closer look at the role of the CNA, define what it means to offer excellent healthcare to patients and learn a bit about the CNA's role in delivering excellent healthcare to patients.

Lesson 3 - Issues of Aging: Focus on what we want for our loved ones as they age, what we would want for ourselves as we age, and what we would want if we were to need long-term nursing care. Introduction to "discussion posts."

Lesson 4 – Communication: Introduction to content related to understanding patients' needs and communicating effectively with patients and their families.

Lesson 5 – Legal and Ethical Responsibilities: Exploration of the legal and ethical responsibilities of being a CNA and learn about patients' rights.

Lesson 6 - The Healthcare Team: Understanding the roles of the professionals on the patient's care team.

Lesson 7 – Your Workplace: A deeper dive into the role of the CNA and essential information on how long-term care is paid for, the survey process for nursing homes, the resident's room, and emergency/disaster planning.

Section 2 - Lily

We meet Lily Lewis a young woman who faces an enormous personal challenge and Marisa, a new CNA. We also meet the members of Lily's family and health care team and learn about topics such as: admissions, emergency care, vital signs, infection control, positioning and rehabilitative and restorative care.

Lesson 1 – Admissions: You will learn how to admit a new resident to a facility, become familiar with delegation guidelines, and how to make an unoccupied bed. At the end of the lesson you'll be introduced to the Note Taking Template for procedures, a tool to organize your notes about procedures that you can use throughout the course.

Lesson 2 – Vital Signs & the Physical Exam: In this lesson, you'll learn about the CNA's role in taking and monitoring vital signs and in assisting with the physical exam.

Lesson 3 – Overview of Injuries, Surgery, & Musculoskeietal Disorders: After suffering from a life-threatening event such as a car accident, many patients will need emergency care. In this lesson, you'll learn about how to provide emergency care and more specifically, rescue breathing. You'll also gain an understanding of injuries, surgery, musculoskeletal disorders, and their treatments.

Lesson 4 – Wound Care and Infection Control Part 1: In this section you've gotten to know Lily Lewis, a patient who suffers from severe injuries. In this lesson, you'll learn how to care for these injuries such as wounds sustained in the car crash. You'll also learn about infection control and about one of its most critical tools: handwashing.

Lesson 5 – Infection Control Part 2: Infections kill hundreds of thousands of Americans every year. In this lesson, you'll learn ways to prevent the spread of infections in long-term care.

Lesson 6 – Positioning, Rehabilitative & Restorative Care: You'll learn how to support rehabilitative and restorative care, as residents work to regain their functioning. As part of this work, a CNA assists with the transfer and movement of residents to facilitate their daily activities and care. This lesson will focus on helping you learn these types of procedures.

Lesson 7 – Bed Baths, Transfers & Discharges: In this lesson, you'll continue to learn about restorative care and some of the procedures associated with it. You'll also observe Lily Lewis' recovery and eventual discharge.

Section 3 - Frank

In Section 3, you will meet both Frank Grafton a wonderful man who is in poor health, and his daughter Beth who cares dearly for her father. You will see how Frank's team helps him confront cancer, COPD, and poor cardiovascular health, as they help him live the best life that he possibly can.

Lesson 1 – The Care Plan & Documentation: In this lesson, you will take a deeper dive into the care plan and the importance of documentation and effective communication in long-term residential nursing care.

Lesson 2 — Reporting & Reporting Subjective & Objective Information: What is the difference between objective and subjective Information? How do these pieces of information influence patient care? In this lesson, you will learn how to effectively use both kinds of information as a CNA.

Lesson 3 – Respiratory Support: This lesson will help you become more familiar with the respiratory system and ways to support residents who suffer from respiratory disorders.

Lesson 4 ~ Supporting Cardiovascular Care: Many residents may suffer from cardiovascular disorders. Consequently, it is important to know the signs and symptoms of cardiovascular disorders as well as care measures that can help people with these conditions. This lesson introduces you to care measures that a CNA can use with residents who have cardiovascular disorders.

Lesson 5 – Supporting Care for Cancer: Many patients who have cancer will also have compromised immune systems. This lesson will help you understand some of the most important steps you can take to reduce the spread of infection.

Lesson 6 – Care for a Bedridden Patient: There are times where patients will become bedridden. The care of bedridden residents is complex. This lesson introduces you to some of the care measures a CNA must employ to care for bedridden residents.

Lesson 7 – Hospice and Palilative Care: Care for patients at the end of their lives is very important. The videos and activities in this lesson will help you understand topics such as palliative care, hospice care and the five stages of grief.

Lesson 8 – Emergency Care & End of Life: Healthcare providers must contend with many clinical, psychological, legal, and procedural issues when a patient dies. This lesson gives you a broad overview of the critical issues that patients, families and healthcare providers face at the end of life.

Section 4 - Helen

Not all residents are as gentle and kind as Frank Grafton. In Section 4, you will meet Helen, a resident who has faced many personal challenges in her life. As you see Helen's team care for her, you will learn about: the immune system, HIV/AIDS, bathing, grooming, personal protective equipment, restraints and residents' rights

Lesson 1 – Working with Challenging Patients: In this lesson, you'll meet Helen Franco, a former model who is HIV positive and has been diagnosed with a mental health disorder. To begin to understand Ms. Franco's condition, you will first get an overview of mental illness, a condition that is often misunderstood.

Lesson 2- Living with HIV: In the previous lesson, you witnessed how persons with HIV may be targets of discrimination. In this lesson, you will learn strategies to address discriminatory behavior. You will also learn about HIV/ AIDS and how it impacts the immune system.

Lesson 3 – Grooming: Grooming helps residents feel refreshed and ready to participate in activities offered by the center. In this lesson, you will learn how to assist with a bath or a shower and shampoo and groom a resident's hair. You will also learn the procedure for shaving a man with a safety razor.

Lesson 4 – The Compromised Immune System: Compromised Immune systems like Heien's are particularly susceptible to infection. In this lesson, you will learn about your role in keeping the facility free from disease causing germs.

Lesson 5 – The Infection Cycle & Facility-Based Infection Prevention and Control: Compromised immune systems like Helen's are particularly susceptible to infection. In this lesson, you will learn about your role in keeping the facility free from disease causing germs.

Lesson 6 – Helen's Manic Episode: In this lesson, you will take a deeper dive into the topic of mental health. Specifically, you will learn about the challenges that residents with bipolar disorder, anxiety, and substance abuse face. You'll also learn about the risk factors, warning signs, and steps to take when working with suicidal residents.

Lesson 7 – Restraints and Residents' Rights: In this lesson, you'll learn about the use of restraints as a last resort and OBRA, the act which protects older Americans from abuse in long-term care. Finally, you will begin your study of dementia, a disorder Helen Franco begins to grapple with at the end of this episode of The Residents.

Section 5 - Martha

As you now know, many residents will struggle with chronic health issues, which may become more complex over time. In Section 5, you will meet Martha and her partner Celly, and learn about: obesity, diabetes, pressure injuries, activities for daily living, and see the way the team responds to Martha's changing health needs.

Lesson 1 – Introduction to Diabetes & Obesity: The videos and activities in this lesson introduce you to some of the critical care considerations associated with obesity and diabetes.

Lesson 2 – Digestive System & Biood Glucose Management: This lesson introduces you to some common digestive system disorders and the measures that are used to treat these disorders. It also provides more information about the care of patients with diabetes.

Lesson 3 – Mealtimes, Special Diets, & Nutrition: Mealtimes are an important part of a resident's day. This lesson introduces you to some of the most critical care measures that a CNA must employ during residents' mealtimes.

Lesson 4 – Foot Care, Exercise, & Range of Motion: This lesson will help deepen your knowledge about care for diabetic patients who, like Martha, need support to meet their exercise goals and who need daily foot care to prevent complications from the disease.

Lesson 5 -Working with Residents with Hearing or Visual impairments: Some patients may arrive at a facility with partial or complete hearing or vision loss, or they may develop these issues over time. In either case, these conditions require that professionals modify and adapt the care that they provide. This lesson will help you become more familiar with care for people with hearing and/or vision loss.

Lesson 6 – Pressure Ulcers: Pressure ulcers are dangerous. This lesson will help you identify the signs and symptoms of pressure ulcers and illustrate ways that healthcare providers can work with patients to prevent pressure ulcers.

Lesson 7 – Morning, Afternoon & Night: A big part of the nursing assistant's role is helping patients with activities for daily living such as: bathing, going to the bathroom, feeding, and moving. This lesson will give you a broad overview of activities for daily living and the implications of this kind of care for patients with both chronic conditions and acute illnesses. Finally, the lesson will also take a more focused look at transfers of patients with mechanical lifts.

Lesson 8 – Revisiting the Care Plan: This lesson introduces you to shingles, a condition which many adults will experience in their lifetimes. Then you'll revisit Martha Vance's care plan and make predictions about her next care plan meeting.

Section 6 - Timothy

In Section 6, you will meet Dr. Timothy Lerner, and his wife Simone as they share their days in an assisted living facility. However, Timothy's health takes a drastic turn for the worse, and he and Simone must adjust

to a new reality. This section includes information about the nervous system, and important care measures for residents who are disabled.

Lesson 1 – Assisted Living & Resident Sexuality: When residents come to move to nursing centers, they bring their whole selves to their homes, not just their disease or disability. In this lesson you'll meet Dr. and Mrs. Lerner, a couple who lives in an assisted living facility. You'll learn about assisted living and how it differs from a nursing center. You'll also learn about resident sexuality and how to support its healthy expression as a CNA.

Lesson 2 – Timothy's Stroke & Change of Condition: In this lesson, Dr. Lerner suffers from a stroke, a disorder of the nervous system. Through observation and supporting activities you'll learn about the causes, signs and symptoms, and treatment of a stroke, the leading cause of disability in adults. You will also revisit the topic of admissions through the eyes of Dr. and Mrs. Lerner who must move from their assisted living housing to a nursing home.

Lesson 3 – Working with a Depressed Patient: Depression is a mental health issue that impacts a high percentage of stroke victims like Dr. Timothy Lerner. In this lesson you'll learn about this disorder and how to work with patients who suffer from depression.

Lesson 4 – ADL: Tolleting, Bathing & Catheter Care: Bedridden residents often need assistance with activities such as toileting and bathing. In this lesson, you will learn the correct method of providing this type of care.

Lesson 5 – ADL: Skin & Nail Care: Caring for residents' skin and nails are part of a nursing assistant's daily responsibilities. In this lesson, you will learn the procedures for massaging a resident, nail care, and guidelines for providing skin care for older adults.

Lesson 6 – Meaitimes: Residents look forward to meaitimes. They are a chance for social interaction and may be the highlight of their day. In addition to providing a safe experience, the goal of assisting with preparation of trays and feeding residents is to make meaitimes as pleasant and enjoyable as possible.

Lesson 7 – Rehabilitative & Restorative Care: Review of the principles of rehabilitative and restorative care and learn how to employ these principles while performing common procedures, such as dressing and ambulation. At the end of the lesson, you'll review some guidelines to follow when communicating with residents and learn the importance of cross cultural communication with those in your care.

Section 7 - Stuart

Section 7 will introduce you to Mr. Stuart Boone and his family as they face Alzheimer's disease together. This section will show you the progression of the disease, and the important care measures that the health care time must enact in order to give Stuart the best quality of life possible. You will also see how the health care professionals work with Stuart's family as his disease progresses.

Lesson 1 — Introduction to Dementia & Aizhelmer's Disease: Section 7 of the course is devoted to working with patients who have dementia or Aizhelmer's disease. The videos and activities in this lesson are designed to give you an introduction to these conditions, as well as the care measures that a CNA must use when working with patients who have these challenges.

Lesson 2 – Care for Moderate Alzheimer's Disease – Part #1: As you now know, Alzheimer's disease is progressive, which means that the person's functional abilities decline over time. This lesson is the first of three lessons, which will introduce you to the care measures that nursing assistants must employ with residents who have moderate Alzheimer's disease.

Lesson 3 – Care for Moderate Alzheimer's Disease – Part #2: - As a person's Alzheimer's progresses, patients' behaviors often change in unpredictable ways. This lesson focuses some of these changes with a special focus on sexual aggression and ways that nursing assistants can manage these challenging behaviors.

Lesson 4 – Care for Moderate Alzheimer's Disease – Part #3 - This lesson will close out the short mini-unit on care for residents with moderate Alzheimer's disease.

Lesson 5 – Care for Severe Alzheimer's Part 1: As the functioning of patients with Alzheimer's disease declines, these patients need additional support from caregivers. The next two lessons focus on important care measures that nursing assistants must be able to provide in order to help patients with severe Alzheimer's disease.

Lesson 6 – Care for Severe Alzheimer's Part 2: As Alzheimer's disease progresses, residents with the disease have difficulty controlling daily activities such as elimination. Residents eventually lose consciousness and become comatose. The following activities and videos will help you learn how to provide care for residents in the late stages of the disease.

Lesson 7 – Additional Care Measures for the Bladder and the Bowels: In this lesson, we'll take a short detour from our study of Alzheimer's disease to learn some additional issues and care measures for the following topics: incontinence, fecal impaction, enemas, and ostomies.

Lesson 8 – Death: As a nursing assistant, you have an important role to play as a care provider when a resident dies. This lesson takes a closer look at the work of the CNA when a resident dies.

Section 8 - Michelle

Some of your residents may have developmental disabilities in addition to other complex health conditions. In Section 8, you will meet Michelle Gilmore and her brother. You will see how the team cares for a patient with kidney failure and see how the nursing home grapples with an extreme violation of residents' rights. Understanding the basic functions of the urinary system will help you provide better care to your patients. This lesson reviews the urinary system and the care measures that you can do as a nursing assistant to promote the health and wellness of your patients.

Lesson 1 – Introduction to Developmental Disabilities: In this lesson, you will get an introduction to developmental disabilities and the nursing assistant's role in working with patients who have developmental disabilities.

Lesson 2 – The Urinary System: Understanding the basic functions of the urinary system will help you provide better care to your patients. This lesson reviews the urinary system and the care measures that you can do as a nursing assistant to promote the health and wellness of your patients.

Lesson 3 – Dialysis: Kidney failure is life-threatening. This lesson takes a closer look at the care measures that a nursing assistant can offer to help patients with kidney failure and other urinary disorders.

Lesson 4 – Suspected Abuse: Although everyone agrees that residents should NEVER be abused or neglected, both abuse and neglect occur in the care of the sick and elderly. This lesson takes a closer look at the issues of abuse and neglect.

Lesson 5 – Reporting Abuse: If you suspect that a patient is being abused or neglected, you must take action. This lesson shows you what to do if you suspect that a resident is being abused or neglected.

2. Each objective must state measurable criteria which serve as the basis for competency evaluations

Throughout the course, there are short quizzes/activities called "Activity" which help the students check their understanding of the material.

At the end of each section, students will have the opportunity to apply what they have learned in the section to a multiple-choice practice test similar to the CNA certification exam. Students can use these practice tests to assess their knowledge of the material and to improve their test-taking skills. As students go through the course, the practice tests, which are cumulative, will include more material and get longer

Practice Tests:1A, 1B, 2A, 2B, 3A, 3B, 4A, 4B, 5A, 5B, 6A, 6B, 7A, 7B, 8A, 8B, 9A, 9B, 10A, 10B

CNA Edge Alignment with Virginia Skills:

Pearson Vue Skill

LOCATION in CNA Edge

1. Hand Hyglene (Hand Washing)	2.4.9a Hand Hygiene (Hand Washing)					
2. Applies one knee-high elastic stocking	3.4.7a Applies One Knee-High Elastic Stocking					
3. Assists to ambulate using transfer belt	6.7.4a Assists to Ambulate Using Transfer Belt					
4. Assists with use of bedpan	3.6.13a Assists with Use of Bedpan					
5. Cleans upper or lower denture	3.6.8b Read and Review: Cleans Upper and Lower Denture					
6. Counts and records radial pulse	2.2.6a Counts and Records Radial Pulse					
7. Counts and records respirations	2.2.7a Counts and Records Respirations					
8. Donning and removing PPE (gown and gloves)	4.2.9a Donning and Removing PPE (Gown and Gloves)					
Dresses client with affected (weak) right arm	6.7.2a Dresses Client with Affected (Weak) Right Arm					
10. Feeds client who cannot feed self	6.6.4b Feeds Client Who Cannot Feed Self					
11. Gives modified bed bath (face and one arm, hand and underarm)	6.4.8a Gives Modified Bed Bath (Face and One Arm, Hand and Underarm)					
12. Measures and records electronic blood pressure	2.2.9b Alternative Blood Pressure Measurements					
13. Measures and records urinary output	8.2.5a Measures and Records Urinary Output					
14. Measures and records weight of ambulatory client	3.2.9b Read and Review: Measure the Weight of a Non-Ambulatory Reside					
15. Performs modified passive range of motion (PROM) for one knee and one ankle	5.4.7a Performs Modified Passive Range of Motion (PROM) for One Knee and One Ankle					
16. Performs modified passive range of motion (PROM) for one shoulder	5.4.7b Performs Modified Passive Range of Motion (PROM) for One Shoulder					
17. Positions on side	2.6.4b Positions on Side					
18. Provides catheter care for female	6.4.9a Provides Catheter Care for Female					
19. Provides foot care on one foot	5.4.2a Provides Foot Care on One Foot					
20. Provides mouth care	3.6.8a Provides Mouth Care					

21. Provides perineal care (peri-care) for female	6.4.3a Provides Perineal Care (Peri-Care) for Female					
22. Transfers from bed to wheelchair using transfer belt	2.7.4a Transfers from Bed to Wheelchair Using Transfer Belt					
23. Measures and records manual blood pressure	2.2.9a Measures and Records Manual Blood Pressure					

SKILLS CHECKLIST

Student Name:

Upon evaluation of each skill the instructor will indicate whether the skill was performed to a Satisfactory (S) or an Unsatisfactory (U) level. The instructor must sign and date the form and place it in the student record.

SKILL:	S	U	DATE:	INSTRUCTOR SIGNATURE:
1. Hand Hygiene (Hand Washing)				
2. Applies one knee-high elastic stocking				
3. Assists to ambulate using transfer belt				
4. Assists with use of bedpan				
5. Cleans upper or lower denture				
6. Counts and records radial pulse				
7. Counts and records respirations				
8. Donning and removing PPE (gown and gloves)				
9. Dresses client with affected (weak) right arm				
10. Feeds client who cannot feed self				
11. Gives modified bed bath (face and one arm, hand and underarm)				
12. Measures and records electronic blood pressure				
13. Measures and records urinary output				
14. Measures and records weight of ambulatory client				
15. Performs modified passive range of motion (PROM) for one knee and one ankle				
16. Performs modified passive range of motion (PROM) for one shoulder				
·17. Positions on side				
18. Provides catheter care for female				
19. Provides foot care on one foot				
20. Provides mouth care				
21. Provides perineal care (peri-care) for female				

22. Transfers from bed to wheelchair using transfer belt		
23. Measures and records manual blood pressure		

Section 1 - Overview

In Section 1, students are introduced to Marissa, a fictional character who has just completed her Nurse Aide Training program and is beginning her career as a CNA in a skilled nursing facility. In this section, students learn about a CNAs role in the facility, and the importance and purpose of long-term care.



Section 1 Lesson 1: Welcome to the Course

Learning Objectives:

- What is the course structure of CNA Edge?
- What kinds of content assets are in the course?
- Who are the virtual faculty in CNA Edge?

Topics Covered:

Introduction to long-term care

Content Assets:

- Close-Up: Course Overview
- In Focus: Welcome to the Course
- Close-Up: Meet Your Faculty

1.2

Section 1 Lesson 2: Your Role

Learning Objectives:

- Why is the role of the nurse aide so important to residents and their families?
- What makes a person a great CNA? Why?
- How will the students take notes in this course? What format will the students use?

Topics Covered:

- The role of the nurse aid
- Resident centered care

- Close-Up: You Are Critical to Patients, Families and Healthcare
- In Focus: Becoming a Certified Nursing Assistant
- In Focus: A CNA's Roles and Responsibilities
- Read and Review: Roles and Responsibilities in Long-Term Care
- Read: Introduction to Activities
- Activity: A CNA's Role
- Close-Up: Defining Excellent Healthcare
- In Focus: An Exceptional CNA
- In Focus: Being A Professional
- Activity: Self-Assessment
- Read and Review: Guidance Document
- Read and Review: Blank Note Taking Template for Videos
- Read and Review: Sample Note Taking Template for Videos

Section 1 Lesson 3: Issues of Aging

Learning Objectives:

- What do the students want for the themselves (or a loved one) as the students age? Why?
- What kinds of changes (physical, psychological, social) occur as we age? How do these changes affect us?
- What do these changes mean for the role of the CNA and for the students' patients?

Topics Covered:

Age related changes

Content Assets:

- Read: Introduction to Posts
- Post: Think About Yourself at Age 85
- In Focus: Getting Older
- Read and Review: Age Related Changes
- Activity: The Older Adult
- Post: Think About Yourself at Age 85 Again

1.4

Section 1 Lesson 4: Communication

Learning Objectives:

- What is Maslow's Hierarchy of Needs? Whys is this important for residential nursing care?
- What is HIPPA? Why is this law so important?
- What are some best practices for communicating with residents and their families? Why are these techniques considered best practices?

Topics Covered:

- Basic communication skills
- Maslow's hierarchy of needs

- In Focus: Maslow's Hierarchy of Needs
- Activity: Maslow's Hierarchy of Needs
- Close-Up: The CNA is Critical to Patients and Families
- In Focus: Respectful Communication
- Read and Review: Phone Skills
- In Focus: Patient Confidentiality and HIPAA
- Activity: Communication
- Episode 1: The Residents

Section 1 Lesson 5: Legal and Ethical Responsibilities

Learning Objectives:

- What are the primary legal and ethical responsibilities of a nurse aide?
- What is the Resident's Bill of Rights? Why are these rights so important?
- What is elder abuse?

Topics Covered:

- Legal and ethical responsibilities of the nurse aid
- Resident rights
- HIPPA

Content Assets:

- In Focus: Legal and Ethical Responsibilities
- Post: Was Evy Justified? Why? Why Not?
- In Focus: Resident Rights and Legal Responsibilities
- Read and Post: Residents' Rights
- In Focus: Boundaries
- Activity: Residents' Rights
- In Focus: Your Legal and Ethical Responsibilities Regarding Abuse
- In Focus: Ethical Responsibilities
- Activity: Elder Abuse

1.6

Section 1 Lesson 6: The Healthcare Team

Learning Objectives:

- What are some of the most common roles in long-term nursing care?
- How do members of the healthcare team and interdisciplinary team work together to help residents?

Topics Covered:

- The care team
- Chain of command

- Close-Up: The Healthcare Team
- Read and Review: Effective and Ineffective Teams
- Activity: The Healthcare Team
- In Focus: The Interdisciplinary Team
- In Focus: Procedures
- Activity: Introduction to Procedures

Section 1 Lesson 7: Your Workplace

Learning Objectives:

- What are the purposes and goals of long-term residential nursing care?
- What should you and your colleagues do in an emergency? Why?

Topics Covered:

- Fire and disaster planning
- The resident's room
- Self-care
- The survey process
- Affordable care

- In-Focus: Purposes and Goals of Long-Term Care
- Read and Review: The Long-Term Care Facility as Home
- In Focus: Affordable Care
- In Focus: Understanding the Survey Process
- Activity: The Long-Term Care Environment
- In Focus: In an Emergency
- Activity: Fire Safety and Disaster Planning
- Read and Review: Fire Extinguishers
- Read and Review: Smoking Safety
- Read and Review: Burn Risks
- Activity: The Resident's Room
- Close-Up: Taking Care of Yourself
- Post: How do you de-stress?

Section 1 Lesson 8: Test Preparation

Learning Objectives:

- What is the format of the multiple-choice test for CNA certification?
- How much of the content from Section 1 did the students learn?
- What do the student still need to study or review?

Content Assets:

- Test Taking Strategy #1 Read the Entire Question
- Activity: Practice Test 1A
- Post: Trying the strategy

1.9

Section 1 Lesson 9: The Final Word

Learning Objectives:

What are the students' major takeaways from Section 1?

Content Assets:

• Close-Up: Review of Section 1

Section 2 – Lily Lewis



Lily is the first resident that the students will be introduced to in the course. Lily, a young and active woman, suffered major injuries because of a car accident and ends up in the facility for rehab. Her family is very involved but not always in agreement with the care plan. In this section students will learn about rehabilitative care, positioning, infection control, basic transfers, admissions and discharge.

Section 2 Lesson 1: Admissions

Learning Objectives:

- What goes on during the resident admissions process? Why are a resident's admissions so important? What is the role of the nurse aide during admissions?
- What are delegation guidelines? What is the role of the CNA in following delegation guidelines?
- How do students make an unoccupied bed?

Topics Covered:

- Admissions
- Delegation guidelines
- Making an unoccupied bed

- Close-Up: Introduction to Section Two
- Episode 2: 28 Minutes to the Top
- In Focus: Admissions
- Activity: Admissions
- In Focus: Delegation Guidelines
- Activity: Delegation Guidelines
- In Focus: Changing Bed Linens
- Read and Review: Procedural Practice Activities
- Activity: Introduction to Procedural Practices
- Blank Note Taking Template for Procedures
- Sample Note Taking Template for Procedures
- Procedural Practice: Making an Unoccupied Bed

Section 2 Lesson 2: Vital Signs and the Physical Exam

Learning Objectives:

- What are the four vital signs? What do the four vital signs measure? Why are these measurements important?
- How do students take a resident's temperature, pulse, respiration rate and blood pressure?
- What are normal (and abnormal) ranges for each vital sign? What should a nurse aide do if one or more of a resident's vital signs are in the abnormal range?

Topics Covered:

- Vital signs
- The physical exam

- Close-Up: Introduction to Vital Signs
- In Focus: Introduction to Vital Signs
- In Focus: Temperature
- Procedural Practice: Measuring and Recording Temperature
- In Focus: Pulse
- Read and Review: Counts and Records Radial Pulse
- In Focus: Respiration
- Read and Review: Counts and Records Respirations
- In Focus: Blood Pressure
- Read and Review: Measures and Records Manual Blood Pressure
- Read and Review: Alternative Blood Pressure Readings
- Activity: Vital Signs
- Episode 3: The Exam
- In Focus: The Physical Exam
- Activity: Processes in the Physical Exam
- Episode 4: Introductions

Section 2 Lesson 3: Overview of Injuries, Surgery, and the Musculoskeletal System

Learning Objectives:

- What is the musculoskeletal system? What are the signs, symptoms, and treatments for common musculoskeletal disorders?
- What are the essential principles of emergency care? What is the role of the nurse aide in emergency care? What are the "ABC's" of emergency care?

Topics Covered:

- The musculoskeletal system and disorders
- Emergency care
- Hot and cold compresses

- Post: Have You Ever Had Surgery?
- Close-Up: Traumatic Accidents & Emergency Care
- In Focus: Basic Emergency Care
- Post: Nosebleeds and Bleeding
- In Focus: Rescue Breathing
- Read and Review: Cardiopulmonary Resuscitation
- Close-Up: Overview of Surgery and Rehabilitation
- In Focus: Fractures
- In Focus: Care for Musculoskeletal Disorders
- Read and Review: The Anatomy of the Musculoskeletal System
- Activity: The Symptoms, Injury, and Care of Musculo-Skeletal Disorders
- In Focus: Hot and Cold Compresses

Section 2 Lesson 4: Wound Care and Infection Control, Part 1

Learning Objectives:

- What are the types of wounds? What are the basic principles for wound care?
- What is an infection? Why is an infection so dangerous? What are the common signs of an infection?
- How can CNAs prevent infections? How do health care providers wash their hands?

Topics Covered:

- Wound care
- Infection control

Content Assets:

- In Focus: The Care Plan
- Episode 5: Observe and Report
- In Focus: Wounds
- Activity: Types of Wounds
- In Focus: Signs of Infections in Wounds
- In Focus: Introduction to Infection Control
- Activity: Infection Prevention Methods
- In Focus: Introduction to Hand Washing
- Close-Up: Handwashing
- Read and Review: Hand Hygiene (Hand Washing)
- Read and Review: Sections of Lily's Care Plan

2.5

Section 2 Lesson 5: Infection Control, Part 2

Learning Objectives:

- How can CNAs work to prevent infections in long-term residential nursing care?
- What is the blood borne pathogen standard? What are the common signs and symptoms of infection?
- How does a nurse aide put on and take off gloves?

Topics Covered:

Infection control (Cont.)

- Close-Up: Infection Control
- Activity: Identify Infection Risks and Signs to be Treated
- In Focus: Blood Borne Pathogens
- Close-Up: Clean and Sterile Gloving
- Procedural Practice: Putting on and Taking Off Gloves
- Episode 6: Stuck in Traction
- Post: Name One Thing You Will Pay Special Attention To

Section 2 Lesson 6: Positioning, Rehabilitative and Restorative Care

Learning Objectives:

- What is rehabilitative and restorative care? Why is this kind of care important?
- What are the basic principles of positioning a resident in bed? What are the common positions heath care provider: used with residents in bed? How do students position a resident in bed?
- What are range of motion exercises?

Topics Covered:

- Rehabilitative care
- Positioning residents in bed
- Body mechanics

- Close-Up: What is Rehabilitative Care and Why is it Important?
- In Focus: How to Move a Person to and from a Stretcher
- Procedural Practice: Moving a Person to a Stretcher
- Close-Up: Positioning Patients in Bed
- Read and Review: Positioning and Rehabilitative Devices
- Read and Review: Positions on Side
- In Focus: Positioning Residents in Bed
- In Focus: How to Move a Resident Up in a Bed
- Procedural Practice: Raising a Person's Head and Shoulders
- Procedural Practice: Helping a Patient Move Up in Bed When the Resident Can Help
- Procedural Practice: Moving the Person Up in Bed with a Trapeze
- In Focus: Moving a Resident from Side to Side in Bed
- Procedural Practice: Moving to the Side of the Bed When the Person Can Help
- Procedural Practice: Logrolling a Person
- Close-Up: Body Mechanics
- In Focus: Range of Motion Exercises

Section 2 Lesson 7: Bed Baths, Transfers and Discharges

Learning Objectives:

- What is a bed bath? Why is a bed bath important?
- What are the basic principles of resident transfers? How do students transfer a resident?
- What happens during a resident's discharge from the facility? What is the nurse aide's role in resident discharge?

Topics Covered:

- Basic transfers
- Bed baths
- Discharges

- In Focus: Bed Baths
- In Focus: Basic Transfers
- Close-Up: Transferring a Patient from a Bed to a Wheelchair
- Read and Review: Transfers from Bed to Wheelchair Using a Transfer Belt
- In Focus: Wheelchairs, Walkers, and Crutches
- Procedural Practice: Transferring a Person from a Wheelchair to a Bed
- Procedural Practice: Transferring a Person to and from the Toilet
- Episode 7: The Long Road Back
- In Focus: Resident Discharge

Section 2 Lesson 8: Test Preparation

Learning Objectives:

- How much content from Sections 1 and 2 did students learn?
- What content do students need to review?

Content Assets:

- Test Taking Strategy #2: Envision the Answer
- Practice Test 2A
- Post: Did You Try the Strategy?

2.9

Section 2 Lesson 9: Review of Section 2

Learning Objectives:

• What are the students' major takeaways from Section 2?

- Close-Up: Review of Section 2
- Close-Up: Section 2 Wrap-Up

Section 3 - Frank Grafton



Frank is a warm, funny man who is in long-term residential care and is dealing with very terminal health issues, including COPD and lung cancer. His daughter is very involved in his care but isn't always easy for the staff to work with as she deals with her own emotional struggles due to her father's decline. Eventually Frank dies, and hi story illustrates the emotional demands and rewards for a nurse aide.

Section 3 Lesson 1: The Care Plan & Documentation

Learning Objectives:

- What is the nursing process? Why is the nursing process important?
- What are the core principles of reporting and recording information? Why is reporting and recording information: important in long-term residential nursing care?

Topics Covered:

- The care plan
- Recording and reporting

- Close-Up: Introduction to Section 3
- In Focus: Frank
- In Focus: A Closer Look into the Nursing Process
- Activity: The Nursing Process
- Episode 8: Meet Frank
- In Focus: Recording and Reporting
- Activity: Documentation

Section 3 Lesson 2: Reporting and Recording Subjective and Objective Information

Learning Objectives:

- What is subjective information? What is objective information? Why are subjective and objective information important to health care providers?
- What are the core principles of reporting and recording information? What is the nurse aide's role in reporting and recording information?
- Why is the physical exam important? What happens during the physical exam?

Topics Covered:

- Subjective and objective information
- The physical

- Episode 9: Old Man River
- In Focus: What Do You See?
- Activity: Subjective or Objective Information
- Post: Subjective and Objective Information
- In Focus: Reporting vs. Recording
- Read and Review: Basic Observations
- Activity: Reporting and Recording
- Read and Review: Common Medical Abbreviations
- Episode 10: The Physical
- Procedural Practice: Measuring Weight and Height
- Read and Review: Measure the Height of a Resident in Bed
- Read and Review: Measuring and Recording the Weight of a Non-Ambulatory Resident
- Read and Review: Measures and Records Weight of Ambulatory Client

Section 3 Lesson 3: Respiratory Support

Learning Objectives:

- What is the respiratory system? Why is the respiratory system important?
- What are common disorders of the respiratory system? What is the role of the nurse aide in treating residents with disorders of the respiratory system?
- What is oxygen therapy? What is the role of the nurse alde in supporting oxygen therapy?

Topics Covered:

- The respiratory system and its disorders
- Deep breathing and coughing
- Incentive spirometer
- Oxygen therapy

- In Focus: The Respiratory System & Its Disorders
- Activity_ The Respiratory System & Its Disorders
- Episode 11: C.O.P.D.
- In Focus: Take a Deep Breath
- Procedural Practice: Assisting Deep Breathing and Coughing
- Procedural Practice: Incentive Spirometer
- Episode 12: Oxygen
- In Focus: Oxygen Therapy
- Read and Review: Oxygen Therapy
- Procedural Practice: Setting for Oxygen Administration
- Read and Review: Oxygen Therapy Safety Guidelines

Section 3 Lesson 4: Supporting Cardiovascular Care

Learning Objectives:

- What are the cardiovascular and circulatory systems? What are common disorders of the cardiovascular and circulatory systems?
- What is the role of the CNA in treating residents with disorders of the cardiovascular and circulatory systems?
- How do students apply elastic stockings to a resident?

Topics Covered:

- Cardiovascular system and its disorders
- The circulatory system
- Compression stockings

- Close-Up: Cardiovascular Disease Inside the Body
- Episode 13: Panther Mount
- In Focus: The Circulatory System
- In Focus: Care for Cardiovascular Disorders
- Activity: The Cardiovascular System and its Disorders
- Read and Review: The Structure and Function of the Heart
- In Focus: Compression Stockings
- Close-Up: Applying Elastic Stockings
- Read and Review: Applies One Knee-High Elastic Stocking
- Activity: Applying Compression Stockings

Section 3 Lesson 5: Supporting Care for Cancer

Learning Objectives:

- What is cancer? What does cancer do to a person's cells?
- What is the chain of infection? How can a nurse alde break the chain of Infection?
- What are the different types of isolation precautions? When do health care providers use isolation precautions?

Topics Covered:

- Cancer
- Infection control

- In Focus: Frank's Cancer
- Episode 14: Infection Control
- In Focus: Isolation Precautions
- Read and Review: Psychological Aspects of Isolation
- Activity: Chain of Infection
- Activity: Cancer and Transmission Based Precautions

Section 3 Lesson 6: Care for a Bedridden Patient

Learning Objectives:

- What are some of the core principles of taking care of a bedridden patient?
- How do nurse aides assist residents with sputum specimens?
- How do nurse aides assist residents with oral hygiene and denture care?
- How do nurse aides assist residents with bedpans, commodes and urinals?

Topics Covered:

- Sputum specimens
- Oral care
- Bed rails

- Episode 15: The Specimen
- In Focus: Taking A Sputum Specimen
- Procedural Practice: Collecting a Sputum Specimen
- Episode 16: Dignity
- In Focus: Bed Rails
- Read and Review: Entrapment Zones
- In Focus: Positive Thinking
- Post: Positive Thinking
- In Focus: Mirror, Mirror
- Read and Review: Provides Mouth Care
- Read and Review: Cleans Upper or Lower Denture
- Procedural Practice: Flossing Teeth
- Procedural Practice: Oral Care for an Unconscious Person
- In Focus: Assisting with Elimination
- Read and Review: Assists with Use of Bedpan
- Procedural Practice: Assisting with a Commode

Section 3 Lesson 7: Hospice and Palliative Care

Learning Objectives:

- What is hospice care? What is palliative care?
- What are the five stages of grief?
- What is the role of the nurse aide in caring for patients on IV therapy and those patients with chest tubes?

Topics Covered:

- Hospice and palliative care
- Grief

Content Assets:

- Episode 17: Frank's Decision
- In Focus: IV Therapy and Chest Tubes
- Close-Up: Care for Patients with Chest Tubes
- Episode 18: Frank in Hospice
- In Focus: Hospice and Palliative Care
- In Focus: The Five Stages of Grief
- Activity: Grief and Legal Responsibilities at the End of Life

3.8

Section 3 Lesson 8: Emergency Care and End of Life

Learning Objectives:

- What is a DNR order and why is it important?
- What is a heart attack? What is the role of the CNA in a medical emergency?
- What is the role of the nurse aide with post-mortem care? How can nurse aides help the family of the resident?

Topics Covered:

- DNR orders
- Post-mortem care

- Episode 19: Do Not Resuscitate
- Close-Up: Signs and Symptoms of a Heart Attack
- In Focus: I'm the One
- In Focus: Post Mortem Care
- Activity: The Chain of Survival and Post Mortem Care
- Episode 20: Family
- Post: If You Were Working with Frank
- In Focus: Self Care

Section 3 Lesson 9: Test Preparation

Learning Objectives:

- How much content from Sections 1-3 did students learn?
- What content do students need to review?

Content Assets:

- Test Taking Strategy #3: Read All Before Deciding
- Practice Test 3A
- Post: Did You Try the Strategy? Why or why not?

3.10

Section 3 Lesson 10: Review of Section 3

Learning Objectives:

• What are students' major takeaways from Section 3?

- Close-Up: Review of Section 3
- Close-Up: Section 3 Wrap-Up

Section 4 - Helen Franco



Heien is a resident who struggles to adjust to life in residential nursing care. She is HIV positive and challenged with mental illness, and at times has great difficulty interacting with staff and other residents. Through Helen the students will observe essential elements of communication, standard precautions, and grooming.

Section 4 Lesson 1: Working with Challenging Patients

Learning Objectives:

- What is mental health? What is mental illness?
- What are some common mental health disorders?
- What are some ways the students can work with challenging patients?

Topics Covered:

- Mental health and mental illness
- The care plan
- Care plan meetings

- Close-Up: Introduction to Section 4
- Episode: 21: Polar Bear Disease
- Read and Review: Resident Behavior
- Read and Review: Helen's Care Plan
- Episode 22: Life is Art
- In Focus: Mind over Matter
- Read and Review: Schizophrenia
- Activity: Mental Health Needs of Residents
- Read and Review: Defense Mechanisms
- Post: The Mentai Health Needs of Residents

Section 4 Lesson 2: Living with HIV

Learning Objectives:

- How can healthcare providers address discrimination and help resolve conflicts in residential facilities?
- What is the immune system? What are HIV and AIDS? How do these diseases affect the immune system? What is the blood borne pathogen standard?
- What is PPE? How do healthcare providers use PPE? Why do healthcare providers use PPE?

Topics covered:

- Standard precautions
- The blood borne pathogen standard
- Sharps
- PPE
- HIV
- Discrimination

- Post: Have you or a loved one ever been the victim of discrimination?
- Episode 23: Discrimination
- Read and Review: Resolving Grievances and Disputes
- In Focus: Addressing Discrimination
- In Focus: The Immune System
- Activity: Elements of the Immune System
- In Focus: The Human Immunodeficiency Virus
- Activity: What is HIV and AIDS?
- Close-up: Review of Blood Borne Pathogens and Sharps Disposal
- In Focus: Personal Protective Equipment
- Read and Review: Donning and Removing Personal Protective Equipment (Gown and Gloves)

Section 4 Lesson 3: Grooming

Learning Objectives:

- How does a nurse aide assist a resident in bathing? (Tub/Shower)
- How does a nurse aide assist a resident with grooming and haircare?

Topics Covered:

- Bathing/showers
- Washing hair
- Grooming

- Episode 24: Depression
- In Focus: Assisting with a Bath or Shower
- Read and Review: Assisting a Resident to Bathe in a Whirlpool
- Procedural Practice: Assisting with a Tub Bath
- Procedural Practice: Assisting with a Shower
- In Focus: Groom in Your Room
- Read and Review: Grooming Facial Hair and Make-Up
- Activity: Washing Hair and Grooming
- Procedural Practice: Washing a Resident's Hair

Section 4 Lesson 4: The Compromised Immune System

Learning Objectives:

- How does a resident with a weakened immune system feel? Why is having a weakened immune system so dangerous for a resident?
- What are common signs and symptoms of pain?
- How can a nurse aide help care for a resident with a weakened immune system? How can a nurse help care for a resident in pain?

Topics Covered:

- The immune systems
- Pain

- Episode 25: On the Inside
- Post: Any advice?
- In Focus: An Immune System to the Rescue...or Maybe Not.
- Activity: An Immune System Under Stress
- Activity: Pain and Medication
- Close-up: Compromised Immune System
- In Focus: Selections of Helen's Care Plan

Section 4 Lesson 5: The Infection Cycle and Facility Based Infection Prevention and Control

Learning Objectives:

- What is the infection cycle? How can nurse aides help break the chain of infection?
- What do the terms: clean, dirty, medical asepsis, and sterile mean?
- How should healthcare providers dispose of sharps? Why?

Topics Covered:

- Infection control
- Cleaning
- Disinfecting and sanitizing

Content Assets:

- Episode 26: Signs of Infection
- In Focus: The Infection Cycle
- Activity: Infection Control: Sharps
- Close-Up: Why is Cleanliness of the Facility So Important and What You Can Do About it
- In Focus: Sanitize and Clean All Unseen Germs
- Activity: Clean vs. Dirty Items
- Post: Teach Infection Prevention or Control

4.6

Section 4 Lesson 6: Helen's Manic Episode

Learning Objectives:

- How does mental illness impact a resident's behavior and state of mind?
- What are some ways that a nurse aide can work with a resident who has mental illness?

Topics Covered:

- The effects of drug and alcoholabuse
- Suicide

- Episode 27: Ghost Bird
- Post: Working with Combative Residents
- In Focus: Riding the Emotional Roller Coaster
- Activity: Bi-PolarDisorder
- In Focus: Mental Health Issues: Anxiety and Substance Abuse
- Close-Up: The Effects of Drug and Alcohol Abuse on the Body
- In Focus: Suicide
- Activity: Mental Health Issues and Suicide

Section 4 Lesson 7: Restraints and Residents' Rights

Learning Objectives:

- What are restraints? When (and why) do healthcare providers sometimes use restraints?
- What are the dangers of restraints?
- What rights do residents have when they are in restraints? What is the role of the nurse aide in caring for residents in restraints?

Topics Covered:

- Restraints
- Residents rights
- Legal and ethical responsibilities of the nursing assistant
- Dementia

- In Focus: Restraints
- Activity: Safe Restraint Use
- In Focus: Omnibus Budget Reconciliation Act
- Activity: Legal Rights and Responsibilities
- Episode 28: Long Lost Sisters
- In Focus: It's Easy to Forget: Mild Dementia

Section 4 Lesson 8: Test Preparation

Learning Objectives:

- How much content from Sections 1-4 did students learn?
- What content do students need to review?

Content Assets:

- Test Prep Strategy #4: Eliminate Obvious Wrong Answers First
- Activity: Practice Test 4A
- Post: How Prepared Are You?

4.9

Section 4 Lesson 9: Review of Section 4

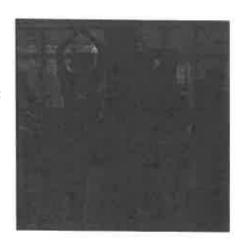
Learning Objectives:

• What are students' major takeaways from Section 4?

- Close-Up: Review of Section 4
- Close-Up: Section 4 Wrap-Up

Section 5 - Martha Vance

Martha, a feisty and occasionally stubborn resident, and her partner are adjusting to Martha's new life in the skilled nursing facility. Martha is faced with limited mobility, falling eyesight, and other serious health concerns because of her uncontrolled diabetes. Students will learn about the importance of diet and exercise in long-term care, and gain a deeper understanding of chronic disease.



Section 5 Lesson 1: Introduction to Diabetes and Obesity

Learning Objectives:

- What is the endocrine system? What are some of the most common endocrine system disorders? How to healthcar providers help care for people with endocrine system disorders?
- What is diabetes? What health problems often accompany diabetes?
- What is obesity? What health problems often accompany obesity?

Topics Covered:

- The endocrine system and its disorders
- Diabetes
- Obesity
- Discrimination

Content Assets:

- Close-Up: Introduction to Section Five
- Episode 29: Martha and Ceily
- Close-Up: Overview of Diabetes and Obesity
- In Focus: The Endocrine System
- Read and Review: Hypothyroidism and Hyperthyroidism
- In Focus: Understanding Diabetes
- Activity: The Endocrine System and Diabetes Overview

5.2

Section 5 Lesson 2: Digestive System and Blood Glucose Management

Learning Objectives:

- What is the digestive system? What are some common disorders of the digestive system?
- What are hyper- and hypoglycemia? Why is it important to help people with diabetes manage their blood sugar?

Topics Covered:

- The digestive system and its disorders
- Hypo and hyperglycemia

- In Focus: Digestive System Disorders
- Read and Review: An Overview of Digestive System Disorders
- Activity: The Digestive System and Its Disorders
- Episode 30: Blood Bugs
- In Focus: A Balancing Act
- Review: An Overview of Hyperglycemia and Hypoglycemia
- Post: How Would You Help Martha?

Section 5 Lesson 3: Mealtimes, Special Diets and Nutrition

Learning Objectives:

- What are the basic principles of nutrition? What are the "My Plate" guidelines? Why is good nutrition important for residents?
- What kind of diet does someone with diabetes need to stay healthy?
- How does a nurse aide monitor a resident's intake and output? Why is this monitoring intake and output important?
- Why is mealtime important?

Topics Covered:

- Meal times
- Food guidelines for diabetic patients
- Monitoring intake and output
- Food and culture

- In Focus: Food is Medicine
- Read and Review: Hydration
- In Focus: Food Guidelines for Diabetics
- Activity: A Diabetic's Diet
- Episode 31: Mealtime
- In Focus: Procedure for Monitoring Intake and Output
- Activity: Monitoring Intake and Output
- Close-Up: Mealtime: Nutrition and Culture

Section 5 Lesson 4: Foot Care, Exercise and Range of Motion

Learning Objectives:

- What should a nurse aide do to help care for residents' feet? How is the foot care of someone with diabetes different from a resident without diabetes? Why?
- Why is exercise important for residents? How can a nurse aide help encourage residents to exercise?
- What are range of motion exercises and why are they important? How can a nurse aide help residents perform range of motion exercises?

Topics Covered:

- Diabetic foot care
- Foot care
- Exercise
- Range of motion

- Close Up: Diabetic Foot Care
- In Focus: Foot Care
- Read and Review: Provides Foot Care on One Foot
- In Focus: Exercise
- Activity: Caring for Diabetics
- Episode 32: Giddy Up!
- Post: Glddy Upl
- Close Up: Range of Motion Exercises
- Read and Review: Performs Modified Passive Range of Motion (PROM) for One Knee and One Ankle
- Read and Review: Performs Modified Passive Range of Motion (PROM) for One Shoulder

Section 5 Lesson 5: Residents with Hearing and Visual Impairments

Learning Objectives:

- Why are falls in residential nursing care so dangerous? How can nurse aides prevent falls? How can a nurse aide help a resident who falls?
- What are some core principles of working with residents who have a visual impairment?
- What are some core principles of working with residents who have a hearing impairment?
- How can nurse aides prevent accidents before they occur?

Topics Covered:

- Working with visually impaired and hearingimpaired residents
- Falls
- Poisons

- Episode 33: BlackSpots
- In Focus: Falls
- Read and Review: Incident and Accident Reports
- Procedural Practice: Stopping a Fall
- Episode 34: Falling Apart
- Close Up: Working with Visually Impaired Patients
- In Focus: Hearing and Visual Impairment
- Read and Review: Anatomy, Physiology and Disorders of the Ear
- Activity: Working with Residents with Hearing and Vision Loss
- Read and Review: Working with Residents Who Have Lost a Sense of Touch, Smell or Taste
- In Focus: Care of Residents with Eyeglasses, Contact Lenses, and Artificial Eyes
- In Focus: The Risk Management Mindset
- Activity: Developing a Risk Management Mindset
- Read and Review: Poisons

Section 5 Lesson 6: Pressure Ulcers

Learning Objectives:

- What are pressure ulcers? How do pressure ulcers form? Where do pressure ulcers form?
- What can nurse aldes do to prevent pressure ulcers?
- How do healthcare providers care for pressure ulcers once these injuries occur?

Topics Covered:

Pressure ulcers

Content Assets:

- In Focus: Pressure Ulcers Stages and Treatment
- Close-Up: Pressure Ulcers
- In Focus: Pressure Ulcer: Prevention and Treatment
- Read and Review: Pressure Reducing Devices
- Activity: Pressure Ulcers

5.7

Section 5 Lesson 7: Morning, Afternoon and Night

Learning Objectives:

- What are AM, PM and evening care? What role does the nurse aide play in AM, PM and evening care?
- What are mechanical lifts? When do CNAs use these lifts? What role does the nurse aide play in operating a
 mechanical lift?
- What is the difference between chronic and acute illness?

Topics Covered:

- Transfers with a mechanical life
- Activities of Daily Living
- Chronic and acute illness

- Episode 35: ADL With Martha
- Post: A "beginner's mistake"
- In Focus: Morning, Afternoon, and Night
- In Focus: Transferring Patients Using a Mechanical Lift
- Procedural Practice: Moving a Person with a Mechanical Lift
- In Focus: Chronic and Acute Illness
- Activity: AM/PM Care, Mechanical Lifts, and Chronic and Acute Care

Section 5 Lesson 8: Revisiting the Care Plan

Learning Objectives:

- What is "shingles"? Why is this condition dangerous? How can a nurse aide help care for a resident with shingles?
- What role does a nurse aide play in helping a resident meet the goals on his or her care plan?

Topics Covered:

Shingles

Content Assets:

- In-Focus: ShinglesActivity: Shingles
- Episode 36: Anniversary
- In-Focus: How Am I Doing?
- Post: Will Martha Meet Her Goals?

5.9

Section 5 Lesson 9: Test Preparation

Learning Objectives:

- How much content from Sections 1-5 did students learn?
- What content do students need to review?

Content Assets:

- Test Taking Strategy #5
- Activity: Practice Test 5A

5.10

Section 5 Lesson 10: Review of Section 5

Learning Objectives:

What are students' major takeaways from Section 5?

- Close-Up: Review of Section 5
- Close-Up: Section 5 Wrap-Up

Section 6 - Dr. Timothy Lerner



Dr. Lerner and his wife Simone are introduced in Section 6. They are adjusting to a new reality after having just moved from assisted living to a residential nursing home care following Dr. Lerner's stroke. Through Dr. Lerner the students will learn about the restorative care, and watch as the care team tries to return the patient back to some of his previous functioning.

Section 6 Lesson 1: Assisted Living and Resident Sexuality

Learning Objectives:

- What is assisted living? How is it different from long-term residential nursing care?
- What rights do residents have in expressing their sexuality? What is the role of the nurse aide in helping residents express their sexuality?

Topics Covered:

- Assisted living
- Resident sexuality
- The service plan

Content Assets:

- Close-Up: Introduction to Section 6
- Episode 37: Timothy and Simone
- In Focus: Assisted Living
- In Focus: The Service Plan
- Read and Review: Timothy's Service Plan
- Activity: Assisted Living
- Episode 38: Always Knock
- In Focus: Resident Sexuality
- Activity: Resident Sexuality

6.2

Section 6 Lesson 2: Timothy's Stroke and Change in Condition

Learning Objectives:

- What is the nervous system? What are some common disorders of the nervous system? What is the role of the nurse alde in helping to care for residents with nervous system disorders?
- What is the nurse aide's role in the admissions process?

Topics Covered:

- Defining and identifying warning signs of Strokes
- The nervous system and its disorders

- Episode 39: Stroke
- Read and Review: Assisting with Hospital Transfers
- In Focus: Strokes: Definition, Warning Signs, and Treatment
- Read & Review: Signs and Symptoms of a Stroke
- Close-Up: The Nervous System
- Activity: Nervous System Disorders/Strokes
- Read and Review: The Nervous System
- Read and Review: Caring for Residents with ALS and Spinal Cord Injuries
- In Focus: Admissions.

Section 6 Lesson 3: Working with a Depressed Patient

Learning Objectives:

- What is depression? How does a depressed person act? What role can the nurse aide play in caring for residents who are depressed?
- How does a nurse aide make an occupied bed?

Topics Covered:

- Depression
- Making an occupied bed

- Episode 40: A Great Man
- Close-Up: Working with a Depressed Patient
- In Focus: Depression
- Activity: Depression
- Post: What is One Thing You Can Do?
- Episode 41: Caring for Timothy
- In Focus: Making an Occupied Bed
- Procedural Practice: Making an Occupied Bed

Section 6 Lesson 4: ADL: Toileting, Bathing and Catheter Care

Learning Objectives:

- Why is toileting, urination and bowel elimination so important?
- What kinds of equipment do health care providers use to aid residents in tolleting, urination and bowel elimination?
- What is the role of the nurse aide in supporting residents/ urination and bowel elimination?

Topics Covered:

- Urination and bowel elimination
- Bedpans
- Commodes
- Briefs
- Perineal care
- Bed baths
- Catheters and catheter care

- Close-Up: Urination & Bowel Elimination
- In Focus: Toileting Aids
- In Focus: Perineal Care
- Read and Review: Provides Perineal Care (Peri-Care) for Female
- Activity: Toileting
- Procedural Practice: Perineal Care for Males
- In Focus: Bathing for Bedridden Residents
- Read and Review: Gives Modified Bed Bath (Face and One Arm, Hand and Underarm)
- in Focus: Catheter Care
- Read and Review: Provide Catheter Care for Female
- Procedural Practice: Applying a Condom Catheter

Section 6 Lesson 5: ADL: Skin and Nail Care

Learning Objectives:

- How is the skin of older adults different from the skin of the younger adults? How can a nurse aide help care for the skin of residents?
- How are the nails of older adults different from the nails of the younger adults? How can a nurse aide help care for the nails of residents?
- Why are back rubs helpful for residents? How can a nurse aide give a resident a backrub?

Topics Covered:

- Massage
- Nail care
- Skin care for olderadults

- Close-Up: MassageIn Focus: Nail Care
- Close-Up: Skin Care for Older Adults
- Read and Review: The Integumentary System
- Read and Review: Scables and Pediculosis

Section 6 Lesson 6: Mealtimes

Learning Objectives:

- Why are mealtimes important?
- What is the role of the nurse aide during mealtimes?
- How does a nurse aide serve meal trays and feed residents who cannot feed themselves?
- How does a nurse aide prevent aspiration? How does a nurse aide perform the Heimlich maneuver?

Topics Covered:

- Mealtimes
- Feeding residents
- Aspiration
- Heimlich maneuver
- Nutrition/Hydration

- In Focus: Mealtimes and Preventing Foodborne Illnesses
- Procedural Practice: Serving Meal Trays
- Episode 42: Patience
- In Focus: Feeding a Resident
- Read and Review: Promoting Nutrition and Safe Eating
- Read and Review: Feeds Client Who Cannot Feed Self
- Read and Review: Proper Positioning During Mealtime
- In Focus: Aspiration
- Close-Up: Heimlich Maneuver
- Read and Review: Clearing the Obstructed Airway the Unconscious Adult
- Post: Mealtimes

Section 6 Lesson 7: Rehabilitative and Restorative Care

Learning Objectives:

- What is rehabilitative and restorative care?
- How does a nurse aide help a resident get dressed and undressed?
- How does a nurse aide support ambulation with a gait belt?
- What are some best practices for cross-cultural communication?

Topics Covered:

- Rehabilitative and restorative care
- Dressing and undressing
- Gait belts and ambulation
- Cross cultural communication

- In Focus: Rehabilitative and Restorative Care
- Read and Review: Orthotic Devices
- Close-Up: Dressing and Undressing Patients
- Read and Review: Dresses Client with Affected (Weak) Right Arm
- Read and Review: Assistive Devices for Dressing
- Episode 43: Moving Timothy
- Close-Up: Gait Belts: Assisting with Ambulation
- Read and Review: Assists to Ambulate Using Transfer Belt
- Episode 44: To Make a Difference
- In Focus: Communication
- In Focus: Cross Cultural Communication
- Read and Review: Providing Culturally Sensitive Care to Residents
- Activity: Best Practices for Communicating with Residents

Section 6 Lesson 8: Test Preparation

Learning Objectives:

- How much content from Sections 1-6 did students learn?
- What content do students need to review?

Content Assets:

- Test Prep Strategy #6: Once You've Done Your Best, Be Sure to Guess
- Activity: Practice Test 6A

6.9

Section 6 Lesson 9: Review of Section 6

Learning Objectives:

• What are students' major takeaways from Section 6?

- Close-Up: Review of Section 6
- Close-Up: Section 6 Wrap-Up

Section 7 - Stuart Boone



Through the story of Stuart, students will begin to understand the many challenges faced while working with patients with Alzheimer's or other dementia. Stuart's cognitive abilities quickly decline, and at some points he displays aggressive behaviors towards staff. Effective communication and caring for patients with Alzheimer's is a focus.

Section 7 Lesson 1: Introduction to Dementia and Alzheimer's Disease

Learning Objectives:

- What is dementia? What is Alzheimer's disease? How are these conditions similar? How are these conditions different?
- How can a nurse aide help care for a resident with mild Alzhelmer's disease?

Topics Covered:

• Dementia and Alzheimer's disease

- Close-Up: Introduction to Section 7
- Close-Up: Introduction to Dementia and Alzheimer's
- Episode 45: Stuart and His Family
- Close-Up: Introduction to Mild Dementia or Alzheimer's
- In Focus: The Mind Cannot Remember Though the Heart Never Forgets
- Activity: Signs and Symptoms of Dementia and Alzheimer's

Section 7 Lesson 2: Care for Moderate Alzheimer's Disease, Part 1

Learning Objectives:

- What are the characteristics of moderate Alzheimer's disease?
- What is wandering? Why is wandering dangerous for residents with Alzheimer's disease?
- How can a nurse aide communicate with a resident who has moderate Alzheimer's disease?

Topics Covered:

- Communicating and managing the behavior of residents with cognitive impairments
- Legal and ethical responsibilities of the nursing assistant
- Wandering and elopement

Content Assets:

- Close-Up: Introduction to Moderate Dementia or Alzheimer's
- Episode 46: Personality Changes Part I
- Post: A "Rookie Mistake"
- In Focus: It's a Wanderful Life
- Read and Review: Elopement Prevention
- Activity: Wandering and Environmental Hazards
- Episode 47: Personality Changes Part II
- In Focus: It's Not What You Say, But How You Say It
- In Focus: Instead of Correcting, Try Redirecting
- Activity: Communicating with the Alzheimer's Patient
- Read and Review: Communicating with Cognitively Impaired Residents
- Post: Advice for Caring for Dementia or Alzheimer's Residents

7.3

Section 7 Lesson 3: Care for Moderate Alzheimer's Disease, Part 2

Learning Objectives:

- What is sexual aggression?
- What should a nurse aide do if a resident becomes sexually aggressive?

Topics Covered:

- Communicating and managing the behavior of residents with cognitive impairments (Cont.)
- Sexual aggression

- Episode 48: Sexual Aggression Part 1
- In Focus: Interpreting and Managing Resident Behavior
- Close-Up: Managing Sexual Aggression
- Activity: Strategies for Handling Sexual Aggression
- Post: If You Were Marissa
- Episode 49: Sexual Aggression Part 2

Section 7 Lesson 4: Care for Moderate Alzheimer's Disease, Part 3

Learning Objectives:

• What are best practices for nurse aides when working with residents who have moderate Alzheimer's disease?
What are some best practices for communicating with residents who have moderate Alzheimer's disease?

Topics Covered:

Communicating and managing the behavior of residents with cognitive impairments (Cont.)

Content Assets:

- In Focus: R-E-S-P-E-C-T Find Out What It Means to Me
- Post: What Would YouDo?
- Close-Up: Working with Patients Who Have Moderate Dementia or Alzheimer's
- Activity: Working with Residents Who Have Moderate Alzheimer's

7.5

Section 7 Lesson 5: Care for Severe Alzheimer's Disease, Part 1

Learning Objectives:

- What are the characteristics of severe Alzheimer's disease?
- What is Sundowning How should a nurse aide work with a resident who is Sundowning? Why?
- What are best practices for using restraints with residents?
- How should a nurse aide reposition a person in a chair? Why?

Topics Covered:

- Restraints
- Sundowning

- Close-Up: Introduction to Severe Dementia or Alzheimer's
- Episode 50: Severe Alzheimer's
- Read and Review: Burnout
- In Focus: Sundowning: The Wanderers of the Night
- Episode 51: Chemical Restraint
- Activity: Dangers of Restraints
- Close-Up: The Impact of Dementia or Alzheimer's on the Family
- Close-Up: Working with Residents with Severe Dementia or Alzheimer's Disease
- In Focus: Repositioning a Person in a Chair
- Procedural Practice: Repositioning a Person in a Chair

Section 7 Lesson 6: Care for Severe Alzheimer's Disease, Part 2

Learning Objectives:

- How should a nurse aide care for an unresponsive patient? Why?
- What are feeding tubes? What is the nurse aide's role in caring for residents with feeding tubes?
- Why are range of motion exercises important for unresponsive patients?

Topics Covered:

- Caring for unresponsive patients
- Enteral nutrition/feeding tubes
- Repositioning a person in a chair
- Range of motion

- Episode 52: Comatose
- In Focus: Caring for Unresponsive Patients
- Close-Up: Care for Unresponsive Patients
- Read and Review: Review of Positioning
- Activity: Caring for Unresponsive Patients
- In Focus: Enteral Nutrition Feeding Tubes
- Read and Review: IV Therapy and Peripherally Inserted Central Catheters (PICC)
- Activity: Feeding Tubes
- In Focus: A Deep Devotion to Range of Motion

Section 7 Lesson 7: Additional Care Measures for the Bladder and the Bowels

Learning Objectives:

- Why is bowel elimination so important? How can nurse aides help care for residents' bowel elimination needs? What can happen if a resident does not regularly empty his or her bowels?
- How can nurse aides help residents who are incontinent? What is a bowel or bladder training program? What is the role of the nurse aide in supporting a bowel or bladder training program?

Topics Covered:

- Incontinence
- Enema
- Ostomy

Content Assets:

- In Focus: Care of Bodily Functions Bowel Elimination
- Procedural Practice: Giving A Commercially Prepared Enema
- In Focus: Urinary and Bowelincontinence
- Activity: Elimination
- Read and Review: Bowel and Bladder Training
- Read and Review: Stool Samples

7.8

Section 7 Lesson 8: Death

Learning Objectives:

- What are the signs and symptoms of death?
- What are the five stages of grief? What does grief look like for residents and families?
- What is the nurse aide's role in helping residents and their families manage death and dying?

Topics Covered:

Death and dying

- Episode 53: Last Breath
- In Focus: Final Days Recognizing the Signs of Death
- Activity: CNA's Role in Death and Dying
- Episode 54: The Conversation
- Post: Supporting the Grieving Process
- In Focus: Helping the Family

Section 7 Lesson 9: Test Preparation

Learning Objectives:

- How much content from Sections 1-7 did students learn?
- What content do students need to review?

Content Assets:

- Test Taking Strategy #7
- Activity: Practice Test 7A
- Post: Helpful Strategies

7.10

Section 7 Lesson 10: Review of Section 7

Learning Objectives:

• What are students' major takeaways from Section 7?

- Close-Up: Review of Section 7
- Close-Up: Section 7 Wrap Up

Section 8 - Michelle Gilmore

Some residents may have developmental disabilities in addition to other complex health conditions. In Section 8, students meet Michelle Gilmore and her brother. They will see how the team cares for a patient with kidney failure, and see how the nursing home grapples with an extreme violation of residents' rights.



Section 8 Lesson 1: Introduction to Developmental Disabilities

Learning Objectives:

- What are "developmental disabilities"? What are some of the most common developmental disabilities? How should a nurse aide help care for a resident with a developmental disability?
- What are best practices that health care providers use to promote rest and sleep?

Topics Covered:

- Developmental disabilities
- Sleep

- Close-Up: Introduction to Section 8
- Episode 55: Michelle and Her Brother
- Read and Review: Coping Mechanisms
- Post: Asking for Assistance
- Close-Up: Introduction to Developmental Disabilities
- In Focus: Developmental Disabilities
- In Focus: Sleep
- Activity: Understanding Sleep

Section 8 Lesson 2: The Urinary System

Learning Objectives:

- What is the urinary system? What are some common urinary system disorders? What is the role of the nurse aide is caring for residents with disorders of the urinary system?
- How does a nurse aide measure and record urinary output? How does a nurse aide collect urine specimens? How
 does a nurse aide empty a urinary drainage bag?
- What are diarrhea and bacterial infections? How can a nurse aide help prevent these conditions?
- How does a nurse aide double bag infectious waste?

Topics Covered:

- The urinary system and its disorders
- Measure and record intake and output
- Urine testing
- Diarrhea and bacterial infections
- Infectious waste

- Episode 56: Incontinence
- In Focus: The Urinary System
- Activity: The Urinary System
- In Focus: Other Urinary Disorders
- In Focus: Measure and Record Urinary Output
- Read and Review: Measures and Records Urinary Output
- Procedural Practice: Collecting a Routine Urine Specimen
- Procedural Practice: Collecting a Clean Catch Urine Specimen
- Read and Review: Emptying Urine Drainage Bag
- Read and Review: Emptying a Urinary Drainage Bag
- In Focus: Urine Testing
- In Focus: Diarrhea and Bacterial Infections
- Procedural Practice: Double Bagging Infectious Waste
- Episode 57: Michelle's Special Diet
- Read and Review: Special Diets

Section 8 Lesson 3: Dialysis

Learning Objectives:

What is kidney disease? What is dialysis? What is the role of the nurse aide in caring for a resident on dialysis?

Topics Covered:

- Dialysis
- Kidney disease
- Special diets

Content Assets:

- Episode 58: Dialysis
- Close-Up: Kidney Disease and Dialysis
- Activity: Urinary Disorders & Dialysis
- Post: Care for Michelle

8.4

Section 8 Lesson 4: Suspected Abuse

Learning Objectives:

- What are the definitions of neglect and abuse?
- What should a nurse aide do if he or she suspects neglect or abuse?

Topics Covered:

- Neglect
- Abuse

- Episode 59: Bruises
- Post: What Would YouDo?
- Close-Up: Neglect and Abuse
- In-Focus: There's No Excuse for Resident Abuse

Section 8 Lesson 5: Reporting Abuse

Learning Objectives:

- What happens if there is a report of neglect or abuse in a health care setting?
- Who is the Ombudsman? What role does this person play?
- What are the legal requirements in terms of reporting suspected neglect and /or abuse?
- What are the consequences if a nurse alde is found to have neglected or abused a resident?

Topics Covered:

- Resident rights
- Reporting abuse

- Episode 60: Consequences
- Post: Another Outcome
- In-Focus: Abuse: Legal Recourse and Obligation to Report
- Read and Review: Code of Virginia §63.2-1606 Mandated and Voluntary Reporting
- Close-Up: Reporting Requirements for Neglect and Abuse

Section 8 Lesson 6: Test Preparation, Part 1

Learning Objectives:

- How much content from Sections 1-8 did students learn?
- What content do students need to review?

Content Assets:

- Test Strategy #8: Make a List
- Activity: Practice Test 8A
- Post: What Did You Learn?

8.7

Section 8 Lesson 7: Review of Section 8

Learning Objectives:

• What are students' major takeaways from Section 8?

- Close-Up: Review of Section 8
- Close-Up: Section 8 Wrap-Up

Section 9 - Beth Grafton



CNAs may work in a variety of settings such as: assisted living, residential nursing care, rehabilitative care, or even a hospital. In Section 9, students watch Beth Grafton (Frank's daughter from Section 3) prepare for the birth of her first child. As they move through Section 9, they will see that many of the care measures they learned in Sections 1-8 also apply to patient care in hospitals.

Section 9 Lesson 1: Introduction to the Reproductive System

Learning Objectives:

- What is the reproductive system? What are common diseases/disorders of the reproductive system?
- Why are STDs common in residential nursing care facilities?
- Why do many older men have an enlarged prostate? What happens to older men with an enlarged prostate? Why:

Topics Covered:

- The reproductive system and its disorders
- Pregnancy
- Labor
- Delivery
- Birth

- Episode 61: Beth and Malik
- In-Focus: The Reproductive System and Its Disorders
- In-Focus: Sexually Transmitted Diseases
- In-Focus: The Enlarged Prostate
- Activity: The Reproductive System and Sexually Transmitted Diseases

Section 9 Lesson 2: 1st - 3rd Trimesters

Learning Objectives:

- What are pregnancy trimesters?
- What happens to a woman's body during pregnancy?
- What are the stages of development of a fetus?
- What are pregnancy best practices?
- What is the CNA's role in caring for a pregnant woman?

Topics Covered:

• Understanding the CNAs role in pregnancy and working with pregnant women

Content Assets:

• Close-Up: Overview Of Pregnancy

• In Focus: 9 Months

In Focus: Your Role in Pregnancy

Activity: 9 Months

• Episode 62: Prepping for Birth

Section 9 Lesson 3: Labor and Delivery

Learning Objectives:

- What are the stages of labor?
- What is the CNAs role in caring for a woman delivering a baby?
- What does a new mom need after delivery
- What are the phases of surgery?

Topics Covered:

- The labor and delivery process, before, during, and after
- Phases of surgery
- C-sections
- Child Development

- Close-Up: Overview Of Labor And Delivery
- Episode 63: A New Life
- In Focus: The Phases of Surgery
- Activity: The Phases of Surgery
- In Focus: After the Birth
- Activity: Immediate Care Measures After the Birth

Section 9 Lesson 4: Neonatal Care and Pain

Learning Objectives:

- What are best practices for neonatal care and pain?
- What are different kinds of pain and the best treatment?
- What is the CNA's role in the treatment of pain?

Topics Covered:

- Neonatal care
- Pain
- Pain management

- In Focus: Neonatal Care
- In Focus: Pain
- Read and Review: Pain and Discomfort
- Activity: Pain and Pain Management
- Post: Your Experience of Pain

Section 9 Lesson 5: Postoperative Care for Mother and Baby

Learning Objectives:

- What are important postoperative care measures for a mother and infant?
- What are the phases of wound healing?
- What is the role of the CNA in wound care?

Topics Covered:

- Postoperative care
- Wound care
- Infection control
- Breast/bottle feeding

- In Focus: Shift Change
- Activity: Shift Change
- In Focus: Wound Care
- Activity: Wound Care
- Activity: Infection Control
- In Focus: Care for the Mother
- Activity: Care for the Mother
- 5 minutes
- Read and Review: Sitz Bath
- In Focus: Breast/Bottle Feeding
- Activity: Feeding the Baby
- 5 minutes
- Status
- Episode 64: Little Frankie

Section 9 Lesson 6: Child Development Part 1

Learning Objectives:

- What are the stages of development in young toddlers and children?
- What is the role of the CNA in pediatric care?

Topics Covered:

Child development in young children

Content Assets:

- Close-Up: Overview Of Child Development
- In Focus: The CNA in Pediatric Care
- Activity: The CNA in Pediatric Care
- In Focus: Infants, Toddlers & Preschoolers
- Activity: Infants, Toddlers & Preschoolers

9.7

Section 9 Lesson 7: Child Development Part 2

Learning Objectives:

- What are the stages of development in older children?
- What is the role of the CNA when working with older children? Adolescents?

Topics Covered:

Child development of older children and adolescents

- In Focus: Childhood
- Close-Up: The CNAs Role in Working With Adolescents
- In Focus: Adolescence
- Post: Childhood Memories

Section 9 Lesson 8: Test Preparation

Learning Objectives:

- How much content from Sections 1-7 did students learn?
- What content do students need to review?

Content Assets:

- Test Strategy #9: Put the Residents Safety First
- Activity: Practice Test 9A
- Post: Share Strategies

Content Assets:

- Test Taking Strategy #9: Put the Resident's Safety First
- Activity: Practice Test 9A
- Post: Share Strategies

9.9

Section 9 Lesson 9: Section 9 Wrap Up

Learning Objectives:

• What are students' major takeaways from Section 9?

- Close-Up: Review of Section 9
- Close-Up: Section 9 Wrap-Up

Section 10 – Test Preparation



The final section of the course is devoted to helping students prepare for the student state certification exam.

Section 10 Lesson 1: Welcome to Section 10

Learning Objectives:

- What is the purpose of Section 10 of this course?
- How will students prepare for the CNA exam?
- What should students bring with them on the day of the test?

Topics Covered:

Preparing for the CNA exam

Content Assets:

- Close-Up: Overview of Section 10
- Review: List of Ways to Prepare for the Test
- Review: List of Things to Bring with You on the Day of the Test

10.2

Section 10 Lesson 2: Practice Test 10A

Learning Objectives:

- Which test-taking strategies have been most helpful forstudents?
- What areas of the course content do students still need to study?

Topics Covered:

Preparing for the multiple-choice exam

- Read and Review: Test Taking Strategles
- Close-Up: Multiple Choice Test
- Activity: Practice Test 10A
- Post: How prepared are you?

Section 10 Lesson 3: Preparing for "Clinicals"

Learning Objectives:

- How will students prepare for the skills portion of the student CNA exam? Who can help students prepare for the skills portion of the CNA exam?
- What final questions do students have about the nurse aide certification exam?

- Close-Up: Preparing for the Practicum
- Post: How will you prepare?
- Close-Up: Final Thoughts

Featured Presenters



Dennis Brooks Administrator



Tara Cortes PhD, Nurse, Professor



Jaque Cundiff CNA



Amy Durbin RN



Lynn Fieldhouse JD Healthcare Attorney



Kim Frantz MSC M.SC,m



Sarah Ivers RN



Selena Jolly RN



Jason Landess JD General Practice

Attorney



Karen Lasater PhD, Clinical Researcher



Jamelah Lashley CNA



Anita Mills CNA



Mark Mills MD, JD



Natalie Mudd LPN



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Debra Peoples CNA



Shannon Watson CNA