

Advancing Quality, Dignity & Justice

REQUIRED SUBJECTS FOR NURSE AIDE TRAINING

FACT SHEET

Certified Nurse Aides (CNAs) provide about 90% of direct resident care to nursing home residents.¹ Thus, it is essential that there are both sufficient numbers of CNAs and that they have the skills and knowledge necessary to meet residents' clinical and psychosocial needs.

Following are the subjects and competencies that must be covered in any certification course under the federal rules. A nurse aide training and competency evaluation program must consist of **no less than 75 hours of training**.² [Note: Many states, recognizing the significant needs of nursing home residents, have higher training requirements than the federal minimum.]

Note: Information below is directly quoted from the Code of Federal Regulations (CFR). Federal standards are applicable to all residents in licensed U.S. nursing homes, including short-term, long-term, private pay, Medicaid, Medicare, or privately insured.

Requirements for approval of a nurse aide training and competency evaluation program 42 C.F.R. § 483.152(b) | F 726

The curriculum of the nurse aide training program must include –

- (1) At least a total of 16 hours of training in the following areas prior to any direct contact with a resident:
 - (i) Communication and interpersonal skills;
 - (ii) Infection control;
 - (iii) Safety/emergency procedures, including the Heimlich maneuver;
 - (iv) Promoting residents' independence; and
 - (v) Respecting residents' rights.
- (2) Basic nursing skills;
 - (i) Taking and recording vital signs;
 - (ii) Measuring and recording height and weight;
 - (iii) Caring for the residents' environment;
 - (iv) Recognizing abnormal changes in body functioning and the importance of reporting such changes to a supervisor; and
 - (v) Caring for residents when death is imminent.
- (3) Personal care skills, including, but not limited to -
 - (i) Bathing;
 - (ii) Grooming, including mouth care;

¹ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2715163/#R6

² CFR § 483.152(a)(1)

- (iii) Dressing;
- (iv) Toileting;
- (v) Assisting with eating and hydration;
- (vi) Proper feeding techniques;
- (vii) Skin care; and
- (viii) Transfers, positioning, and turning.
- (4) Mental health and social service needs:
 - (i) Modifying aide's behavior in response to residents' behavior;
 - (ii) Awareness of developmental tasks associated with the aging process;
 - (iii) How to respond to resident behavior;
 - (iv) Allowing the resident to make personal choices, providing and reinforcing other behavior consistent with the resident's dignity; and
 - (v) Using the resident's family as a source of emotional support.
- (5) Care of cognitively impaired residents:
 - (i) Techniques for addressing the unique needs and behaviors of individual with dementia (Alzheimer's and others);
 - (ii) Communicating with cognitively impaired residents;
 - (iii) Understanding the behavior of cognitively impaired residents;
 - (iv) Appropriate responses to the behavior of cognitively impaired residents; and
 - (v) Methods of reducing the effects of cognitive impairments.
- **(6)** Basic restorative services:
 - (i) Training the resident in self care according to the resident's abilities;
 - (ii) Use of assistive devices in transferring, ambulation, eating, and dressing;
 - (iii) Maintenance of range of motion;
 - (iv) Proper turning and positioning in bed and chair;
 - (v) Bowel and bladder training; and
 - (vi) Care and use of prosthetic and orthotic devices.
- (7) Residents' Rights.
 - (i) Providing privacy and maintenance of confidentiality;
 - (ii) Promoting the residents' right to make personal choices to accommodate their needs;
 - (iii) Giving assistance in resolving grievances and disputes;
 - (iv) Providing needed assistance in getting to and participating in resident and family groups and other activities;
 - (v) Maintaining care and security of residents' personal possessions;
 - (vi) Promoting the resident's right to be free from abuse, mistreatment, and neglect and the need to report any instances of such treatment to appropriate facility staff;
 - (vii) Avoiding the need for restraints in accordance with current professional standards.