

NNAAP

National Nurse Aide Assessment Program

An NCSBN® Examination



Pearson
VUE

District of Columbia **NURSE AIDE**

written (or oral) examination
& skills evaluation

Candidate Handbook

July 2018

QUICK REFERENCE

PEARSON VUE REGISTRATION AND SCHEDULING SERVICES

District of Columbia NNAAP

(877) 833-4542

Email: pearsonvuecustomerservice@pearson.com

Hours of Operation:

Monday through Friday 8:00 a.m. – 11:00 p.m.

Saturday 8:00 a.m. – 11:00 p.m.

Sunday 10:00 a.m. – 4:00 p.m.

(Eastern Standard Time)

Call Pearson VUE Customer Service to:

- Check exam scheduling date and/or status
- Find test sites and availability
- Schedule, reschedule or cancel an examination
- Ask questions about online registration
- Obtain information regarding your score report
- Obtain information regarding your examination

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Call Pearson VUE for questions about:

- Duplicate score report requests
- Name and address changes AFTER being placed on the DC registry
- The exam content

DC DEPARTMENT OF HEALTH

Board of Nursing

899 North Capitol Street, NE

Suite 200

Washington, DC 20002

(877) 672-2174

Web site: <http://dchealth.dc.gov/bon>

Email: bon.dc@dc.gov

*Hours of Operation:
Monday through Friday
8:15 a.m. – 4:30 p.m.
(Eastern Standard Time)*

***Go to the Board of Nursing Website
(<http://dchealth.dc.gov/bon>) to:***

- View or download the Nursing Assistant Candidate Handbook
 - Download a copy of the District of Columbia Certified Nursing Assistant Regulations
 - Find a list of Board Approved Nursing Assistant Programs
 - Obtain information regarding endorsement
 - Search the Nursing Assistant Registry
-

**PEARSON VUE®
District of Columbia NNAAP®**

PO Box 13785
Philadelphia, PA 19101-3785
(888) 274-6060

*Hours of Operation
8:00 a.m. – 5:00 p.m.
(Eastern Standard Time)*

Call Pearson VUE to:

- Obtain information regarding your score report
- Request a duplicate score report
- Obtain information regarding the examination
- Clarify information about the Registry
- Change your current address or name prior to examination results being sent to the Registry
- Change your current address or name once you are on the Registry
- Obtain information regarding reciprocity
- Obtain information on continued certification on the Registry

***Go to Pearson VUE's website
(www.pearsonvue.com) to:***

- Download a Candidate Handbook
- Download an application
- View the Nursing Assistant Practice Written Examination
- Search the Nursing Assistant Registry

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TABLE OF CONTENTS

QUICK REFERENCE	inside front cover
INTRODUCTION	1
Criminal Background Check Requirement	1
National Nursing Assistant Assessment Program	1
NNAAP Exam Overview	2
ELIGIBILITY	3
Eligibility Routes for Nursing Assistant.....	3
APPLICATION AND SCHEDULING	4
Online Registration and Scheduling.....	4
Exam Fees.....	5
Exam Scheduling.....	6
Testing Locations.....	6
Accommodations	6
CANCELLATION	7
Re-scheduling	7
Absence Policy	7
Weather Emergencies.....	8
EXAM DAY	8
Checking In.....	8
What to Bring	8
Proper Identification.....	9
Security and Cheating.....	9
Testing Policies	10
Lateness	10
Electronic Devices	10
Study Aids	10
Eating/Drinking/Smoking.....	10
Misconduct.....	10
Guests/Visitors.....	10
THE WRITTEN (OR ORAL) EXAM	11
Written Exam	11
Oral (English or Spanish) Exam	11
WRITTEN (OR ORAL) EXAM CONTENT OUTLINE - NURSING ASSISTANT	12

continued on next page

SAMPLE QUESTIONS	13
SELF-ASSESSMENT READING TEST	14-17
THE SKILLS EVALUATION	18
What to Expect	18
Setting	18
Who Will Act as a Client?.....	18
Candidate Volunteer Requirements	18
Candidate Dress Requirements.....	18
The Tasks	19
Recording a Measurement	20
Sample of Recording Sheet for Measurement Skills	21
Tips for the Skills Evaluation.....	22
SKILLS LISTING	23-37
SCORE REPORTING	38
Exam Results	38
Written (or Oral) Exam	38
Skills Evaluation	38
Failing.....	38
How to Read a Failing Score Report	39
Passing	40
GRIEVANCE PROCESS	40
THE CNA REGISTRY	41
Change of Address or Name.....	41
Certification Renewal.....	41
DISTRICT OF COLUMBIA NURSING ASSISTANT FREQUENTLY ASKED QUESTIONS	42-44
APPENDIX	
Appendix A: Request for Duplicate Score Report	
Appendix B: Change of Address or Name Form	

INTRODUCTION

This handbook is designed for candidates seeking nursing assistant certification in the District of Columbia. It describes the process of applying for and taking the National Nursing Assistant Assessment Program (NNAAP®) Examination.

The District of Columbia Department of Health, Health Regulation Licensing Administration, has contracted with Pearson VUE®, a nationally recognized leading provider of assessment services to regulatory agencies and national associations, to develop, score, and report the results of the NNAAP Examination for the DC Nursing Assistant Registry. Credentia will be working with Pearson VUE to schedule and administer the NNAAP Examination.

CRIMINAL BACKGROUND CHECK

To be hired as a certified Nurse Assistant in the District of Columbia and have direct contact with residents or beneficiaries, you must pass a criminal background check and your name may not appear on any Nurse Assistant abuse registry. See D.C. Law 12-238, the Health-Care Facility Unlicensed Personnel Criminal Background Check Act of 1998, D.C. Official Code 44-551 *et seq.* If you have any questions regarding the criminal background check requirement, please contact the Criminal Background Unit of the Health Regulation & Licensing Administration at (202) 442-9004.

NATIONAL NURSING ASSISTANT ASSESSMENT PROGRAM (NNAAP®)

The Nursing Home Reform Act, adopted by Congress as part of the Omnibus Budget Reconciliation Act of 1987 (OBRA '87), was designed to improve the quality of care in long-term health care facilities and to define training and evaluation standards for nursing assistants who work in such facilities. Each state is responsible for following the terms of this federal law.

The National Nursing Assistant Assessment Program (NNAAP®) is an examination program designed to determine minimal competency to become a certified nurse aide in your state. The NNAAP was developed by the National Council of State Boards of Nursing, Inc., (NCSBN) to meet the nursing assistant evaluation requirement of federal and

Continued on next page

state laws and regulations. Pearson VUE is the authorized administrator of the NNAAP in your state.

The NNAAP Examination is an evaluation of nursing assistant-related knowledge, skills, and abilities. The NNAAP Examination is made up of both a Written (or Oral) Examination and a Skills Evaluation. The purpose of the NNAAP Examination is to test that you understand and can safely perform the job of an entry-level nursing assistant.

NNAAP EXAM OVERVIEW

The two parts of the examination process, the Written (or English or Spanish Oral) Examination and the Skills Evaluation, will be administered on the same day. You must pass both parts in order to be certified and listed on the DC Nursing Assistant Registry.

The Written Examination consists of seventy (70) multiple-choice questions written in English. Sample questions are provided in this handbook.

An English or Spanish Oral Examination may be taken in place of the Written Examination if you have difficulty reading English. The English or Spanish Oral Examination consists of sixty (60) multiple-choice questions and ten (10) reading comprehension questions. If you want to take the English or Spanish Oral Examination, you must request it when you submit your application.

At the Skills Evaluation you will be asked to perform five (5) randomly selected nursing assistant skills. You will be given thirty (30) minutes to complete the five (5) skills. You will be rated on these skills by a Nursing Assistant Evaluator. A complete listing of the skills is shown on pages 23 to 37.

See *Written (or Oral) Exam* and *Skills Evaluation* for more details on the parts of the NNAAP Examination.

ELIGIBILITY

ELIGIBILITY ROUTES FOR CNA

You are eligible to apply to take the NNAAP Examination for certification as a nursing assistant in DC if you qualify under one of the following eligibility routes:

Note: You are permitted three (3) attempts to pass the exam. After a third failure, you must complete another Nurse Assistant training program and submit another application for examination.

D1

You have completed a DC Department of Health approved training program within the last twenty-four (24) months and are not currently listed on the DC Nursing Assistant Registry or on a nursing assistant registry in another state. You will be required to attach a copy of your training certificated during the application process.

D2

You have completed equivalent practical nursing or registered nursing “Fundamentals of Nursing” course with a clinical component in the USA.

D4

You have trained as an RN or LPN outside the United States within the last thirty-six (36) months. Attach a copy of your foreign credentials certification. You must attach a CGFNS report that confirms you were trained as a nurse in your home country. Enter 99910 in *Section 4* of the application.

D5

You are taking the NNAAP Examination for re-application to obtain a current certification after it has expired LESS than 24 months.

D6

You are taking the NNAAP[®] Examination for re-application to obtain a current certification after it has expired **MORE** than twenty-four (24) months, and have completed a new training program. Attach a copy of your expired Registry Certificate and your new training program certificate and enter your Registry Certificate number in *Section 1* of the application.

APPLICATION AND SCHEDULING

ONLINE REGISTRATION AND SCHEDULING

Online registration is quick, convenient and an environmentally responsible way to register for your examination. This process will eliminate the transit time associated with mailing a paper application. First time users are required to create an account. The candidate will need to fill in all required fields, which are preceded by an asterisk (*), on the online form in order to create an ID and be assigned a password. Step-by-step instructions will lead the candidate through the rest of the examination reservation process.

- Payment is in the form of a credit card or pre-paid credit card (American Express, Master Card, Visa or electronic voucher). Fees are non-refundable and non-transferable once submitted.
- To access the online form go to <https://i7lp.integral7.com/durango/do/login?ownername=dcna&usertype=admin> and follow the instructions.
- You must make an on-line reservation at least 10 days prior to the test date.
- You are responsible for completing the appropriate sections online. You may ask someone from your nurse aide training program or facility employer for assistance in completing the application.
- If you need or have any questions about the application process, contact a Pearson VUE representative at (877) 833-4542 between 8:00 a.m. and 11:00 p.m. (Eastern Time Zone).
- Fees are non-refundable and non-transferable.

EXAM FEES

The fees listed below have been established for the National Nursing Assistant Assessment Program in DC.

NNAAP EXAM		FEE
Written Examination & Skills Evaluation	<i>first time</i>	\$117*
English Oral Examination & Skills Evaluation	<i>first time</i>	\$127*
Spanish Oral Examination & Skills Evaluation (NNAAP only)	<i>first time</i>	\$127*
Written Examination & Skills Evaluation	<i>re-test exam</i>	\$105
English Oral Examination & Skills Evaluation	<i>re-test exam</i>	\$115
Spanish Oral Examination & Skills Evaluation (NNAAP only)	<i>re-test exam</i>	\$115
Written Examination ONLY	<i>re-test exam</i>	\$40
English Oral Examination ONLY		\$50
Spanish Oral Examination ONLY (NNAAP only)		\$50
Skills Evaluation ONLY		\$65

*** The first time test fee includes a (one-time) \$12 Registry placement fee.**

Payment must be made by credit card, debit card or electronic voucher.

Under federal and District of Columbia laws, nursing homes are required to pay for the NNAAP Examination for their Nursing Assistant employees, including individuals required to re-test. If you are not currently employed as a Nursing Assistant at a nursing home, you may pay the fee yourself.

EXAM SCHEDULING

For more information about scheduling, or on how to register for the examination online, please visit: www.pearsonvue.com/dc/nurseaides

TESTING LOCATIONS

The NNAAP Examination is given by Credentia at Regional Test Sites. **The complete testing schedule, titled *Regional Test Sites and Test Schedules*, is available on the Pearson VUE website at: www.pearsonvue.com/dc/nurseaides**

ACCOMMODATIONS

Pearson VUE complies with the provisions of the Americans with Disabilities Act as amended. The purpose of accommodations is to provide candidates with full access to the test. Accommodations are not a guarantee of improved performance or test completion. Pearson VUE provides reasonable and appropriate accommodations to individuals with documented disabilities who demonstrate a need for accommodations.

Test accommodations may include things such as:

- A separate testing room
- Extra testing time for the Written/Oral exam
- A Reader or Recorder, for individuals with mobility or vision impairments and cannot read or write on their own

Test accommodations are individualized and considered on a case-by-case basis. All candidates who are requesting accommodations because of a disability must provide appropriate documentation of their condition and how it is expected to affect their ability to take the test under standard conditions. This may include:

- Supporting documentation from the professional who diagnosed the condition, including the credentials that qualify the professional to make this diagnosis
- A description of past accommodations the candidate has received

The steps to follow when requesting test accommodations vary, depending on your test program sponsor. To begin, go to <http://pearsonvue.com/accommodations>, and then select your test program sponsor from the alphabetized list. Candidates who have additional questions concerning test accommodations may contact the ADA Coordinator at accommodationspearsonvue@pearson.com.

CANCELLATION

If you are unable to attend your examination, ***you must call Pearson VUE at least nine (9) business days*** before the examination date to re-schedule (Saturday and Sunday and national holidays are not considered business days). If you do not call Pearson VUE at least nine (9) business days in advance of your examination date to re-schedule, and do not show up for your scheduled examination, you will be responsible for the examination fee. Your fee will not be refunded and cannot be transferred to a new examination date, and you may not give your examination date to another person.

- If you notify Pearson VUE in time, there is no penalty, and your fee may be transferred to your new examination date. If your employer paid your examination fee, you should tell them about missing the examination or re-scheduling. Let them know how you have handled re-scheduling and when you plan to re-test.
- If you do not report to the testing location on the day of your scheduled examination, you will be considered a “no-show” and you will be required to pay an additional fee to reschedule the exam.

RE-SCHEDULING

To re-schedule your examination, please call Pearson VUE at (877) 833-4542 weekdays between 8:00 a.m. and 11:00 p.m.

ABSENCE POLICY

Since unexpected situations sometimes occur, Pearson VUE will consider excusing an absence for a serious illness or an emergency. A request for an excused absence must be submitted at least two (2) business days prior to, or within one (1) day after, the scheduled examination. You may be asked to provide evidence of the situation.

Acceptable reasons for an excused absence are:

- Illness of yourself or a member of your immediate family
- Death in the family
- Disabling traffic accident
- Court appearance or jury duty
- Military duty

Continued on next page

With proper notification, there is no fee for re-scheduling an examination; however, you are only permitted to re-schedule one time.

Pearson VUE 's decision regarding whether an absence is excused will be final.

WEATHER EMERGENCIES

The examination will be delayed or cancelled only in emergencies. If severe weather or a natural disaster makes the test site inaccessible or unsafe, the examination will be delayed or cancelled.

EXAM DAY

CHECKING IN

You must arrive 30 minutes prior to your scheduled time for BOTH the written and skills examinations. If you are late for the written examination you will not be allowed to test and your fees will not be refunded. If you missed your written examination and are scheduled for a skills evaluation, please arrive 30 minutes prior to your scheduled time. Skills Evaluation test times are approximate. You will be required to check in for both the written and for the skills examinations. You will be required to present proper identification.

WHAT TO BRING

Be sure to arrive at least thirty (30) minutes prior to your examination. You **MUST** have the following items with you when you take the examination:

- Two (2) forms of signature identification, one of which must be photo identification
- Three (3) No. 2 pencils (sharpened)
- Eraser
- Your Social Security number or government issued ID

No other materials will be allowed.

PROPER IDENTIFICATION

You are required to bring two (2) forms of official, signature-bearing identification to the test site (one of which must be a photo identification). Photocopies of identification will NOT be accepted. Examples of proper identification include:

- Driver's license
- Signature-bearing Social Security card (or affidavit stating that you have applied for your Social Security number. Please Note: Your Social Security number will be required when you renew your certification.)
- Clinic card
- Credit card
- Library card
- State-issued identification card
- Passport
- Alien registration card

The name on your identification must be the same as the name you used on the application to register for the examination.

If you do not bring proper identification, you will not be allowed to test and your examination fee will not be refunded.

SECURITY AND CHEATING

If you give help to or receive help from anyone during the examination, the examination will be stopped. The incident will be reported to the DC Board of Nursing for review, and your examination will not be scored (see *Testing Policies*).

All examination questions, each form of the examination, and all other examination materials are copyrighted by, the property of, or licensed to Pearson VUE. Consequently, any distribution of the examination content or materials through any form of reproduction, or through oral or written communication, is strictly prohibited and punishable by law. ***Anyone who removes or tries to remove examination material or information from the test site will be prosecuted.***

TESTING POLICIES

The following policies are observed at the test site.

LATENESS

Plan to arrive about thirty (30) minutes before the examination starts. If you are late for your scheduled examination, or do not bring all of your required items (see *What to Bring*), you will **NOT** be allowed to test and your examination fee will **NOT** be returned.

ELECTRONIC DEVICES

Cellular phones, beepers, or any other electronic devices are not permitted to be used and must be turned off during testing. There is no place for storage of personal belongings at the Regional Test Sites.

STUDY AIDS

You are not permitted to take personal belongings such as briefcases, large bags, study materials, extra books, or papers into the examination room. Any such materials brought into the examination room will be collected and returned to you when you have completed the examination. Pearson VUE is not responsible for lost or misplaced items.

EATING/DRINKING/SMOKING

You are not permitted to eat, drink, or smoke during the examination.

MISCONDUCT

If you cause a disturbance of any kind or engage in any kind of misconduct, you will be dismissed from the examination and reported to your state licensing agency. Decisions regarding disciplinary measures are the responsibility of this agency.

GUESTS/VISITORS

No guests, visitors, pets, or children are allowed at the Regional Test Sites.

THE WRITTEN (OR ORAL) EXAM

WRITTEN EXAM

The Nursing Evaluator will hand out materials and give instructions for taking the Written Examination. The Written Examination has seventy (70) multiple-choice questions. You will have two (2) hours to complete the Written Examination. You will be told when fifteen (15) minutes are left to finish. Fill in only one (1) oval on the answer sheet for each question. Markings in the test booklet will not be accepted as answers. Your answers must appear on the separate answer sheet. Sample questions for the Written Examination are located on page 17. You are given two (2) hours to complete the Written exam.

ORAL (ENGLISH OR SPANISH) EXAM

An Oral Examination may be taken in place of the Written Examination if you have difficulty reading English. You must request an Oral Examination when filling out your application. The Oral Examination is provided on an MP3 player. Earphones are provided at the test center. You will be asked to listen to a recording of the Oral Examination and follow along in the test booklet as the questions are read aloud on the MP3 player.

The Oral Examination consists of two (2) parts, and you must pass both parts in order to pass the Oral Examination. The first part of the Oral Examination has sixty (60) multiple-choice questions. Each of these questions is read twice. As each question is read, you will be asked to choose the correct answer and mark it on your answer sheet.

The second part of the Oral Examination has ten (10) multiple-choice questions. These questions test your ability to speak a minimum amount of English by recognizing common words used as a nurse aide in long-term care facilities. Each word is read three (3) times. You are asked to match the word you hear on the tape to the written word in the test booklet. As you find the match, you mark your answer on the answer sheet.

You will be given two (2) hours to complete the Oral exam. You will be told when fifteen (15) minutes remain in order to finish. Fill in only one (1) oval on the answer sheet for each question. You may write in the test booklet, but markings in the test booklet will **NOT** be accepted as answers. Your answers must appear on the separate answer sheet.

2016 WRITTEN (OR ORAL) EXAM CONTENT OUTLINE

The revised content outline is based on the findings from the *2014 Job Analysis and Knowledge, Skill, and Ability Study of Nurse Aides* published by the National Council of State Boards of Nursing (NCSBN) in 2015. The examination content outline will be effective January 2016.

The NNAAP written examination is comprised of 70 multiple-choice items; 10 of these items are pretest (non-scored) items on which statistical information will be collected. The NNAAP oral examination is comprised of 60 multiple-choice items and 10 reading comprehension (word recognition) items. The candidate is allowed to choose between a written and an oral examination.

	<i>% of the exam</i>	<i># of questions in the exam</i>
I. Physical Care Skills		
A. Activities of Daily Living.....	14%	9
1. Hygiene		
2. Dressing and Grooming		
3. Nutrition and Hydration		
4. Elimination		
5. Rest/Sleep/Comfort		
B. Basic Nursing Skills.....	39%	23
1. Infection Control		
2. Safety/Emergency		
3. Therapeutic/Technical Procedures		
4. Data Collection and Reporting		
C. Restorative Skills.....	8%	5
1. Prevention		
2. Self Care/Independence		
II. Psychosocial Care Skills		
A. Emotional and Mental Health Needs	11%	6
B. Spiritual and Cultural Needs	2%	2
III. Role of the Nurse Aide		
A. Communication.....	8%	4
B. Client Rights	7%	4
C. Legal and Ethical Behavior.....	3%	2
D. Member of the Health Care Team	8%	5

SAMPLE QUESTIONS

The following questions are samples of the kinds of questions that you will find on the Written Examination. Check your answers to these questions in the box below.

- 1. The client's call light should always be placed:**
 - (A) on the bed
 - (B) within the client's reach
 - (C) on the client's right side
 - (D) over the side rail
- 2. Which of the following items is used in the prevention and treatment of bedsores or pressure sores?**
 - (A) rubber sheet
 - (B) air mattress
 - (C) emesis basin
 - (D) restraint
- 3. When caring for a dying client, the nursing assistant should:**
 - (A) keep the client's room dark and quiet
 - (B) allow client to express his feelings
 - (C) change the subject if client talks about death
 - (D) contact the client's minister, priest or rabbi
- 4. What does the abbreviation ADL mean?**
 - (A) Ad Lib
 - (B) As Doctor Likes
 - (C) Activities of Daily Living
 - (D) After Daylight
- 5. After giving a client a back rub, the nursing assistant should always note:**
 - (A) the last time the client had a back rub
 - (B) any change in the client's skin
 - (C) client's weight
 - (D) amount of lotion used
- 6. How should the nursing assistant communicate with a client who has a hearing loss?**
 - (A) face the client when speaking
 - (B) repeat the statement
 - (C) shout so that the client can hear
 - (D) use a high-pitched voice

1. B 2. B 3. B 4. C 5. B 6. A

Correct Answers

SELF-ASSESSMENT READING TEST

The two-part Self-Assessment Reading Test that appears below will help you decide if you should consider taking the Oral Examination instead of the Written Examination. To complete the reading test, follow the instructions provided below and select the answer to each question. When you have completed the reading test, you will be able to determine the number of questions you answered correctly.

PART 1: VOCABULARY

1. Circle the best answer to each question.
2. When you have finished, check your answers using the answer key on page 21.
3. Count up the number of correct answers.
4. If your score is less than 17, you may have difficulty reading the Written Examination and should consider taking the Oral Examination.

1. You go to a doctor when you _____.

- (A) feel sleepy (D) need money
(B) need socks (E) need clothes
(C) feel sick

2. A person who flies an airplane is its _____.

- (A) pilot (D) surgeon
(B) steward (E) director
(C) mother

3. You use a _____ to write.

- (A) bow (D) carpenter
(B) calculator (E) needle
(C) pencil

4. To EXIT a room means to _____ it.

- (A) enter (D) read
(B) leave (E) interrupt
(C) forget

5. A wedding is a joyous _____.

- (A) focus (D) occasion
(B) vehicle (E) civilization
(C) balloon

6. To REQUIRE something means to _____ it.

- (A) need (D) understand
(B) have (E) hear
(C) forget

go to next page

7. **You _____ something to find its length.**
(A) slice
(B) lock
(C) measure
(D) force
(E) tape
8. **Soup is served in a _____.**
(A) plate
(B) bowl
(C) fork
(D) chair
(E) closet
9. **To accompany someone means to _____.**
(A) disagree with him
(B) work for him
(C) go with him
(D) speak to him
(E) choose him
10. **A nursing home resident receives _____ from the staff.**
(A) quality
(B) fame
(C) interruption
(D) care
(E) work
11. **Medicine is used to _____ pain.**
(A) widen
(B) conjure
(C) enliven
(D) increase
(E) relieve
12. **To DRENCH the flowers means to _____ them.**
(A) steam
(B) drink
(C) touch
(D) soak
(E) anger
13. **A bicycle is a means of _____.**
(A) nourishment
(B) transportation
(C) prediction
(D) collision
(E) walking
14. **When someone speaks in a whisper, it may be difficult to _____.**
(A) deceive
(B) understand
(C) frighten
(D) estimate
(E) regulate

go to next page

SELF-ASSESSMENT READING TEST

PART 2: COMPREHENSION

In this part of the reading test you will be provided with a series of brief paragraphs. You are to read each paragraph and then answer the questions that appear after the paragraph.

There are many different kinds of fish. All fish live in water. They use their tails and fins to swim.

15. **Fish live in _____.**
- (A) cups
 - (B) houses
 - (C) air
 - (D) water
 - (E) fountains
16. **Fish use their _____ to swim.**
- (A) tails
 - (B) heads
 - (C) gills
 - (D) lungs
 - (E) floats

Maria grew up on a farm. She loved the work on the farm. She knew when all of the crops had to be planted. She would like a job on a farm or in a flower garden.

17. **Maria has had experience as a _____.**
- (A) guide
 - (B) farmer
 - (C) driver
 - (D) nurse
 - (E) teacher
18. **She would like to work in _____.**
- (A) an office
 - (B) a library
 - (C) a garden
 - (D) a hospital
 - (E) a supermarket
19. **As a child Maria lived _____.**
- (A) in the city
 - (B) in an apartment
 - (C) on a farm
 - (D) in a large house
 - (E) on the beach

go to next page

Carolyn has a good job. She is a nurse in a large hospital. Every day she can help many people. She enjoys this very much. She also makes a good salary. Each month she can pay her bills and save some money.

20. Carolyn works in a _____.
- (A) hospital
 - (B) doctor's office
 - (C) garage
 - (D) school
 - (E) library
21. One of the things Carolyn enjoys is _____.
- (A) working in an office
 - (B) helping people
 - (C) reading books
 - (D) working late hours
 - (E) driving a car
22. With her salary she can pay her bills and _____.
- (A) buy furniture
 - (B) give to charity
 - (C) save money
 - (D) buy new clothes
 - (E) pay for college

***This completes the
Self-Assessment Reading Test.***

Answers

- | | | | |
|------|-------|-------|-------|
| 1. C | 7. C | 13. B | 19. C |
| 2. A | 8. B | 14. B | 20. A |
| 3. C | 9. C | 15. D | 21. B |
| 4. B | 10. D | 16. A | 22. C |
| 5. D | 11. E | 17. B | |
| 6. A | 12. D | 18. C | |

If your score is less than 17, you may have difficulty reading the Written Examination and should consider taking the Oral Examination in place of the Written Examination.

THE SKILLS EVALUATION

WHAT TO EXPECT

SETTING

The Skills Evaluation is set up to resemble an actual caregiving situation. The Skills Evaluation area will look similar to your work setting. It will have all the equipment necessary to perform the assigned skills. The Skills Evaluation will be administered by a Nursing Assistant Evaluator. Before your skills evaluation begins, the evaluator will show you where equipment is located and answer questions about operating the equipment.

Please arrive at the designated test site thirty (30) minutes early. Test times are approximate, so please plan to spend the entire day.

See pages 23-37 for the complete skills listing.

WHO WILL ACT AS A CLIENT?

The part of the “client” will be played by a candidate who volunteers to act as a weakened elderly person. While you perform the skills, speak to the candidate volunteer as you would speak to an actual client in a nursing assistant work setting. You are encouraged to speak to the candidate volunteer not only because it is part of quality care, but also because it will help you to relax as you perform the skills.

CANDIDATE VOLUNTEER REQUIREMENTS

You will need to act as a candidate volunteer for another nursing assistant’s Skills Evaluation and play the role of a nursing home patient (client). The evaluator will give you verbal instructions that will describe how you should act in performing the role of the client.

CANDIDATE DRESS REQUIREMENTS

You **must wear flat, slip-on, non-skid shoes**, a loose-fitting top with short sleeves that can be rolled up to the shoulder, or tank top, and loose fitting pants that can be rolled up, or bathing suit. You will be required to put a gown on over your clothing. In no case may candidates remove clothing down to undergarments.

Prior to beginning the exam, you should inform the evaluator of any food or latex allergy or sensitivity to skin soaps or lotion. Any limitations to range of motion must also be communicated to the evaluator prior to the start of the skills examination.

For infection control purposes, you should not come to the test site with open areas/sores on the skin. Candidates with any open areas or sores on their skin should reschedule their skills test to a later date after their skin fully heals.

THE TASKS

The NNAAP Skills List contains all of the skills that you may be asked to demonstrate during the Skills Evaluation. Each skill represents a task that you will be asked to perform in your job and has been broken down into a series of steps.

A step that is highlighted in **bold type** is called a **Critical Element Step**. Critical Element Steps are important steps that must be performed correctly in order for you to pass the skill. If you leave out a Critical Element Step or do not perform a Critical Element Step properly, you will not pass the skill. However, if you perform only the Critical Element Step correctly in a skill, you do not automatically pass that skill. You must also correctly demonstrate enough steps to meet the passing standard (or *cut score*) for each skill.

Before your Skills Evaluation begins, the Nursing Assistant Evaluator will give you an instruction card that will list the five (5) skills selected for you to perform. Hand-washing will always be one of the skills to be performed. The remaining four (4) skills are randomly chosen from the complete set of skills listings on pages 23 to 37 of this handbook. You are strongly encouraged to perform the skills in the order they are listed on the instruction card.

If you make a mistake, say so, and you will be instructed to tell the evaluator which step(s) is to be corrected and then to perform the step(s). You will not have to redo the entire skill, just the steps you wish to correct. There are, however, some exceptions to this rule. If you fail to put on gloves or take them off when it is required to do so and the evaluator reminds you to do so, for infection control purposes, then you will not receive credit for attempting to correct this step. If you wish to correct an order-dependent step (a step stating that an action should be performed **before** or **after** another step) and you fail to say **when** the corrected step should be performed, you will not receive credit for the correction.

Continued on next page

Once you begin a new skill, you may not go back to correct a previous skill. The Nursing Assistant Evaluator will not answer questions **during** the Skills Evaluation and will not tell you whether you performed a skill correctly. You may not receive help from anyone during the Skills Evaluation. If you do have any questions, please ask them before the Skills Evaluation begins.

One (1) of the four (4) randomly-selected skills will include a measurement skill (see the section below, *Recording A Measurement*, for more information regarding measurement skills).

You must successfully complete five (5) out of the five (5) skills in the skill form to pass the Skills Evaluation. You will have thirty (30) minutes to demonstrate all five (5) skills.

When you have completed your skills evaluation, the evaluator will direct you to wash your hands. Although this will not effect your examination results, for the purposes of infection control, you must wash your hands.

RECORDING A MEASUREMENT

The NNAAP Skills Evaluation requires every candidate to perform one measurement skill, such as radial pulse, respirations, urine output, or weight. You will be given a special form, called a Recording Sheet for Measurement Skills, to write down, or *record*, the measurement. For example, if performing the *Measures & Records Weight of Ambulatory Client* skill, you will write the actual weight in a box labeled "Candidate Results."

On the following page is a copy of the recording sheet that will be used during the skills exam. The candidate must record his/her results in the Candidate Results box on this sheet. This sheet will be used to record the results of the following measurement skills:

- Measures and Records Weight of Ambulatory Client
- Measures and Records Urinary Output
- Counts and Records Radial Pulse
- Counts and Records Respirations

RECORDING SHEET FOR MEASUREMENT SKILLS

Date _____

Test Site ID _____

Candidate Name _____

Candidate ID _____

Evaluator Name _____

Evaluator _____

SKILL TESTED

One box next to the skill being tested must be marked.

- Blood Pressure
- Radial Pulse
- Respirations
- Urine Output
- Weight (must document the unit of measurement, lb or kg)

CANDIDATE RESULTS	EVALUATOR RESULTS

TIPS FOR THE SKILLS EVALUATION

- You will be expected to perform the skills as you would in a nursing home setting. When water is required, you must use running water. All candidates will be required to perform the *Hand Hygiene* skill. The evaluator will inform you after you have washed your hands for the first time that you should just tell him or her when you would wash your hands during your performance of the rest of the skills, rather than actually washing them for each skill. For all steps other than hand-washing, you must actually perform the skill in order to receive credit. You may not simply tell the evaluator what you would do for simulating a step. For example, you may not simply tell the evaluator that you would wash the client. You must actually demonstrate washing the client. You may not simply tell the evaluator that you would feed the client. You must actually demonstrate feeding the client.
- After you have introduced yourself to the client for the first time, it is not necessary for you to introduce yourself each time you begin a new skill.
- To receive full credit for a measurement skill, you must accurately make the required measurement and then write that measurement on the *Recording Sheet for Measurement Skills*. The evaluator will provide the Recording Sheet to you at the test site. A sample of the Recording Sheet is shown on page 21 of this handbook. You are encouraged to become familiar with the Recording Sheet before your scheduled test date.
- You must know how to operate both a standing and a non-digital bathroom scale and must know how to set both types of scales to zero.
- You **may not bring** any of your own equipment to the test site (i.e. transfer/gait belt).
- It is important for you to place the call signal within the client's reach whenever you leave the client.
- *Where the word "client" appears, it refers to the person receiving care.*

SKILLS LISTING

The 23 skills that follow are arranged in alphabetical order, except for the *Hand Hygiene (Hand Washing)* skill. Hand Hygiene is listed first as a reminder of the importance of performing this skill before all other skills. The numbered lines below each skill are the steps needed to perform that skill. Critical Element Steps are in bold type.

SKILL 1 — HAND HYGIENE (HAND WASHING)

- 1 Address client by name and introduces self to client by name
- 2 Turns on water at sink
- 3 Wets hands and wrists thoroughly
- 4 Applies soap to hands
- 5 **Lathers all surfaces of wrists, hands, and fingers producing friction, for at least 20 (twenty) seconds, keeping hands lower than the elbows and the fingertips down**
- 6 Cleans fingernails by rubbing fingertips against palms of the opposite hand
- 7 **Rinse all surfaces of wrists, hands, and fingers, keeping hands lower than the elbows and the fingertips down**
- 8 Uses clean, dry paper towel/towels to dry all surfaces of fingers, hands, and wrists starting at fingertips then disposes of paper towel/towels into waste container
- 9 Uses clean, dry paper towel/towels to turn off faucet then disposes of paper towel/towels into waste container or uses knee/foot control to turn off faucet
- 10 Does not touch inside of sink at any time

SKILL 2 — APPLIES ONE KNEE-HIGH ELASTIC STOCKING

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Client is in supine position (lying down in bed) while stocking is applied
- 4 Turns stocking inside-out, at least to the heel
- 5 Places foot of stocking over toes, foot, and heel

Skill continues

- 6 Pulls top of stocking over foot, heel, and leg
- 7 Moves foot and leg gently and naturally, avoiding force and over-extension of limb and joints
- 8 Finishes procedure with no twists or wrinkles and heel of stocking, if present, is over heel and opening in toe area (if present) is either over or under toe area; if using a mannequin, candidate may state stocking needs to be wrinkle-free**
- 9 Signaling device is within reach and bed is in low position
- 10 After completing skill, wash hands

SKILL 3 — ASSISTS TO AMBULATE USING TRANSFER BELT

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before assisting to stand, client is wearing non-skid shoes/footwear**
- 4 Before assisting to stand, bed is at a safe level
- 5 Before assisting to stand, checks and/or locks bed wheels
- 6 Before assisting to stand, client is assisted to sitting position with feet flat on the floor**
- 7 Before assisting to stand, applies transfer belt securely at the waist over clothing/gown
- 8 Before assisting to stand, provides instructions to enable client to assist in standing including prearranged signal to alert client to begin standing
- 9 Stands facing client positioning self to ensure safety of candidate and client during transfer. Counts to three (or says other prearranged signal) to alert client to begin standing
- 10 On signal, gradually assists client to stand by grasping transfer belt on both sides with an upward grasp (candidate's hands are in upward position), and maintaining stability of client's legs by standing knee to knee, or toe to toe with client
- 11 Walks slightly behind and to one side of client for a distance of ten (10) feet, while holding onto the belt
- 12 Assists client to bed and removes transfer belt
- 13 Signaling device is within reach and bed is in low position
- 14 After completing skill, wash hands

SKILL 4 — ASSISTS WITH USE OF BEDPAN

- 1 Explains procedure speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before placing bedpan, lowers head of bed
- 4 Puts on clean gloves before placing bedpan under client
- 5 Places bedpan correctly under client's buttocks
- 6 Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 7 After positioning client on bedpan and removing gloves, raises head of bed
- 8 Toilet tissue is within reach
- 9 Hand wipe is within reach and client is instructed to clean hands with hand wipe when finished
- 10 Signaling device within reach and client is asked to signal when finished
- 11 Puts on clean gloves before removing bedpan
- 12 Head of bed is lowered before bedpan is removed
- 13 Ensures client is covered except when placing and removing bedpan
- 14 Empties and rinses bedpan and pours rinse into toilet
- 15 Places bedpan in designated dirty supply area
- 16 Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 17 Signaling device is within reach and bed is in low position

SKILL 5 — CLEANS UPPER OR LOWER DENTURE

- 1 Puts on clean gloves before handling denture
- 2 Bottom of sink is lined and/or sink is partially filled with water before denture is held over sink
- 3 Rinses denture in moderate temperature running water before brushing them
- 4 Applies denture toothpaste to toothbrush
- 5 Brushes all surfaces of denture
- 6 Rinses all surfaces of denture under moderate temperature running water
- 7 Rinses denture cup and lid
- 8 Places denture in denture cup with moderate temperature water/solution and places lid on cup

Skill continues

- 9 Rinses toothbrush and places in designated toothbrush basin/container
- 10 Maintains clean technique with placement of toothbrush and denture
- 11 Sink liner is removed and disposed of appropriately and/or sink is drained
- 12 Removes and disposes of gloves (without contaminating self) into waste container and washes hands

SKILL 6 — COUNTS AND RECORDS RADIAL PULSE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Places fingertips on thumb side of client's wrist to locate radial pulse
- 3 Count beats for one full minute
- 4 Signaling device is within reach
- 5 Before recording, washes hands
- 6 Records pulse rate within plus or minus 4 beats of evaluator's reading**

SKILL 7 — COUNTS AND RECORDS RESPIRATIONS

- 1 Explains procedure (for testing purposes), speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Counts respirations for one full minute
- 3 Signaling device is within reach
- 4 Before recording, washes hands
- 5 Records respiration rate within plus or minus 2 breaths of evaluator's reading**

SKILL 8 — DONNING AND REMOVING PPE (GOWN AND GLOVES)

- 1 Picks up gown and unfolds
- 2 Facing the back opening of the gown places arms through each sleeve
- 3 Fastens the neck opening
- 4 Secures gown at waist making sure that back of clothing is covered by gown (as much as possible)
- 5 Puts on gloves

Skill continues

- 6 Cuffs of gloves overlap cuffs of gown
- 7 **Before removing gown, with one gloved hand, grasps the other glove at the palm, remove glove**
- 8 **Slips fingers from ungloved hand underneath cuff of remaining glove at wrist, and removes glove turning it inside out as it is removed**
- 9 Disposes of gloves into designated waste container without contaminating self
- 10 After removing gloves, unfastens gown at waist and neck
- 11 After removing gloves, removes gown without touching outside of gown
- 12 While removing gown, holds gown away from body without touching the floor, turns gown inward and keeps it inside out
- 13 Disposes of gown in designated container without contaminating self
- 14 After completing skill, washes hands

SKILL 9 — DRESSES CLIENT WITH AFFECTED (WEAK) RIGHT ARM

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Asks which shirt he/she would like to wear and dresses him/her in shirt of choice
- 4 Avoids overexposure of client by ensuring client's chest is covered
- 5 Removes gown from the left (unaffected) side first, then removes gown from the right (affected/weak) side
- 6 Before dressing client, disposes of gown into soiled linen container
- 7 **Assists to put the right (affected/weak) arm through the right sleeve of the shirt before placing garment on left (unaffected) arm**
- 8 While putting on shirt, moves body gently and naturally, avoiding force and over-extension of limbs and joints
- 9 Finishes with clothing in place
- 10 Signaling device is within reach and bed is in low position
- 11 After completing skill, washes hands

SKILL 10 — FEEDS CLIENT WHO CANNOT FEED SELF

- 1 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Before feeding, looks at name card on tray and asks client to state name
- 3 Before feeding client, client is in an upright sitting position (75-90 degrees)**
- 4 Places tray where the food can be easily seen by client
- 5 Candidate cleans client's hands before beginning feeding
- 6 Candidate sits in a chair facing client during feeding
- 7 Tells client what foods and beverage are on tray
- 8 Asks client what he/she would like to eat first
- 9 Using spoon, offers client one bite of each type of food on tray, telling client the content of each spoonful
- 10 Offers beverage at least once during meal
- 11 Candidate asks client if they are ready for next bite of food or sip of beverage
- 12 At end of meal, candidate cleans client's mouth and hands
- 13 Removes food tray
- 14 Leaves client in upright sitting position (75-90 degrees) with signaling device within client's reach
- 15 After completing skill, washes hands

SKILL 11 — GIVES MODIFIED BED BATH (FACE AND ONE ARM, HAND AND UNDERARM)

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Removes gown and places directly in soiled linen container while ensuring client's chest and lower body is covered
- 4 Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water
- 5 Puts on clean gloves before washing client.
- 6 Beginning with eyes, washes eyes with wet washcloth (no soap), using a different area of the washcloth for each stroke, washing inner aspect to outer aspect then proceeds to wash face**

Skill continues

- 7 Dries face with dry cloth towel/washcloth
- 8 Exposes one arm and places cloth towel underneath arm
- 9 Applies soap to wet washcloth
- 10 Washes fingers (including fingernails), hand, arm, and underarm keeping rest of body covered
- 11 Rinses and dries fingers, hand, arm, and underarm
- 12 Moves body gently and naturally, avoiding force and over-extension of limbs and joints
- 13 Puts clean gown on client
- 14 Empties, rinses, and dries basin
- 15 Places basin in designated dirty supply area
- 16 Disposes of linen into soiled linen container
- 17 Avoids contact between candidate clothing and used linens
- 18 Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 19 Signaling device is within reach and bed is in low position

SKILL 12* — MEASURES AND RECORDS ELECTRONIC BLOOD PRESSURE

****STATE SPECIFIC (EVALUATOR: DO NOT
SUBSTITUTE THIS SKILL FOR SKILL 23 'MANUAL
BLOOD PRESSURE')***

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Has client assume a comfortable lying or sitting position
- 4 Client's arm is positioned at level of heart with palm up and upper arm is exposed
- 5 Selects appropriate cuff size
- 6 Feels for brachial artery on inner aspect of arm, at bend of elbow
- 7 Places blood pressure cuff snugly on client's upper arm and sensor/arrow is over the brachial artery site
- 8 Turns on the machine and ensures device is functioning. If the machine has different settings for infants, children, and adults, selects the appropriate setting
- 9 Pushes start button. If cuff inflates to more than 200 mm Hg then stops machine and uses cuff on client's other arm

Skill continues

- 10 Waits until the blood pressure reading appears on the screen and for the cuff to deflate, then removes the cuff
- 11 Signaling device is within reach
- 12 Before recording, washes hands
- 13 After obtaining reading using BP cuff, records both systolic and diastolic pressures exactly as displayed on the digital screen**

SKILL 13 — MEASURES AND RECORDS URINARY OUTPUT

- 1 Puts on clean gloves before handling bedpan
- 2 Pours the contents of the bedpan into measuring container without spilling or splashing urine outside of container
- 3 Rinses bedpan and pours rinse into toilet
- 4 Measures the amount of urine at eye level with container on flat surface (if between measurement lines, round up to nearest 25 ml/cc)
- 5 After measuring urine, empties contents of measuring container into toilet
- 6 Rinses measuring container and pours rinse into toilet
- 7 Before recording output, removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 8 Records contents of container within plus or minus 25 ml/cc of evaluator's reading**

SKILL 14 — MEASURES AND RECORDS WEIGHT OF AMBULATORY CLIENT

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Client has non-skid shoes/footwear on before walking to scale
- 3 Before client steps on scale, candidate sets scale to zero
- 4 Asks client to step on center of scale and obtains client's weight
- 5 Asks client to step off scale
- 6 Before recording, washes hands
- 7 Records weight based on indicator on scale. Weight is within plus or minus 2 lbs of evaluator's reading (If weight recorded in kg weight is within plus or minus 0.9 kg of evaluator's reading)**

SKILL 15 — PERFORMS MODIFIED PASSIVE RANGE OF MOTION (PROM) FOR ONE KNEE AND ONE ANKLE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Ensures that client is supine in bed and instructs client to inform candidate if pain is experienced during exercise
- 4 **While supporting the leg at knee and ankle, bends the knee and then returns leg to client's normal position (flexion/extension) (AT LEAST 3 TIMES unless pain is verbalized). Moves joints gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.**
- 5 **While supporting the foot and ankle close to the bed, pushes/pulls foot toward head (dorsiflexion), and pushes/pulls foot down, toes point down (plantar flexion) (AT LEAST 3 TIMES unless pain is verbalized). Moves joints gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.**
- 6 Signaling device is within reach and bed is in low position
- 7 After completing skill, washes hands

SKILL 16 — PERFORMS MODIFIED PASSIVE RANGE OF MOTION (PROM) FOR ONE SHOULDER

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Instructs client to inform candidate if pain experienced during exercise
- 4 **While supporting arm at the elbow and at the wrist, raises client's straightened arm from side position upward toward head to ear level and returns arm down to side of body (flexion/extension) (AT LEAST 3 TIMES unless pain is verbalized). Moves joint gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.**

Skill continues

- 5 While supporting arm at the elbow and at the wrist, moves client's straightened arm away from the side of body to shoulder level and returns to side of body (abduction/adduction) (AT LEAST 3 TIMES unless pain is verbalized). Moves joint gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.
- 6 Signaling device is within reach and bed is in low position
- 7 After completing skill, washes hands

SKILL 17 — POSITIONS ON SIDE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before turning, lowers head of bed
- 4 Raises side rail on side to which body will be turned
- 5 Candidate assists client to slowly roll onto side toward raised side rail
- 6 Places or adjusts pillow under head for support
- 7 Candidate repositions arm and shoulder so that client is not lying on arm
- 8 Supports top arm with supportive device
- 9 Places supportive device behind client's back
- 10 Places supportive device between legs with top knee flexed; knee and ankle supported
- 11 Signaling device is within reach and bed is in low position
- 12 After completing skill, washes hands

SKILL 18 — PROVIDES CATHETER CARE FOR FEMALE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water
- 4 Puts on clean gloves before washing
- 5 Places linen protector under perineal area including buttocks before washing

Skill continues

- 6 Exposes area surrounding catheter (only exposing client between hip and knee)
- 7 Applies soap to wet washcloth
- 8 While holding catheter at meatus without tugging, cleans at least four inches of catheter from meatus, moving in only one direction, away from meatus, using a clean area of the washcloth for each stroke**
- 9 While holding catheter at meatus without tugging, using a clean washcloth, rinses at least four inches of catheter from meatus, moving only in one direction, away from meatus, using a clean area of the washcloth for each stroke**
- 10 While holding catheter at meatus without tugging, dries at least four inches of catheter moving away from meatus using a dry cloth towel/washcloth
- 11 Empties, rinses, and dries basin
- 12 Places basin in designated dirty supply area
- 13 Disposes of used linen into soiled linen container and disposes of linen protector appropriately
- 14 Avoids contact between candidate clothing and used linen
- 15 Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 16 Signaling device is within reach and bed is in low position

SKILL 19 — PROVIDES FOOT CARE ON ONE FOOT

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water
- 4 Basin is in a comfortable position for client and on protective barrier
- 5 Puts on clean gloves before washing foot
- 6 Client's bare foot is placed into the water
- 7 Applies soap to wet washcloth
- 8 Lifts foot from water and washes foot (including between the toes)

Skill continues

- 9 Foot is rinsed (including between the toes)
- 10 Dries foot (including between the toes) with dry cloth towel/washcloth
- 11 Applies lotion to top and bottom of foot (excluding between the toes) removing excess with a towel/washcloth
- 12 Supports foot and ankle during procedure
- 13 Empties, rinses, and dries basin
- 14 Places basin in designated dirty supply area
- 15 Disposes of used linen into soiled linen container
- 16 Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 17 Signaling device is within reach

SKILL 20 — PROVIDES MOUTH CARE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before providing mouth care, client is in upright sitting position (75-90 degrees)
- 4 Puts on clean gloves before cleaning mouth
- 5 Places cloth towel across chest before providing mouth care
- 6 Secures cup of water and moistens toothbrush
- 7 Before cleaning mouth, applies toothpaste to moistened toothbrush
- 8 Cleans mouth (including tongue and all surfaces of teeth), using gentle motions**
- 9 Maintains clean technique with placement of toothbrush
- 10 Candidate holds emesis basin to chin while client rinses mouth
- 11 Candidate wipes mouth and removes clothing protector
- 12 Disposes of used linen into soiled linen container
- 13 Rinses toothbrush and empties, rinses, and dries basin
- 14 Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 15 Signaling device is within reach and bed is in low position

SKILL 21 — PROVIDES PERINEAL CARE (PERI-CARE) FOR FEMALE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water
- 4 Puts on clean gloves before washing perineal area
- 5 Places pad/ linen protector under perineal area including buttocks before washing
- 6 Exposes perineal area (only exposing between hips and knees)
- 7 Applies soap to wet washcloth
- 8 Washes genital area, moving from front to back, while using a clean area of the washcloth for each stroke**
- 9 Using clean washcloth, rinses soap from genital area, moving from front to back, while using a clean area of the washcloth for each stroke**
- 10 Dries genital area moving from front to back with dry cloth towel/washcloth
- 11 After washing genital area, turns to side, then washes rectal area moving from front to back using a clean area of washcloth for each stroke.
- 12 Using clean washcloth, rinses soap from rectal area, moving from front to back, while using a clean area of the washcloth for each stroke
- 13 Dries rectal area moving from front to back with dry cloth towel/washcloth
- 14 Repositions client
- 15 Empties, rinses, and dries basin
- 16 Places basin in designated dirty supply area
- 17 Disposes of used linen into soiled linen container and disposes of linen protector appropriately
- 18 Avoids contact between candidate clothing and used linen
- 19 Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 20 Signaling device is within reach and bed is in low position

SKILL 22 — TRANSFERS FROM BED TO WHEELCHAIR USING TRANSFER BELT

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before assisting to stand, wheelchair is positioned alongside of bed, at head of bed facing foot or foot of bed facing head
- 4 Before assisting to stand, footrests are folded up or removed
- 5 Before assisting to stand, locks wheels on wheelchair**
- 6 Before assisting to stand, bed is at a safe level
- 7 Before assisting to stand, checks and/or locks bed wheels
- 8 Before assisting to stand, client is assisted to a sitting position with feet flat on the floor**
- 9 Before assisting to stand, client is wearing shoes
- 10 Before assisting to stand, applies transfer belt securely at the waist over clothing/gown
- 11 Before assisting to stand, provides instructions to enable client to assist in transfer including prearranged signal to alert when to begin standing
- 12 Stands facing client positioning self to ensure safety of candidate and client during transfer. Counts to three (or says other prearranged signal) to alert client to begin standing
- 13 On signal, gradually assists client to stand by grasping transfer belt on both sides with an upward grasp (candidate's hands are in upward position) and maintaining stability of client's legs by standing knee to knee, or toe to toe with the client
- 14 Assists client to turn to stand in front of wheelchair with back of client's legs against wheelchair
- 15 Lowers client into wheelchair
- 16 Positions client with hips touching back of wheelchair and transfer belt is removed
- 17 Positions feet on footrests
- 18 Signaling device is within reach
- 19 After completing skill, washes hands

SKILL 23* — MEASURES AND RECORDS MANUAL BLOOD PRESSURE

***STATE SPECIFIC (EVALUATOR: DO NOT
SUBSTITUTE THIS SKILL FOR SKILL 1
'ELECTRIC BLOOD PRESSURE')**

- 1 Explains procedure, speaking clearly and directly, maintaining face-to-face contact whenever possible
- 2 Before using stethoscope, wipes bell/diaphragm and earpieces of stethoscope with alcohol
- 3 Client's arm is positioned with palm up and upper arm is exposed
- 4 Palpates for brachial artery on inner aspect of arm at bend of elbow
- 5 Places blood pressure cuff snugly on client's upper arm, with sensor/arrow over brachial artery site
- 6 Earpieces of stethoscope are in ears and bell/diaphragm is over brachial artery site
- 7 Candidate inflates cuff between 160mm Hg to 180 mm Hg. If beat heard immediately upon cuff deflation, completely deflate cuff. Re-inflate cuff to no more than 200 mm Hg
- 8 Deflates cuff slowly and notes the first sound (systolic reading), and last sound (diastolic reading) (If rounding needed, measurements are rounded UP to the nearest 2 mm of mercury)
- 9 Removes cuff
- 10 Signaling device is within reach
- 11 Before recording, washes hands
- 12 **After obtaining reading using BP cuff and stethoscope, records both systolic and diastolic pressures each within plus or minus 8 mm of evaluator's reading**

SCORE REPORTING

EXAM RESULTS

WRITTEN (OR ORAL) EXAM

After you finish the Written (or English or Spanish Oral) Examination, the Nursing Evaluator will fax your answer sheet for scoring. After the answer sheet is faxed, it will be scored and you will receive an official Score Report. The Score Report will indicate whether you have passed or failed the Written (or Oral) Examination.

SKILLS EVALUATION

The Nursing Evaluator will also fax your Skills Evaluation results for scoring. After the Nursing Assistant Evaluator evaluates your performance, he or she will fax the Skills Evaluation answer sheet for scoring. An official Score Report will be faxed back to the test center and will indicate whether you have passed or failed the Skills Evaluation.

Although technical difficulties are infrequent, Score Reports occasionally may not be received at the test center on the day of testing. If this happens, your answer sheet will be mailed to Pearson VUE for handscoring. Your Score Report will then be mailed to you within 5-7 business days after testing. For questions regarding delayed Score Reports, please contact Pearson VUE at (888) 274-6060. **Results will not be given over the telephone.**

FAILING

If you fail the Written (or Oral) Examination or the Skills Evaluation, your Score Report will provide you with information on how to re-take either or both parts. A new examination fee is required each time you re-take any part of the NNAAP Examination. To re-take either or both parts, you must submit an original completed registration form and a re-take fee. For re-take fees and information, refer to the *Application & Scheduling* section in this handbook.

State and federal regulations allow you three (3) attempts to pass both the Skills Evaluation and the Written (or Oral) Examination. If you should fail either part or both parts three (3) times, you will be required to successfully complete a Board-approved training program and re-take both parts. You must take and pass both the Written (or Oral) Examination and the Skills Evaluation within a twenty-four (24) month period in order to receive certification as a DC Nursing Assistant.

HOW TO READ A FAILING SCORE REPORT

If you do not pass the Skills Evaluation, you will receive a Failing Score Report. The score report will list the five (5) skills that you performed and a score of *Satisfactory* or *Unsatisfactory* for each skill. Any skill with an *Unsatisfactory* result is considered a failed skill. You must receive a *Satisfactory* result on all five (5) skills in order to pass the Skills Evaluation.

Use your failing Score Report as an aid in studying to re-take the Skills Evaluation. A failed skill will show the reason for the failure. You may not have performed the steps of a skill correctly, or you may have forgotten a step, especially a Critical Element Step.

The failing Score Report will list steps that were missed or incorrect—look for numbers printed directly under a skill marked *Unsatisfactory*. A list of all the skills and the steps needed for each skill can be found in this handbook. Find the skill you failed, and study the steps, especially steps listed as *Unsatisfactory* on the score report.

In the example below, a candidate received a result of *Unsatisfactory* on the skill *Hand Hygiene*. The numbers 1, 5, and 10 printed below the skill refer to steps that were missed or performed incorrectly. To study for re-taking the Skills Evaluation, this candidate should turn to the Skills Listing in this handbook, look for the *Hand Hygiene* skill, and review all the steps, especially steps 1, 5, and 10.

District of Columbia NNAAP® Examination Results	
Exam: Skills	Result: Fail
Skills Performance:	
Hand Hygiene 1, 5, 10	Unsatisfactory
Positions on Side	Satisfactory
Measures and Records Blood Pressure	Satisfactory
Puts One Knee-High Elastic Stocking on Client	Satisfactory
Measures and Records Weight of Ambulatory Client	Satisfactory

A sample of a Failing Score Report

PASSING

Once you have passed both the Written (or Oral English or Spanish) Examination and the Skills Evaluation, your name will be placed on the DC Nursing Assistant Registry. A Registry Certificate (also known as a Notice of Enrollment) will be mailed to you by Pearson VUE and will arrive approximately three (3) weeks after you successfully complete both the Written (or Oral English or Spanish) Examination and the Skills Evaluation. You must show this card to your employer. ***Do not make any changes to your Registry Certificate. Any changes to the Registry Certificate could affect your status as a nursing assistant.***

NOTE: *Certification is valid for the time period indicated on the certificate and will expire if not renewed.*

GRIEVANCE PROCESS

All grievances must be in writing and submitted through the online system. The candidate must provide as much detail as possible in the grievance form. The grievance must be submitted within thirty (30) days of the candidate's exam date. After receipt of the grievance form, the complaint will be investigated. Once the investigation is complete, Pearson VUE will send written correspondence back to the candidate informing him/her of the outcome of the investigation. If the grievance is substantiated, the candidate will be allowed to retest at no additional cost.

You can access the grievance form by logging into your account. Once you are in your account, go to Actions on the left side, and select Complete a Form. Under Other Forms you will select the Grievance Form. Please ensure you complete all information in the form and then Submit. You will receive a response within thirty (30) business days of receipt.

THE CNA REGISTRY

CHANGE OF ADDRESS OR NAME

To change your name or address, use the *Change of Address or Name Form* in the back of this handbook, or send a letter to the DC Nursing Assistant Registry (see address on the *Change of Address or Name Form*) informing them of the change. Failure to inform the Registry of an address change may jeopardize your certification status. Be sure to list both the old information and the updated information, including your name, address, Social Security number, and telephone number. *Name changes MUST be accompanied by official supporting documentation, such as a notarized copy of a marriage certificate, divorce decree, or other official document.*

NOTE: *Under federal requirements, certification is no longer valid for any nursing assistant who has had a lapse of twenty-four (24) consecutive months or more in the performance of paid nursing-related services. Your new employer must update your employment history by notifying the Registry when you change jobs.*

CNA CERTIFICATION RENEWAL

Approximately sixty (60) days prior to the expiration of your Registry Certificate, you will be sent an email renewal reminder with instructions for renewing your certification. To renew your certification, follow the instructions to complete the form and return it to Pearson VUE. Once the form has been processed, a new Registry Certificate will be sent to you.

NOTE: *The requirements for renewal of your certification include the performance of paid nursing-related services for a minimum of eight (8) hours and twenty four (24) hours of continuing education or in-services.*

NURSING ASSISTANT CERTIFICATION FREQUENTLY ASKED QUESTIONS

QUESTION	ANSWER
1. How do I become a CNA?	<ul style="list-style-type: none"> You must successfully complete an approved training program and pass both portions of the examination within two (2) years of training at an approved testing site. Check the Exam Overview Section of this handbook for other options.
2. May I perform the duties of a Nursing Assistant before I am certified?	<ul style="list-style-type: none"> For Nursing Assistants, if you have been employed, you have 120 days (4 months) in which to become certified.
3. How do I arrange for Special accommodations?	<ul style="list-style-type: none"> Special requests must be submitted and approved prior to testing. Documentation from your physician or other qualifying professional must be included with the request. Please refer to the Accommodations section of the candidate handbook for details.
4. How do I decide which exam to take?	<ul style="list-style-type: none"> Initially, both the Written and Skills exams must be scheduled together. An Oral Examination in English may be substituted for the Written examination if you have difficulty reading English. It contains ten (10) reading comprehension questions in which you must identify job-related words.
5. Is there a time limit in which I must pass both exams?	<ul style="list-style-type: none"> For the Nursing Assistant currently working in a healthcare setting, you have 4 months to become certified. For all other Nursing Assistants applicants, you must pass both exams within 24 months of the completion of your training program.

NURSING ASSISTANT CERTIFICATION FREQUENTLY ASKED QUESTIONS

QUESTION	ANSWER
6. Can I register for an exam or check my scores online?	<ul style="list-style-type: none"> • Registration must be done online. • Results are given to each candidate at the test site for each examination taken.
7. What form of payment do you accept and may I take it to the test site?	<ul style="list-style-type: none"> • All payments must be made online with a credit card, debit card or electronic voucher. NO form of payment will be accepted at the test site.
8. What is the next test date?	<ul style="list-style-type: none"> • Contact Customer Service at (877) 833-4542
9. How long will it take me to find out if I passed or failed?	<ul style="list-style-type: none"> • Score Reports are provided the day of the examination. If the site experiences technical difficulties with faxing answer sheets, they will be sent to Pearson VUE for hand scoring and results will be mailed or emailed within 5-7 business days after testing.
10. How do I verify my certification status?	<ul style="list-style-type: none"> • If you are certified, your name will be on the DC Nursing Assistant Registry.
11. How do I change my name and/or address?	<ul style="list-style-type: none"> • Mailing addresses can be changed online. Name changes require proof of the name change - i.e. marriage or divorce documents, etc.
12. How long is my certification active?	<ul style="list-style-type: none"> • Your certification is valid for 2 years from the effective date.

NURSING ASSISTANT CERTIFICATION FREQUENTLY ASKED QUESTIONS

QUESTION	ANSWER
<p>13. My certification expired. How do I renew it or become certified again?</p>	<ul style="list-style-type: none"> • Nursing Assistants must retrain and retest when the certification has expired more than 24 months. • Nursing Assistants who have expired certifications less than 24 months may reinstate the certification by providing proof of the performance of nursing services for pay and twenty four (24) continuing education hours.
<p>14. I'm moving to or from another state. May I perform nurse aide duties in that state?</p>	<ul style="list-style-type: none"> • If you are moving TO DC, and you have been certified in another state, you may obtain certification by contacting DC Board of Nursing or visiting the website: https://dchealth.dc.gov/node/149322 • If you are moving FROM DC, you should contact the Board of Nursing or Department of Health for that state, to obtain state requirements.

District of Columbia
Nursing Assistant

REQUEST FOR DUPLICATE SCORE REPORT

DIRECTIONS:

You may use this form to ask Pearson VUE for a copy of your Score Report. Please print or type all information on the back of this form, or your request will be returned.

Skills Evaluation

Written/Oral Examination

SEND TO:

DC Nursing Assistant – Reports
Pearson VUE
PO Box 13785
Philadelphia, PA 19101-3785

PLEASE COMPLETE BOTH SIDES OF THIS FORM

PLEASE COMPLETE THE FOLLOWING FORM WITH YOUR CURRENT NAME AND ADDRESS. ALL INFORMATION MUST BE COMPLETE AND ACCURATE TO ENSURE PROPER PROCESSING.

Name _____

Street _____

City _____ State _____ Zip _____

Tel. (_____) _____ Pearson VUE Identification Number or Social Security Number _____

IF THE ABOVE INFORMATION WAS DIFFERENT AT THE TIME YOU WERE TESTED, PLEASE INDICATE ORIGINAL INFORMATION.

Name _____

Street _____

City _____ State _____ Zip _____

Tel. (_____) _____

I hereby authorize Pearson VUE to send to me at the address above a duplicate copy of my Score Report.

Your Signature _____ Date _____

PLEASE COMPLETE BOTH SIDES OF THIS FORM

**District of Columbia
Nursing Assistant**

CHANGE OF ADDRESS OR NAME

DIRECTIONS:

Use this form to inform the Registry of your change of address or name. Please print or type all information on the reverse side of this form. Be sure to provide all information, or your request cannot be filled.

For name changes you must also provide written documentation of your name change. See back of this form for details.

SEND TO:

DC Nursing Assistant Registry
Pearson VUE
PO Box 13785
Philadelphia, PA 19101-3785

PLEASE COMPLETE OTHER SIDE OF THIS FORM

PRINT YOUR NEW NAME AND ADDRESS BELOW.

Name _____

Street _____

City _____ State _____ Zip _____

Tel. (_____) _____

PLEASE PRINT YOUR OLD NAME AND ADDRESS BELOW.

Name _____

Street _____

City _____ State _____ Zip _____

Social Security Number _____ Nursing Assistant Certification Number _____

YOUR SIGNATURE _____ Date _____

NOTE: *A notarized copy of an official document (marriage certificate or other court order) verifying your name change must accompany this request if you are notifying the DC Nursing Assistant Registry of a change in name.*

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