

ON THE JOB LEARNING OUTLINE

1. **Occupational Title:** Certified Nursing Assistant, Geriatric Specialty
2. **DOT Code:** 355.674-014
3. **O*NET Code:** 31-1012.00
4. **RAIS Code:** 0824-G
5. **Occupational Description:** Performs any combination of following duties in care of residents in nursing home, or other medical facility; under direction of nursing and medical staff: incorporates expanded knowledge of age related changes in maximizing functional status related to mobility and nutritional well being; maintains respect and dignity in all aspects of care. Incorporates basic knowledge related to medications and effects on the aging adult while monitoring status and implementing strategies to prevent decline and maximize well-being. May be assigned to specific area of a nursing home, or medical facility.
6. **Term:** Competency Based (Minimum 1,000 Hours)
7. **On-The-Job Learning:** The following competency areas have been identified to lend focus and direction to the professional development of nursing assistants. The apprentice will attain a basic level of mastery across all competency areas before receiving certification. Basic mastery will be represented by the apprentices being able to articulate their learning with each competency area and demonstrate that they have successfully integrated all the competencies in their work. The order in which the apprentices learn will be determined by the flow of work on-the-job and will not necessarily be in the order listed. Times allotted to these various processes are estimated for the average apprentice to learn each phase of the occupation and demonstrate competency. They are intended only as a guide to indicate the quality of training being provided and the ability of an apprentice to absorb this training in an average amount of time.

Competencies	Approximate Hours (Min/Max)
A. Provides appropriate assistance with ADL's to maximize independence and well-being incorporating expanded understanding of aging considerations and client preferences.....	150-200
<ul style="list-style-type: none"> • Provides bathing assistance with consideration of resident's physical, mental and cognitive status based on individual preferences and/or needs. • Provides assistance with oral and denture care, recognizing and reporting problems such as loose fitting dentures, missing teeth, dry mouth, and plaque build up. • Gives nail care according to plan of care, monitoring condition & reporting abnormalities. • Gives foot care and monitors condition for any early signs of breakdown. • Provides assistance with dressing and undressing as needed based on individual needs and uses of assistive devices as per plan of care. . • Demonstrates use and care of prosthetic and orthotic devices and reports problems. • Incorporates task segmentation with ADL's as outlined in care plan. 	

- Provides assistance with bowel/bladder elimination based on individual needs.
- Demonstrates care of suprapubic and ostomy appliances per facility procedure.
- Assists to maintain personal hygiene needs by providing hair care, shaving, peri care, applying make-up, washing and drying face and hands based on resident needs.

B. Provides therapeutic interventions in caring for cognitively impaired and meeting psychosocial and mental health needs of residents..... 100-200

- Demonstrates techniques for addressing the unique needs and behaviors of individuals with dementia (Alzheimer's and others)
- Communicates effectively with cognitively impaired residents.
- Communicates understanding of the behavior of cognitively impaired residents and verbalizes techniques to circumvent negative behaviors. .
- Responds appropriately to the behavior of cognitively impaired residents.
- Utilizes interventions to reduce the effects of cognitive impairments, incorporating therapeutic interventions according to plan of care.
- Provides support to families and significant others of cognitively impaired residents.
- Recognizes and reports signs and symptoms of depression and anxiety.
- Identifies and promptly reports mental status and behavioral changes.
- Implements interventions to support resident coping mechanisms according to the plan of care.
- Implements support for spiritual well-being according to individual wishes.

C. Assists in identifying the social needs of residents..... 150-200

- Assists in identifying basic human needs throughout the lifespan, including physical (security, shelter, food, clothing), socio-cultural (family, friends), and psychological (emotional, self-esteem, and self-actualization).
- Documents and describes mental status and behavior changes.
- Assists in identifying sources of stress common to residents.
- Describes how cultural attitudes contribute to psychological problems.
- Modifies own behavior in response to resident behavior.
- Ensures that residents are not subject to abuse by anyone.
- Ensures that all incidences of alleged or suspected abuse/neglect are promptly reported.
- Identifies normal sexuality and common myths related to sexuality and aging.
- Facilitates the client's expression of needs and provides supportive communication.
- Assists and instructs clients to be independent in the activities of daily living.
- Modifies care to accommodate client values, customs or habits.
- Uses family members as a source of resident emotional support.
- Provides appropriate care for residents with depression, schizophrenia, and mental retardation.

- D. Incorporates appropriate interventions in caring for dying residents 100-150**
- Identifies and recognizes the stages of dying.
 - Assists in care of dying client and their family members considering spiritual and cultural beliefs.
 - Observes, records and reports cessation of vital signs.
 - Provides post-mortem care according to facility guidelines.
- E. Applies nutritional interventions to maximize/maintain nutritional health 100-150**
- Assists resident with thickened liquids and identify consistencies as needed.
 - Recognizes thickened liquid consistency and demonstrates ability to mix and administer appropriately.
 - Identifies therapeutic diets, the foods included in each specific diet, and the conditions where specific diets are prescribed.
 - Recognizes personal, cultural, and religious variations in diet.
 - Describes dietary problems of the aging.
 - Identifies why a client may need to be encouraged to drink fluids as ordered and recognizes symptoms of dehydration and reports promptly
 - Provides and restricts fluids as ordered, verbalizing rationale for restrictions.
 - Prepares and positions the client appropriately for meals.
 - Identifies clients at nutritional risk and implements measures to minimize weight loss as per care plan.
 - Assists the client with eating using effective feeding techniques.
 - Demonstrates use of assistive eating devices.
 - Observes and records the amount/percentage consumed.
 - Recognizes potential problems associated with feeding tubes
- F. Maintains a safe, homelike environment for geriatric residents 100-120**
- Establishes a safe, clean, comfortable and homelike environment with regard for the resident's preferences.
 - Identifies environmental safety hazards, and methods used to prevent accidents, including falls, slips, and tripping hazards and uses safety precautions when oxygen is in use.
 - Identifies disaster plans and vulnerability of residents in given situations.
 - Maintains and enforces safety precautions related to age of client.
 - Applies and monitors mobility alarms and demonstrates appropriate application according to plan of care.
 - Ensures faulty equipment is identified and lock-out tag out procedures are implemented per guidelines.
 - Verbalizes appropriate interventions to prevent elopement, and implement smoking precautions.
 - Considers the resident's sensory and/or cognitive impairments when planning a safe environment.
 - Monitors equipment safe use and maintenance of equipment.

G. Incorporates expanded knowledge of geriatrics in care delivery, makes observations in the care of residents with complex clinical needs and alerts nursing and medical staff to changes in condition..... 300-350

- Recognizes resident need for skin protectors, i.e. geri-gloves, etc. to protect fragile skin & implements as needed.
- Demonstrates skills to minimize episodes of insomnia without medications.
- Promotes sense of value incorporating past life experiences and recognitions, encouraging appropriate activity participation and recognizing individual sense of worth.
- Serves as a resident advocate in care planning individualized interventions according to resident preferences.
- Incorporates knowledge of care of resident with complex orthopedic needs –such as: complications of hip-replacement surgery, transfer of patient with hip-replacement surgery, logrolling of immobile resident, guidelines for the care of a resident in a cast.
- Incorporates knowledge of care of residents with complex infection-control needs including M.R.S.A. and VRE.
- Incorporates knowledge of care for residents with chronic or severe pain
- Recognizes symptoms of fecal impaction, monitors bowel function, and promptly reports any abnormalities.

Total Approximate Hours1,000–1,370

Related Theoretical Instruction

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5. **Description:** Related instruction supplements the on-the-job learning and lists courses that provide technical ability. It is through the combination of both on-the-job learning and the related theoretical instruction that the apprentice can reach a skilled level in the occupation. The following are suggested courses to be completed during the term of apprenticeship.

<u>Core Skills</u>	<u>Approximate. Hours</u>
A. General concepts on aging and body system changes.....	40
<ul style="list-style-type: none"> • Describes the aging process and common myths of aging. • Identifies developmental tasks associated with the aging process. • Identifies the role of elderly in the home and community, including cultural and religious aspects. • Identifies major health problems found in the aging process. • Identifies major physical system changes in the aging process: <ul style="list-style-type: none"> ➤ Respiratory system—COPD, bronchitis, asthma, TB. ➤ Cardiac system—CHF, MI, atherosclerosis, angina, hypertension, pacemakers ➤ Urinary system—various types of incontinence, UTI’s and identifies appropriate indications for catheters. ➤ Metabolic system—diabetes, dialysis issues and kidney dysfunction. ➤ Integumentary system—skin tears, , skin ulcers(stasis vs. pressure) shingles, lice/scabies. ➤ Nervous system—CVA, TIA, Parkinson’s Disease, spinal cord injuries, cerebral palsy. ➤ Gastrointestinal system—diverticulitis, ulcers, hernias, gall bladder disease. ➤ Musculoskeletal system—fractures , osteoporosis, arthritis and contractures. ➤ Reproductive system—AIDS, benign prostatic hypertrophy, prolapsed uterus, post menopause. ➤ Sight and hearing: cataracts, glaucoma, hearing loss. 	
B. Resident assessment process and the specialty nurse assistant role in care planning and interventions	8
C. Cognition and mental health & behavioral manifestations	16
D. Medication use in the geriatric population.....	24
Total Hours of Related Instruction	88

Individuals who complete the CNA, Geriatric Specialty on-the-job learning and related instruction components shall receive a “Certificate of Specialization” credential. Some courses and/or work experience may be credited toward the LPN Apprenticeship Program and or training depending on state regulations-or other viable work experience.