

# Community & Technical Colleges Changing Lives, Creating Futures Certified Nurse Aide \* Exam Blueprint

The Competency Exam is administered in two parts, a written exam to assess knowledge, and a performance-based clinical skills exam. To demonstrate competency to receive the Louisiana Certification you must successfully pass both exams within 12 months of nurse aide training.

The outline below gives an overview of the content of the four components of the written exam. The test will include questions on the subjects in this outline.

## I. <u>Assessment/Reporting/Critical</u> Response - 20%

- 1. Potential hazards in the healthcare environment
- 2. Common injuries of residents
  - a. Skin tears and shearing
  - b. Falls
  - c. Spills
  - d. Burns
  - e. Bruises
- 3. Risks related to common injuries
- 4. Safety and comfort
  - a. Comfort needs of the resident
  - b. Accident prevention, including fall prevention protocols
  - c. Restraint techniques and alternatives
  - d. Legal implications in the use of restraints
  - e. Risk factors for elopement (resident leaving without staff knowledge)
- 5. Safety devices
- 6. Infection prevention and control
  - a. Maintaining a clean environment
  - b. Factors that contribute to the spread of disease-causing organisms
  - c. Signs and symptoms of infections
  - d. Practices that decrease the risk of exposure to disease-causing organisms
- 7. Emergencies
  - a. Emergency and disaster response protocols
  - b. Immediate life-safety techniques
  - c. Evacuation procedures
- 8. Fire prevention and safety
- 9. Acute emergency situations
  - a. Chest pain
  - b. Cardiac arrest
  - c. Respiratory distress
  - d. Difficulty swallowing

- e. Choking/aspirations
- f. Vomiting
- g. Seizures
- h. Changes in mobility, speech, or other potential signs of stroke
- i. Diabetic situations
- j. Sudden onset of confusion or agitation
- k. Changes in the level of consciousness
- I. Falls
- m. Bleeding
- n. Burns

### II. Health and Wellness Promotion – 20%

- 1. Health maintenance/restoration
  - a. Promoting circulation and skin integrity (e.g., specialized mattresses, chair cushions, positioning)
  - b. Nutrition and hydration
  - c. Sleep and rest needs
  - d. Elimination (bowel and bladder)
  - e. Mobility, including bed mobility
  - f. Effects of immobility
  - g. Care and use of assistive devices
- 2. Age-related changes
  - a. Cognitive (e.g., memory) changes
  - b. Psychosocial (e.g., relationships) changes
  - c. Physical changes
- 3. Psychosocial needs of residents
  - a. Fundamental human needs (e.g., Maslow's Hierarchy of Needs)
  - b. Emotional support strategies
  - c. Intervention strategies to assist residents in coping with losses and adjustments to nursing home placement (e.g., control, autonomy, privacy)

#### **III.** Nurse Aide Functions – 32%

- 1. Personal responsibility
  - a. Reporting requirements
  - b. Promotion of personal health and safety
  - c. Promotion and protection of resident rights
  - d. Time management and work prioritization
  - e. Workplace standards, including ethical and unethical behaviors
  - f. Nurse Aide Registry
- 2. Nurse aide as a member of the health care team
  - a. Job responsibilities of the nurse aide, including duties and limitations
  - b. Interdisciplinary team member roles

- c. Teamwork principles (e.g., collaboration, cooperation, sharing information, customer service)
- d. The care planning process and implementation
- e. Nurse aide's responsibility to provide care according to the care plan
- 3. Interpersonal relations/communication skills
  - a. Communication principles
  - b. Communication types
  - c. Factors affecting communication
  - d. Therapeutic communication techniques
- 4. Care of the dying resident and post-mortem care
  - a. Grief process
  - b. Responding to the emotional needs of the resident, other residents, family, and caregivers in the grief process
  - c. Factors influencing responses to grief (e.g., spiritual beliefs, culture, past experience)
  - d. Physical changes and needs as death approaches
  - e. Post-mortem care procedures

#### IV. Patient Care – 28%

- 1. Routine, chronic, non-life-threatening situations
  - a. Observation and reporting of physical changes
  - b. Observation and reporting of behavioral changes
- 2. Physical problems
  - a. Common physical impairments and related care
  - b. Providing for safety, care, and comfort of residents with physical impairments
  - c. Impact of impairment on resident safety, care, and comfort
- 3. Psychological problems
  - a. Common psychological impairments and related care (e.g., confusion, anxiety, depression, delirium, phobias, addiction)
  - b. Special considerations for the safety, care, and comfort of residents with psychological impairments
- 4. Personal care skills
  - a. Feeding
  - b. Bathing
  - c. Perineal care, including catheter
  - d. Foot/nail care
  - e. Mouth care
  - f. Skin care
  - g. Toileting
  - h. Grooming
  - Dressing/undressing