# Nurse Aide Training:

## TNA to CNA Guidance

### and

## Competency Test Preparation

# LDH Nurse Aide Training Program Desk

Approved NAT programs: https://ldh.la.gov/page/3796

TNA to CNA Transition: https://www.ldh.la.gov/page/4077

## *Temporary Nurse Aides NA to CNA Transition*

Per the CMS Waiver, implemented in March 2020, NH's may utilize "temporary nurse aides" to assist with staffing shortages. This means any individual that meets requirements (i.e., background check) can be utilized as a "temporary nurse aide" during the COVID-19 crisis.

Facilities are still required to *"ensure that nurse aides are able to demonstrate competency in skills and techniques necessary to care for residents' needs, as identified through resident assessments, and described in the plan of care."*

## *TNA to CNA Transition*

The TNA to CNA Transition Process was implemented by the LDH as a pathway for TNA's to become certified without completion of a traditional Nurse Aide Training Program.

CMS Memo QSO-21-17-NH clarified that:
- ➢ Temporary nurse aides may be certified using alternate training methods, but must pass the state's competency exam
- ➢ Facilities will have **4 months** from the date of the CMS Waiver expiration to ensure TNA's are certified

**Eligibility for TNA to CNA Transition:**
1. (Minimum) 8 hours of temporary nurse aide training course *or equivalent*;
2. (Minimum) 16 hours skills competency verification **PRIOR TO DIRECT RESIDENT CONTACT;**
3. (Minimum) 60 hours of on the job training/work as a TNA in a NH/SNF; and
4. **Currently** employed as a TNA.

**Process for TNA to CNA Transition:**

1. Facility must submit TNA to CNA Verification Form to the Registry email [HSS-CNA-DSW-Request@la.gov](mailto:HSS-CNA-DSW-Request@la.gov).
   a. Only submit TNA's not previously approved (i.e., re-test does not need to be submitted)
   b. Facility will received approval email with TNA Code and any other updates or instructions
   c. If TNA terminated after approval by LDH, notify the Registry via email.
2. Once approval is received from Registry, facility must submit application and fees to Prometric to schedule testing.
   a. The email provided on application will be used for status updates, test schedule, etc.
   b. If application is incomplete, email notification will be sent of required information.
   c. A test date will not be scheduled if application is incomplete.

Website: [TNA to CNA Transition Process](#)

*\*\*NOTE:  If facility has a traditional Nurse Aide Training Program, ensure that TNA's are NOT submitted using the NATP code.  Candidates tested using the NATP Code must have verification during survey that training was conducted per the NATP approval (i.e., curriculum, program hours, schedule, instructors, etc.).  TNA's tested using the TNA School Code only require documentation of minimum TNA to CNA training requirements (as noted above).*

# Prometric

## Home Page:
**https://www.prometric.com/nurseaide/la**

## The Prometric Competency Evaluation (Certification Exam)

### Competency evaluation by Prometric consists of 2 portions

1. Knowledge

- ⇨ Written or Oral
- ⇨ Computer based
- ⇨ 50 operational (scored) questions and 10 pretest (non-scored) questions
- ⇨ Timed (90 minutes)
- ⇨ 4th to 6th grade reading level

2. Clinical (demonstration of skills)

- ⇨ 5 total skills
- ⇨ All candidates will be scored on **Handwashing** and **Indirect Care** (unprompted)
- ⇨ The other 3 skills are assigned randomly by the testing software (prompted)
- ⇨ Timed (based on skills candidate must perform)
- ⇨ Each skill has objective criteria (checkpoints) used by the Nurse Aide Evaluator (NAE) to evaluate skills performance
- ⇨ *Each checkpoint is weighted; the NAE inputs the results (checkpoints) into Prometric system; **software** determines pass/fail*
- ⇨ Must pass all 5 skills to pass the clinical portion of the competency exam

Many resources are available on the Prometric website:

- ⇨ The Candidate Information Bulletin
  - Application instructions
  - Test procedures
  - Written test content outline
  - Clinical skills list
  - *Sample written test and answer key*
- ⇨ Written exam practice tests for purchase
  - 3 different versions available
  - Includes answers and rationales
- ⇨ Clinical skills readiness test for purchase
  - Multiple choice test that provide in-depth assessment of knowledge about each skill
  - Helps determine areas or skills that need review
  - Multiple options to select tests with specific combinations of skills

⇨ Studies have shown that candidates that take the practice tests perform better than those that do not

⇨ [Webinar](#) presented by Prometric in February 2020 is available on their website.

- Review of Competency Exam Process
- Review of resources available
- Overview of exam statistics
- Frequently missed checkpoints on the clinical skills exam
- Tips to decrease time between completion of training and testing

### Remember:

⇨ Passing a skill does **NOT** require **PERFECT** performance!

⇨ The skills checklist is **NOT** to be used as a Procedure Guide...**follow the curriculum**!

## Testing the Candidates

**Students must complete the Prometric competency evaluation in an *approved testing facility*.**

**1**. **Regional test sites:**

If your campus is not approved as an In-facility Test site (IFT), the student will be scheduled at the **regional** site chosen on the application.

⇨ Date of test is "first come, first serve"

⇨ Student scheduled on *next* available date at the regional site (cannot specify or request date)

⇨ Test cannot be scheduled until application, fees, and Training Verification Form (TVF) are processed by Prometric

⇨ Regional sites must have minimum of 4 students to create a testing event

⇨ Possibility that classmates will not get the same test date

- Maximum of 8 students can be scheduled per event
- Open to candidates from other programs

**2**. **In-facility test sites**:

If a program is approved as an In-Facility Test (IFT) site, a Prometric test proctor conducts testing at the Nurse Aide Training Program/campus.

⇨ School may "reserve" a future test date (up to several months in advance), but *will not be finalized until application, fee, and TVF are processed* by Prometric.

⇨ Test packet must be received by Prometric **10 days prior** to test date

⇨ All students for the event must be included in the test packet:

- Applications must be complete and accurate
- Fees must be submitted with applications or will be considered incomplete

**Benefits of IFT approval:**

⇨ Decreased time between completion of program and testing

⇨ Students will be tested in a familiar setting

- Experience with the computer that will be used for knowledge (written) test
- Skills test performed where training occurred

⇨ Can schedule between 4 to 16 students in one test event

- If facility has accommodations (computers and lab), an additional proctor may be provided to test more than 8 in the test event

## *Prometric test site approval*

**IFT test site information**:

- https://www.ldh.la.gov/page/3013
- Test Center Requirements FAQ sheet
- Application to become IFT
- Once application submitted, please allow at least 2-3 business days for Prometric to respond
- If timely response not received, please contact Ash-Leigh Garcia (LDH) or a Channel Recruitment Representative (Prometric Operations Team)

## *Special Testing Accommodations*

If student needs special testing accommodations, Prometric offers 2 options:

1. Oral test

⇨ Available to *any* student

⇨ Does **NOT** require ADA accommodations request

⇨ Will check "oral and clinical skills" on the Exam Selection portion of the application (page 4)

| ✓ | Newly Trained Tester | Fee | ✓ |
|---|---|---|---|
| | Written and Clinical Skills | $125 | |
| | Oral and Clinical Skills (includes Reading Comprehension Exam) | $125 | ✓ |

2. Americans with Disabilities Act (ADA) accommodations

⇨ Check ADA box on Page 1 of application

**If applying for Testing Accommodations under the Americans with Disabilities Act (ADA):**

- Please go to to **www.prometric.com/nurseaide** to print the required ADA Accommodations Request Packet. This packet **MUST** be completed and submitted with this application.
- Fill out the box below.

**Note:** *Candidates applying to take the Oral (audio) Exam do not need to apply for ADA accommodations*

I am applying for **Americans with Disabilities Act (ADA) accommodations.** I am requesting testing accommodations and have included the **required ADA Accommodations Request Packet** along with this application. I understand I must request accommodations **30 days in advance of the test date** and not **all** accommodations can be approved.

✔ **Yes** ☐ **No**

⇨ Must submit completed [ADA Request Packet](#)
- A completed Accommodation Request Packet includes:
  1. Testing Application (test fees and Training Verification Form);
  2. Candidate Accommodation Request Form;
  3. Professional Evaluation Form; and/or
  4. Any additional verification required.

- MUST either have an appropriate professional complete the Professional Evaluation Form OR provide existing documentation from the person(s) who granted the same or similar accommodations in another formal testing environment

- Dated no more than 1 year prior

⇨ Must provide 30 days' advance notice (to allow Prometric to coordinate the best accommodations for the situation)

## Content of Competency Exam

The Competency Examination consists of two tests, a **Written** (Knowledge) test, and a performance-based **Clinical Skills** test. The student must pass both the Written (or Oral) and Clinical Skills test within 12 months of completing the nurse aide training course.

The following will provide more detail as to the contents that may be included on the Prometric competency exam.

⇨ As previously noted, all required content is provided in the approved textbooks. **If the curriculum is followed, the student will be well-prepared for both portions of the competency exam.**

⇨ Prometric website provides many resources for test preparation:
- ○ [Written practice test](#) (no cost)
- ○ Additional [written practice test(s)](#) (for a fee)

# Written (Knowledge) Test Content Outline:

## I. Role of the Nurse Aide - 20%

### A. Personal responsibility
1. Reporting requirements
2. Promotion of personal health and safety
3. Promotion and protection of resident rights
4. Time management and work prioritization
5. Workplace standards, including ethical and unethical behaviors
6. Nurse Aide Registry

### B. Nurse aide as a member of the health care team
1. Job responsibilities of the nurse aide, including duties and limitations
2. Interdisciplinary team member roles
3. Teamwork principles (e.g., collaboration, cooperation, sharing information, customer service)
4. The care planning process and implementation
5. Nurse aide's responsibility to provide care according to the care plan

### C. Interpersonal relations/communication skills
1. Communication principles
2. Communication types
3. Factors affecting communication
4. Therapeutic communication techniques

## II. Promotion of Safety - 22%

### A. Potential hazards in the healthcare environment

### B. Common injuries of residents (e.g., skin tears and shearing, falls, spills, burns, bruises)

### C. Risks related to common injuries

### D. Safety and comfort
1. Comfort needs of the resident

2. Accident prevention including fall prevention protocols
3. Restraint techniques and alternatives
4. Legal implications in the use of restraints
5. Risk factors for elopement (resident leaving without staff knowledge)

### E. Safety devices (e.g., wanderguard, alarms)

### F. Infection prevention and control
1. Maintaining a clean environment
2. Factors that contribute to spread of disease-causing organisms
3. Signs and symptoms of infections
4. Practices that decrease the risk of exposure to disease-causing organisms

### G. Emergencies
1. Emergency and disaster response protocols
2. Immediate life-safety techniques
3. Evacuation procedures

### H. Fire prevention and safety

## III. Promotion of Function and Health of Residents - 20%

### A. Personal care skills
1. Feeding
2. Bathing
3. Perineal care, including catheter
4. Foot/nail care
5. Mouth care
6. Skin care
7. Toileting
8. Grooming
9. Dressing/undressing

### B. Health maintenance/restoration
1. Promoting circulation and skin integrity (e.g., specialized mattresses, chair cushions, positioning)
2. Nutrition and hydration

3. Sleep and rest needs
4. Elimination (bowel and bladder)
5. Mobility, including bed mobility
6. Effects of immobility
7. Care and use of assistive devices

### C. Age-related changes
1. Cognitive (e.g., memory) changes
2. Psychosocial (e.g., relationships) changes
3. Physical changes

### D. Psychosocial needs of residents
1. Fundamental human needs (e.g., Maslow's Hierarchy of Needs)
2. Emotional support strategies
3. Intervention strategies to assist residents in coping with losses and adjustments to nursing home placement (e.g., control, autonomy, privacy)

## IV. Basic Nursing Care Provided by the Nurse Aide - 24%
### A. Routine, chronic, non-life threatening situations
1. Observation and reporting of physical changes
2. Observation and reporting of behavioral changes

### B. Acute emergency situations
1. Chest pain
2. Cardiac arrest
3. Respiratory distress
4. Difficulty swallowing
5. Choking/aspirations
6. Vomiting
7. Seizures
8. Changes in mobility, speech, or other

9. potential signs of stroke
10. Diabetic situations
11. Sudden onset of confusion or agitation
12. Changes in level of consciousness
13. Falls
14. Bleeding
15. Burns

## V. Providing Specialized Care for Residents with Changes in Health - 14 %
### A. Physical problems
1. Common physical impairments and related care
2. Providing for safety, care, and comfort of residents with physical impairments
3. Impact of impairment on resident safety, care, and comfort

### B. Psychological problems
1. Common psychological impairments and related care (e.g., confusion, anxiety, depression, delirium, phobias, addiction)
2. Special considerations for the safety, care, and comfort of residents with psychological impairments

### C. Care of the dying resident and post-mortem care
1. Grief process
2. Responding to the emotional needs of the resident, other residents, family and caregivers in the grief process
3. Factors influencing responses to grief (e.g., spiritual beliefs, culture, past experience)
4. Physical changes and needs as death approaches
5. Post-mortem care procedures

## Clinical Skills Test:

There are 22 skills that are included on the Clinical Skills Test. **All students must perform Handwashing and Indirect Care.** When the student registers to test, the computer will decide which remaining 3 skills the student will be required to perform.

⇨ Prometric website provides many resources for test preparation:
- Clinical Skills Checklist used by proctors
- Clinical Skills Instructions
- Clinical Skills Timing Information
- Indirect Care Behaviors
- Measurement Forms
- Clinical Skills Readiness Practice (for a fee)

**Handwashing:** Handwashing technique is evaluated at the beginning of the test. This skill is **not prompted,** which means the student **will not be told** to wash their hands. Nursing aides are expected to know to wash their hands *before and after* physical contact (touching) with the resident. Students will not be required to *demonstrate* handwashing for the remaining skills, but must *verbalize* if and when they would wash their hands, as it will be considered an Indirect Care Checkpoint: "Use Standard Precautions and Infection Control when providing care."

**Indirect Care:** The Indirect Care skill evaluates behaviors that are common to all resident care such as: infection control; safety; communication; and resident preferences, needs, comfort, and rights. The student is **not prompted** to perform the Indirect Care skill, and the evaluator watches for these behaviors while the student performs the other skills. **See the "Indirect Care Behaviors" attachment for more details related to each skill.** The Indirect Care checkpoints are:

1. Greet resident, address by name, and introduce self? (IC)
2. Provide explanations to resident about care before beginning and during care? (IC)
3. Ask resident about preferences during care? (IC)
4. Use Standard Precautions and infection control measures when providing care? (IC)
5. Ask resident about comfort or needs during care or before care completed? (IC)
6. Promote resident's rights during care? (IC)
7. Promote resident's safety during care? (IC)

**Clinical Skills:** The evaluator uses "checkpoints" to evaluate the student's performance during the clinical skills demonstration. The checkpoints are considered to be the **minimum** steps that a **competent** nurse aide would be expected to perform. See the "Clinical Skills Test Checklist" attachment for the checkpoints required for each skill. The checkpoints are provided as a *resource*, and will help the student/instructor understand

what the evaluator will be looking for. Because **the "Clinical Skills Test Checklist" is not intended to be used as a procedure guide**, the curriculum (textbook) must be followed for skills instruction.

## I. Clinical Skills List-

a. Ambulate the resident using a transfer/gait belt

b. Assist resident needing to use a bedpan

c. Change bed linen while the resident remains in bed

d. Change resident's position to a supported side-lying position

e. Dress a resident who has a weak arm

f. Empty contents of resident's urinary drainage bag, and measure and record urine output on an Intake and Output (I&O) form

g. Feed a resident who is sitting in a chair, and record intake on an Intake and Output (I&O) form

h. Measure and record a resident's radial pulse

i. Measure and record a resident's respirations

j. Provide catheter care to a female resident who has an indwelling urinary catheter

k. Provide foot care to a resident who is sitting in a chair

l. Provide mouth care to a resident who has a denture

m. Provide mouth care to a resident who has teeth

n. Provide perineal care to a female resident who is incontinent of urine

o. Provide resident hand and nail care

p. Provide resident a partial bed bath and back rub

q. Provide resident with passive range of motion (ROM) exercises to one elbow and wrist

r. Provide resident with passive range of motion (ROM) exercises to one shoulder

s. Provide resident with passive range of motion (ROM) exercises to one hip, knee, and ankle

t. Transfer the resident from the bed into a wheelchair using a pivot technique and a transfer/gait belt