Virginia Nurse Aide
written (or oral) examination & skills evaluation

CANDIDATE HANDBOOK
March 2017
QUICK REFERENCE

PEARSON VUE REGISTRATION AND SCHEDULING SERVICES
Virginia NNAAP
(866) 340-3555
pearsonvuecustomerservice@pearson.com
www.pearsonvue.com/va/nurseaides

Hours of Operation
Mon. – Fri. 8:00 a.m. – 11:00 p.m.
Sat. 8:00 a.m. – 5:00 p.m.
Sun. 10:00 a.m. – 4:00 p.m.
(Eastern Time Zone)

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

AFTER THE EXAM DATE
(888) 204-6183

Hours of Operation
Mon. – Fri. 8:00 a.m. – 5:00 p.m. (Eastern Time Zone)

Call Pearson VUE for questions about:
• Duplicate score report requests
• The exam content

VIRGINIA BOARD OF NURSING
Virginia Department of Health Professions
Virginia Board of Nursing
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, VA 23233-1463
www.dhp.virginia.gov/nursing

Hours of Operation Monday through Friday
8:15 a.m. – 5:00 p.m.

Visit the Virginia Board of Nursing at www.dhp.virginia.gov/nursing to:
• Obtain information on official laws and regulations for nurse aides
• Find out if you are currently listed on the Registry
• Clarify information about the Registry
• Change your current address or name once you are on the Registry
• Obtain information on continued certification on the Registry
• Request an accommodation for testing under the American with Disabilities Act (ADA) guidelines

Call the Board of Nursing at 804-367-4639 if you are unable to locate answers to your questions on the website.
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This handbook is designed for candidates seeking nurse aide certification in the Commonwealth of Virginia. It describes the process of applying for and taking the National Nurse Aide Assessment Program (NNAAP®) Examination. The NNAAP® Examination is made up of a Written (or Oral) Examination and a Skills Evaluation. It is necessary to pass both parts to be certified as a nurse aide in Virginia.

The Virginia Board of Nursing has contracted with Pearson VUE, a nationally recognized leading provider of assessment services to regulatory agencies and national associations, to administer, score, and report the results of the NNAAP Examination for the Virginia Nurse Aide Registry. Credentia works with Pearson VUE to schedule and administer the NNAAP Examination.

NATIONAL NURSE AIDE 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 nurse aides who work in such facilities. Each state is responsible for following the terms of this federal law.

The National Nurse Aide 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 nurse aide evaluation requirement of federal and state laws and regulations. Pearson VUE is the authorized administrator of the NNAAP in Virginia.

The NNAAP Examination is an evaluation of nurse aide-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 nurse aide.

EXAM OVERVIEW

The two parts of the examination process, the Written (or 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 Virginia Nurse Aide Registry.

The Written Examination consists of seventy (70) multiple-choice questions written in English. Sample questions are provided in this handbook. An Oral Examination may be taken in place of the Written Examination if you have difficulty reading English. This is done by using an MP3 player. The Oral Examination consists of sixty (60) multiple-choice questions and ten (10) reading comprehension questions. If you want to take the Oral Examination, you must request it when you submit your Examination Application.

At the Skills Evaluation you will be asked to perform five (5) randomly selected nurse aide skills. You will be given thirty (30) minutes to complete the five (5) skills. You will be rated on these skills by a Registered Nurse Evaluator. A complete listing of the skills is shown on pages 28 to 43.

See The Written (or Oral) Exam and The Skills Evaluation sections for more details about each part of the NNAAP Examination.

ELIGIBILITY

ELIGIBILITY ROUTES
You are eligible to apply to take the NNAAP Examination for certification as a nurse aide in Virginia if you qualify under one of the following eligibility routes.

There is no time limitation from when you complete a nurse aide education program to when you must take and pass the NNAAP Examination.

E-1 NEW NURSE AIDE
A. FIRST TIME TEST TAKER
B. PREVIOUSLY FAILED ALL OR PART OF THE NNAAP EXAMINATION

You have successfully completed a Virginia-approved nurse aide education program (1982 or thereafter) and have never been certified as a nurse aide.

E-2 NURSING STUDENT
You are currently enrolled in an approved nursing education program preparing for registered nurse or practical nurse licensure, or enrolled in a program in the last 12 months. When completing your online application, you must upload an original letter on letterhead from the program director documenting that you are currently enrolled and have satisfactorily completed at least one (1) clinical course in the nursing program which includes at least forty (40) hours of clinical experience involving direct client care. The online application and letter must be submitted within 12 months of the date on the letter.

E-3 NURSING GRADUATE
You have completed a nursing education program preparing for registered nurse or practical nurse licensure. Verification of completion of a nursing program in the form of an original or certified true copy of a school transcript, in English, is required to be uploaded in Credential Management. Foreign trained RN and LPN applicants must also provide confirmation from CGFNS that their program meets the requirements of their home country. The required forms must be uploaded online when completing the application.

E-4 LAPSED CERTIFICATE HOLDER
You were previously certified in Virginia as a nurse aide but your certification has expired. You must also have completed a renewal or reinstatement application with the Board of Nursing within the past year. For clarification, call the Board at 804-367-4639.

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.

After completing a Virginia state-approved training course or your application has been approved by the Department of Education to test, your name will be sent to Pearson VUE. You will receive an email informing you to complete the application process.

First-time users are required to create an account and complete all required demographic information. Step-by-step instructions will lead the candidate through the rest of the examination reservation process.
ADDITIONAL INFORMATION MAY BE NEEDED FROM CANDIDATES

If you have ever had a criminal conviction, been denied certification/licensure in Virginia or another state, had action taken against your certificate/license in Virginia or another state, or have a mental, physical or chemical dependency condition that could interfere with your ability to practice, you must indicate such history on your online application. Failure to reveal this information is considered falsification of an application and grounds for denial of certification or disciplinary action by the Board of Nursing even after successful completion of the NNAAP.

You must supply additional information about your criminal convictions, other state actions, or conditions that could interfere with safe practice.

If you have a **criminal conviction**, you will need to upload the following information for review by the Board:
- A certified copy of all conviction order(s) from the court(s);
- Evidence that all court ordered requirements were met (i.e., letter from the probation officer if on supervised probation, paid fines, restitution, etc.) for each conviction;
- Letter from you explaining the facts and circumstances leading to the criminal offense; and
- Letters of support from your employers.

If you had **previous action taken against you** or been denied a license or certification, you will need to upload the following information for review by the Board:
- Explanation of the action that was taken (where & when it occurred, details leading to the complaint/action taken)
- An official, certified copy from the regulatory authority of the final Order outlining the outcome of the action taken

If you have a **mental, physical, or chemical dependency condition that could interfere with practice**, you will need to upload the following information for review by the Board:
- Evidence of any past treatment related to the condition (i.e., discharge summary from inpatient and/or outpatient treatment);
- Letter from currently treating health care providers addressing diagnosis, treatment regimen, compliance with treatment, and ability to practice safely;

Payment is in the form of a credit card or pre-paid credit card (American Express, MasterCard, Visa or electronic voucher). Fees are non-refundable and non-transferable once submitted.

You can access the online application at [https://i7lp.integral7.com/vana](https://i7lp.integral7.com/vana)

You must make an online reservation at least ten (10) calendar 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 online application. If you need help or have any questions about the application process, contact a Pearson VUE support representative at 866-340-3555.

Please note that the address you provide on your Credential Management profile will become your address of record with the Virginia Board of Nursing after you pass the Written (or Oral) Examination and the Skills Evaluation. (Some licensees have expressed concern that their resident address is accessible. Consistent with Virginia law and the mission of the Department of Health Professions, addresses of licensees are made available to the public. This has been the policy and the practice of the Commonwealth of Virginia for many years. However, the application of new technology makes such information more accessible.) In most cases it is permissible for an individual to provide an address of record other than a resident address, such as a post office box or a practice location address. If a practice location address is used, it is your responsibility to change your address with and provide any changes of employment to the Board of Nursing.

Changes of address may be made at the time of certification renewal or at any time by written notification to the Virginia Board of Nursing. Please be advised that all notices and correspondence from the Board of Nursing (including renewal notices, licenses, and other legal documents) will be mailed to the address you provide.

If you need help or have any questions about the Examination Application, please contact a Pearson VUE support representative at 866-340-3555.

Completed applications are valid for twelve (12) months from the date of approval or the original receipt date.
• A letter from you explaining circumstances of your condition and ongoing efforts to function safely; and
• Letters of support from your employers.

Please note that although these circumstances may be grounds to deny an applicant, it does not mean the Board of Nursing will deny your application for certification. A delay in testing should be expected and sometimes a meeting with the Board is required to determine approval for certification by examination.

EXAM FEES

The fees listed below have been established for the National Nurse Aide Assessment Program in Virginia.

<table>
<thead>
<tr>
<th>Examination &amp; Skills Evaluation</th>
<th>fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Written Examination &amp; Skills Evaluation</td>
<td>$94</td>
</tr>
<tr>
<td>Oral Examination &amp; Skills Evaluation</td>
<td>$94</td>
</tr>
<tr>
<td>Written Examination ONLY</td>
<td>$25</td>
</tr>
<tr>
<td>Skills Evaluation ONLY</td>
<td>$69</td>
</tr>
<tr>
<td>Oral Examination ONLY</td>
<td>$25</td>
</tr>
</tbody>
</table>

Under federal and Virginia regulations, nursing homes that receive federal funds are required to pay for the National Nurse Aide Assessment Program for their nurse aide employees, including individuals required to re-test.

Payments must be made using a credit card, debit card, single use card or electronic voucher. The electronic vouchers can only be purchased by the training program. No other form of payment will be accepted.

You must pay for both the Written (or Oral) Examination and the Skills Evaluation the first time you test.

EXAM SCHEDULING

Once you have completed your Profile (demographics) and application, your Home Page will state: “Click here to schedule your examinations.” Select PR (skills evaluation) first. Select the test site you want to use and a calendar will appear with available test dates highlighted. Select the date you want and repeat the process for the AW (Written) or AO (Oral English). Proceed to checkout and select your form of payment. When completed, you will receive a Confirmation Notice and Receipt of Payment via email.

TESTING LOCATIONS

The NNAAP Examination is given by Credentia at Regional Test Sites. The complete testing schedule titles Regional Test Sites and Test Schedule is available on the Pearson VUE website at [www.pearsonvue.com/va/nurseaides](http://www.pearsonvue.com/va/nurseaides).

Additional information about test sites may be obtained by calling Pearson VUE at (866) 340-3555.

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. If you have a disability, you may request special arrangements for testing when you apply. All requests must be approved in advance by the Virginia Board of Nursing prior to being scheduled for an exam. Be sure to explain the specific type of help you need and enclose proof of the need (diagnosed disability) from your health care provider. If your accommodation request is approved by the Virginia Board of Nursing, the RN Evaluators administering the examinations will be notified and will be prepared to meet your needs. For specific requirements on requesting accommodations for testing, please visit the Virginia Board of Nursing website at [www.dhp.virginia.gov/nursing](http://www.dhp.virginia.gov/nursing) and select the Guidance Document. Download the guidance document 90-22. For additional questions, call the Board of Nursing at (804) 367-4639.
ABSENCE POLICY

Since unexpected situations sometimes occur, Pearson VUE will consider excusing an absence from a scheduled examination in certain situations.

Acceptable excused absences are as follows:
- Illness of yourself or an immediate family member
- Death in the family
- Disabling traffic accident
- Court appearance or jury duty
- Military duty
- Weather emergency

Requests for excused absences must be made in writing within ten (10) business days following the scheduled examination date. Your request must include verification from the appropriate source of the reason for your absence. For example, if you are absent because of jury duty, you must supply a copy of the court notice.

The decision of Pearson VUE regarding whether an absence is excused will be final. See Exam Rescheduling for more information on excused absences.

WEATHER EMERGENCIES

The examination will be delayed or cancelled only in the case of severe weather or a natural disaster. If severe weather or a natural disaster makes the Regional Test Site inaccessible or unsafe, the examination will be delayed or cancelled. If testing has been cancelled, you will be re-scheduled for the next available examination at that site at no additional cost.

CANCELLATION AND RESCHEDULING

If you are unable to attend your scheduled examination, you MUST notify Pearson VUE at least five (5) 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 five (5) business days before your examination date to re-schedule an examination, and do not show up on your scheduled examination date, your fee will NOT be refunded and cannot be transferred to a new examination date. You may not give your examination reservation to another person.

If you do 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. Let your employer know how you have handled re-scheduling and when you plan to re-test.

REFUNDS

Once payment of exam fees is received, NO REFUNDS WILL BE ISSUED.
EXAM DAY

CHECKING IN
You must arrive 30 minutes prior to your scheduled time for BOTH the written examination and for the skills evaluation. 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 examination and for the skills evaluation. You will be required to present proper identification.

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). All identification must be current (not expired) and no birth certificates will be accepted. Photocopies of identification will NOT be accepted. Examples of proper identification include:

• Driver’s license
• Signature-bearing Social Security card
• Clinic card (example — Medicaid ID card)
• Credit card
• Library card
• State-issued identification card
• Passport
• Signed high school ID card — must have signature line
• Signed university ID card — must have signature line

The name on your identification must be the same as the name you used on the application to register for the examination. If your name is different, you MUST bring proof of your name change (a copy of an official document such as a marriage license or divorce decree) to the test center.

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

WHAT TO BRING
You MUST have the following items with you when you take the NNAAP Examination.

• Two (2) forms of signature identification, one of which must have your picture (for example, a driver’s license or government-issued photo identification), as stated above.
• Three (3) No. 2 pencils (sharpened)
• Eraser
• Watch with a second hand
• Self-addressed, stamped envelope which will be used to mail your Score Reports

No other materials will be allowed.

CANDIDATE-VOLUNTEER REQUIREMENT
The Skills Evaluation requires that a candidate volunteer be present for each skill. Each candidate scheduled to take the Skills Evaluation will be expected to play the role of a nursing home client. Please bring or wear loose, non-binding clothing to the Skills Evaluation. Specific directions for volunteering will be given to you by the Registered Nurse Evaluator on the day of the examination.

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 Virginia Board of Nursing for review, and your examination will not be scored. See Testing Policies.

Please note that all examination questions, each form of the examination, and all other examination materials are copyrighted by, the property of, or licensed by 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 materials or information from the test site will be prosecuted.
TESTING POLICIES

The following policies are observed at each Regional Test Site.

LATENESS

Plan to arrive about thirty (30) minutes before the examination begins. If you are late for your scheduled examination or do not bring the required materials (see What to Bring), you will NOT be allowed to take the examination and you will forfeit your examination fee. If you are late for the Written (or Oral) Examination, but arrive on time for the Skills Examination, you will be allowed to take the Skills Examination.

Skills examination times are approximate. Please plan to spend the day.

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 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 are discovered causing a disturbance of any kind or engaging in any kind of misconduct, you will be dismissed from the examination and reported to the Virginia Board of Nursing. Decisions regarding disciplinary measures are the responsibility of the Virginia Board of Nursing.

SUSPECTED 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 Virginia Board of Nursing and Pearson VUE for review and your examination will not be scored. Please note that all examination questions, each form of the examination, and all other examination materials are copyrighted by and the property of the NCSBN. Anyone who removes or tries to remove examination materials or information from the test site will be prosecuted.

RESTROOM POLICY

When taking the Written (or Oral) Examination, you may leave the examination room to use the restroom. Before leaving the room, you must turn in your test booklet to the Registered Nurse Evaluator. The Registered Nurse Evaluator should be informed of your destination. The time out and in will be noted on your test booklet. Only one candidate may leave the examination room at one time. No additional testing time will be allotted for the time spent out of the examination room.

GUESTS/VISITORS

No guests, visitors, pets, or children are allowed at the test sites.
THE WRITTEN (OR ORAL) EXAM

When you arrive, you will present your Admission Ticket and appropriate identification to the Registered Nurse Evaluator. Once you are admitted, you will await the beginning of the Written (or Oral) Examination. The Registered Nurse Evaluator will hand out materials and give instructions for taking the Written (or Oral) Examination.

If you give help to or receive help from anyone during the Written (or Oral) Examination, you will be asked to return the examination materials and leave the room immediately. The answer sheet will not be scored and the incident will be reported to the Virginia Board of Nursing.

All examination materials for the Written (or Oral) Examination must be left in the examination room. Anyone who takes or tries to take materials or information from the examination room is subject to prosecution.

WRITTEN EXAM

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) box 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.

ORAL 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. The MP3 player and 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 recording to the written word in the test booklet. As you find the match, you mark your answer on the answer sheet.

The Oral Examination takes two (2) hours to complete. 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. Markings in the test booklet will NOT be accepted as answers. Your answers must appear on the separate answer sheet.

SELF-ASSESSMENT READING TEST

A self-assessment reading test, found on page 18 of this handbook, will help you decide if you should take the Oral Examination.
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 nurse aide 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 nurse aide 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 nurse aide 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
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

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
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

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.

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 ORAL EXAMINATION**

If you choose to take the Oral Examination, you will take the Oral Examination in the same room as the candidates taking the standard written examination. 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.

Part 1 of the Oral Examination contains sixty (60) questions that will be read to you on the MP3 player two (2) times. After the second reading, select your answer on the answer sheet.

Part 2 of the Oral Examination contains ten (10) Reading Comprehension questions. A word or phrase will be repeated three (3) times and you must select the word or phrase from the choices listed in the booklet, and fill in the correct choice on the answer sheet.

For the Oral Examination, you must pass BOTH Part 1 and Part 2 to have an overall passing grade. If you only pass one part of the Oral Examination, you will receive a Failing Score Report and will have to retake the 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 Nurse Aide Evaluator. Before your skills evaluation begins, the evaluator will show you where equipment is located and answer questions about operating the equipment.

**Please arrive 30 minutes early. Test times are approximate. Please plan to spend the day.**

*See pages 28-43 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 an elderly person. While you perform the skills, speak to the candidate volunteer as you would speak to an actual client in a nurse aide 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 nurse aide’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.

You **must wear your own 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. 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 Nurse Aide 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 28 to 43 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.

Once you begin a new skill, you may not go back to correct a previous skill. The Nurse Aide 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 will be asked to decontaminate your hands (with hand sanitizer) before proceeding from skills performed on a live client to skills that are not. This is for infection control purposes and will not affect the results of your evaluation.

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 at least one measurement skill, such as blood pressure, 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 and Records Blood Pressure skill, you will write the complete systolic and diastolic pressures of your blood pressure reading 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 Blood Pressure
- Measures and Records Weight of Ambulatory Client
- Measures and Records Urinary Output
- Counts and Records Radial Pulse
- Counts and Records Respirations

**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 26 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 22 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.

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 hands, wrists, and fingers 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

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
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
9. Signaling device is within reach and bed is in low position
10. After completing skill, wash hands

ASSISTS TO AMBULATE USING TRANSFER BELT

1. Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
2. Before assisting to stand, client is wearing shoes
3. Before assisting to stand, bed is at a safe level
4. Before assisting to stand, checks and/or locks bed wheels
5. Before assisting to stand, client is assisted to sitting position with feet flat on the floor
6. Before assisting to stand, applies transfer belt securely at the waist over clothing/gown
7. Before assisting to stand, provides instructions to enable client to assist in standing including prearranged signal to alert client to begin standing
8. 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
9. 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
10. Walks slightly behind and to one side of client for a distance of ten (10) feet, while holding onto the belt
11. After ambulation, assists client to bed and removes transfer belt
12. Signaling device is within reach and bed is in low position
13. After completing skill, wash hands

Skill continues
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 removing bedpan
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 Avoids overexposure of client
14 Empties and rinses bedpan and pours rinse into toilet
15 After rinsing bedpan, places bedpan in designated dirty supply area
16 After placing bedpan in designated dirty supply area, 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

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 After obtaining pulse by palpating in radial artery position, records pulse rate within plus or minus 4 beats of evaluator’s reading

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 Washes hands
5 Records respiration rate within plus or minus 2 breaths of evaluator’s reading

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 toothpaste to toothbrush
5 Brushes surfaces of denture
6 Rinses surfaces of denture under moderate temperature running water
7 Before placing denture into cup, rinses denture cup and lid
8 Places denture in denture cup with moderate temperature water/solution and places lid on cup
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 After rinsing equipment and disposing of sink liner, removes and disposes of gloves (without contaminating self) into waste container and washes hands

Skill continues
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
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 neck and waist
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

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 with hand wipe before beginning feeding
6. Candidate sits facing client during feeding
7. Tells client what foods are on tray and asks what client would like to eat first
8. Using spoon, offers client one bite of each type of food on tray, telling client the content of each spoonful
9. Offers beverage at least once during meal
10. Candidate asks client if they are ready for next bite of food or sip of beverage
11. At end of meal, candidate cleans client’s mouth and hands with wipes
12. Removes food tray and places tray in designated dirty supply area
13. Signaling device is within client’s reach
14. After completing skill, washes hands

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. While avoiding overexposure of client, removes gown from the unaffected side first, then removes gown from the affected side and disposes of gown into soiled linen container
5. Assists to put the right (affected/weak) arm through the right sleeve of the shirt before placing garment on left (unaffected) arm
6. While putting on shirt, moves body gently and naturally, avoiding force and over-extension of limbs and joints
7. Finishes with clothing in place
8. Signaling device is within reach and bed is in low position
9. After completing skill, washes hands

Skill continues
**MEASURES AND RECORDS BLOOD PRESSURE**

1. Explains procedure, speaking clearly, slowly, 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. Feels 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 160 mm 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. 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.

**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 in soiled linen container, while avoiding overexposure of the client.
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**
7. Dries face with towel.
8. Exposes one arm and places towel underneath arm.
9. Applies soap to wet washcloth.
10. Washes arm, hand, and underarm keeping rest of body covered.
11. Rinses and dries arm, hand, 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. After rinsing and drying basin, 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. After placing basin in designated dirty supply area, and disposing of used linen, 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.
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. Instructs client to inform candidate if pain is experienced during exercise
4. Supports leg at knee and ankle while performing range of motion for knee
5. Bends the knee and then returns leg to client’s normal position (extension/flexion) (AT LEAST 3 TIMES unless pain is verbalized)
6. Supports foot and ankle close to the bed while performing range of motion for ankle
7. Pushes/pulls foot toward head (dorsiflexion), and pushes/pulls foot down, toes point down (plantar flexion) (AT LEAST 3 TIMES unless pain is verbalized)
8. While supporting the limb, moves joints gently, slowly, and smoothly through the range of motion, discontinuing exercise if client verbalizes pain
9. Signaling device is within reach and bed is in low position
10. After completing skill, washes hands

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. Measures the amount of urine at eye level with container on flat surface
4. After measuring urine, empties contents of measuring container into toilet
5. Rinses measuring container and pours rinse into toilet
6. Rinses bedpan and pours rinse into toilet
7. After rinsing equipment, and 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

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 shoes on before walking to scale
3. Before client steps on scale, candidate sets scale to zero
4. While client steps onto scale, candidate stands next to scale and assists client, if needed, onto center of scale; then obtains client’s weight
5. While client steps off scale, candidate stands next to scale and assists client, if needed, off scale before recording weight
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)
**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. Supports client’s upper and lower arm while performing range of motion for shoulder.
5. **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). Supporting the limb, moves joint gently, slowly, and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.
6. 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). Supporting the limb, moves joint gently, slowly, and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.
7. Signaling device is within reach and bed is in low position.
8. After completing skill, washes hands.

**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. Slowly rolls onto side as one unit toward raised side rail.
6. Places or adjusts pillow under head for support.
7. Candidate positions client 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.

**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 before washing.
6. Exposes area surrounding catheter while avoiding overexposure of client.
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 (i.e., away from meatus) using a clean area of the cloth for each stroke.**
9. **While holding catheter at meatus without tugging, rinses at least four inches of catheter from meatus, moving only in one direction, away from meatus, using a clean area of the cloth for each stroke.**
10. While holding catheter at meatus without tugging, dries at least four inches of catheter moving away from meatus.
11. Empties, rinses, and dries basin.
12. After rinsing and drying basin, 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. After disposing of used linen and cleaning equipment, 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.
**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 clothing protector 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 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. Supports foot and ankle during procedure
13. Empties, rinses, and dries basin
14. After rinsing and drying basin, places basin in designated dirty supply area
15. Disposes of used linen into soiled linen container
16. After cleaning foot and equipment, and disposing of used linen, removes and disposes of gloves (without contaminating self) into waste container and washes hands
17. Signaling device is within reach

**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)
9. Foot is rinsed (including between the toes)
10. Dries foot (including between the toes)
11. Applies lotion to top and bottom of foot, removing excess (if any) with a towel
12. Supports foot and ankle during procedure
13. Empties, rinses, and dries basin
14. After rinsing and drying basin, places basin in designated dirty supply area
15. Disposes of used linen into soiled linen container
16. After cleaning foot and equipment, and disposing of used linen, 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
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 before washing.
6. Exposes perineal area while avoiding overexposure of client.
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 towel.
11. After washing genital area, turns to side, then washes and rinses rectal area moving from front to back using a clean area of washcloth for each stroke. Dries with towel.
12. Repositions client.
13. Empties, rinses, and dries basin.
14. After rinsing and drying basin, places basin in designated dirty supply area.
15. Disposes of used linen into soiled linen container and disposes of linen protector appropriately.
16. Avoids contact between candidate clothing and used linen.
17. After disposing of used linen, and placing used equipment in designated dirty supply area, removes and disposes of gloves(without contaminating self) into waste container and washes hands.
18. Signaling device is within reach and bed is in low position.

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 along side 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, bed is at a safe level.
6. Before assisting to stand, locks wheels on wheelchair.
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 (candidates hands are in upward position) and maintaining stability of client’s legs.
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.
SCORE REPORTING

EXAM RESULTS
After all testing is completed, the Nurse Aide Evaluator (NAE) will fax all answer sheets for scoring. When Score Reports are received, the NAE will place the results in the self-addressed, stamped envelope provided by each candidate. After leaving the test site, the NAE will put all self-addressed, stamped envelopes in the closest USPS mailbox for local delivery.

If a candidate did not provide a self-addressed, stamped envelope or there were issues with the fax machine, all information will be returned to Pearson VUE for scoring. Score reports will be mailed 5–7 business days after the package is received in Pennsylvania.

If you have questions regarding your Score Reports, call Pearson VUE at 888-204-6183. Results will not be given over the phone.

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 of the evaluation. A new examination fee is required each time you re-take any part of the NNAAP evaluation. To reschedule either or both parts, log into Credential Management and schedule the required exam(s).

There is no limit on the number of times you may re-take the Written (or Oral) Examination and Skills Evaluations. However, you must pass both parts of the NNAAP Examination within two (2) years from the first exam date. If you do not pass both parts of the exam within that two (2) year period, you must retake both parts of the NNAAP Examination again.

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 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 on the following page, 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.
Virginia NNAAP® Examination Results

<table>
<thead>
<tr>
<th>Exam: Skills</th>
<th>Result: Fail</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Skills Performance:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Hand Hygiene</td>
<td>Unsatisfactory</td>
</tr>
<tr>
<td>1, 5, 10</td>
<td></td>
</tr>
<tr>
<td>Provides Mouth Care</td>
<td>Satisfactory</td>
</tr>
<tr>
<td>Measures and Records</td>
<td>Satisfactory</td>
</tr>
<tr>
<td>Blood Pressure</td>
<td></td>
</tr>
<tr>
<td>Puts One Knee-High</td>
<td>Satisfactory</td>
</tr>
<tr>
<td>Elastic Stocking on Client</td>
<td></td>
</tr>
<tr>
<td>Measures and Records</td>
<td>Satisfactory</td>
</tr>
<tr>
<td>Weight of Ambulatory Client</td>
<td></td>
</tr>
</tbody>
</table>

* A sample of a Failing Score Report

**PASSING**

Once you have passed both the Written (or Oral) Examination and the Skills Evaluation, your name will be submitted to the Virginia Board of Nursing for placement on the Virginia Nurse Aide Registry. You must successfully pass both the Written (or Oral) Examination and the Skills Evaluation in order to be placed on the Registry. Although you have received a passing score report, you are not permitted to call yourself a “Certified Nurse Aide (CNA)” until your name appears on the Registry.

**DUPLICATE SCORE REPORT**

If you lose your score report or need a duplicate Score Report, or would like your Written (or Oral) Examination or Skills Evaluation hand-scored, complete the Request for Duplicate Score Report or Handscored Answer Sheet Form and mail it to Pearson VUE (see Appendix A).

**NURSE AIDE TESTING 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 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 30 days of receipt.
THE REGISTRY

CHANGE OF ADDRESS OR NAME
The Virginia Board of Nursing requires that you inform them in writing of your correct address. In most cases it is permissible for an individual to provide an address of record other than a resident address, such as a post office box or a practice location address. In order to receive renewal notification and other correspondence from the Virginia Board of Nursing, you MUST inform the Registry about any changes in your name or address within thirty (30) days after any change is made.

A change of address may be made online at the time of renewal or at any time by written notification to the Board of Nursing. To change your address, you may:

• use the Change of Address or Name Form in the back of this handbook;
• send a separate letter to the Virginia Board of Nursing/Nurse Aide Registry informing them of the change. (If you are writing a separate letter, please be sure to list both the old information and the updated information, including your name, address, Social Security or certificate number, and telephone number.)
• email the Board at: nursebd@dhp.virginia.gov or do so online at: www.license.dhp.virginia.gov.

Please be advised that all notices and correspondence from the Board, including renewal notices, licenses, and other legal documents, will be mailed to the address of record that you provide. Failure to inform the Registry of an address change may jeopardize your timely receipt of these important documents.

If you change your name, you must provide appropriate documentation of that change when you notify the Board of Nursing. A copy of a marriage certificate, divorce decree granting you the right to resume your former name, or other court order is required.

RENEWAL
Your initial nurse aide certification is valid for one (1) year. At least thirty (30) days prior to the expiration date of your certificate, a renewal notice will be mailed to your last address on record with the Board of Nursing/Nurse Aide Registry requesting you to renew online at www.license.dhp.virginia.gov. You are required to personally attest that you have been employed for pay performing nursing-related activities within the previous two (2) years. In order to be renewed and maintained on the Registry, you must meet the work requirement mentioned above or you will be required to re-take the NNAAP Examination to demonstrate continued competency.

Your nurse aide certification will expire if you do not renew it. It is your responsibility to renew your certification, regardless of whether or not you receive the renewal notice mailed from the Board office. If you do not receive your renewal notice by the middle of the month in which your certificate is due to expire, please contact the Board of Nursing at (804) 367-4639.

DUPLICATE CERTIFICATE
If you lose your Nurse Aide Certificate, you may request another copy from the Virginia Board of Nursing. A duplicate certificate must be requested in writing. Written requests must include your Nurse Aide Certificate number or Social Security number. There is no fee to obtain a duplicate copy of your Nurse Aide Certificate.

LAPSED CERTIFICATION
If you were previously listed on the Virginia Board of Nursing Registry and have been lapsed for more than 90 days, you MUST submit a reinstatement application and fees to the Board of Nursing. The Board will then determine if you also need to take the NNAAP examination to demonstrate competency for reinstatement.

Reinstatement applications with instructions may be obtained from the Board of Nursing website at www.dhp.virginia.gov/nursing or by calling the Board office at (804) 367-4639.

ENDORSEMENT
If you are a nurse aide currently listed on another state’s nurse aide registry, and you are seeking certification on the Virginia Nurse Aide Registry, you MAY NOT need to test. Endorsement applications are available for on-line submission through the Virginia Board of Nursing’s web site at www.dhp.virginia.gov/nursing.

The length of the endorsement process depends on the time it takes your state to provide verification that you are a certified nurse aide and meet requirements similar to those for initial certification in Virginia.
## Nurse Aide Certification — Frequently Asked Questions

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>How do I become a CNA?</strong></td>
<td>• You must successfully complete a state-approved nurse aide training program and pass both the written and skills portions of the NNAAP examination. The time frame for successfully completing both exams varies, by state. Please check with your training program or the Exam Overview section of this handbook.</td>
</tr>
<tr>
<td><strong>May I perform the duties of a nurse aide before I am certified?</strong></td>
<td>• If you are currently attending an approved training program in a nursing home, you have 120 days in which to complete the training and become certified. During that period, a student may not perform any duty for which they have not been trained and checked by the instructor.</td>
</tr>
<tr>
<td><strong>How do I arrange for special accommodations</strong></td>
<td>• 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.</td>
</tr>
<tr>
<td><strong>How do I decide which exam to take?</strong></td>
<td>• 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 10 reading comprehension questions in which you must identify job-related words.</td>
</tr>
<tr>
<td><strong>Is there a time limit in which I must pass both exams?</strong></td>
<td>• If you are currently working in a nursing home facility, you have one-hundred twenty (120) days to complete all eligibility requirements and become certified. • There is no limit on the number of times you may take the examinations, but both parts must be passed within a 2 year (24 month) period.</td>
</tr>
<tr>
<td><strong>Can I register for an exam or check my scores online?</strong></td>
<td>• Registration must be done online. • Score Reports are mailed to the candidates. If a self-addressed, stamped envelope was given to the NAE at check-in, it was placed in a local mailbox for delivery. If no envelope was provided, the candidate should wait 7–10 business days before calling Pearson VUE at 888-204-6183. • If you passed both parts of the examination, your name will be forwarded to the Virginia Board of Nursing for determination of placement on the Nurse Aide Registry. You can also verify your status by checking online at <a href="http://www.dhp.virginia.gov">www.dhp.virginia.gov</a> 5–7 business days after the examination.</td>
</tr>
<tr>
<td><strong>What form of payment do you accept and may I take it to the test site?</strong></td>
<td>• You will not be scheduled unless payment is made using a credit card, debit card, single use card or electronic voucher. No form of payment will be accepted at a test site.</td>
</tr>
<tr>
<td><strong>What is the next test date?</strong></td>
<td>• Test dates at Regional Test Sites are listed on the Pearson VUE website (<a href="http://www.pearsonvue.com/va/nurseaides">www.pearsonvue.com/va/nurseaides</a>). Click on Health, Medicine &amp; Nurse Aides, Virginia Nurse Aides and Regional Test Sites &amp; Test Schedule.</td>
</tr>
</tbody>
</table>
### Nurse Aide Certification — Frequently Asked Questions

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>How do I verify if I’m on the Nurse Aide Registry?</td>
<td>• You can verify your status on the Virginia Nurse Aide Registry online at <a href="http://www.dhp.virginia.gov">www.dhp.virginia.gov</a>. Select Nursing and then License Lookup.</td>
</tr>
<tr>
<td>How do I change my name and/or address?</td>
<td>• Complete the form in the back of the handbook and mail it with appropriate documentation to the Virginia Board of Nursing. You may also contact the Board via email or letter. See Change of Address or Name section of the handbook for details.</td>
</tr>
<tr>
<td>How long will my name remain on the registry?</td>
<td>• Your initial certification is for two (2) years from when your name is provided to the Board as passing both parts of the competency test within a 24-month period. Once your certificate is up for renewal, it is renewed annually. A renewal notice will be sent to the address of record 60 days before your certificate's expiration date.</td>
</tr>
<tr>
<td>My certification expired. How do I renew it or become certified again?</td>
<td>• If your certificate has been expired for less than 90 days, contact the Board office at (804) 367-4639 for information on renewing it. If it has been expired for more than 90 days, a reinstatement application must be completed and mailed to the Board of Nursing. You can access and download that application from the Board’s website at <a href="http://www.dhp.virginia.gov/nursing">www.dhp.virginia.gov/nursing</a> or by calling the Board office at the same phone number listed above. Once renewal/reinstatement information has been received, the Board will determine if you have to retest to complete the renewal/reinstatement process due to a lack of nursing-related employment within the required time frame.</td>
</tr>
<tr>
<td>I’m moving to or from another state. May I perform nurse aide duties in that state?</td>
<td>• If you are moving TO Virginia, you will need to complete an Endorsement Application. This is now an on-line application which you can access and complete from the Board of Nursing’s website at <a href="http://www.dhp.virginia.gov/nursing">www.dhp.virginia.gov/nursing</a>. If you do not have access to a computer, you can get an application mailed to you by contacting the Board office at (804) 367-4639. • If you are moving FROM Virginia, you should contact the Board of Nursing or Department of Health for that state, to obtain state requirements.</td>
</tr>
</tbody>
</table>
REQUEST FOR DUPLICATE SCORE REPORT OR HANDSCORED ANSWER SHEET

**DIRECTIONS:** You may use this form to request Pearson VUE to send a duplicate copy of your Score Report or to request a handscore of your Written (or Oral) Examination or Skills Evaluation answer sheet. Please print or type all information on the reverse side of this form and include correct fees, or your request will be returned. Check the service requested:

- [ ] Duplicate Score Report
- [ ] Handscore

**SEND TO:**
Attn: Virginia Nurse Aide – Reports
Pearson VUE Processing Center
PO Box 822749
Philadelphia, PA 19182-2745

PLEASE COMPLETE BOTH SIDES OF THIS FORM
Please complete both sides of this form.

________________________________________________________________________________________________________________
Name
________________________________________________________________________________________________________________
Street
City
State
Zip
Telephone (______)____________________
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
Telephone (______)___________________________________

I hereby authorize Pearson VUE to send to me at the address above a duplicate copy of my Score Report or the handscored results of my Written (or Oral) Examination or Skills Evaluation.

________________________________________________________________________________________________________________
Name
________________________________________________________________________________________________________________
Street
City
State
Zip
Telephone (______)____________________

I understand that all information must be complete and accurate to ensure proper processing.

________________________________________________________________________________________________________________
Name
________________________________________________________________________________________________________________
Street
City
State
Zip
Telephone (______)____________________

Your Signature
______________________________
Date

Please complete the following form with your current name and address. All information must be complete and accurate to ensure proper processing.

Virginia Nurse Aide

APPENDIX

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

Please complete other side of this form.
Print your new name and address below.
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
City_______________________________________________________________
State______________
Zip_______________________
Tel. (__________) __________________________ Email ___________________________________________________________

Please print your old name and address below.
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
City_______________________________________________________________
State______________
Zip_______________________

Social Security Number __________________________
Nurse Aide Certification Number __________________________

Your Signature_________________________________________________________________
Date__________________________

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