

# **D&S Diversified Technologies LLP**

## **Headmaster LLP**

# Arkansas Nurse Aide Candidate Handbook

UPDATED: March 2025

Version 9

#### **Updates made March 2025 to the following sections:**

Complete your TMU Account
Remotely Proctored Knowledge Exam

# **Contact Information**

| D&S Diversified Technologies (D&SDT)-Headmaster, LLP PO Box 6609 Helena, MT 59604 Email: arkansas@hdmaster.com Website: www.hdmaster.com                      | Monday through Friday<br>7:00AM — 7:00PM<br>Central Time (CT) | Phone #: (888) 401-0462 Fax #: (406) 442-3357  |
|---|---|--|
| Arkansas Department of Human Services (DHS), Office of Long-Term Care (OLTC) PO Box 8059 Little Rock, AR 72203-8059 Email: natpcertification@dhs.arkansas.gov |   | Email: natpcertification@dhs.arkansas.gov      |
| Registry and TestMaster Universe-TMU© Phone: (888) 401-0465 Email: arkansas@hdmaster.com  | Arkansas TMU© Webpage: ar.tmutest.com                         | D&SDT- HEADMASTER Website:<br>www.hdmaster.com |

# **Table of Contents**

| INTRODUCTION   | 1      |
|--|--------|
| MILITARY MEMBER LICENSURE  | 1      |
| MILITARY MEMBERS: INITIAL NURSE AIDE LICENSURE ROUTES  Uniformed Service Member/Veteran Criteria to Waive Nurse Aide Certification Education  Military Spouse Applying to take the Arkansas Nurse Aide Competency Exam  PRIORITY OF SERVICE ON TEST DAY FOR MILITARY MEMBERS  ELIGIBILITY REQUIREMENTS FOR EXPEDITED NURSE AIDE LICENSURE FOR MILITARY MEMBERS | 2<br>3 |
| NURSE AIDE REGISTRY REQUIREMENTS   | 4      |
| REGISTRY MAINTENANCE   | 4      |
| REGISTRY RECIPROCITY   | 5      |
| Out-of-State Reciprocity Process   | 5      |
| OUT-OF-STATE TRAINING WAIVER APPLICATION   | 5      |
| REQUIREMENTS   | 5      |
| STUDENT NURSE / GRADUATE NURSE TRAINING  | 6      |
| REQUIREMENTS   | 6      |
| AMERICANS WITH DISABILITIES ACT (ADA)  | 6      |
| ADA COMPLIANCE   | 6      |
| THE ARKANSAS NURSE AIDE COMPETENCY EXAM  | 6      |
| PAYMENT INFORMATION  | 7<br>7 |
| SCHEDULE AN ARKANSAS NURSE AIDE EXAM   |        |
|  |        |

| SELF-PAY OF TESTING FEES IN TIMU   | 12 |
|--|----|
| SCHEDULE / RESCHEDULE A TEST EVENT   | 15 |
| TEST CONFIRMATION LETTER   | 16 |
| CHECK/VIEW YOUR TMU® NOTIFICATIONS   | 17 |
| TIME FRAME FOR TESTING FROM TRAINING PROGRAM COMPLETION  | 18 |
| Exam Check-In  | 18 |
| TESTING ATTIRE   | 19 |
| IDENTIFICATION   | 19 |
| Demographic Updates / Changes / Corrections  |    |
| INSTRUCTIONS FOR THE KNOWLEDGE, REMOTELY PROCTORED KNOWLEDGE AND SKILL EXAMS                           |    |
| TESTING POLICIES.  |    |
| Access the Candidate Handbook and Testing Instructions   |    |
| SECURITY   |    |
| RESCHEDULE A TEST EVENT  |    |
| REFUND OF TESTING FEES PAID  |    |
| Scheduled in a Test Event  |    |
| Not Scheduled in a Test Event  |    |
| Unforeseen Circumstances Policy  |    |
| No-Show Status   |    |
| No-Show Exceptions   |    |
| CANDIDATE FEEDBACK – EXIT SURVEY   |    |
| TEST RESULTS   |    |
| Access your Test Results   |    |
| TEST ATTEMPTS  |    |
| RETAKING THE NURSE AIDE EXAM   |    |
|  |    |
| TEST REVIEW REQUESTS   |    |
| THE KNOWLEDGE/AUDIO EXAM   | 30 |
| Knowledge Exam Content   | 20 |
| KNOWLEDGE EXAM INFORMATION   |    |
| AUDIO VERSION OF THE KNOWLEDGE EXAM  |    |
| Select an Audio Version of the Knowledge Exam  |    |
| Knowledge/Audio Exam Spanish Version   |    |
| REMOTELY PROCTORED KNOWLEDGE EXAM OPTION   |    |
| Remotely Proctored Knowledge Exam Candidate Requirements   |    |
| Schedule a Remotely Proctored Knowledge Exam   |    |
| Remotely Proctored Knowledge Exam Instructions   |    |
| Remotely Proctored Knowledge Exam Check-In   |    |
| · · · · · · · · · · · · · · · · · · ·  |    |
| Remotely Proctored Knowledge Exam Policies   |    |
| Knowledge Practice Test  | 3/ |
| THE MANUAL SKILL TEST  | 38 |
| SKILL TEST RECORDING FORM  | 20 |
|  |    |
| SKILL TEST TASKS   |    |
| Ambulate a Resident from their Bed to a Wheelchair using a Gait Belt                                   |    |
| Ambulate a Resident from a Wheelchair to their Bed using a Gait Belt                                   |    |
| Bed Bath (partial): Whole Face and One Arm, Hand and Underarm  |    |
| Assist a Resident with a Bedpan, Measure and Record Output with Hand Washing                           |    |
| Catheter Care for a Female Resident with Hand Washing  |    |
| Denture Care – Upper or Lower Denture  |    |
| Donn [Put On] an Isolation Gown and Gloves, Empty a Urinary Drainage Bag, Measure and Record Output, D |    |
| and Gloves with Hand Washing   |    |
| Dressing a Bedridden Resident  |    |
| Feeding a Dependent Resident   |    |
| Foot Care - One Foot   |    |
| Making an Occupied Bed   | 48 |
|  |    |

| Mou    | uth Care—Brushing a Resident's Teeth  | 4 |
|--------|---|---|
| Nail   | Care - One Hand   |   |
| Peri   | neal Care for a Female Resident with Hand Washing   |   |
| Pivo   | t-Transfer a Weight-Bearing, Non-Ambulatory Resident from their Bed to a Wheelchair using a Gait Belt |   |
| Pivo   | t-Transfer a Weight-Bearing, Non-Ambulatory Resident from a Wheelchair to their Bed using a Gait Belt |   |
| Posi   | tion a Resident on their Side in Bed  |   |
| Ran    | ge of Motion for Hip and Knee   |   |
| Ran    | ge of Motion for One Shoulder   |   |
| Vita   | Signs – Count and Record the Resident's Radial Pulse and Respirations                                 |   |
| Vita   | Signs – Count and Record the Resident's Radial Pulse and Respirations                                 |   |
| NOWLED | GE FXAM VOCABULARY LIST   |   |

#### Introduction

Congress adopted the Nursing Home Reform Act in 1987 as part of the Omnibus Budget Reconciliation Act (OBRA '87). This federal law was designed to improve the quality of care in long-term healthcare facilities and 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.

As defined in the OBRA regulations, a nurse aide competency evaluation program provides specific standards for nurse aide (NA)- related knowledge and skills. The program aims to ensure that candidates seeking to be nurse aides understand these standards and can competently and safely perform the job of an entry-level nurse aide.

This handbook describes the process of taking the nurse aide competency examination and is designed to help prepare candidates for testing. There are two parts to the nurse aide competency examination—a multiple-choice, knowledge exam and a skill test. Candidates must pass both parts of the nurse aide competency exam to be identified and listed on the Arkansas Nurse Aide Registry.

The Arkansas Department of Human Services (DHS) has approved D&S Diversified Technologies (D&SDT)-HEADMASTER, LLP to provide tests and scoring services for nurse aide testing. For questions not answered in this handbook, please contact D&SDT-HEADMASTER at (888) 401-0462 or go to the <u>Arkansas webpage</u>. The information in this handbook will help you prepare for your examination.

# **Military Member Licensure**

#### A 'uniformed service member' means:

- An active or reserve component member of the United States Air Force, United States Army, United States Coast Guard, United States Marine Corps, United States Navy, United States Space Force or National Guard
- An active component member of the National Oceanic and Atmospheric Commissioned Office Corps
- An active or reserve component member of the United States Commissioned Corps of the Public Health Service

#### A 'uniformed service veteran' means:

 A former member of the United States uniformed services discharged under conditions other than dishonorable.

#### Military Members: Initial Nurse Aide Licensure Routes

#### Uniformed Service Member/Veteran Criteria to Waive Nurse Aide Certification Education

To qualify to waive nursing assistant certification education and be eligible to apply to take the Arkansas nursing assistant competency exam for certification as a nursing assistant in Arkansas, you must be:

- A uniformed service member; or
- A uniformed service veteran who makes an application within one (1) year of their discharge from uniformed service.

You will need to provide proof of service documentation. Proof of service documentation includes:

- Department of Defense Identification Card (active, retired, or TDRL).
- DD214 Military Discharge Certificate indicating disposition of discharge.
- Report of Separation from the national archives at the National Personnel Records Center (NPRC) in St. Louis, Missouri.
- Veterans Identification Card from the Department of Veterans Affairs.

You will need to provide proof of military occupational training or a service-issued credential that meets nurse aide licensure qualifications or requirements, along with experience in healthcare in a nursing-related capacity (e.g., Medical Specialist, Healthcare Specialist, Hospital Corpsman).

You are required to provide relevant and applicable documentation that you have completed at least 90 hours of military healthcare education, training, or service-issued credentialing toward nurse aide qualifications or requirements, as evidenced by your military records. The documentation can include official training documents.

#### Documentation of military health care training includes:

• Official military health care education, training, or service-issued credential toward nurse aide qualifications or requirements documents.

You will need to fill out the <u>AR Military Waiver Form</u>, which can be found on the D&SDT-HEADMASTER Arkansas webpage at www.hdmaster.com. Please submit the required proof of service and military healthcare education, training, or service-issued credential that supports nurse aide qualifications or requirements. Once received by D&SDT-HEADMASTER, your request will be expedited, and you will receive priority of service on test day (see below). You will be required to take both the knowledge and the skills exams.

#### MILITARY SPOUSE APPLYING TO TAKE THE ARKANSAS NURSE AIDE COMPETENCY EXAM

If you are a spouse of a uniformed service member (see qualifications below) applying to take the Arkansas nurse aide competency exam, you will need to have:

- Completed an Arkansas-approved training program, or
- Completed a training program of at least 90 hours in another state but have not successfully completed a nurse aide competency exam that is the same or substantially similar to the Arkansas examination (please see information under 'Out-of-State Reciprocity Process'), or
- Qualified for training as a currently enrolled student nurse (SN) or graduate nurse (GN), please see information under 'Student Nurse/Graduate Nurse Training'.

You will be required to successfully complete the Arkansas competency examination within one (1) year of your successful completion of an Arkansas-approved training program or your documented completion of comparable training. You will be required to take both the knowledge and skills exams. Your request will be expedited, and you will receive priority service on test day.

#### Qualifications as a spouse of a uniformed service member:

- The spouse of a uniformed service member or veteran who resides in or establishes residency in the State of Arkansas;
- The spouse of a uniformed service member who is assigned a tour of duty that excludes the uniformed service member's spouse from accompanying the uniformed service member and the spouse relocates to the State of Arkansas;
- Or the spouse of a uniformed service member who is killed or succumbs to his or her injuries or illness in the line of duty, if the spouse establishes residency in the State of Arkansas.

You will also need to complete the <u>AR Military Spouse Expedited Application to Test Form</u> found on the D&SDT-HEADMASTER Arkansas webpage at <u>www.hdmaster.com</u>, and submit the required military member proof of service.

#### **Priority of Service on Test Day for Military Members**

If you qualify to test under one of the applicable means listed above, you are eligible to receive priority of service on testing day.

You must meet all the required qualifications listed above and you must provide the following additional proof of service documentation to the RN Test Observer at check-in on test day:

- Department of Defense Identification Card (active, retired or TDRL).
- DD214 Military Discharge Certificate indicating disposition of discharge.
- Report of Separation from the national archives at the National Personnel Records Center (NPRC) in St. Louis, Missouri.
- Veterans Identification Card from the Department of Veterans Affairs.

#### **Eligibility Requirements for Expedited Nurse Aide Licensure for Military Members**

**NOTE:** You will need to follow the steps needed to complete your request for placement on the ARNAR and submit the required completed forms and documentation found under the 'Nurse Aide Registry Requirements' section:

- Registry Maintenance
- Registry Renewal
- Registry Reciprocity
- Student Nurse/Graduate Nurse Training

Applicability for expedited nurse aide licensure applies to the following members who complete one of the eligibility routes listed under the 'Nurse Aide Registry Requirements' section, submit the applicable completed forms, and provide images/copies of the applicable required documentation:

- A uniformed service member stationed in the State of Arkansas;
- A uniformed service veteran who resides in or establishes residency in the State of Arkansas;
- The spouse of a uniformed service member or veteran who resides in or establishes residency in the State of Arkansas;
- The spouse of a uniformed service member who is assigned a tour of duty that excludes the uniformed service member's spouse from accompanying the uniformed service member and the spouse relocates to the State of Arkansas;
- Or the spouse of a uniformed service member who is killed or succumbs to his or her injuries or illness in the line of duty, if the spouse establishes residency in the State of Arkansas.

If you qualify under one of the applicable means listed above, once D&SDT-HEADMASTER receives your correctly completed forms and documentation, the processing of your request for licensure in the State of Arkansas will be expedited.

You must complete the AR Military Expedited Licensure Form, available on the D&SDT-HEADMASTER Arkansas webpage at www.hdmaster.com, and provide a copy of your proof of service documentation.

# **Nurse Aide Registry Requirements**

The Arkansas Nurse Aide Registry (ARNAR) lists the names of nurse aides who, through training, testing, and experience, meet federal and/or state requirements to work as a nurse aide in Arkansas. The Registry includes substantiated findings of nurse aide abuse, neglect, misappropriation of resident property, or exploitation involving a nurse aide at a DHS-regulated facility.

A nurse aide candidate, upon successful completion of training, passing both the knowledge and skills portions of the competency exam, and meeting federal and/or state requirements, will be listed on the ARNAR. A newly trained nurse aide candidate must successfully pass both the knowledge and skills exams within one (1) year of successfully completing a training program. Review the Nurse Aide Competency Exam section below to help prepare for the exam.

#### **Registry Maintenance**

Once placed on the Arkansas Registry, it is your responsibility to keep your demographic information up to date so that renewal notifications and alerts can be delivered to you in a timely manner. You must renew electronically by signing in to your TMU© account at <u>ar.tmutest.com</u>. Use your Email or Username and Password to sign in. If you are new to the system or have forgotten your password, refer to the 'Forget my Password?' section in this handbook for instructions on resetting your password. If you need assistance signing in to your TMU© account, call D&SDT-HEADMASTER at (888) 401-0462. Renewal reminders are emailed to your TMU© account email address of record and/or texted to your SMS-capable phone, so it is important to keep your contact information up to date.

**Note:** Renewal notifications and alerts are sent 60 days prior to your certification expiration date via email and text message. No renewal certifications are sent via USPS mail. It is important to keep your TMU© demographic information up to date to ensure you receive your renewal notification.

You can check your registry status at any time, update your address and phone number, and check your eligibility expiration date from any Internet-capable device.

# DEMOGRAPHIC UPDATES / CHANGES / CORRECTIONS

Registry name changes (such as marriage, divorce, etc.) must be verified with the appropriate documentation. Please complete the **DEMOGRAPHIC CHANGE/CORRECTION REQUEST FORM** and upload your name change documentation. The form is located under 'APPLICATIONS' on the Arkansas TMU© main web page (before you log in to your account), or you can click on this link: <a href="https://ar.tmutest.com/apply/11">https://ar.tmutest.com/apply/11</a>.

#### **Registry Renewal**

To maintain eligibility to work, you must renew your eligibility every 24 months. To be eligible to renew, you must have worked for pay as a nurse aide performing nursing or nursing-related services for at least eight (8) consecutive hours during the previous 24 months. Nurse aides with misconduct restrictions on the Registry are not eligible for renewal.

To renew, sign in to your TMU© account at <u>ar.tmutest.com</u> and record your work hours and the location where you were employed. An email verification link will be sent to the employer contact you choose from the list of employers. When the employer verifies your work experience, your eligibility will be extended an additional 24 months.

Under federal regulations, a nurse aide becomes ineligible for employment if they do not perform at least 8 hours of nursing-related services for pay in a health care setting during a period of 24 consecutive months. To reestablish employment eligibility on the ARNAR, you must successfully pass both components of the approved Arkansas Nurse Aide Competency Examination. Contact D&SDT-HEADMASTER for authorization to schedule the competency test to regain employment eligibility.

# **Registry Reciprocity**

This information is for applicants who want to be entered on the ARNAR through the Arkansas Reciprocity/Out-of-State registry placement process.

#### **Out-of-State Reciprocity Process**

There are multiple methods by which you may be eligible for placement on the ARNAR via the out-of-state registry process. In any case, you must be current and in good standing on a nurse aide registry in a state other than Arkansas to be considered.

To apply for reciprocity placement on the ARNAR, you must complete the <u>Out-of-State Reciprocity Form 9110AR</u>, which can be found on the Arkansas TMU© main page (before logging in to your TMU© account) under APPLICATIONS.

Once your completed application, processing fee, and all required documentation have been received, D&SDT-HEADMASTER staff will determine if you are eligible to be added to the Arkansas Nurse Aide Registry. You must have a valid email address to receive your TMU© login username and temporary password. You may check your listing on the Arkansas Nurse Aide Registry at <a href="mailto:ar.tmutest.com">ar.tmutest.com</a>. Any personal information entered into TMU© will only be used to determine whether you are eligible to work as a nurse aide in Arkansas. Failure to provide complete and accurate information during the reciprocity determination process may delay or even prevent you from being listed on the ARNAR.

• If you have successfully passed a nurse aide competency exam that is the same or substantially similar to the Arkansas competency examination within one (1) year of completing your training program, your name may be placed on the ARNAR. You must have a valid email address to receive a username and temporary password. Once you have received your username and password, log in to your TMU© account at <a href="mailto:ar.tmutest.com">ar.tmutest.com</a> to verify all your Arkansas registry information. This is also where you will renew your registry listing every 24 months, provided you have completed and maintained good and sufficient Nursing Assistant work in Arkansas.

# **Out-of-State Training Waiver Application**

#### Requirements

If you are a nurse aide candidate from another state who has completed a training program of at least 90 hours but have not successfully completed a nurse aide competency exam that is the same or substantially similar to the Arkansas examination, you will be required to successfully complete the Arkansas competency examination within one (1) year of your documented completion of comparable training.

To apply for an out-of-state training waiver, you must complete the Out-of-State Training Waiver Application. The Out-of-State Training Waiver Application (<- click the link) can be found at <a href="mailto:ar.tmutest.com/apply">ar.tmutest.com/apply</a> under 'APPLICATIONS' and click on the Out-of-State Training Waiver Application. You must have a valid email address to

receive a username and temporary password. Once you have received your username and password, log in to your TMU account at <u>ar.tmutest.com</u> and select a test event and location of your choice. Upon passing both the knowledge and skills exams within three attempts, your name will be added to the ARNAR.

# **Student Nurse / Graduate Nurse Training**

#### **Requirements**

RN or LPN students who have completed the basic nursing course (Introduction to Nursing, Fundamentals of Nursing, etc.) must provide a copy of their school transcript or document showing successful completion of the basic nursing course to qualify for the state competency test. To apply for a Student Nurse/Graduate Nurse Training waiver, you must complete the <a href="Nursing Student or RN Candidate Examination Application">Nursing Student or RN Candidate Examination Application</a> (<- click the link), or go to 'APPLICATIONS' at <a href="ar.tmutest.com/apply">ar.tmutest.com/apply</a> and select the Nursing Student or RN Candidate Examination Application.

# **Americans with Disabilities Act (ADA)**

#### **ADA Compliance**

The Arkansas Department of Human Services and D&SDT-HEADMASTER provide reasonable accommodations for candidates with disabilities or limitations that may affect their ability to perform the nurse aide competency examination. Accommodations are granted in accordance with the Americans with Disabilities Act (ADA).

If you have a qualified disability or limitation, you may request special accommodations for examination. D&SDT-Headmaster must approve accommodations in advance of examination. Complete the <u>ADA Accommodation Request Application</u> located on the Arkansas TMU© main page under 'APPLICATIONS' to be reviewed for accommodation.

ADA Accommodation Request Applications submitted without the required supporting documentation of a diagnosed disability will not be reviewed until the required documentation is provided. D&SDT-HEADMASTER will email you if further documentation or information is required using the email in your TMU© account.

**Please allow additional time for your request to be approved.** If you have questions regarding the ADA review process or specific required documentation, please call D&SDT-HEADMASTER at (888)401-0462.

# The Arkansas Nurse Aide Competency Exam

### **Payment Information**

| Exam Description  |            |
|---|------------|
| Knowledge Exam or Retake  | \$30       |
| Knowledge Exam- Spanish Version or Retake   | \$30       |
| Audio Version of Knowledge Exam or Retake   |            |
| (\$30 Knowledge Exam fee + \$10 for an audio version = \$40)                                | \$40       |
| Audio Spanish Version of Knowledge Exam- or Retake Spanish                                  | \$40       |
| <b>Version</b> (\$30 Knowledge Exam Spanish Version fee + \$10 for an audio version = \$40) | <b>Ş40</b> |
| Skill Test or Retake  | \$95       |

#### ARKANSAS DEPARTMENT OF HUMAN SERVICES (DHS) FUNDING OF TESTING FEE

DHS is responsible for paying the test fee for individuals who are employed by a Medicaid-certified nursing facility or those individuals who have a commitment (letter of intent) to be employed in a Medicaid-certified nursing facility. Letters of intent to hire from Medicaid-certified nursing facilities must be dated within 12 months immediately preceding the application date to take the test.

Independent test candidates who are taking the competency test without a connection to a long-term care facility through employment will be responsible for paying their own test fee.

A DHS-funded applicant deemed a "no-show" is not reimbursable by DHS. You will forfeit all fees paid and must submit a new testing fee (refer to the payment information table above) to schedule yourself into a new test event. Please see more information under the 'Reschedule a Test' and 'No-Show Status' sections.

#### **Complete your TMU© Account**

Your initial information will be entered in D&SDT-HEADMASTER's TestMaster Universe© (TMU©) software.

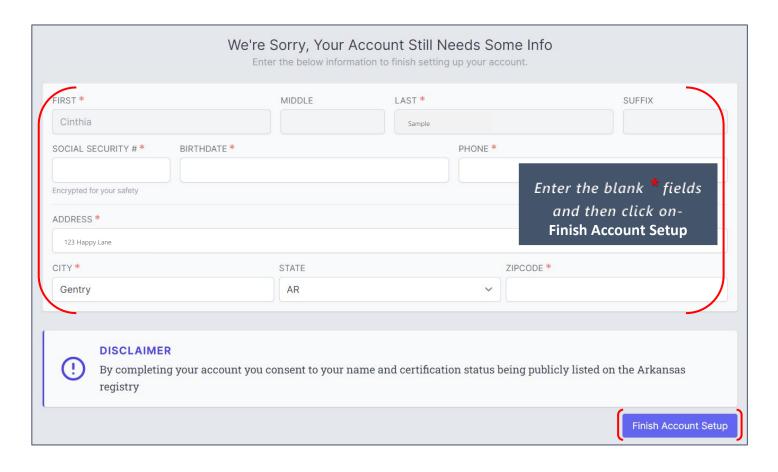
<u>IMPORTANT</u>: Before you can test, you must sign in to your TMU© account using your secure Email or Username and Password and complete the missing demographic information <u>prior to testing</u>. Failure to do so may result in you being turned away from testing. You will be a no-show status for your event and forfeit your testing fees.

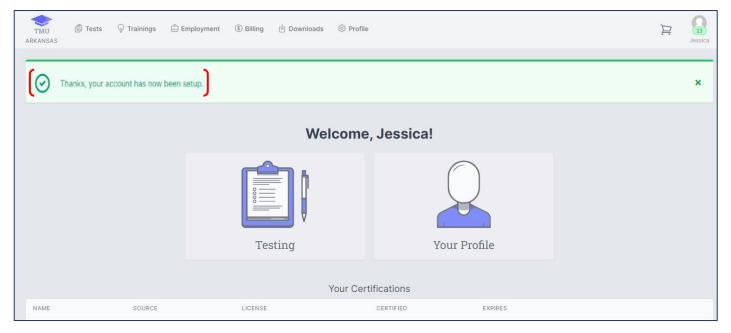
 Upon receiving your confirmation email from TMU© (check your junk/spam mail) that your account has been created, you need to sign in to your account, update your password, and complete your demographic information. This must be done before scheduling a test event.

If you do not know your Username and/or Password, enter your email address and click on "Forgot Your Password?" You will be asked to re-enter your email and then click "Recover Your Account." A 'reset password link' will be sent to your email; make sure you check your junk/spam mail for this email (see instructions under 'Forgot your Password and Recover your Account'). If you are unable to sign in for any reason, contact D&SDT-HEADMASTER at (888)401-0462 during regular business hours 7:00AM to 7:00PM Central Time (CT) Monday through Friday, excluding holidays.

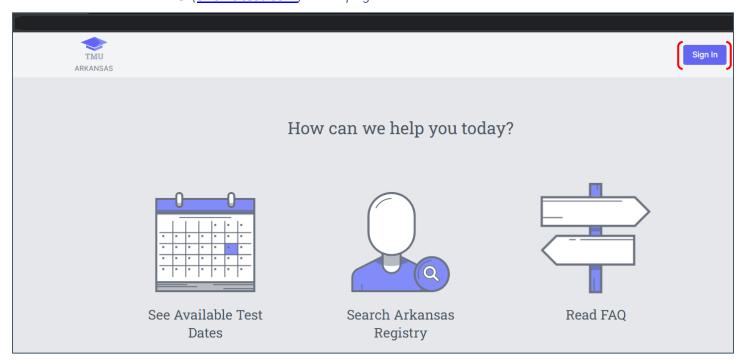
The screen you will see the first time you sign in to your TMU© account with the demographic information you need to enter to complete your account on the next page:

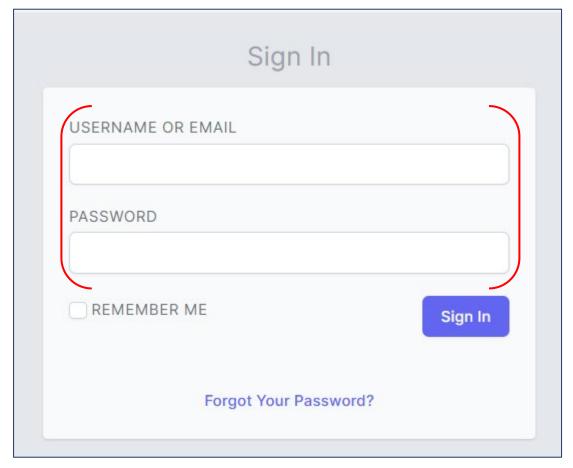
Screen you will see the first time you sign in to your TMU© account with the **demographic information you need to enter to complete your account**:





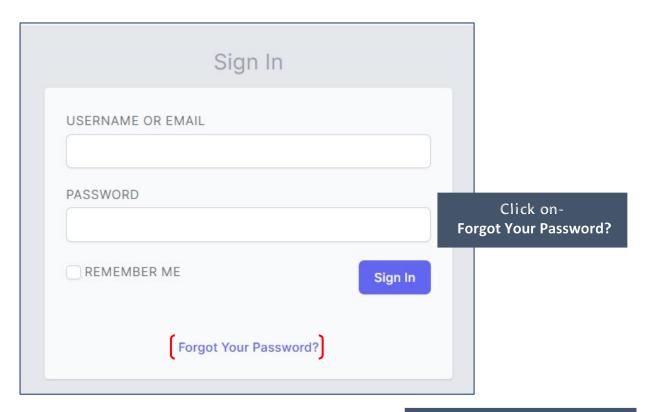
This is the Arkansas TMU© (ar.tmutest.com) home page:

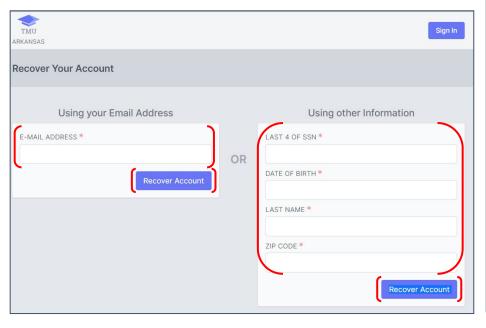




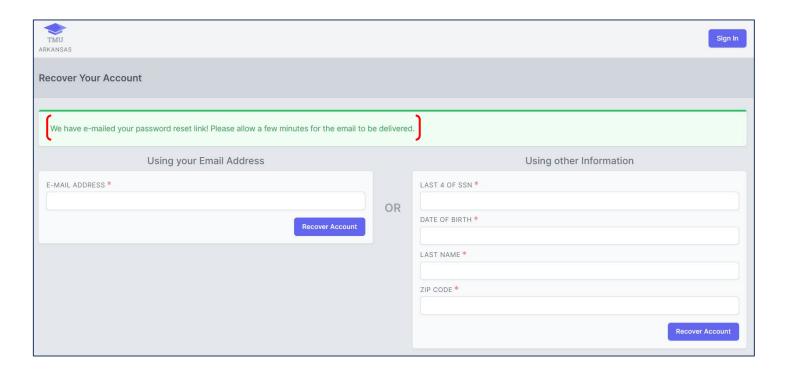
#### **Forgot your Password and Recover your Account**

If you have forgotten your password, follow the instructions below (see screenshots) to reset it and recover your account.

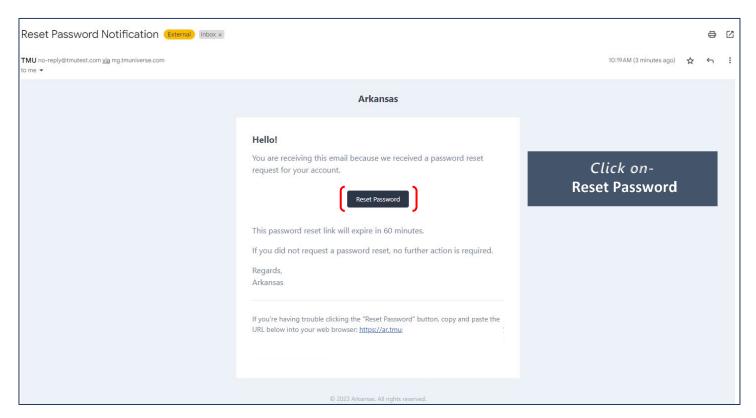




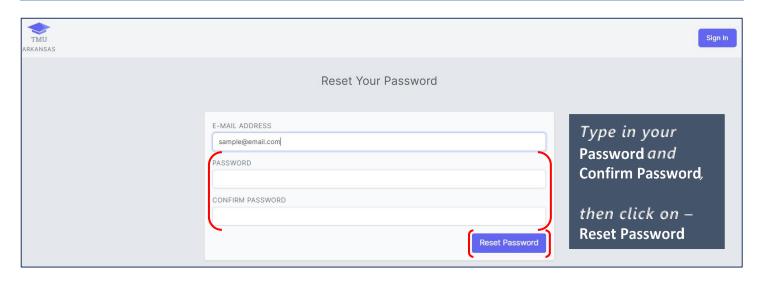
# Type in your Email Address Click on – Recover Account An email with the reset link will be emailed to you. Click on the reset link in your email to reset your password. (-OR- You can type in the requested data under Using other Information if you have already updated your demographic information in your account) Click on Recover Account



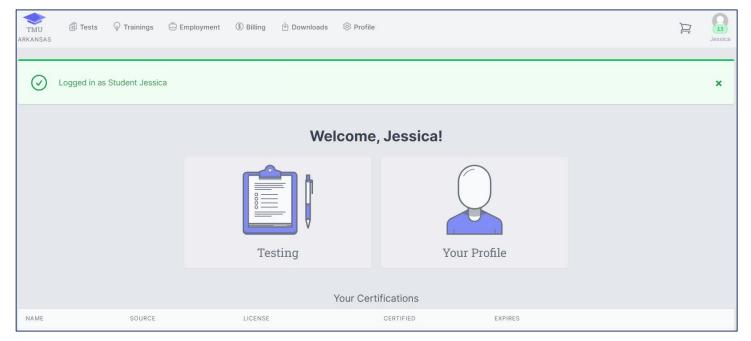
#### Email you will receive (check your junk/spam folder):



**Note:** If you do not reset your password right away, the link does expire in 60 minutes and after that time, you will need to request a new link.



This is the home screen you will see once you have reset your password:



#### Schedule an Arkansas Nurse Aide Exam

Once you have completed your program and your instructor has entered your training record in the D&SDT-HEADMASTER TestMaster Universe© (TMU©) database and your testing fee has been paid (see instructions under 'Self-Pay of Testing Fees'), you may schedule your exam date online at the Arkansas TMU© webpage at ar.tmutest.com using your email and password (see instructions under 'Schedule/Reschedule a Test Event'). If you are unable to sign in with your email, or schedule/reschedule, please call D&SDT-HEADMASTER for assistance at (888) 401-0462 during regular business hours 7:00AM to 7:00PM, CT, Monday through Friday, excluding holidays.

#### Self-Pay of Testing Fees in TMU©

Testing fees must be paid before scheduling a test date. Once your training program has completed your training record with completion hours and date, you will receive an email, text message, or notification that you are eligible to schedule a test date. Some training programs pre-pay testing fees for their graduating students.

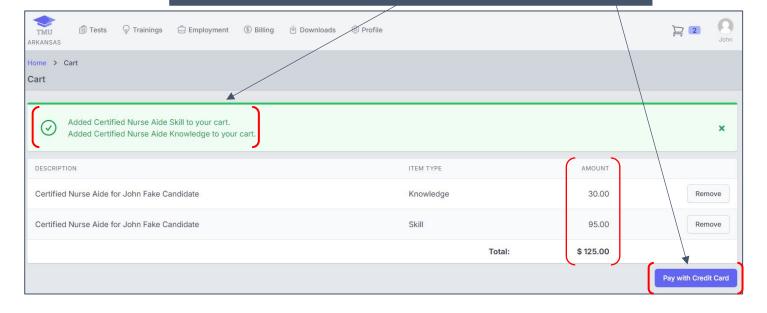
Your program/instructor will have informed you if this is the case. Before scheduling a test, verify with your instructor whether the training program has already prepaid for your test.

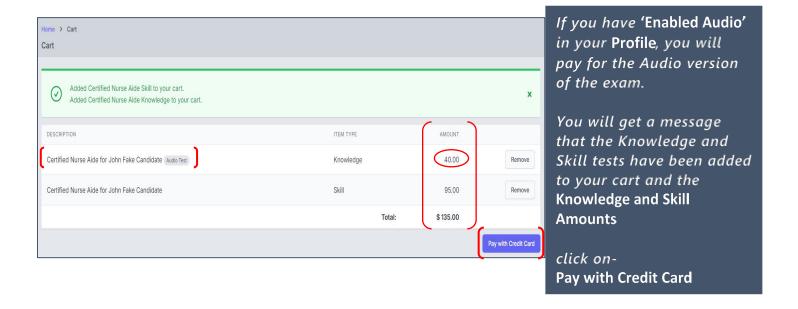
Securely processed Visa or MasterCard credit/debit card information is required when paying testing fees online, if you are not a DHS-paid candidate.

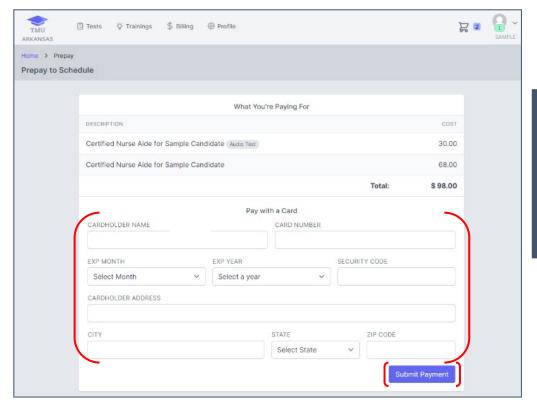


You will get a message that the Knowledge and Skill tests have been added to your cart and the Knowledge and Skill Amounts

# click on-Pay with Credit Card





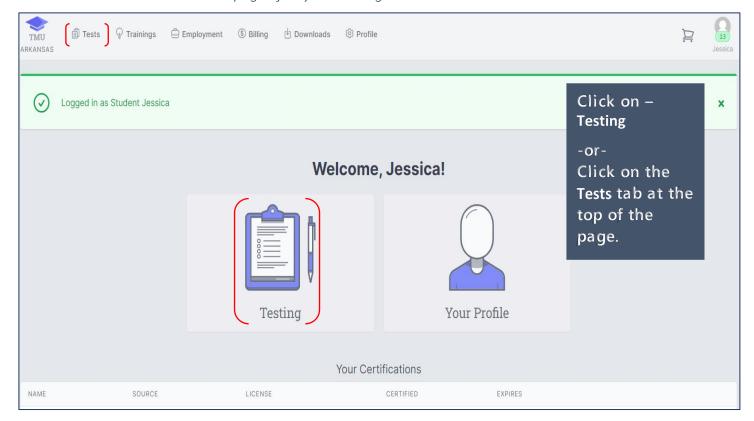


Enter the Credit Card information and then click on-Submit Payment

You will receive a receipt of the transaction.

Once your testing fees are paid, you will be eligible to choose a test site and date. Follow the instructions in the next section to schedule or reschedule an event.

This is the Arkansas TMU© home page after you have signed in:



#### Schedule / Reschedule a Test Event

After testing fees are paid (see instructions under 'Self-Pay of Testing Fees', if you are not DHS-funded), you will be able to schedule and/or reschedule your test event up to the business day before a scheduled test date of your choice and receive your test confirmation notification online or on the screen while you are logged in. You may log in with any Internet-connected device.

To schedule or reschedule your test date, sign in to the Arkansas TMU© webpage at <a href="mailto:ar.tmutest.com">ar.tmutest.com</a> using your email and password. If you are unable to schedule/reschedule online, please call D&SDT-HEADMASTER at (888)401-0462 during regular business hours, 7:00AM to 7:00PM CT, Monday through Friday, excluding holidays, for assistance.



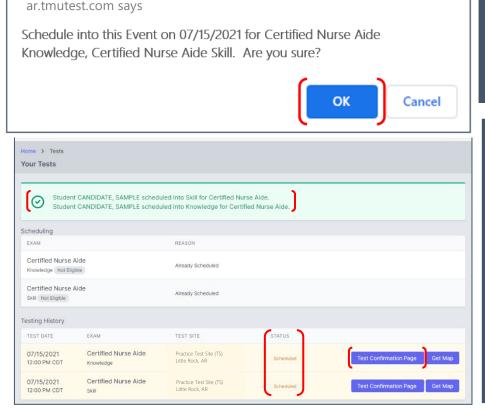
All eligible test
events will appear
in this format.

To select a test
site and test date,

click on –
Schedule to the
right of the test
date you want to
schedule into.



To select a test site and test date, click on -Schedule



To confirm this is the site and date you want to schedule into, click on -OK

This screen confirms you are scheduled into a test date to take your knowledge exam

Your status shows Scheduled and a note at the top of your screen also shows you are scheduled.

Click on-

**Test Confirmation Page** *to see* your test confirmation with important reminders for testing.

#### **Test Confirmation Letter**

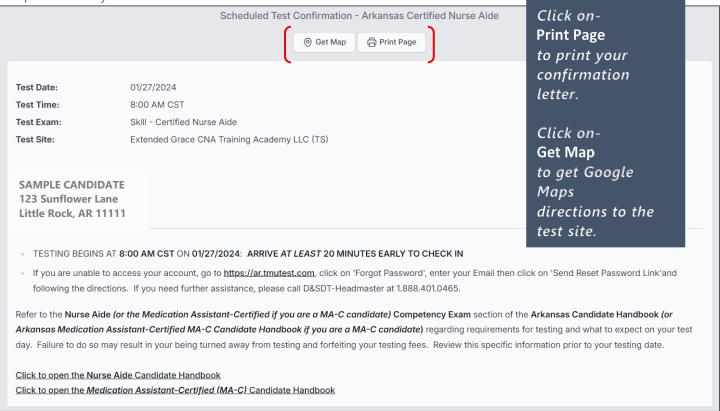
Your test confirmation letter will provide you with important information regarding where you are scheduled to test (date, time and address). It can be accessed at any time.

The body of the test confirmation letter will direct you to read the Arkansas Nurse Aide Candidate Handbook for important information regarding test day.

#### It is important that you read this letter!

Failure to do so could result in you not being allowed to test, being a No-Show status, and forfeiting all testing fees paid.

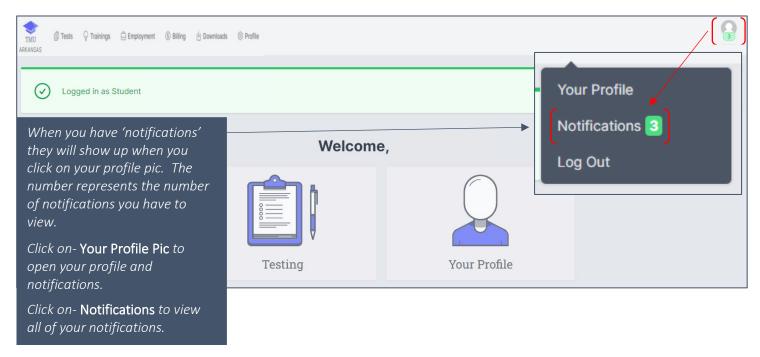
#### Sample Test Confirmation Letter:

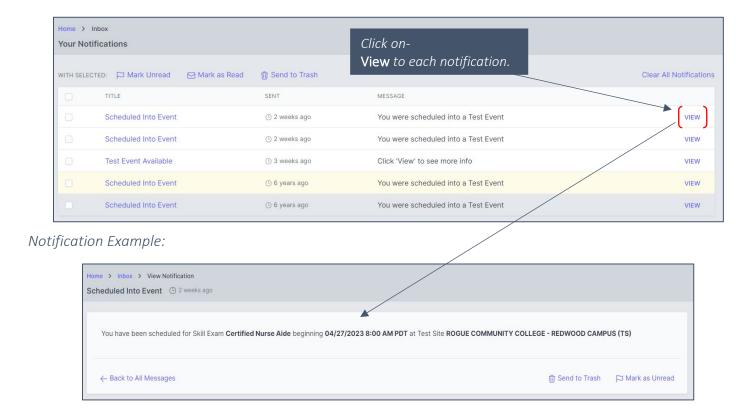


Candidates who self-schedule online or are scheduled by their training programs will receive their test confirmation when they are scheduled.

#### **Check/View your TMU© Notifications**

Remember to check your 'notifications' in your TMU© account for important notices regarding your selected test events and other information. See the screenshots that follow:





#### **Time Frame for Testing from Training Program Completion**

You must schedule a test within one year of your training program completion date. After one year, you must complete another Arkansas DHS-approved training program to be eligible to schedule testing.

Many training programs host and pre-schedule in-facility test dates for their graduating students. Your program/instructor will have informed you if this is the case. Before scheduling a test, verify with your instructor whether the training program has already scheduled and/or prepaid for your test. Regional test seats are open to all candidates. Regional test dates are posted on the Arkansas TMU© site.

If you have any questions regarding your test scheduling, call D&SDT-HEADMASTER at (888) 401-0462 during regular business hours, 7:00AM to 7:00PM CT, Monday through Friday, excluding holidays.

#### Exam Check-In

You must arrive at your confirmed test site 20 to 30 minutes before your exam starts.

- Testing **begins** promptly at the start time noted.
- You must arrive at the event at least 20 minutes before the start time to allow sufficient time to check in with the RN Test Observer.
- For example, if your test starts at 8:00AM, you must be at the test site for check-in no later than 7:40AM

Note: If you arrive late, you will not be allowed to test. You will be considered a NO-SHOW status. You will forfeit your testing fees and have to pay for another exam date.

#### **Testing Attire**

The following testing attire requirements will be followed at testing sites:

- You must be in full clinical attire (scrubs).
  - Scrubs and shoes can be any color/design.
- No open-toed shoes are allowed.
- Long hair must be pulled back.

**Note:** You will not be admitted for testing if you are not wearing scrubs attire and appropriate shoes with long hair pulled back. You will be considered a NO-SHOW status. You will forfeit your testing fees and have to pay for another exam date.

Other testing attire information:

- You may bring a standard watch with a second hand.
- Bluetooth-connected devices, smartwatches, fitness monitors, etc., are not allowed.

#### Identification

You must bring a United States (US) government-issued, \*signed, non-expired photo-bearing form of identification.

**NOTE:** Only original IDs are accepted. Photocopies, faxes, images, or mobile or electronic/digital versions (for example; Apple or Google Wallet) of IDs *are not allowed*.

Examples of the forms of US government-issued, signed, non-expired photo IDs that are acceptable are:

- State or Other United States Government Issued Driver's License
  - You may use the letter issued by the Department of Motor Vehicles (DMV) that you receive when you apply for or renew your driver's license while waiting to receive your new license.
- State-issued Identification Card
- Signed US Passport (Foreign Passports and Passport Cards are not acceptable)
  - Exception: A signed foreign passport with a US VISA is acceptable (the US VISA does not have a signature).
- Permanent Resident Card (Green Card or Alien Registration Card)/Employment Authorization Card issued by the U.S. Citizenship and Immigration Services (USCIS) (\*now accepted without a signature or fingerprint IF ISSUED from January 30, 2023, to present day. If issued before January 1, 2023, may contain a fingerprint in place of a signature)
- Tribal Identification Card (a signed photo ID with an expiration date (not expired) issued by a <u>federally recognized</u> Tribal Nation/Indian Tribe)
- US Military Identification Card (\*accepted without a signature or fingerprint, but will have a bar code or may contain a fingerprint in place of a signature)
- Concealed Hand Gun Carry Permit (that meets all identification criteria)

<u>Identification Criteria</u> = United States (US) government-issued, \*signed, unexpired photo-bearing form of identification.

The **FIRST** and **LAST** names listed on the mandatory United States (US) government-issued, \*signed, non-expired photo-bearing form of identification presented to the RN Test Observer during check-in at your test event **MUST EXACTLY MATCH** the FIRST and LAST names that were entered in the TMU© database. You may call D&SDT-HEADMASTER at (888) 401-0462 during regular business hours, 7:00AM to 7:00PM CT, Monday through Friday, excluding holidays, to confirm that your TMU© account name of record matches your United States (US) government-issued, \*signed, non-expired photo-bearing form of identification, or sign in to your TMU© account

to check or change your demographic information. See more information under 'Demographic Updates / Changes / Corrections'.

#### DEMOGRAPHIC UPDATES / CHANGES / CORRECTIONS

Registry name changes (marriage/divorce, etc.) must be verified with appropriate documentation. Please complete the **DEMOGRAPHIC CHANGE/CORRECTION REQUEST FORM** and upload your name change documentation. The form is under 'APPLICATIONS' on the Arkansas TMU© main web page (before you log in to your account), or click on this link: <a href="https://ar.tmutest.com/apply/11">https://ar.tmutest.com/apply/11</a>.

#### Note:

- You will not be admitted for testing if you do not bring proper/valid identification.
  - Be sure your identification is not expired.
  - Check to ensure that the FIRST and LAST printed names on your identification card match the current name on record in your TMU© account.
- A driver's license or state-issued ID card with a hole punched in it is <u>NOT VALID</u> and will not be accepted
  as an acceptable form of ID.
- A school ID is not an acceptable form of ID.
- In cases where names do not match, your ID is not proper or valid, or it has a hole punched in it, this is considered a 'no show' status, and you will have to reschedule and pay for another test and date.

You will be required to show your ID again when you enter the knowledge test room and when you enter the skills lab for your skills exam. Please keep your ID with you during the entire exam event.

#### Instructions for the Knowledge, Remotely Proctored Knowledge and Skill Exams

Test instructions for the knowledge and skills exams will be provided in written format in the waiting area when you check in for your test. If you are taking a remotely proctored knowledge exam, the Remotely Proctored Knowledge Exam Instructions can be found in your TMU© account under the Downloads tab (\*see paragraph below).

These instructions detail the process and what you can expect during your exam. Please read the instructions **before** taking the knowledge exam or skills test. The instructions will be left in the waiting area during testing for you to refer to throughout your time at the test site. The RN Test Observer and Knowledge Test Proctor will ask questions about the instructions you read when entering the testing rooms.

The **Knowledge, Remotely Proctored Knowledge, and Skill Exam Instructions** are also available under the **'DOWNLOADS'** tab in your TMU© account. \*Refer to the 'Access the Candidate Handbook and Testing Instructions' section of this handbook for instructions.

#### **Testing Policies**

The following policies are observed at each test site:

- Make sure you have signed in to your TMU© account at <u>ar.tmutest.com</u> well before your test date to update your password and complete your demographic information. Refer to this handbook's 'Complete Your TMU© Account' section for instructions and information.
  - If you have not signed in and completed/updated your TMU© account when you arrive for your test, you may not be admitted to the exam and any exam fees paid will NOT be refunded.

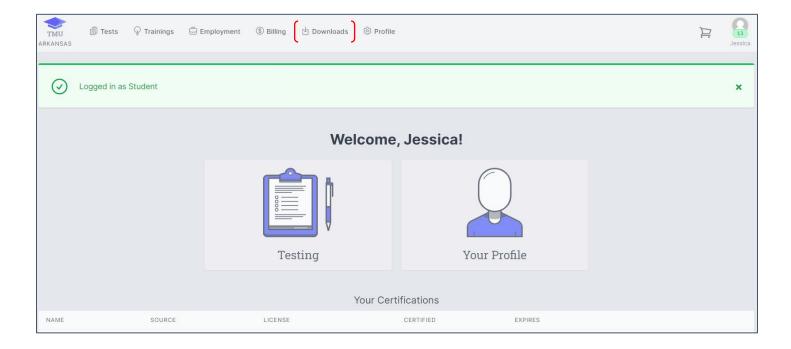
- Plan to be at the test site for up to 5 hours in the worst-case scenario.
- Testing begins promptly at the start time noted on your confirmation. If you arrive late for your confirmed exam (you need to be at the test site to check in at least 20 to 30 minutes before your scheduled start time if your test start time is 8:00AM, you need to be at the test site by 7:40AM at the latest), you will not be admitted to the exam. Any exam fees paid will NOT be refunded.
- If you do not bring a valid and appropriate United States (US) government-issued, \*signed, non-expired photo-bearing form of identification, you will not be admitted to the exam, and any exam fees paid will NOT be refunded.
  - If the FIRST and LAST printed names on your ID do not match your current name of record in your TMU© account, you will not be admitted to the exam, and any exam fees paid will NOT be refunded.
- If you do not wear scrubs with appropriate shoes, have long hair pulled back, and conform to all testing policies, you will not be admitted to the exam and any exam fees paid will NOT be refunded.
- If you do not show up for your exam day, or are considered a NO-SHOW STATUS (see details in this handbook's 'No-Show Status' section) for any reason, any test fees paid will NOT be refunded. You must re-pay your testing fees online in your TMU© account using your Email or Username and Password to schedule another exam date.
- **PERSONAL ITEMS**: Such as water bottles, briefcases, large bags, study materials, extra books, or papers) are not permitted to be on or near you in either testing room. The testing team will inform you of the designated area to place your items, and you will collect these items when you complete your exam(s).
- <u>ELECTRONIC DEVICES</u>: Cell phones, smart watches, fitness monitors, electronic recording devices, and Bluetooth-connected devices are not permitted on or near you in either testing room. The testing team will inform you of the designated area to place your electronic devices, and you are to collect these items when you complete your test(s).
  - All electronic devices must be **turned off**, including smartwatches, fitness monitors, and Bluetooth-connected devices, which must be removed from your wrist or body.
- If you are taking the remotely proctored knowledge exam, please refer to this handbook's 'Remotely Proctored Knowledge Exam Option' section.
- Anyone caught using any electronic recording device during testing will be removed from the testing room(s), have their test scored as a failed attempt, forfeit all testing fees, and will be reported to their training program and the Arkansas DHS. You may, however, use personal devices during your free time in the waiting area.
- You are encouraged to bring a jacket, snack, drink, or study material while waiting to test.
- Published foreign word-for-word translation dictionaries are allowed during testing.
  - Dictionaries with definitions or handwriting/notes, electronic dictionaries, or non-approved language translators <u>are not allowed</u>. You must show your published word-for-word translation dictionary to the test observer/proctor during check-in at your on-site or remote test event.
- You may not remove any notes or other materials from the testing room.
- You are not permitted to eat, drink, or smoke (e-cigarettes or vape) during the exam.
- You are not allowed to leave the testing room (knowledge exam room or skills lab) once the exam has begun *for any reason*. If you do leave during your test event, you will not be allowed back into the testing room to finish your exam.

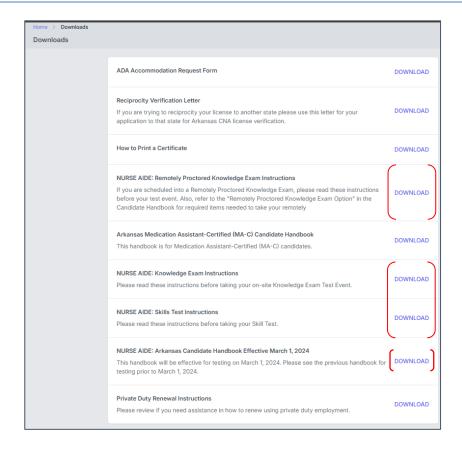
- If you are discovered causing a disturbance of any kind, cheating, engaging in any misconduct, visibly impaired, or trying to take any notes or testing materials from the testing room, you will be dismissed from the exam, your test will be scored as a failed attempt, and you will be reported to your training program and the Arkansas Department of Human Services.
- Test sites, RN Test Observers, Knowledge Test Proctors, and Actors are not responsible for the candidate's personal belongings at the test site.
- No visitors, guests, pets (including companion animals), or children are allowed.
  - Service animals with an approved ADA accommodation in place are allowed.
- You may not test if you are ill (sick). Call D&SDT-Headmaster at (888) 401-0462 immediately to reschedule (see the <u>note</u> below).
  - You may not test if you have any physical limitation (excluding pre-arranged ADAs) that would prevent you from performing your duties as a nurse aide. (Examples: cast, arm/leg braces, crutches, etc.). Call D&SDT-Headmaster at (888) 401-0462 immediately if you are on doctor's orders to reschedule (see the <u>note</u> below).

**NOTE**: Please see this handbook's 'Reschedule a Test Event' and 'No-Show Exceptions' sections.

- $\rightarrow$  Reschedules will not be granted less than one (1) full business day before a scheduled test date.
- Please review this Arkansas Candidate Handbook before your test day for any testing and/or policy updates.
- The Candidate Handbook can also be accessed within your TMU© account under your 'Downloads' tab.

#### Access the Candidate Handbook and Testing Instructions





Click on-Download to open the Arkansas Nurse Aide Candidate Handbook. The Knowledge, Remotely Proctored Knowledge and Skill test instructions can be downloaded

here as well.

#### Security

If you refuse to follow directions, cheat, use abusive language, disrupt the examination environment, or are visibly impaired, your test will be stopped and scored as a failed attempt. You will be dismissed from the testing room and will forfeit any testing fees paid. A report of your behavior will be submitted to your training program and the Arkansas Department of Human Services (DHS). You will not be allowed to retake the test for a minimum period of six months.

Anyone who removes or attempts to remove test material, takes notes, or obtains information from the test site will be reported to their training program and the Arkansas Department of Health and is subject to prosecution to the full extent of the law. Your test will be scored as a failed attempt, and you will forfeit any testing fees that have been paid. You will not be allowed to retake the test for a minimum period of six (6) months. You may have to obtain permission from the Arkansas DHS to be eligible to test again.

If you give or receive help from anyone during testing (which also includes the use of any electronic recording devices such as cell phones, smart watches, Bluetooth-connected devices, or navigating to other browsers/sites during an electronic exam, etc.), your test will be stopped, you will be dismissed from the testing room, and your test will be scored as a failed attempt. You will forfeit any testing fees that have been paid. You will be reported to your training program and the Arkansas Department of Human Services, and you may need to obtain permission from DHS to be eligible to test again.

#### **Reschedule a Test Event**

All candidates may reschedule for free online at <u>ar.tmutest.com</u> up until one (1) business day before a scheduled test day, excluding Saturdays, Sundays, and holidays.

If you must reschedule your exam date, please do so as soon as possible. You may reschedule an exam date online by signing in to your TMU© account at <a href="mailto:ar.tmutest.com">ar.tmutest.com</a>. (See instructions under 'Schedule/Reschedule a Test Event'.)

**Example:** If you are scheduled to take your exam on a Saturday, Sunday, or Monday, you would need to reschedule by the close of business on the Thursday before your scheduled exam. D&SDT-HEADMASTER is open 7:00AM to 7:00PM CT, Monday through Friday, excluding holidays.

| The scheduled test date is on a: | Reschedule before 7:00PM CT the previous: |  |
|----------------------------------|---|--|
| Monday                           | The previous Thursday                     |  |
| Tuesday                          | The previous Friday                       |  |
| Wednesday                        | The previous Monday                       |  |
| Thursday                         | The previous Tuesday                      |  |
| Friday                           | The previous Wednesday                    |  |
| Saturday                         | The previous Thursday                     |  |
| Sunday                           | The previous Thursday                     |  |

**Note:** Reschedules will not be granted less than one full business day before a scheduled test date.

#### **Refund of Testing Fees Paid**

Requesting a refund of testing fees paid is different than rescheduling a test date. Requesting a refund means that you are not interested in taking the Arkansas nurse aide certification test at all.

#### SCHEDULED IN A TEST EVENT

1) If you are scheduled in a test event, a refund request of testing fees paid must be made by completing and submitting the <u>Refund Request Form</u> on D&SDT-HEADMASTER'S Arkansas webpage at <u>www.hdmaster.com</u> at least **one (1) full business day** before your scheduled test event (excluding Saturdays, Sundays, and Holidays). No phone calls will be accepted.

**Example:** If you are scheduled to take your exam on a Saturday, Sunday, or Monday, you would need to request a refund by the close of business on the Thursday before your scheduled exam. D&SDT-HEADMASTER is open until 7:00PM Central Time.

- 2) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund processing fee.
- 3) Refund requests must be made within thirty (30) days of paying the original testing fees with D&SDT. Requests for refunds made more than 30 days after the purchase date will not be issued.

#### NOT SCHEDULED IN A TEST EVENT

- 1) Refund requests must be made within thirty (30) days of the original payment of testing fees with Headmaster. Any requests for refunds made more than 30 days after the original payment of testing fees with D&SDT will not be issued.
- 2) To request a refund of testing fees paid, you must complete and submit the <u>Refund Request Form</u> on D&SDT-HEADMASTER'S Arkansas webpage at <u>www.hdmaster.com</u>. No phone calls will be accepted.
- 3) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund processing fee.

#### **Unforeseen Circumstances Policy**

If an exam date is canceled due to weather or other unforeseen circumstances, D&SDT-HEADMASTER staff will make every effort to contact you using the contact information (phone number/email) we have on file in your TMU© account to reschedule you for no charge to a mutually agreed-upon new test date.

Therefore, you must keep your contact information in your TMU© account up to date in case we need to contact you (\*see examples below for reasons we may not be able to contact you that you are responsible for.)

If D&SDT-HEADMASTER is unable to reach you via phone call or email with the information in your TMU© account (\*see examples below) due to an unforeseen circumstance for a test event you are scheduled for, you will be removed from the test event, and D&SDT-HEADMASTER will not reschedule you until we hear back from you.

**NOTE:** The \*<u>examples</u> listed below are your responsibility to check and keep updated.

- If D&SDT-HEADMASTER leaves you a message or emails you at the phone number or email in your TMU© account and:
  - you do not call us back in a timely manner
  - your phone number is disconnected/your voice mailbox is full
  - you do not check your messages in a timely manner
  - you do not check your email or reply to our email in a timely manner
  - your email is invalid, or you are unable to access your email for any reason

See more information under 'No Show Exceptions'.

#### **No-Show Status**

If you are scheduled for your exam and do not show up without notifying D&SDT-HEADMASTER at least one (1) full business day before your scheduled testing event, **excluding** Saturdays, Sundays, and holidays, OR if you are turned away for lack of proper identification, proper attire, or any other reason to deem you ineligible to test, you will be considered a **NO-SHOW STATUS.** You will forfeit all fees paid and must submit a new testing fee to schedule yourself into a new test event.

A DHS-funded applicant deemed a 'NO-SHOW' status is not reimbursable by DHS. You will forfeit all fees paid and must submit a new testing fee to schedule yourself into a new test event. You cannot schedule a new test event until you have paid your testing fee.

These fees partially offset D&SDT-HEADMASTER cost incurred for services requested and resulting work that is performed. If a reschedule or refund request is not received at least one full business day before a scheduled test event, excluding Saturdays, Sundays, and holidays (see examples under 'Reschedule a Test Event' and 'Refund of Testing Fees Paid'), a NO-SHOW status will exist and you will forfeit your testing fees. You must repay the full testing fee to secure a new test event.

#### **No-Show Exceptions**

Exceptions to the NO-SHOW status exist; if you are a no-show status for any test component for any of the following reasons, a free reschedule will be authorized to the remitter of record, providing the required documentation is received within the appropriate time frames outlined below:

- <u>Car breakdown or accident</u>: D&SDT-Headmaster must be contacted within one business day via phone call, fax, or email, and a tow bill, police report, or other appropriate documentation showing your name and the provider of service name must be submitted within three (3) business days of the exam date. If we do not receive proof within three business days, you will be required to pay as if you were a noshow.
- Weather or road condition-related issue: D&SDT-Headmaster must be contacted within one business day via phone call, fax, or email, and a road report, weather report, or other appropriate documentation must be submitted within three (3) business days of the exam date. If we do not receive proof within three business days, you will be required to pay as if you were a no-show.
- <u>Medical emergency or illness</u>: D&SDT-Headmaster must be contacted within one business day via phone call, fax, or email, and a doctor's note showing your name and the provider's name (or on the provider's letterhead) must be submitted within three (3) business days of the missed exam date. If we do not receive proof within three business days, you will be required to pay as if you were a no-show.
- <u>Death in the family</u>: D&SDT-Headmaster must be contacted within one business day via phone call, fax, or email, and an obituary showing your name and the provider's name or a letter on your behalf from the funeral home for immediate family only be submitted within **seven (7) business days** from a missed exam date. If we do not receive proof within seven business days, you will be required to pay as if you were a no-show. (Immediate family includes parents, grandparents, great-grandparents, siblings, children, spouse, or significant other.)
- Remotely proctored testing issues: D&SDT-Headmaster must be contacted within one business day via phone call, fax, or email, and appropriate documentation showing your name and the provider of service name must be submitted within three (3) business days of the exam date. If we do not receive proof within three business days, you will be required to pay as if you were a no-show.
  - **Internet outage or issue:** Documentation showing your name and the service provider's name from the Internet provider, including the date and times of the outage.
  - **Computer or cell phone issue:** If the computer or cell phone fails to function for any reason, provide documentation showing your name and the name of the service provider, obtained from a computer repair technician or shop, or other relevant documentation.

#### **Candidate Feedback – Exit Survey**

Candidates are provided the opportunity to complete an exit survey via a link when they check their test results in their TMU© account. The survey is confidential and will not have any bearing on the outcome of any test. You are encouraged to complete the survey questions with honest feedback regarding the examination process to help improve the testing process.

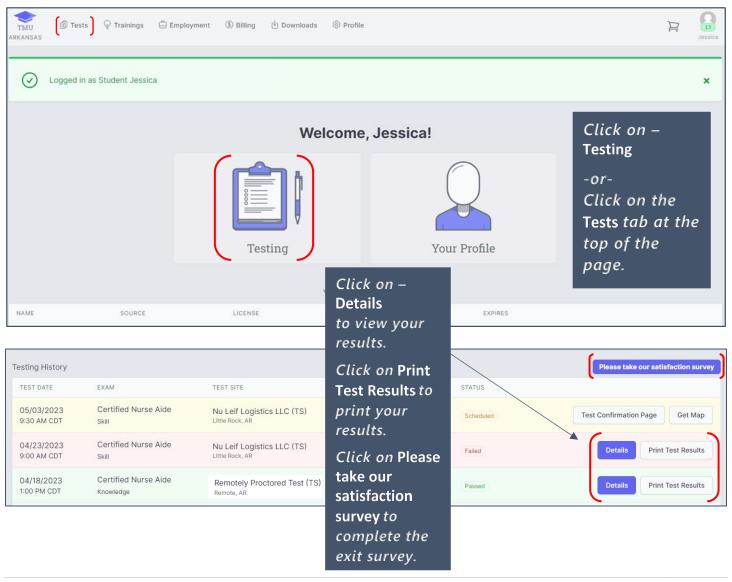
#### **Test Results**

After you have completed both the Knowledge Exam and Skill Test components of the competency exam, your test results will be officially scored and double-checked. Official test results will be available by signing in to your TMU© account after 7:00PM CT the business day after your test event.

#### D&SDT-HEADMASTER does not send postal mail test results letters.

To view your test results, sign in to your TMU© account at ar.tmutest.com.

#### **ACCESS YOUR TEST RESULTS**



#### Knowledge Exam Test Results Example:



#### Skills Exam Test Results Example:



#### **Test Attempts**

You have **three (3) attempts** to pass the knowledge and skill test portions of the exam **within one year** from the date of completing your nurse aide training program. If you do not complete testing within one year of completing training, you must retrain to become eligible to attempt the Arkansas nurse aide examination further.

#### **Retaking the Nurse Aide Exam**

If you fail the knowledge and/or skill portion of the examination, you must pay for the portion you failed before scheduling a new exam date to reapply.

You can schedule a test or re-test online by signing in to your TMU© account at <a href="ar.tmutest.com">ar.tmutest.com</a>. (See the 'Schedule/Reschedule a Test Event' section of this handbook for instructions.) You will need to pay with a Visa or MasterCard credit/debit card before you can schedule.

If you need assistance scheduling your retest, please call D&SDT-HEADMASTER at (888) 401-0462 during regular business hours, 7:00 AM to 7:00 PM CT, Monday through Friday, excluding holidays. We can assist you in scheduling a test or retest date, provided your fees have been paid first.

#### **Test Review Requests**

You may request a review of your test results or dispute any other testing condition. The purpose of this review process is to ensure fairness and accuracy in the evaluation of your test.

PLEASE READ BEFORE FILLING OUT THE TEST REVIEW REQUEST: Please call D&SDT-Headmaster at (888) 401-0462 during regular business hours, 7:00AM to 7:00PM CT, Monday through Friday, excluding holidays, to discuss the test outcome you are questioning before committing to paying the \$25 non-refundable test review request deposit. Once you have further details about the scoring of your test, you will often gain a better understanding of the scoring process and learn how to prepare more effectively for subsequent exam attempts. If, after discussing your concerns with D&SDT-Headmaster staff, you still have concerns about your testing process that affected the outcome of your exam, you may submit a Test Review Request.

There is a \$25 non-refundable test review deposit fee. To request a review, complete the <u>Test Review Request</u> and <u>Payment Application</u>, available on the Arkansas TMU© main page (before logging in to your account) at <u>ar.tmutest.com</u>. Test Review Requests must be received within three (3) business days from the official scoring of your test (excluding Saturdays, Sundays, and holidays). Late requests will be denied and will not be considered.

Since one qualification for certification as a nurse aide in Arkansas is demonstrated by passing an examination of minimum nurse aide knowledge and skills, the likely outcome of your review will determine who pays for any retests that may be granted. If, after investigation, the review finding is in your favor, you will be refunded the \$25 test review deposit. If the finding of the review is *not in your favor*, the \$25 test review deposit will remain, and the fee is non-refundable.

D&SDT-Headmaster will review your detailed recollection, knowledge test markings, and any skill task measurements you recorded at the time of your test, as well as review the markings, notations, and measurements recorded by the RN Test Observer during your test. We will interview the RN Test Observer,

Actor, or Knowledge Test Proctor about the facts detailed in your dispute documentation. D&SDT-Headmaster will re-check the scoring of your test and may contact you, the RN Test Observer, the Actor, and/or the Knowledge Test Proctor, as well as other candidates who were on-site at your test event, for any additional information about the test event.

After a candidate reaches the age of 18, D&SDT-Headmaster will only discuss test results or test disputes with the candidate. D&SDT-Headmaster will not review test results or disputes with instructors, training programs, family members, or anyone else on behalf of the candidate once the candidate reaches 18 years of age.

D&SDT-Headmaster will complete your review request within ten business days of receiving it within the required timeframe. The final determination of the review results will be sent to the email address listed in your TMU© account, along with a notification to the Arkansas Department of Human Services (DHS).

# The Knowledge/Audio Exam

#### **Knowledge Exam Content**

The Knowledge Test consists of 75 multiple-choice questions. Questions are selected from subject areas based on the DHS-approved Arkansas test plan and include questions from all the required categories as defined in the federal regulations. The subject areas are as follows:

| Subject Area                       | Number of Questions | Subject Area            | Number of Questions |
|------------------------------------|---------------------|-------------------------|---------------------|
| Aging Process and Restorative Care | 5                   | Infection Control       | 9                   |
| Basic Nursing Skills               | 11                  | Mental Health           | 4                   |
| Care Impaired                      | 3                   | Personal Care           | 8                   |
| Communication                      | 5                   | Resident Rights         | 6                   |
| Data Collection                    | 4                   | Role and Responsibility | 7                   |
| Disease Process                    | 5                   | Safety                  | 8                   |

#### **Knowledge Exam Information**

You will be required to present your ID again when you enter the knowledge test room and when you enter the skills lab for your skills exam. Please keep your ID with you during the entire exam day.

The Knowledge Test Proctor will hand out materials and give instructions for taking the Knowledge Exam. You will have a maximum of **60 minutes (one hour)** to complete the **75 multiple-choice question** Knowledge Exam. You will be told when fifteen (15) minutes remain. You may not ask questions about the content of the Knowledge Exam (such as "What does this question mean?").

#### You must have a score of 76% or better to pass the knowledge portion of the exam.

Electronic testing using TMU© internet connected computers is utilized at all sites in Arkansas. The Knowledge Exam portion of your exam will be displayed on a computer screen for you to read and key/tap or click on your answers.

**NOTE:** You will need your TMU© Username or Email and Password to sign in to your knowledge exam. The Knowledge Test Proctor will provide you with a code at the test event to start your test.

#### TRANSLATION DICTIONARIES OR DEVICES:

Published foreign word-for-word translation dictionaries are allowed.

Electronic dictionaries or non-approved language translators are not allowed. Dictionaries that contain definitions or handwritten notes are not allowed. You must present your published word-for-word translation dictionary to the test observer or proctor during check-in at your on-site or remotely proctored test event.

#### SCRATCH PAPER AND BASIC CALCULATORS:

If needed, calculations may be done on scratch paper or with a basic calculator provided by the KTP.

All test materials, including scratch paper and calculators, must be left in the testing room. Anyone who takes or attempts to take materials, notes, or information from the testing room is subject to prosecution and will be reported to the Arkansas Department of Human Services (DHS).

#### **Audio Version of the Knowledge Exam**

An audio (oral) version of the knowledge exam is available. However, you must request an Audio version before you submit your testing fee payment. There is an additional \$10 charge for an Audio version of the Knowledge Exam.

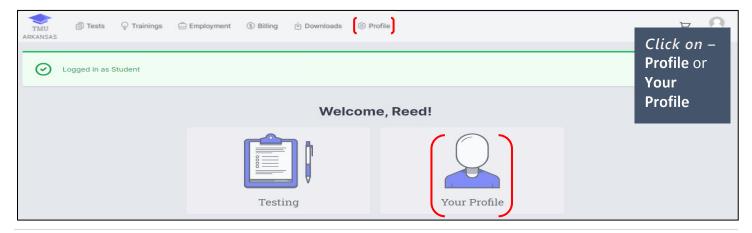
The questions are read to you neutrally and will be heard through wired earbuds plugged into the computer. **Bluetooth-connected devices are not allowed.** When taking an Audio version of the Knowledge exam, the audio control buttons will be displayed on the computer screen, enabling you to play, rewind, or pause questions as needed.

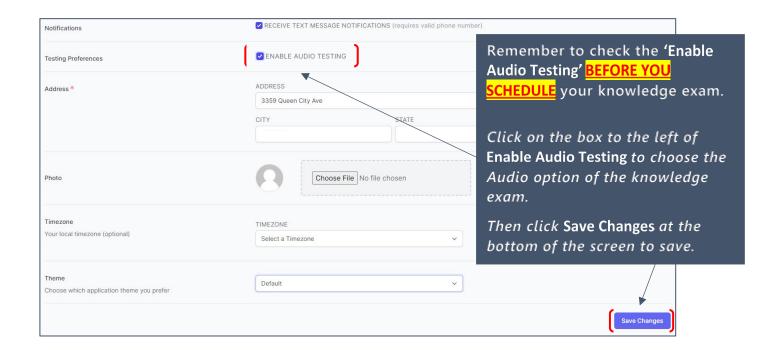
<u>NOTE</u>: On the Audio version of the Knowledge Exam, only the first 67 questions will be read orally; the remaining eight (8) questions must be answered without audio assistance to assess English reading comprehension.

#### SELECT AN AUDIO VERSION OF THE KNOWLEDGE EXAM

To select the Audio version of the knowledge exam, please follow the instructions below.

Under your PROFILE, check the 'Enable Audio Testing' to receive an Audio version of the Knowledge Exam:

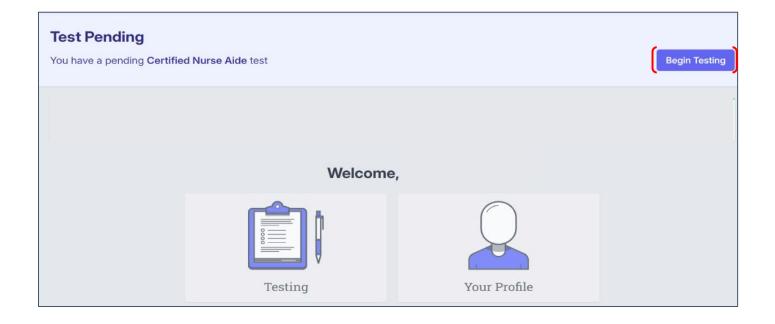


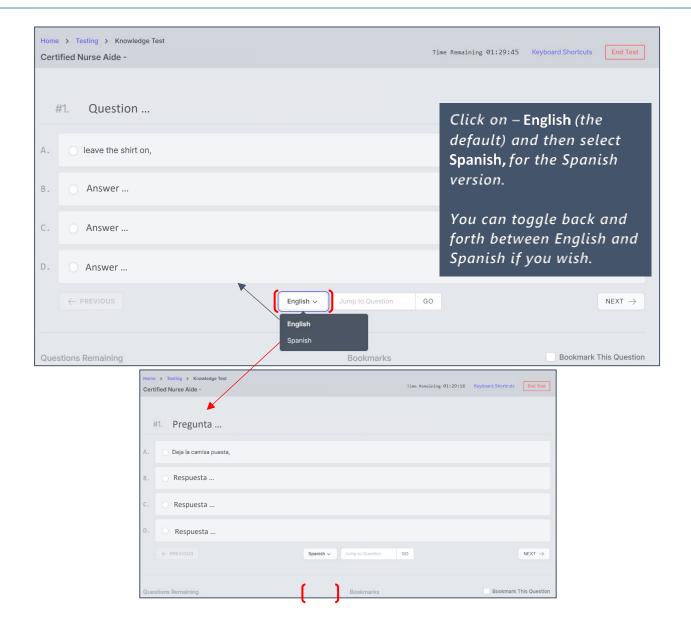


#### **Knowledge/Audio Exam Spanish Version**

The Knowledge/Audio Exam is available in a Spanish version. When you are signed in to your Knowledge Exam at a test event or your remotely proctored Knowledge Exam, you will have the option to toggle your exam from English to Spanish.

Please refer to the instructions below.





# **Remotely Proctored Knowledge Exam Option**

You can take the knowledge exam with a remote proctor from your home, etc.

### REMOTELY PROCTORED KNOWLEDGE EXAM CANDIDATE REQUIREMENTS

### Candidates must have:

- An updated version of Google Chrome as your Internet browser.
  - TMU© does not support Internet Explorer.
- A reliable Internet (Wi-Fi) connection.
- A personal computer, tablet, or laptop to log in to TMU© to access the knowledge exam.
- Your Email or Username and Password to take the remotely proctored TMU© Knowledge exam. The remote Proctor will give you a 'code' to start your test.
- A smartphone to access the 'video conferencing app' (for example, Zoom) that you must download.
  - An email will be sent to you and in your notifications (in your TMU© account) with information about the 'video conferencing app' (for example, Zoom, etc.) you will need to download <u>before</u> test day.

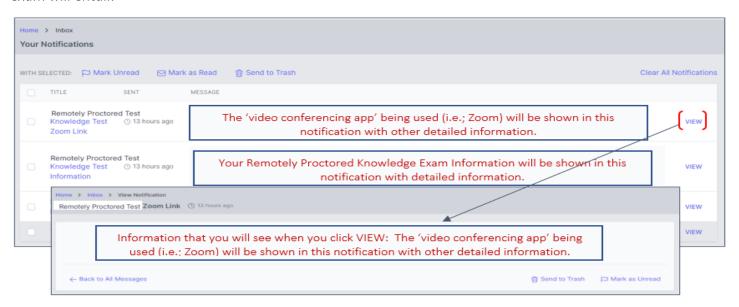
- The night before your scheduled remotely proctored knowledge exam, you will receive an email, along with a notification in your TMU© account, containing a reminder with a password-protected link to join the test event.
- During your test, your smartphone must be positioned so that the remote Proctor can clearly see you, your keyboard, mouse (if used), and the entire screen of your computer/tablet/laptop.
- You may not use a video filter such as a background or blurring your screen.
- **IMPORTANT NOTE:** On testing day, you will not be allowed to receive any assistance with your setup from anyone in your environment (room/area).
- You must be alone (by yourself during the entire time while testing) in a quiet, isolated, secured room/area free of distractions, interruptions, and any other people, children, or pets.
- Along with showing the remote Proctor your surroundings/entire room during check-in, the remote Proctor may also ask you to show your room/entire surroundings at any time during your test.
- If you have selected the Audio version of the knowledge exam, you will provide your own wired earbuds or headphones, which you must show to the remote proctor at check-in. Earbuds or headphones cannot be Bluetooth-connected devices.
  - The questions are neutrally read to you and will be heard through wired headphones or earbuds plugged into the computer.
  - When taking an Audio exam, the audio control buttons will be displayed on the computer screen, enabling you to play, rewind, or pause questions as needed.
- Only the first 67 questions will be read orally on the audio version of the Knowledge Exam. The remaining eight (8) questions must be answered without audio assistance to assess English reading comprehension.
- Failure to adhere to any of these remote testing conditions will require the remote Proctor to stop your test, which will be scored as a failed attempt.

### SCHEDULE A REMOTELY PROCTORED KNOWLEDGE EXAM

You will need to sign in to your TMU© account using your Username or Email and Password and follow the instructions in this handbook's 'Schedule / Reschedule a Test Event' section. Please ensure you have met the 'Remotely Proctored Knowledge Exam Candidate Requirements' above before scheduling a remotely proctored knowledge exam.

- The test site location for a remotely proctored knowledge exam will be the 'Remotely Proctored Knowledge Exam.'
- Once scheduled, a test confirmation will be sent via email and/or text, and a notification will be generated in your TMU© account for you to view (see this handbook's 'Test Confirmation Letter' and the 'Check/View your Notifications' sections for information to access your test confirmation.)
- Instructions and a link to download the video conferencing app (for example, Zoom) will be emailed to you, along with the meeting ID and Password for the remotely proctored knowledge event you are scheduled for, and in your notifications.
  - Remember to check your 'Notifications' under your profile picture in your TMU account for this information. Please refer to the 'Check/View your Notifications' section.

See the screenshots showing an example of what a notification regarding your remotely proctored knowledge exam will entail:



Please call D&SDT-HEADMASTER at (888) 401-0462 if you have any questions, concerns, or need assistance scheduling a remotely proctored knowledge exam.

## REMOTELY PROCTORED KNOWLEDGE EXAM INSTRUCTIONS

It is important that you read the Remotely Proctored Knowledge Exam Instructions before signing in to your remotely proctored knowledge exam. Please refer to the instructions for the Remotely Proctored Knowledge Exam, located under 'Access the Candidate Handbook and Testing Instructions'.

### REMOTELY PROCTORED KNOWLEDGE EXAM CHECK-IN

You must be signed in to the remotely proctored exam link (for example, Zoom, etc., waiting room) at least 10 minutes before the start time listed on your test confirmation for the check-in process with the remote test proctor. If you are not signed into the remotely proctored exam waiting room <u>at least 10 minutes</u> before the time listed on your test confirmation, you will not be allowed to test, will be considered a no-show, and forfeit your testing fees paid. You will also be required to pay for another test date.

- You must show the remote proctor your mandatory form of identification at check-in before starting your remotely proctored knowledge exam. Please refer to the 'Identification' section for details.
- You must show your surroundings/entire room to the remote Proctor during check-in before starting your remotely proctored knowledge exam.
  - Along with showing the remote Proctor your surroundings/entire room during check-in, the remote Proctor may also ask you to show your room/entire surroundings at any time during your test.
- Then, you must position your smartphone so the remote Proctor can clearly see you, your keyboard, mouse (if used), and the entire screen of your computer/tablet/laptop.
  - You may not use a video filter, such as a background or blurring your screen.
- **NOTE:** On testing day, you <u>will not be allowed to receive any assistance with your setup</u> from anyone in your environment (room/area).
- Failure to adhere to any of these remote testing conditions will require the remote Proctor to stop your test, which will be scored as a failed attempt.

### REMOTELY PROCTORED KNOWLEDGE EXAM POLICIES

All 'Testing Policies' and 'Security' measures are followed during the remotely proctored knowledge exam. Please refer to those sections for information.

- On testing day, you will not be allowed to receive any assistance with your setup from anyone in your environment (room/area). If someone else is in the room with you, the remote Proctor will remove you from the meeting, and you will be considered a no-show status. You will forfeit any testing fees paid and must repay to schedule a new test.
- You must be **alone (by yourself during the entire time while testing)** in a quiet, isolated, secured room/area free of distractions, interruptions, and any other people, children, or pets.
- Along with showing the remote Proctor your surroundings/entire room during check-in, the remote Proctor may also ask you to show your room/entire surroundings at any time during your test.
- During your test, your smartphone must be positioned so that the remote Proctor can clearly see you, your keyboard, mouse (if used), and the entire screen of your computer/tablet/laptop.
  - You may not use a video filter such as a background or blurring your screen
- The 'video conferencing app' (for example, Zoom, etc.) link must be maintained during the entire knowledge exam.
  - If the 'video conferencing app' (for example, Zoom, etc.) connection is lost, you must immediately reconnect, or you will be disconnected from the test event by the remote Proctor, and your test will be scored as a failed attempt.
- Your device must <u>not be muted</u> during testing so that the remote Proctor can hear if there are any distractions or other interruptions during your test. **REMEMBER:** You need to test in an isolated, secured/room area that is distraction and interruption-free, just like you would if you were sitting in the knowledge test room at a test site.
- If the remote Proctor has any inclination that you are cheating or not following instructions, your test will be ended and scored as a failed attempt.
- Please see the information on remotely proctored testing issues under the 'No-Show Exceptions' section.
- If needed, you may do math calculations on scratch paper or with a basic calculator. Before starting your
  exam, you will be asked to show both sides of the scratch paper and the basic calculator to the remote
  Proctor.
  - At the end of your exam, you will be asked to show both sides of the scratch paper and the calculator to the remote Proctor *again*. You will then be instructed to tear up the scratch paper in view of the remote Proctor and to mute your phone before doing so.
- Published foreign word-for-word translation dictionaries <u>are allowed</u>. Electronic dictionaries or non-approved language translators *are not allowed*. Dictionaries that contain definitions or handwritten notes *will not be allowed*. You must show your published word-for-word translation dictionary to the remote Proctor during check-in at your test event.
- If you have requested an audio version of the Knowledge Exam, you will need to have wired earbuds or headphones (Bluetooth-connected devices are not permitted) that plug into the computer.
  - The questions are neutrally read to you and will be heard through wired headphones or earbuds plugged into the computer.

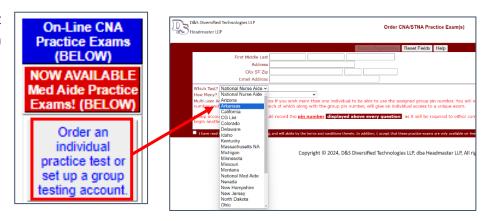
- When taking an Audio exam, the audio control buttons will be displayed on the computer screen, enabling you to play, rewind, or pause questions as needed.
- Only the first 67 questions will be read orally on the audio version of the Knowledge Exam. The
  remaining eight (8) questions must be answered without audio assistance to assess English
  reading comprehension

Failure to adhere to any of these remote testing conditions/policies will require the remote Proctor to stop your test, which will be scored as a failed attempt.

### **Knowledge Practice Test**

D&SDT-HEADMASTER offers a free knowledge test question of the day and a ten-question online static practice test available on our website at <a href="www.hdmaster.com">www.hdmaster.com</a>. Candidates may also purchase complete, randomly generated practice tests based on the state test plan. A mastery learning method is used, and each practice test taken will be unique. This means candidates must get the question they are attempting correct before they can move on to the next question. A first attempt percentage score and vocabulary feedback are supplied upon completion of the practice test. A list of vocabulary words to study is provided at the end of each test. Single or group purchase plans are available.

**NOTE:** Make sure you select **ARKANSAS** from the drop-down list.



The following are a sample of the kinds of questions that you will find on the Knowledge/Audio exam:

### 1. Clean linens that touch the floor should be:

- (A) Picked up quickly and placed back on the clean linen cart
- (B) Used immediately on the next resident bed
- (C) Considered dirty and placed in the soiled linen hamper
- (D) Used only in the room with the floor the linen fell on

### 2. When you are communicating with residents, you need to remember to:

- (A) Face the resident and make eye contact
- (B) Speak rapidly and loudly
- (C) Look away when they make direct eye contact
- (D) Finish all their sentences for them

### 3. A resident's psychological needs:

- (A) Should be given minor consideration
- (B) Make the resident withdrawn and secretive
- (C) Are nurtured by doing everything for the resident
- (D) Are nurtured when residents are treated like individuals

ANSWERS: 1-C | 2-A | 3-D

# **The Manual Skill Test**

- The purpose of the Skill Test is to evaluate your performance when demonstrating Arkansas Department of Health Services (DHS)- approved nurse aide skill tasks. You will find a complete list of skill tasks in this handbook.
- You will be asked to present your ID that you showed the RN Test Observer at check-in.
- Make sure you understand all instructions you read while in the waiting area before beginning your skill
  task demonstrations. You may not ask questions once the Skill Test begins and the timer starts. Once
  the Skill Test begins, the RN Test Observer may not answer questions.
- Each of your randomly selected 3 or 4 tasks will have scenarios associated with them. The scenarios will be read to you by the RN Test Observer immediately before you are asked to do each task.
- You will be allowed a maximum of **30 minutes** to complete your three or four tasks. After 15 minutes have elapsed, you will be alerted that 15 minutes remain.
- Listen carefully to all instructions given by the RN Test Observer. You may request to have any of the scenarios repeated **at any time** during your Skill Test up until you run out of time or tell the RN Test Observer that you are finished with your skill task demonstrations.
- You must correctly perform all **key steps (in bold font)** and 80% of all steps on each assigned task to pass the Skill Test.
- If you believe you made a mistake while performing a task, tell the RN Test Observer you would like to make a correction. You will need to correctly demonstrate the step or steps that you believe you performed incorrectly to receive credit for the correction.
- You may repeat or correct any step or steps on any task you believe you have performed incorrectly at
  any time during your allotted 30 minutes, or until you inform the RN Test Observer that you are finished
  with the Skill Test.
- The skill task steps are not order-dependent, unless the words "BEFORE" or "AFTER" are used in a step.
- When you finish each task, verbally tell the RN Test Observer you are finished and move to the designated "relaxation area." When the RN Test Observer and actor have set up and are ready for your next skill task demonstration, the RN Test Observer will read the scenario for your next task.
- All steps must actually be demonstrated. Steps that are only verbalized WILL NOT COUNT.

### **Skill Test Recording Form**

The RN test observer will provide a recording form similar to the one displayed on the next page if your skill test includes a skill task that requires recording a count or measurement. You will be required to sign the recording form during the equipment and supplies demonstration.

# RECORDING FORM ───

| Candidate's Name:   | PLEASE PRINT       |
|---------------------|--------------------|
| PULSE:              | RESPIRATIONS:      |
| URINARY OUTPUT: _   | ml                 |
| GLASS 240ml:        |                    |
| GLASS 120ml:        | _                  |
| TOTAL FLUID INTAKE: | mi   FOOD INTAKE:9 |

### **Skill Test Tasks**

You will be assigned one of the following mandatory tasks as your first task:

- Bedpan and Output with Hand Washing
- Catheter Care for a Female with Hand Washing [DEMONSTRATED ON A MANIKIN]
- Donning an Isolation Gown and Gloves, Emptying a Urinary Drainage Bag with Hand Washing
- Perineal Care for a Female with Hand Washing [DEMONSTRATED ON A MANIKIN]

**Please note:** Hand washing with soap and water is embedded in each of the mandatory tasks and must be demonstrated at the end of each mandatory task.

You will also receive an additional two or three randomly selected tasks from the Skill Task listing below. These selected tasks will make up your personalized and unique skill test. Each skill test randomly assigned by the TMU© skill test assignment algorithm will be comparable in overall difficulty. That is why some skill tests will have a differing number of tasks.

### **Skill Tasks Listing**

Every step must be performed and demonstrated during your skill test demonstration to receive credit.

The steps listed for each task are the requirements for a nurse aide candidate to successfully demonstrate the minimum proficiency of the skill task for the RN Test Observer. The steps will be performed on a live resident actor for all tasks, except for two tasks: catheter care and perineal care for a female, which will be demonstrated on a manikin.

You will be scored only on the steps listed. You must achieve a score of 80% on each task, without missing any key steps (the Bolded steps), to pass the skill component of your competency evaluation.

If you fail the Skill Test, one of the tasks on your retest will be a task you previously failed. There will always be one of the four mandatory tasks to start each Skill Test. The other tasks included in your Skill Test are randomly chosen so that every Skill Test is comparable in difficulty and average time to complete.

The RN Test Observer will observe your demonstrations of the skill tasks and record what they observe you doing. D&SDT-HEADMASTER scoring teams will officially score and double-check your test.

**NOTE:** The skill task steps outlined in this handbook are provided as guidelines to help prepare candidates for the Arkansas Nurse Aide Skill Test. These steps are not intended to serve as an all-inclusive guide to best care practices in a real-world work setting.

# Ambulate a Resident from their Bed to a Wheelchair using a Gait Belt

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Must verbally acknowledge that this is a one-person transfer, as per the resident's care plan. (Note: RN Test Observer will acknowledge by replying 'yes'.)
- 3) Explain the procedure to the resident.
- 4) Obtain a gait belt for the resident.
- 5) Lock bed brakes to ensure the resident's safety.
- 6) Adjust the bed height to ensure the resident's feet are flat on the floor.
- 7) Bring the resident to a sitting position with the resident's feet flat on the floor.
- 8) Properly place the gait belt around the resident's waist to stabilize the trunk.
- 9) Tighten gait belt. Check the gait belt for tightness by slipping fingers between the gait belt and the resident.
- 10) Assist the resident in putting on non-skid footwear BEFORE standing.
- 11) Bring the resident to a standing position using proper body mechanics at all times.
- 12) Grasp the gait belt.
- 13) Stabilize the resident.
- 14) Ambulate the resident at least 10 steps to the wheelchair.
- 15) Lock wheelchair brakes to ensure the resident's safety.
- 16) Assist the resident to pivot/turn and sit in a wheelchair.
- 17) Sit the resident in the wheelchair in a controlled manner that ensures safety at all times.
- 18) Remove gait belt.
- 19) Place the resident within easy reach of the call light or signaling device.
- 20) Maintain respectful, courteous interpersonal interactions at all times.
- 21) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Ambulate a Resident from a Wheelchair to their Bed using a Gait Belt

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- **2)** Must verbally acknowledge that this is a one-person transfer, as per the resident's care plan. (Note: RN Test Observer will acknowledge by replying 'yes'.)
- 3) Explain the procedure to the resident.
- 4) Obtain a gait belt for the resident.
- 5) Lock bed brakes to ensure the resident's safety.
- 6) Adjust the bed height to ensure the resident's feet are flat on the floor.
- 7) Lock wheelchair brakes to ensure the resident's safety.
- 8) Properly place the gait belt around the resident's waist to stabilize the trunk.

- 9) Tighten gait belt. Check the gait belt for tightness by slipping fingers between the gait belt and the resident.
- 10) Grasp the gait belt with both hands.
- 11) Bring the resident to a standing position using proper body mechanics at all times.
- 12) Continue grasping the gait belt.
- 13) Stabilize the resident.
- 14) Ambulate the resident at least 10 steps to the bed.
- 15) Assist the resident in pivoting and turning to sit on the bed.
- 16) Sit the resident on the bed in a controlled manner that ensures safety at all times.
- 17) Remove gait belt.
- 18) Remove the resident's non-skid footwear.
- 19) Assist the resident to lie down in the center of the bed, making sure the resident is comfortable and in good body alignment.
- 20) Lower the bed.
- 21) Place the call light or signaling device within easy reach of the resident.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 23) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Bed Bath (partial): Whole Face and One Arm, Hand and Underarm

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to the resident.
- 3) Provide for privacy.
- 4) Fill a basin with warm water.
- 5) Raise bed height.
- 6) Cover the resident with a bath blanket.
- 7) Fan-fold bed linens at least down to the waist or move linens to the opposite side.
- 8) Remove the resident's gown without exposing the resident.
- 9) Place gown in designated laundry hamper.
- 10) Wash face WITHOUT SOAP.
- 11) Pat dry face.
- 12) Place a towel under the arm, only exposing one arm.
- 13) Wash arm, hand and underarm using soap and water.
- 14) Rinse arm, hand, and underarm.
- 15) Pat dry arm, hand, and underarm.
- 16) Assist the resident to put on a clean gown.
- 17) Empty, rinse, dry, and return to storage.
- 18) Place soiled linen in a designated laundry hamper.

- 19) Lower bed.
- 20) Place the call light or signaling device within easy reach of the resident.
- 21) Maintain respectful, courteous interpersonal interactions at all times.
- 22) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Assist a Resident with a Bedpan, Measure and Record Output with Hand Washing

(One of the possible mandatory first tasks)

- 1) Knock on the door.
- 2) Introduce yourself to the resident.
- 3) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 4) Explain the procedure to the resident.
- 5) Provide for privacy.
- 6) Put on gloves.
- 7) Position the resident on the bedpan correctly (pan not upside down, is centered, etc.) using proper body mechanics.
- 8) Raise the head of the bed to a comfortable level.
- 9) Leave the call light or signaling device and tissue within reach of the resident.
- 10) Step away to an area of the room away from the resident.
- 11) When the RN Test Observer indicates, the candidate returns.
- 12) Provide/assist the resident with hand hygiene. (Candidate may use or hand the resident a disposable wipe to clean their hands —or- wash/assist the resident to wash their hands with a wet washcloth —or-may use or put hand sanitizer on the resident's hands making sure to cover all surfaces of the resident's hands and rubbing or having the resident rub the sanitizer in until dry.)
- 13) Ensure the resident's hands are dry. (If candidate used or handed a wet washcloth to the resident to wash their hands, they will need to dry or hand the resident a dry towel/washcloth to dry their hands. If hand sanitizer or a disposable wipe was used, make sure the hands are dry.)
- 14) Place soiled linen in a designated laundry hamper. If a disposable wipe was used, discard it in the trash container.
- 15) Gently remove the bedpan or fracture pan and hold it while the RN Test Observer pours an unknown quantity of fluid into the bedpan or fracture pan.
- 16) Place the graduate on a level, flat surface.
- 17) With the graduate at eye level, read the output.
- 18) Empty the equipment into the designated toilet.
- 19) Rinse equipment used (bedpan/fracture pan and graduate) and empty rinse water into the designated toilet.
- 20) Return equipment to storage.
- 21) Remove gloves, turning them inside out, and dispose of them in an appropriate container.
- 22) Record output on the provided, previously signed recording form.
- 23) The candidate's recorded output is within 25mls of the RN Test Observer's recorded output.
- 24) Place the call light or signaling device within easy reach of the resident.
- 25) Maintain respectful, courteous interpersonal interactions at all times.

- 26) Wash hands: Begin by wetting hands.
- 27) Apply soap to hands.
- 28) Rub hands together using friction for at least 20 seconds with soap.
- 29) Interlace fingers pointing downward with soap.
- 30) Wash all surfaces of hands and wrists with soap.
- 31) Rinse hands thoroughly under running water with fingers pointed downward.
- 32) Dry hands with clean paper towel(s).
- 33)Turn off the faucet using a clean, dry paper towel (or use a knee or foot control to turn off the faucet, or remove your hands from under the water sensor).
- 34) Discard paper towels into the trash container as used.
- 35) Do not re-contaminate your hands by touching the faucet or sink at any time during or after the hand washing procedure.

# Catheter Care for a Female Resident with Hand Washing

(One of the possible mandatory first tasks) [DEMONSTRATED ON A MANIKIN]

- 1) Knock on the door.
- 2) Introduce yourself to the resident.
- 3) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 4) Explain the procedure to the resident.
- 5) Provide for privacy.
- 6) Fill basin with warm water.
- 7) Put on gloves.
- 8) Avoid overexposure throughout the procedure.
- 9) Check to see that urine can flow, unrestricted, into the drainage bag (helpful to verbalize checking while looking for kinks in tubing, etc.).
- 10) Use soap and water to carefully wash around the catheter where it exits the urethra.
- 11) Hold the catheter where it exits the urethra with one hand.
- 12) While holding the catheter where it exits the urethra, clean 3-4 inches down the catheter tube.
- 13) Clean with strokes only away from the urethra. (At least two strokes.)
- 14) Use a clean portion of the washcloth for each stroke.
- 15) Rinse using strokes only away from the urethra.
- 16) Rinse using a clean portion of the washcloth for each stroke.
- 17) Pat dry.
- 18) Do not allow the tube to be pulled at any time during the procedure.
- 19) Replace the resident's gown over the perineal area.
- 20) Replace the top cover over the resident.
- 21) Leave the resident in a position of safety and comfort.
- 22) Empty, rinse, dry, and return basin to storage.
- 23) Remove gloves, turning them inside out, and dispose of them in an appropriate container.
- 24) Place the call light or signaling device within easy reach of the resident.
- 25) Maintain respectful, courteous interpersonal interactions at all times.
- 26) Wash hands: Begin by wetting hands.
- 27) Apply soap to hands.
- 28) Rub hands together using friction for at least 20 seconds with soap.

- 29) Interlace fingers pointing downward with soap.
- 30) Wash all surfaces of hands and wrists with soap.
- 31) Rinse hands thoroughly under running water with fingers pointed downward.
- 32) Dry hands with clean paper towel(s).
- 33) Turn off the faucet using a clean, dry paper towel (or use a knee or foot control to turn off the faucet, or remove your hands from under the water sensor).
- 34) Discard paper towels into the trash container as used.
- 35) Do not re-contaminate your hands by touching the faucet or sink at any time during or after the hand washing procedure.

# **Denture Care – Upper or Lower Denture**

### [ONLY ONE PLATE IS USED FOR TESTING]

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to the resident.
- 3) Line the bottom of the sink with a protective lining that would help prevent damage to the dentures. (Towel, washcloth, or paper towels are allowed for lining.)
- 4) Put on gloves.
- 5) Apply denture cleanser.
- 6) Remove the denture from the cup.
- 7) Handle the denture carefully to avoid damage.
- 8) Handle the denture carefully to avoid contamination.
- 9) Rinse denture cup.
- 10) Thoroughly brush denture, including the inner, outer, and chewing surfaces of upper and lower **dentures**. (Only one plate is used during testing.)
- 11) Rinse denture using clean, cool water.
- 12) Place denture in rinsed denture cup.
- 13) Add cool, clean water to the denture cup.
- 14) Rinse equipment.
  - a. Denture brush or toothbrush.
- 15) Return equipment to storage.
- 16) Discard protective lining in an appropriate container.
- 17) Remove gloves, turning them inside out, and dispose of them in an appropriate container.
- 18) Place the call light or signaling device within easy reach of the resident.
- 19) Maintain respectful, courteous interpersonal interactions at all times.
- 20) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Donn [Put On] an Isolation Gown and Gloves, Empty a Urinary Drainage Bag, Measure and Record Output, Doff [Remove] the Gown and Gloves with Hand Washing

(One of the possible mandatory first tasks)

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Face the back opening of the gown.
- 3) Unfold the gown.
- 4) Place arms through each sleeve.
- 5) Secure the neck opening.
- 6) Secure the waist, making sure that the back flaps cover the clothing as completely as possible.
- 7) Put on gloves.
- 8) Gloves overlap sleeves at the wrist.
- 9) Knock on the door.
- 10) Introduce yourself to the resident.
- 11) Explain the procedure to the resident.
- 12) Place a barrier on the floor under the drainage bag.
- 13) Place the graduate on the previously placed barrier.
- 14) Open the drain to allow the urine to flow into the graduate.
- 15) Avoid touching the graduate with the tip of the tubing.
- 16) Close the drain.
- 17) Wipe the drain with an alcohol wipe AFTER emptying the drainage bag.
- 18) Replace the drain in the holder.
- 19) Place the graduate on a level, flat surface.
- 20) With the graduate at eye level, read the output.
- 21) Empty graduate into the designated toilet.
- 22) Rinse the graduate and empty rinse water into the designated toilet.
- 23) Return the graduate to storage.
- 24) Leave the resident in a position of comfort and safety.
- 25) Record output on the provided, previously signed recording form.

# 26) The candidate's recorded output reading is within 25mls of the RN Test Observer's recorded output reading.

- 27) Place the call light or signaling device within easy reach of the resident.
- 28) Maintain respectful, courteous interpersonal interactions at all times.
- 29) Remove gloves, turning them inside out.
- 30) Remove gloves BEFORE removing gown.
- 31) Dispose of the gloves in the appropriate container.
- 32) Unfasten gown at the neck.
- 33) Unfasten gown at the waist.
- 34) Remove the gown by folding the soiled area over the soiled area.
- 35) Dispose of the gown in the appropriate container.
- 36) Wash hands: Begin by wetting hands.
- 37) Apply soap to hands.
- 38) Rub hands together using friction for at least 20 seconds with soap.

- 39) Interlace fingers pointing downward with soap.
- 40) Wash all surfaces of hands and wrists with soap.
- 41) Rinse hands thoroughly under running water with fingers pointed downward.
- 42) Dry hands with clean paper towel(s).
- 43) Turn off the faucet using a clean, dry paper towel (or use a knee or foot control to turn off the faucet, or remove your hands from under the water sensor).
- 44) Discard paper towels into the trash container as used.
- 36) Do not re-contaminate your hands by touching the faucet or sink at any time during or after the hand washing procedure.

# **Dressing a Bedridden Resident**

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to the resident.
- 3) Provide for privacy.
- 4) Raise bed height.
- 5) Keep the resident covered while removing the gown.
- 6) Remove gown from unaffected side first.
- 7) Place the used gown in a designated laundry hamper.
- 8) When dressing the resident in a button-up shirt, insert your hand through the sleeve of the shirt and grasp the resident's hand.
- 9) When dressing the resident in a button-up shirt, always dress from the affected (weak) side first.
- 10) Assist the resident to raise their buttocks or turn the resident from side to side and draw the pants over the buttocks and up to the resident's waist.
- 11) When dressing the resident in pants, always dress from the affected (weak) side first.
- 12) When putting on the resident's socks, draw the socks up the resident's foot until they are smooth.
- 13) Leave the resident comfortably/properly dressed and in a position of safety.
- 14) Lower the bed.
- 15) Place the call light or signaling device within easy reach of the resident.
- 16) Maintain respectful, courteous interpersonal interactions at all times.
- 17) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Feeding a Dependent Resident

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to the resident.
- 3) Ask the resident to state their name and verify that the name matches the name on the diet card.
- 4) Protect clothing from soiling by using a napkin, clothing protector, or towel.
- 5) Provide hand hygiene for the resident <u>BEFORE</u> feeding. (Candidates may use a disposable wipe to clean the resident's hands, wash the resident's hands with a wet washcloth, or apply hand sanitizer to the resident's hands, covering all surfaces and rubbing the sanitizer in until dry.)

- 6) Ensure the resident's hands are dry <u>BEFORE</u> feeding. (If the candidate uses a wet washcloth to wash the resident's hands, they will need to dry the resident's hands. If hand sanitizer or a disposable wipe was used, make sure the hands are dry.)
- 7) Position yourself at eye level, facing the resident, while feeding them.
- 8) Describe the food being offered to the resident.
- 9) Offer each fluid frequently from each glass.
- 10) Offer food in small amounts at a reasonable rate, allowing the resident to chew and swallow.
- 11) Wipe the resident's face during a meal at least once.
  - a. The actor will say, "I'm full" before all the solid food and fluids have been consumed.
- 12) Leave the resident clean.
  - a. Remove the clothing protector.
- 13) Record intake in a percentage of total solid food eaten on the provided, previously signed recording
- 14) The candidate's recorded food intake is within 25 percentage points of the RN Test Observer's recorded food intake.
- 15) Record the intake of the sum total fluid consumed in ml on the provided, previously signed recording
- 16) The candidate's recorded total fluid intake is within 60ml of the RN Test Observer's recorded fluid intake.
- 17) Place the call light or signaling device within easy reach of the resident.
- 18) Maintain respectful, courteous interpersonal interactions at all times.
- 19) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Foot Care - One Foot

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to the resident.
- 3) Fill basin with warm water.
- 4) Remove the resident's sock from the (left/right) foot. (The scenario read to you will specify left or right.)
- 5) Immerse the resident's foot in warm water.
  - a. You may verbalize the 5 to 20 minutes soaking time after you begin soaking the foot.
  - b. Once the 5 to 20 minutes soaking time is verbalized, the RN Test Observer will acknowledge the stated time and say, "You may continue with your demonstration now."
- 6) Use water and a soapy washcloth.
- 7) Wash entire foot.
- 8) Wash between toes.
- 9) Rinse entire foot.
- 10) Rinse between toes.
- 11) Dry foot thoroughly.
- 12) Dry thoroughly between toes.
- 13) Warm lotion by rubbing it between your hands.
- 14) Massage lotion over entire foot.

- 15) Avoid getting lotion between the toes.
- 16) If there is any excess lotion, wipe it with a towel.
- 17) Replace the sock on the resident's foot.
- 18) Empty, rinse, dry, and return basin to storage.
- 19) Place dirty linen in a designated laundry hamper.
- 20) Leave the resident in a position of safety in proper body alignment in the chair.
- 21) Place the call light or signaling device within easy reach of the resident.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 23) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Making an Occupied Bed

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to the resident.
- 3) Gather linen.
- 4) Transport linen away from the body.
- 5) Place linen on a clean surface. (May place linen on the overbed table, chair, or bedside stand.)
- 6) Provide for privacy.
- 7) Raise bed height.
- 8) Resident is to remain covered at all times.
- 9) Assist the resident to roll onto their side.
- 10) Roll or fan-fold soiled linen, soiled side inside, to the center of the bed.
- 11) Place a clean bottom sheet on the mattress.
- 12) Secure two fitted corners.
- 13) Roll or fan-fold clean linen against the resident's back.
- 14) Assist the resident to safely roll over the bottom linen.
- 15) Remove soiled linen without shaking.
- 16) Avoid touching the linen to your uniform.
- 17) Place soiled linen in a designated laundry hamper.
- 18) Pull through and smooth out the clean bottom linen.
- 19) Secure the other two fitted corners.
- 20) Place clean top linen and blanket or bedspread over the covered resident.
- 21) Remove used linen, keeping the resident unexposed at all times.
- 22) Tuck in clean top linen at the foot of the bed, leaving room for the feet to move.
- 23) Tuck a clean blanket or bedspread at the foot of the bed, leaving room for the feet to move.
- 24) Apply a clean pillow case.
- 25) Gently lift the resident's head while replacing the pillow.
- 26) Lower bed.
- 27) Return the side rails to a lowered position, if they were used.

- 28) Place the call light or signaling device within easy reach of the resident.
- 29) Maintain respectful, courteous interpersonal interactions at all times.
- 30) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Mouth Care—Brushing a Resident's Teeth

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to the resident.
- 3) Provide for privacy.
- 4) Put on gloves only AFTER supplies have been gathered.
- 5) Drape the resident's chest with a towel (cloth or paper) to prevent soiling.
- 6) Wet toothbrush.
- 7) Apply toothpaste to the toothbrush.
- 8) Brush the resident's teeth, including the inner, outer, and chewing surfaces of all upper and lower teeth.
- 9) Clean tongue.
- 10) Assist resident in rinsing mouth.
- 11) Wipe the resident's mouth.
- 12) Remove soiled chest barrier.
- 13) Place soiled chest barrier (cloth or paper) in the appropriate container.
- 14) Empty, rinse, and dry the emesis basin.
- 15) Rinse the toothbrush.
- 16) Return equipment to storage.
- 17) Remove gloves, turning them inside out, and dispose of them in an appropriate container.
- 18) Leave the resident in a position of comfort.
- 19) Place the call light or signaling device within easy reach of the resident.
- 20) Maintain respectful, courteous interpersonal interactions at all times.
- 21) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Nail Care - One Hand

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to the resident.
- 3) Fill basin with warm water.
- 4) Immerse the resident's left/right hand nails in warm water. (The scenario read to you will specify left or right.)

- 5) Verbalize to soak the nails for at least five (5) minutes.
  - a. You may verbalize the at least 5 minutes soaking time after you begin soaking the nails.
  - b. Once the at least 5 minutes soaking time is verbalized, the RN Test Observer will acknowledge the stated time and say, "You may continue with your demonstration now."
- 6) Dry the resident's hand thoroughly.
- 7) Specifically dry between the fingers.
- 8) Gently clean under the resident's nails with an orange stick.
- 9) Gently push cuticles back with a towel or washcloth.
- 10) File each fingernail.
- 11) Empty, rinse, and dry basin.
- 12) Return equipment to storage.
- 13) Place soiled linen in a designated laundry hamper.
- 14) Place the call light or signaling device within easy reach of the resident.
- 15) Maintain respectful, courteous interpersonal interactions at all times.
- 16) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Perineal Care for a Female Resident with Hand Washing

(One of the possible mandatory first tasks) [DEMONSTRATED ON A MANIKIN]

- 1) Knock on the door.
- 2) Introduce yourself to the resident.
- 3) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 4) Explain the procedure to the resident.
- 5) Provide for privacy.
- 6) Raise the bed height.
- 7) Fill basin with warm water.
- 8) Put on gloves.
- 9) Direct the RN Test Observer to stand on the opposite side of the bed or raise the side rail on the opposite side of the bed to provide for safety.
  - a. RN Test Observer does not move into position unless directed to do so by the candidate.
- 10) Turn resident or raise hips and place barrier under buttocks. (Candidate will choose a barrier such as a towel, waterproof pad, chux, etc.)
- 11) Expose the perineum only.
- 12) Separate labia. The candidate must also verbalize the separation.
- 13) Use water and a soapy washcloth to clean the front side.
- 14) Clean one side of the labia from top to bottom.
- 15) Using a clean portion of a washcloth, clean the other side of the labia from top to bottom.
- 16) Using a clean portion of a washcloth, clean the vaginal area from top to bottom.
- 17) Use water and a clean washcloth to rinse the front side.
- 18) Rinse one side of the labia from top to bottom.
- 19) Using a clean portion of a washcloth, rinse the other side of the labia from top to bottom.
- 20) Using a clean portion of a washcloth, rinse the vaginal area from top to bottom.
- 21) Pat the front side dry.

- 22) Covers the exposed area with the bath blanket.
- 23) Assist the resident to turn onto their side away from the candidate.
  - a. RN Test Observer may help hold the manikin on their side ONLY after the candidate has turned the manikin.
- 24) Use water and a clean, soapy washcloth to clean the backside.
- 25) Clean from the vagina to the rectal area.
- 26) Use a clean portion of the washcloth to clean from the vagina to the rectal area with any stroke.
- 27) Use water and a clean washcloth to rinse the backside.
- 28) Rinse the rectal area from the vagina to the rectal area.
- 29) Uses a clean portion of a washcloth to rinse from the vagina to the rectal area with any stroke.
- 30) Pat the backside dry.
- 31) Safely remove the barrier from under the buttocks.
- 32) Position the resident (manikin) on its back.
- 33) Place soiled linen in a designated laundry hamper.
- 34) Empty, rinse, dry, and return equipment to storage.
- 35) Remove gloves, turning them inside out, and dispose of them in an appropriate container.
- 36) Lower bed.
- 37) Place the call light or signaling device and water within easy reach of the resident.
- 38) Maintain respectful, courteous interpersonal interactions at all times.
- 39) Wash hands: Begin by wetting hands.
- 40) Apply soap to hands.
- 41) Rub hands together using friction for at least 20 seconds with soap.
- 42) Interlace fingers pointing downward with soap.
- 43) Wash all surfaces of hands and wrists with soap.
- 44) Rinse hands thoroughly under running water with fingers pointed downward.
- 45) Dry hands with clean paper towel(s).
- 46) Turn off the faucet using a clean, dry paper towel (or use a knee or foot control to turn off the faucet, or remove your hands from under the water sensor).
- 47) Discard paper towels into the trash container as used.
- 48) Do not re-contaminate your hands by touching the faucet or sink at any time during or after the hand washing procedure.

# Pivot-Transfer a Weight-Bearing, Non-Ambulatory Resident from their Bed to a Wheelchair using a Gait Belt

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- **2)** Must verbally acknowledge that this is a one-person transfer, as per the resident's care plan. (Note: RN Test Observer will acknowledge by replying 'yes'.)
- 3) Explain the procedure to the resident.
- 4) Obtain a gait belt.
- 5) Lock bed brakes to ensure the resident's safety.
- 6) Assist the resident in putting on non-skid footwear.
- 7) Adjust the bed height to ensure the resident's feet are flat on the floor.
- 8) Assist the resident to a sitting position.

- 9) Position the wheelchair at the foot or head of the bed with the wheelchair arm/wheel touching the side of the bed.
- 10) Lock wheelchair brakes to ensure the resident's safety.
- 11) Properly place the gait belt around the resident's waist to stabilize the trunk.
- 12) Tighten the gait belt. Check the gait belt for tightness by slipping fingers between the gait belt and the resident.
- 13) Grasp the gait belt with both hands.
- 14) Bring the resident to a standing position using proper body mechanics.
- 15) Assist the resident to pivot and sit in the wheelchair in a controlled manner that ensures safety.
- 16) Remove gait belt.
- 17) Place the resident within easy reach of the call light or signaling device.
- 18) Maintain respectful, courteous interpersonal interactions at all times.
- 19) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Pivot-Transfer a Weight-Bearing, Non-Ambulatory Resident from a Wheelchair to their Bed using a Gait Belt

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Must verbally acknowledge that this is a one-person transfer, as per the resident's care plan. (Note: RN Test Observer will acknowledge by replying 'yes'.)
- 3) Explain the procedure to the resident.
- 4) Obtain a gait belt.
- 5) Lock bed brakes to ensure the resident's safety.
- 6) Adjust the bed height to ensure the resident's feet are flat on the floor.
- 7) Position the wheelchair at the foot or head of the bed with the wheelchair arm/wheel touching the side of the bed.
- 8) Lock wheelchair brakes to ensure the resident's safety.
- 9) Properly place the gait belt around the resident's waist to stabilize the trunk.
- 10) Tighten gait belt. Check the gait belt for tightness by slipping fingers between the gait belt and the resident.
- 11) Ensure the resident's feet are flat on the floor.
- 12) Grasp the gait belt with both hands.
- 13) Bring the resident to a standing position using proper body mechanics.
- 14) Assist the resident in pivoting and sitting on the bed in a controlled manner that ensures safety.
- 15) Remove gait belt.
- 16) Remove non-skid footwear.
- 17) Assist the resident to lie down in the center of the bed.
- 18) Make sure the resident is comfortable and in good body alignment.

- 19) Lower bed.
- 20) Place the call light or signaling device within easy reach of the resident.
- 21) Maintain respectful, courteous interpersonal interactions at all times.
- 22) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Position a Resident on their Side in Bed

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to the resident.
- 3) Provide for privacy.
- 4) Position the bed flat.
- 5) Raise bed height.
- 6) Direct the RN Test Observer to stand on the side of the bed opposite the working side of the bed, or raise the side rail on the side of the bed opposite the working side of the bed to provide for safety.
- 7) From the working side of the bed, move the upper body, hips, and legs toward yourself to provide room on the bed that will be used to safely turn the resident onto their side.
- 8) Assist/turn the resident onto their side. (Side will be read to the candidate by the RN Test Observer.)
- 9) Ensure that the resident's face never becomes obstructed by the pillow.
- 10) Check to be sure that the resident is not lying on their downside arm.
- 11) Ensure the resident is in correct body alignment.
- 12) Place support devices such as pillows, wedges, blankets, etc., to maintain correct body alignment and protect bony prominences- under the resident's head, the upper arm, behind the back, and between the knees.
- 13) Leave the resident in a position of comfort and safety.
- 14) Lower bed.
- 15) Place the call light or signaling device within easy reach of the resident.
- 16) Maintain respectful, courteous interpersonal interactions at all times.
- 17) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Range of Motion for Hip and Knee

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to the resident.
- 3) Raise bed height.
- 4) Provide for privacy.
- 5) Position the resident supine (bed flat).
- 6) Position the resident in good body alignment.
- 7) Place one hand under the resident's knee.
- 8) Place the other hand under the resident's ankle.

- a. abduction
- 10) Move the entire leg back toward the body.
  - a. adduction
- 11) Complete abduction and adduction of the hip at least three times.
- 12) Continue to support the joints correctly by placing one hand under the resident's knee and the other hand under the resident's ankle.
- 13) Bend the resident's knee and hip toward the resident's trunk.
  - a. flexion of the hip and knee at the same time

9) ROM for hip: Move the entire leg away from the body.

- 14) Straighten the resident's knee and hip.
  - a. extension of the knee and hip at the same time
- 15) Complete flexion and extension of the knee and hip at least three times.
- 16) Do not force any joint beyond the point of free movement.
- 17) The candidate <u>must ask</u> at least once during the ROM exercise if there is any discomfort or pain.
- 18) Leave the resident in a comfortable position.
- 19) Lower bed.
- 20) Place the call light or signaling device within easy reach of the resident.
- 21) Maintain respectful, courteous interpersonal interactions at all times.
- 22) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Range of Motion for One Shoulder

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to the resident.
- 3) Provide for privacy.
- 4) Raise bed height.
- 5) Position the resident supine (bed flat).
- 6) Position the resident in good body alignment.
- 7) Place one hand under the resident's elbow.
- 8) Place the other hand under the resident's wrist.
- 9) Raise the resident's arm up and over the resident's head.
  - a. flexion
- 10) Bring the resident's arm back down to the resident's side.
  - a. extension
- 11) Complete flexion and extension of the shoulder at least three times.
- 12) Continue to support the joints correctly by placing one hand under the resident's elbow and one hand under the resident's wrist.
- 13) Move the resident's entire arm out away from the body.
  - a. abduction
- 14) Return the resident's arm to the resident's side.
  - a. adduction
- 15) Complete abduction and adduction of the shoulder at least three times.
- 16) Do not force any joint beyond the point of free movement.

# 17) The candidate <u>must ask</u> at least once during the ROM exercise if there is any discomfort or pain.

- 18) Leave the resident in a comfortable position.
- 19) Lower bed.
- 20) Place the call light or signaling device within easy reach of the resident.
- 21) Maintain respectful, courteous interpersonal interactions at all times.
- 22) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

# Vital Signs – Count and Record the Resident's Radial Pulse and Respirations

- 1) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to the resident.
- 3) Locate the radial pulse by placing the tips of fingers on the thumb side of the resident's wrist.
- 4) Count the pulse for 60 seconds or 30x2.
  - a. Tell the RN Test Observer when you start counting and tell them when you stop counting.
- 5) Record pulse rate on the provided, previously signed recording form.
- 6) The candidate's recorded pulse rate is within four (4) beats of the RN Test Observer's recorded pulse rate.
- 7) Count the respirations for 60 seconds or 30x2.
  - a. Tell the RN Test Observer when you start counting and tell them when you stop counting.
- 8) Record respirations on the provided, previously signed recording form.
- 9) The candidate's recorded respiratory rate is within two (2) breaths of the RN Test Observer's recorded respiratory rate.
- 10) Place the call light or signaling device within easy reach of the resident.
- 11) Maintain respectful, courteous interpersonal interactions at all times.
- 12) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub hands together until hands are completely dry.

**Knowledge Exam Vocabulary List** 

| abandonment          |  |
|----------------------|--|
| abdominal thrust     |  |
| abductor wedge       |  |
| abnormal vital signs |  |
| abuse                |  |
| accidents            |  |
| accountable          |  |
| activities           |  |
| acute                |  |
| adaptive devices     |  |
| adduction            |  |
| ADL                  |  |

| admitting resident    |
|-----------------------|
| advance directives    |
| affected side         |
| aging process         |
| agitation             |
| AIDS                  |
| Alzheimer's           |
| ambulation            |
| angina                |
| anti-embolism/elastic |
| stocking/TED hose     |
| antibiotics           |
|                       |

| aphasia              |
|----------------------|
| apical               |
| apnea                |
| appropriate response |
| arthritis            |
| aspiration           |
| assault              |
| assistive device     |
| attitudes            |
| axillary temperature |
| back strain          |
| bacteria             |
|                      |

| basic needs            |
|------------------------|
| bathing                |
| bed height             |
| bed rails              |
| bedrest                |
| behavioral care plan   |
| beliefs                |
| biohazard              |
| bleeding               |
| blindness              |
| blood pressure         |
| body defense           |
| body fluid             |
| body language          |
| body mechanics         |
| body temperature       |
| bone loss              |
| bowel program          |
| breathing              |
| brittle bones          |
| burnout                |
| call light             |
| cancer                 |
| cane                   |
| cardiac arrest         |
| care impaired          |
| care plan              |
| cast                   |
| cataract               |
| catheter care          |
| cc's in an ounce       |
| central nervous system |
| chain of command       |
| charge nurse           |
| chemotherapy           |
| choking                |
| chronic                |
| circulatory system     |
| cleaning               |
| clear liquid diet      |
| clergy                 |
| cognitively impaired   |
| colostomy              |
| coma                   |
| combative resident     |
|                        |

| communication             |
|---------------------------|
| conduct                   |
| confidentiality           |
| conflict resolution       |
| confused resident         |
| congestive heart failure  |
| constipation              |
| contact isolation         |
| contamination             |
| contracture               |
| converting measures       |
| COPD                      |
| coughing excessively      |
| cross contamination       |
| cultural                  |
| CVA                       |
| cyanotic                  |
| dangling                  |
| de-escalation             |
| death and dying           |
| decubitus ulcer           |
| dehydration               |
| delegation                |
| demanding resident        |
| dementia                  |
| dentures                  |
| depression                |
| development               |
| diabetes                  |
| diet                      |
| dilate                    |
| discharging resident      |
| disease process           |
| disinfection              |
| disoriented               |
| disposing of contaminated |
| materials                 |
| DNR                       |
| documentation             |
| dorsiflexion              |
| dressing                  |
| droplets                  |
| drowsy                    |
| dry skin                  |
| dying                     |
| чушв                      |

| dysphagia            |
|----------------------|
| edema                |
| elastic stockings    |
| elderly              |
| electrical equipment |
| elimination          |
| emergency procedures |
| emesis               |
| emesis basin         |
| emotional abuse      |
| emotional needs      |
| empathy              |
| emphysema            |
| epilepsy             |
| essential behaviors  |
| ethics               |
| eyeglasses           |
| falls                |
| fasting              |
| feces                |
| feeding              |
| fire safety          |
| fluid intake         |
| foot care            |
| fracture pan         |
| fraud                |
| frayed cord          |
| gait belt            |
| gastric feedings     |
| gastrostomy tube     |
| geriatrics           |
| gifts                |
| gloves               |
| grieving process     |
| group settings       |
| hair care            |
| hand care            |
| hand washing         |
| health-care team     |
| hearing aid          |
| hearing impaired     |
| Heimlich maneuver    |
| helping residents    |
| hemiplegia           |
| HIPAA                |
|                      |

| LIN/                                   |
|--|
| HIV                                    |
| holistic care                          |
| hormones                               |
| hospice                                |
| hyperglycemia                          |
| hypertension                           |
| 1&0                                    |
| impaired                               |
| in-house transfer                      |
| in-service programs                    |
| incontinence                           |
| indwelling catheter                    |
| infection control                      |
| infectious disease                     |
| initial observations                   |
| insomnia                               |
| insulin                                |
| intake                                 |
| intake and output                      |
| integumentary system                   |
| interpersonal skills                   |
| invasion of privacy                    |
| isolation                              |
| job description                        |
| job responsibility                     |
| life support                           |
| lift/draw sheet                        |
| linen                                  |
| living will                            |
| log roll                               |
| loose teeth                            |
|  |
| making occupied bed male perineal care |
| masturbation                           |
|  |
| measuring height                       |
| measuring temperature                  |
| mechanical lift                        |
| medical record                         |
| medications                            |
| mental health                          |
| mentally impaired                      |
| microbes                               |
| microorganism                          |
| military time                          |
| minerals                               |

| misappropriation mistakes mobility mouth care moving MSDS musculoskeletal nail care nasal cannula neglect non-contagious disease non-verbal communication NPO nursing assistant's role nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care |                       |
|--|-----------------------|
| mistakes mobility mouth care moving MSDS musculoskeletal nail care nasal cannula neglect non-contagious disease non-verbal communication NPO nursing assistant's role nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care                  | misannronriation      |
| mobility mouth care moving MSDS musculoskeletal nail care nasal cannula neglect non-contagious disease non-verbal communication NPO nursing assistant's role nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care                           |                       |
| mouth care moving MSDS musculoskeletal nail care nasal cannula neglect non-contagious disease non-verbal communication NPO nursing assistant's role nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care                                    |                       |
| moving MSDS musculoskeletal nail care nasal cannula neglect non-contagious disease non-verbal communication NPO nursing assistant's role nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   | •                     |
| musculoskeletal nail care nasal cannula neglect non-contagious disease non-verbal communication NPO nursing assistant's role nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   |                       |
| musculoskeletal nail care nasal cannula neglect non-contagious disease non-verbal communication NPO nursing assistant's role nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physician needs physician's authority plaque podiatrist positioning postmortem care  |                       |
| nail care nasal cannula neglect non-contagious disease non-verbal communication NPO nursing assistant's role nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physician needs physician's authority plaque podiatrist positioning postmortem care  |                       |
| nasal cannula neglect non-contagious disease non-verbal communication NPO nursing assistant's role nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal items personal items personal protective equipment personal values pet therapy phone etiquette physician suthority plaque podiatrist positioning postmortem care   |                       |
| neglect non-contagious disease non-verbal communication NPO nursing assistant's role nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   |                       |
| non-contagious disease non-verbal communication NPO nursing assistant's role nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   |                       |
| non-verbal communication NPO nursing assistant's role nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care  | -                     |
| nursing assistant's role nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physician's authority plaque podiatrist positioning postmortem care  |                       |
| nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physician's authority plaque podiatrist positioning postmortem care   |                       |
| nutrition objective data OBRA occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physician's authority plaque podiatrist positioning postmortem care   |                       |
| occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care  |                       |
| occupied bed ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care  |                       |
| ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   |                       |
| ombudsman oral hygiene oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   | occupied bed          |
| oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care  | ·                     |
| oral temperature osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care  | oral hygiene          |
| osteoporosis overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   |                       |
| overbed table oxygen palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care  | ·                     |
| palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   |                       |
| palliative care paralysis paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   | oxygen                |
| paranoia Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   |                       |
| Parkinson's pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care  | paralysis             |
| pathogen patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care  | paranoia              |
| patience perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   | Parkinson's           |
| perineal care personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care  | pathogen              |
| personal care personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care  | patience              |
| personal items personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care  | perineal care         |
| personal protective equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   | personal care         |
| equipment personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   | personal items        |
| personal values pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   | personal protective   |
| pet therapy phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   | equipment             |
| phone etiquette physical needs physician's authority plaque podiatrist positioning postmortem care   | personal values       |
| physical needs physician's authority plaque podiatrist positioning postmortem care   | pet therapy           |
| physician's authority plaque podiatrist positioning postmortem care  | phone etiquette       |
| plaque<br>podiatrist<br>positioning<br>postmortem care   | physical needs        |
| podiatrist positioning postmortem care   | physician's authority |
| positioning postmortem care  | plaque                |
| postmortem care  | podiatrist            |
|  | positioning           |
| PPE  | postmortem care       |
|  | PPE                   |

| precautions               |
|---------------------------|
| pressure ulcer            |
| preventing falls          |
| privacy                   |
| progressive               |
| pronation                 |
| prostate gland            |
| prosthesis                |
| psychological needs       |
| psychosocial              |
| pulse                     |
| pureed diet               |
| quadriplegia              |
| RACE (acronym)            |
| radial                    |
| range of motion           |
| reality orientation       |
| rectal                    |
| regulation                |
| rehabilitation            |
| reminiscence therapy      |
| reminiscing               |
| renewal                   |
| reporting                 |
| reposition                |
| resident abuse            |
| resident independence     |
| resident pictures         |
| resident rights           |
| resident trust            |
| Resident's Bill of Rights |
| resident's chart          |
| resident's environment    |
| resident's families       |
| residents                 |
| respectful treatment      |
| respiration               |
| respiratory               |
| responding to resident    |
| behavior                  |
| responsibility            |
| restorative care          |
| restraint                 |
| resuscitation             |
| role                      |
|                           |

| rotation            |
|---------------------|
| safety              |
| safety data sheets  |
| saliva              |
| sanitizer           |
| scabies             |
| scale               |
| seclusion           |
| secretions          |
| security            |
| seizure             |
| self-esteem         |
| semi fowlers        |
| sensory system      |
| sexual abuse        |
| sexual harassment   |
| sexual needs        |
| sharing information |
| Sharp's container   |
| shaving             |
| shearing            |
| side rails          |
| skin integrity      |
| smoking             |
| social needs        |
| social worker       |
|                     |

| soiled linen          |  |
|-----------------------|--|
| specimen              |  |
| spilled food          |  |
| stages of grief       |  |
| standard precautions  |  |
| stealing              |  |
| sterilization         |  |
| stethoscope           |  |
| stress                |  |
| stroke                |  |
| subjective data       |  |
| sundowning            |  |
| supine                |  |
| supplemental feedings |  |
| survey                |  |
| temperature           |  |
| terminal illness      |  |
| terminology           |  |
| thick fluid           |  |
| threatening resident  |  |
| tips                  |  |
| toenails              |  |
| transfer belt         |  |
| transfers             |  |
| transporting          |  |
| transporting food     |  |

| tub bath               |  |  |  |
|------------------------|--|--|--|
| twice daily            |  |  |  |
| tympanic temperature   |  |  |  |
| unaffected             |  |  |  |
| uniform                |  |  |  |
| unsteady               |  |  |  |
| urethral               |  |  |  |
| urinary catheter bag   |  |  |  |
| urinary/urinary system |  |  |  |
| UTI                    |  |  |  |
| vaginal drainage       |  |  |  |
| vision change          |  |  |  |
| vital signs            |  |  |  |
| vitamins               |  |  |  |
| vocabulary             |  |  |  |
| vomitus                |  |  |  |
| walker                 |  |  |  |
| wandering resident     |  |  |  |
| water                  |  |  |  |
| water faucets          |  |  |  |
| water temperature      |  |  |  |
| waterless hand soap    |  |  |  |
| weighing               |  |  |  |
| well-being             |  |  |  |
| wheelchair safety      |  |  |  |
| withdrawn resident     |  |  |  |
|                        |  |  |  |

| Notes: |  |  |
|--------|--|--|
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |
|        |  |  |