

Brief Summary of Direct Care Workforce Workgroup Activities (2005-2008)

The Direct Care Workforce Workgroup was established in early 2005. The Workgroup originally consisted of 29 members, in addition to 6 staff members from state government. The stakeholders were broadly representative of providers, consumers, workers and their advocates. Three subcommittees were formed, each with a specific purpose.¹

Training Subcommittee (18 members):

This subcommittee will address broad issues related to the education and training of direct care workers. These include: entry level training and preparation, quality of care and services, credentialing and certification, and career advancement. It will make recommendations on how to improve current training for workers and examine funding and other related systemic issues.

Systemic Subcommittee (23 members):

This subcommittee will address issues related to long term care system design, improving coordination among state agencies, and developing a more coordinated approach to service delivery. It will also focus on how to increase and structure funding so that direct care workers receive improved wages and benefits. Finally, the subcommittee will consider where there are legislative and regulatory barriers to improving direct care jobs and make recommendations for change.

Workplace Practice Subcommittee (31 members):

This subcommittee will address issues of workplace culture and practice. It will identify practices that improve retention, and worker's ability to provide quality services to consumers as well as examining how funding and quality assurance systems can help employers sustain them.

Each committee had a similar charge:

1. Clearly articulate the critical issues involved in each area.
2. Acquire the necessary data to accurately describe the issue and point out where additional data would help.
3. Describe what is currently being done in this area.
4. Describe nationwide exemplary practices.
5. Make recommendations for action.

Between April and October 2005 each subcommittee held multiple meetings and developed recommendations in their areas. The recommendations from each of subcommittees were reported to the full DCW workgroup in the fall of 2005. In December, the full DCW workgroup met again to gain consensus on a strategy for promoting the workgroup recommendations and to choose a subset of the recommendations for immediate action based on what was currently being done in each area (e.g., building on success of the training and workplace practice initiatives from the Pennsylvania *Better Jobs, Better Care* project).

¹ Several additional individuals were recruited for the subcommittees to broaden stakeholder involvement, and some Workgroup members served on multiple subcommittees.

The report of the DCW Workgroup identified five immediate initiatives to improve quality of direct care jobs and quality of care for long term care consumers:

1. Health Insurance Access
2. Rate-Setting and Reimbursement
3. System-Wide Procurement Standards
4. Training and Career Advancement
5. Commission of the Direct Care Workforce

The workgroup's draft recommendations were presented and approved by the Center for Health Careers on May 17th, 2006. A final version of the recommendations was prepared and presented to the State Workforce Investment Board on December 6, 2006. At that meeting, the Board unanimously approved the recommendations.

The five immediate initiatives were presented along with a broader set of strategic recommendations in the 2007 report, *"Addressing Pennsylvania's Direct Care Workforce Capacity: Primary Recommendations for Quality Jobs and Quality Care."*

Within that report, the training recommendations called for establishing a credentialing body to determine training standards and credentials for direct care workers as part of a new statewide competency-based system. In order to further specify the recommendations and keep them moving forward, the Department of Labor and Industry contracted with PHI to do the design work on the preliminary draft of the competency-based standards, and to assist with the implementation of the workgroup recommendations.

Draft system recommendations, including suggested core and advanced competencies, were delivered to the Department in March of 2007. The training subcommittee was reconvened for a meeting on May 1, 2007. Low turnout of the committee membership prevented a full discussion, so a second meeting was held on May 24, 2007. In the interim, the recommendations were also shared with the Center for Health Careers at their Leadership Council meeting on May 16th.

The training subcommittee was reconvened in November 2007 to consider a revised training and credentialing system for direct care workers, and to receive an overview of the core competencies (standards) and a model core curriculum developed by PHI as an example of a curriculum that taught the standards. This curriculum was based on a curriculum that was developed with wide stakeholder involvement through the *Better Jobs, Better Care* project.

The full DCW Workgroup met in January 2008. The core competency standards and model curriculum were shared with the DCW Workgroup, and the Workgroup voted to share the training and credentialing recommendations with the Leadership Council for further consideration in February 2008.

Implementation Strategies for the Direct Care Worker Report

A Direct Care Worker Committee Report to the Leadership Council

In December 2007, the Direct Care Worker Committee (DCW) finalized their report "Addressing Pennsylvania's Direct Care Workforce Capacity". Contained within that report (page 15) were recommendations dealing with "Training, Credentialing, and Career Advancement" which were assigned to the DCW subcommittee on training. The subcommittee has been working on those recommendations for several years and is now prepared to offer recommendations to the Leadership Council that provide direction for the future course of actions within state government that impact direct care workers. In addition, the DCW Committee is recommending certain actions on the part of state government to dramatically alter current practices, both in government structure, and providing credentials for direct care workers that better reflect their role and training.

The process utilized to develop these recommendations has been arduous and time consuming; however, as a result of the involvement of industry, education and trade organizations, we were able to develop outcomes that reflect the original visions inherent in the Governor's report on direct care workers. There were several general goals/concepts intrinsic in the work of the committee including the need to:

- upgrade the current nurse aide curriculum requirements which only necessitate 80 total hours of instruction;
- develop an entry level course that would meet the needs of several wavier programs and lead to the development of a career ladder. This course would be the same course that was used in the pilot programs during the last year. An OBRA compliant bridge course of 75 hours would provide for a ladder to complete the certified nurse aide course of at least 120 hours.
- consolidate programs dealing with nurse aide regulations into one government entity that could handle testing, program approval, registry requirements and over all coordination;
- introduce legislation that would encompass several of the recommended outcomes of the project;
- solve the nurse aide faculty shortage issue within the state which is projected to become more profound in the coming three years;
- develop competencies and scope of work documents that will guide the Department of Education in the development of a model curriculum that can be utilized by training providers; and
- to provide a new legal title for nurse aides.

The Training Subcommittee proceeded to meet with various government departments and incorporated representatives from the State Board of Nursing, Department of Health, Department of Education, Department of Aging, Department of Public Welfare and the Governor's Office of Health Care Reform into their committee and task force meetings. Recognizing the complexity of work for some of the subject matter, the DCW Committee also created two task forces; one to develop a scope of work for direct care workers, and the second to develop competencies that could be utilized in developing a new model curriculum by the Department of Education. These task forces completed their reports which are attached to this document. PCHC staff has been meeting with various government entities to collect information and data, used by the committee, to develop recommendations for this report. For example, staff has met with the Commissioner of Professional and Occupational Affairs to explore placement of direct care workers within an existing board or through the creation of a new board. During the process of developing these recommendations, the DCW Committee has encountered several obstacles. The first obstacle is the multiple of departments within which direct care worker initiatives are located, and the second obstacle is the lack of coordination between these programs. Deputy Secretary Fred Dedrick recently implemented an interdepartmental committee consisting of 6 departments, to begin addressing issues that transcend departments, thus beginning the process of opening communications and resolving issues that were (and still are to some extent) impacting the progress of the committee. This committee, in a short period of time, has addressed multiple issues and is moving to create changes for the improvement of the direct care worker initiative.

At previous meetings of the Leadership Council you have been provided with updates of certain activities in which the committee was involved. Included in the reports was the concept of developing two levels of direct care workers to create the beginning of a career ladder. Attachment A provides the model of three levels of training including personal care assistant/attendant, certified nurse aide/home health aide and specialized training according to the area within which the DCW will be working. From the outset of initial discussions on the direct care worker, the Direct Care Worker Committee intended that DCW's from long term care, home health care and acute care should all complete the same certification program, thus providing for lateral and upward mobility. This is inherent in attachment A. Legislation would have to incorporate these principles and the preparation of legislation should be implemented as soon as possible.

Much needs to be accomplished to incorporate these changes in government programs and the training and certification of nurse aides. To provide guidance to meet these goals the Direct Care Worker Committee now submits recommendations for the Leadership Council to consider that will guide our efforts in the coming months.

Direct Care Worker Committee Recommendations

The Direct Care Worker Committee recommends that the Center for Health Careers:

Consolidation of Government Services

- Support the consolidation of government programs dealing with nurse aides/home health aides into one unit that would provide for closer collaboration, coordination, and consolidation of programmatic activities. Programs to be included in this consolidation include:
 - certification of nurse aide training programs and related activities (currently within the Department of Education and the Department of Health);
 - programs related to testing of nurse aide candidates (currently within the Department of Aging); and
 - programs related to the maintenance of a nurse aide registry (currently within the Department of Health)
- Support the development and introduction of legislation to provide for the consolidation of nurse aide regulatory services within one administrative entity.
- Support direct care workers providing health care assistance within home health agencies, nursing homes, and acute care hospitals being regulated by one government entity and completing the same entry requirements for initial certification.
- Recognize that all recommendations and considerations set forth in this document are subject to change pending the placement of this project within one specific state agency. Such agency will have the authority and discretion to alter or amend all recommendations and considerations to fit the legal, fiscal, or administrative needs of the agency.

Training and Certification

- Approve the "Scope of Work" definition for Personal Care Attendants and Certified Nurse Aide/Home Health Aides developed by the Direct Care Worker Committee (See Attachment B).
- Approve the competencies developed by the Direct Care Worker Committee (See Attachment C).
- Support two levels of direct caregivers:
 - An entry level Personal Care Attendant demonstrating the core competencies in personal care featured in the 75-hour personal care services model curriculum ; and
 - A certified nurse aide/home health aide prepared:

- through an approved course of core and advanced competencies covered in no less than 120 hours, or
 - by completing a 75-hour OBRA compliant bridge course after completing the Personal Care Attendant course.
- Support the title "Certified Nurse Aide" for individuals completing requirements established by law and regulations. Support the title "Personal Care Attendant" for individuals completing a training course consistent with the 75-hour model curriculum.
- Support the completion of a 120-hour model curriculum by the Department of Education that integrates the competencies developed by the Direct Care Worker Committee and is consistent with an articulated career ladder training system for Personal Care Attendants.

Nurse Aide Faculty Shortage

- Request that the Department of Aging and Long Term Living submit a waiver to the US Department of Health and Human Resources requesting changes to prerequisites for faculty teaching OBRA compliant nurse aide courses. These changes would include waiving the requirement for faculty to have at least 1 year of long-term care experience if the RN/LPN has successfully completed an approved supplemental course specific to geriatric, long-term care.

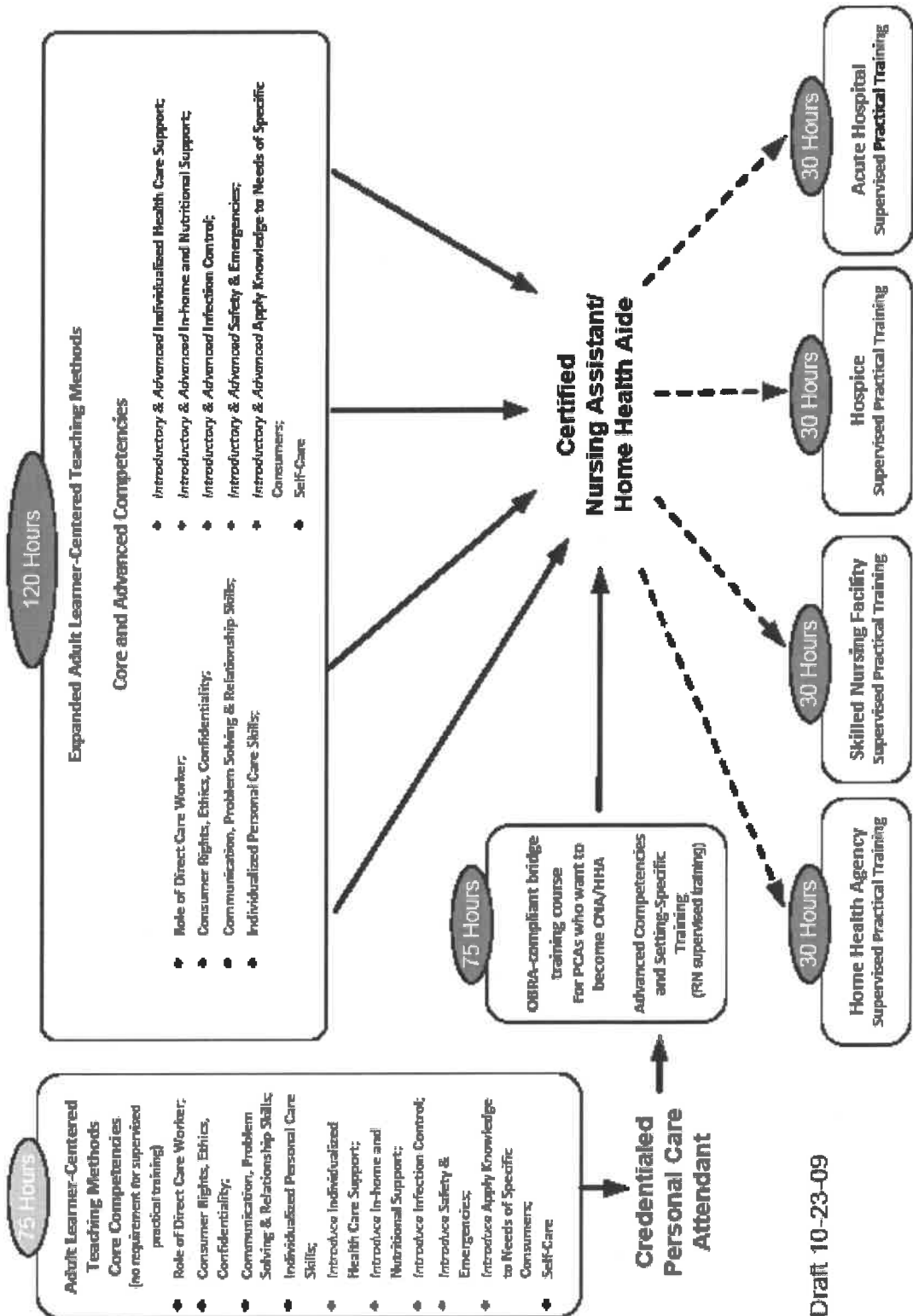
Research Report

- Approve the two recommendations contained within the research document "The Health of the Direct-Care Workforce in Pennsylvania's Long-Term Living System" and the subsequent public release of report and distribution of the report to the industry.

Fiscal Considerations

- Current fiscal realities have had significant impacts on state and local budgets across the nation, severely affecting their abilities to plan and provide for services to citizens, regardless of age or disability. Accordingly, we recommend that the Leadership Council consider not only the priorities for addressing Pennsylvania's Direct Care Workforce Capacity, but the approximate cost and funding sources of each.

Exhibit A Proposed OBRA-Compliant Direct Care Worker Training & Credentialing System in Pennsylvania



Pennsylvania

WORKFORCE INVESTMENT BOARD

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Scope of Work For Certified Nurse Aide

A nurse aide is a person who performs basic nursing related services in a variety of settings, does not hold a license to practice nursing in the Commonwealth of PA, has met the requisite training, and has successfully completed the competency evaluation requirements to be placed on the nurse aide registry.

Scope of Work for Personal Care Attendant (PCA)

A personal care assistant is an individual who performs tasks for clients/patients/residents that focus on activities of daily living that would be performed independently if the person had no disability. These services include non-medical personal care (i.e., eating, bathing, dressing, and personal hygiene), coaching/cueing, general household chores/activities, and companion services to supervise the functionally impaired individual who cannot safely be left alone. Health maintenance activities can also be provided by the PCA including skin maintenance, perineal care for persons with or without a foley, and range of motion exercises.

PCA Course Outline with Competencies

Section A. Introduction and Orientation to Direct-Care Work

Module	Activities	Competencies
Module 1. Key Concepts	1.1 Welcome, Introductions, Orientation to the Training	
	1.2 Qualities of a Direct-Care Worker	1.1 Explain the importance of the relationship between the consumer and the direct-care worker for quality of care 1.2 Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings 1.3 Explain the role of the direct-care worker in relation to the consumer receiving services in various long-term care settings
	1.3 Key Concepts of Direct Care	2.1 Listen to and observe the preferences of the consumer 2.2 Respect the consumer's right to privacy, respect, and dignity 2.3 Demonstrate ways of promoting the consumer's independence 2.4 Explain the philosophies of consumer-direction and independent living. 2.6 Respect the confidentiality of consumer information, adhere to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), and follow employer confidentiality guidelines

Module 2. Work Settings, Teamwork, and Professionalism	2.1 Introduction to Work Settings	1.3 Explain the role of the direct-care worker in relation to the consumer receiving services in various long-term care settings 1.5 Explain the purpose of the service or care plan
	2.2 Teamwork and Team Building	1.2 Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings
	2.3 Professionalism	1.4 Demonstrate professionalism and responsibility, including in timeliness and appearance

Section B. Foundational Knowledge, Attitudes, and Skills

Module	Activities	Competencies
Module 3. Infection Control	3.1 Overview of Infection	7.1 Demonstrate proper hand washing procedures 7.2 Demonstrate application of the principles of infection control in all activities 7.3 Demonstrate the use of standard precautions as indicated 7.4 Prepare soiled linen for laundry
	3.2 Infection Control Strategies, Standard Precautions, and Consumer Education	
	3.3 Demonstration and Practice Lab—Hand Washing, Using Gloves, and Mixing Universal Solutions	
	3.4 Demonstration—Disposing of Wastes	
Module 4. Body Mechanics	4.1 Group Warm-up—Mirroring	4.7 Turn and/or position consumer in bed and wheelchair 4.8 Transfer consumer from bed to wheelchair 8.1 Use proper body mechanics at all times and demonstrate safe transfer techniques
	4.2 Demonstrating Good Body Mechanics—Lifting an Object	
	4.3 Demonstrating Good Body Mechanics—Positioning a Person	
	4.4 Practice Lab	

Module 5. Body Systems and Common Diseases	5.1 Body Systems	9.1 Describe basic anatomy and physiology of body systems
	5.2 Common Diseases	9.2 Recognize and report abnormal signs and symptoms of common diseases and conditions of body systems
Module 6. Working with Elders	6.1 Building Empathy	9.3 Describe the normal aging process and its effects
	6.2 Physical Changes As We Age	9.6 Identify the specific needs of and demonstrate the ability for care for a sensory deprived consumer
	6.3 Experiencing Sensory Changes	
	6.4 Helping Consumers to Manage Physical Changes of Aging	
	6.5 Summary	
Module 7. Respecting Differences	7.1 People Bingo	2.2 Respect the consumer's right to privacy, respect, and dignity
	7.2 Exploring Assumptions	3.4 Demonstrate respect and cultural sensitivity in communicating with others
	7.3 Telling Your Story	
	7.4 Affirmations	
Module 8. Communication: Listening and Talking Skills	8.1 Listening Well	3.1 Explain the term "communication" including the difference between verbal and non-verbal communication
	8.2 Paraphrasing—Saying It in Your Own Words	3.2 Demonstrate effective communication, including listening, paraphrasing, and asking open-ended questions
	8.3 Asking Open-Ended Questions	
	8.4 Communication Skills Practice	

Section C. Person-Centered Care

Module	Activities	Competencies
<p>Module 9. Supporting Consumers at Home</p>	<p>9.1 Introduction to a Consumer Living at Home</p>	<p>1.1 Explain the importance of the relationship between the consumer and the direct-care worker for quality of care</p> <p>1.2 Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings</p> <p>1.3 Explain the role of the direct-care worker in relation to the consumer receiving services in various long-term care settings</p> <p>2.1 Listen to and observe the preferences of the consumer</p> <p>3.4 Demonstrate respect and cultural sensitivity in communication with others</p>
	<p>9.2 Care of the Home</p>	<p>6.3 Assist consumers with care of the home and/or personal belongings</p> <p>6.4 Support a safe, clean, and comfortable living environment</p>
	<p>9.3 General Safety and Emergency Procedures in the Consumer's Home</p>	<p>6.4 Support a safe, clean, and comfortable living environment</p> <p>8.2 Explain procedures in case of emergencies</p>
	<p>9.4 Assisting with Self-Administered Medications; Caring for Eyeglasses, Hearing Aids, and Prostheses</p>	<p>5.1 Assist consumers with self-administered medications</p> <p>4.18 Clean and ensure appropriate function and care of appliances such as glasses, hearing aids, orthotics, prostheses, and assist with their use</p>
<p>Module 10. ADL: Ambulating; Making a Bed</p>	<p>10.1 Assisting a Consumer to Stand, Transfer, and Use Assistive Devices for Ambulation</p>	<p>8.1 Use proper body mechanics at all times and demonstrate safe transfer techniques</p> <p>4.13 Assist with walking</p>

	10.2 Making a Bed	4.14 Make an occupied and unoccupied bed
	10.3 Practice Lab— Assisting to Stand, Transfer, and Ambulate; Plus, Making a Bed	4.13 Assist with walking 4.14 Make an occupied and unoccupied bed 8.1 Use proper body mechanics at all times and demonstrate safe transfer techniques

Module 11. Supporting Consumers' Dignity While Providing Personal Care	11.1 Introduction to an Elder Consumer in a Nursing Home	1.1 Explain the importance of the relationship between the consumer and the direct-care worker for quality of care 1.2 Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings 1.3 Explain the role of the direct-care worker in relation to the consumer receiving services in various long-term care settings 2.1 Listen to and observe the preferences of the consumer
	11.2 Overview— Personal Care and Supporting Consumers' Dignity	2.2 Respect the consumer's right to privacy, respect, and dignity
	11.3 Bathing with Dignity	4.1 Assist with tub bath and shower 4.2 Provide bed baths
	11.4 Demonstration— Bed Bath with Pericare	4.2 Provide bed baths 4.17 Provide perineal care (cleaning of genital and anal areas) 7.2 Demonstrate application of the principles of infection control in all activities 7.3 Demonstrate the use of standard precautions as indicated 4.19 Observe, record, and report as appropriate
Module 12. ADL: Bathing and Personal Care	12.1 Demonstration and Practice—Care of the Skin, Hands, Fingernails, Feet, and Toenails	4.5 Assist with fingernail and toenail care 4.9 Provide consumer with back rubs, foot rubs, leg rubs, arm/hand rubs 4.10 Assist with routine skin care 4.19 Observe, record, and report as appropriate

	<p>12.2 Demonstration and Practice—Tub Bath, Shower, Hair Care, Shampoo, Mouth Care, and Shaving</p>	<p>4.1 Assist with tub bath and shower</p> <p>4.3 Shampoo hair in bed</p> <p>4.4 Assist with oral hygiene</p> <p>4.6 Shave consumer</p> <p>4.19 Observe, record, and report as appropriate</p>
	<p>12.3 Practice Lab and Return Demonstrations (for Modules 3, 4, 10, 11, and 12)</p>	<p>4.1 Assist with tub bath and shower</p> <p>4.2 Provide bed baths</p> <p>4.3 Shampoo hair in bed</p> <p>4.4 Assist with oral hygiene</p> <p>4.5 Assist with fingernail and toenail care</p> <p>4.6 Shave consumer</p> <p>4.9 Provide consumer with back rubs, foot rubs, leg rubs, arm/hand rubs</p> <p>4.10 Assist with routine skin care</p> <p>4.17 Provide perineal care (cleaning of genital and anal areas)</p> <p>4.19 Observe, record, and report as appropriate</p> <p>7.1 Demonstrate proper hand washing procedures</p> <p>7.2 Demonstrate application of the principles of infection control in all activities</p> <p>7.3 Demonstrate the use of standard precautions as indicated</p> <p>8.1 Use proper body mechanics at all times and demonstrate safe transfer techniques</p>

Module 13. Working with a Consumer with Alzheimer's Disease	13.1 Introduction to a Consumer with Alzheimer's Disease	1.1 Explain the importance of the relationship between the consumer and the direct-care worker for quality of care 1.2 Define the role of the direct-care worker in relation to other members of the service team in various long- term care settings 1.3 Explain the role of the direct-care worker in relation to the consumer receiving services in various long-term care settings 2.1 Listen to and observe the preferences of the consumer
	13.2 Understanding Alzheimer's Disease	9.3 Describe the normal aging process and its effects 9.4 Identify the specific needs of a person with Alzheimer's and related dementia
	13.3 Working with Challenging Behaviors	2.1 Listen to and observe the preferences of the consumer 2.2 Respect the consumer's right to privacy, respect, and dignity 3.3 Demonstrate ability to resolve conflict 3.4 Demonstrate respect and cultural sensitivity in communicating with others
Module 14. ADL: Toileting (Part 1)	14.1 Assisting the Consumer with Healthy Toileting Practices	4.15 Assist with basic toileting needs including using a bathroom or commode
	14.2 Assisting Consumers Who Are Reluctant to Do Activities of Daily Living	4.1 Assist with tub bath and shower 4.2 Provide bed baths 4.11 Assist with eating and drinking 4.13 Assist with walking
	14.3 Building Relationships with the Consumer's Family	3.6 Demonstrate respectful and professional interaction with the consumer, significant other(s), and family members

Module 15. Working with an Independent Adult with Physical Disabilities	15.1 Introduction to Working with Consumers with Physical Disabilities	<p>1.1 Explain the importance of the relationship between the consumer and the direct-care worker for quality of care</p> <p>1.2 Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings</p> <p>1.3 Explain the role of the direct-care worker in relation to the consumer receiving services</p> <p>9.5 Identify the needs of people with various physical disabilities</p> <p>2.8 Describe the rights of consumers as addressed in the Americans with Disabilities Act (ADA)</p>
	15.2 Working with Self-Directing Consumers	<p>2.1 Listen to and observe the preferences of the consumer</p> <p>2.2 Respect the consumer's right to privacy, respect, and dignity</p> <p>2.3 Demonstrate ways of promoting the consumer's independence</p> <p>2.4 Explain the philosophies of consumer-direction and independent living</p>
	15.3 Responding to Sexual Behavior of the Consumer	<p>9.7 Describe how age, illness, and disability affect sexuality</p> <p>3.3 Demonstrate ability to resolve conflict</p> <p>3.4 Demonstrate respect and cultural sensitivity in communicating with others</p>
Module 16. ADLs: Dressing and Toileting (Part 2)	16.1 Dressing with Dignity	<p>2.2 Respect the consumer's right to privacy, respect, and dignity</p> <p>4.12 Assist with dressing, including using elastic support stockings</p>

	16.2 Toileting (Part 2)—Bedpan, Urinal, Portable Commode, and Catheter Care	4.16 Demonstrate proper use of bedpan, urinal, and commode
	16.3 Practice Lab—Toileting (Part 2)	<p>2.2 Respect the consumer’s right to privacy, respect, and dignity</p> <p>4.14 Demonstrate proper use of bedpan, urinal, and commode</p> <p>8.1 Use proper body mechanics at all times and demonstrate safe transfer techniques</p>

Module 17. Working with a Consumer Who Is Depressed	17.1 Introduction to a Consumer Who is Depressed	1.1 Explain the importance of the relationship between the consumer and the direct-care worker for quality of care 1.2 Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings 1.3 Explain the role of the direct-care worker in relation to the consumer receiving services in various long-term care settings 2.1 Listen to and observe the preferences of the consumer
	17.2 Changes in How People Feel and Relate to Others as They Age	9.3 Describe the normal aging process and its effects
	17.3 Understanding Depression	
	17.4 Exploring Options to Solve Problems	2.1 Listen to and observe the preferences of the consumer 2.2 Respect the consumer’s right to privacy, respect, and dignity 2.3 Demonstrate ways of promoting the consumer’s independence 3.5 Demonstrate the use of effective problem-solving skills
Module 18. ADL: Eating	18.1 Eating for Health and Enjoyment	6.1 Assist with meal planning, food preparation and serving, food shopping, storage, and handling 6.2 Assist with the preparation of simple modified diets
	18.2 When Consumers Need Assistance with Eating	4.11 Assist with eating and drinking

	18.3 Practice Lab— The Exploring Options Approach to Problem Solving	3.4 Demonstrate respect and cultural sensitivity in communicating with others 3.5 Demonstrate the use of effective problem-solving skills
Module 19. Practice Lab and Return Demonstrations: Dressing, Eating, Toileting	19.1 Practice Lab and Return Demonstrations— Dressing, Eating, and Toileting	All the skills competencies covered so far, particularly in Modules 14, 16, and 18.

Section D. Other Issues That Apply Across Work Settings

Module	Activities	Competencies
Module 20. Introduction to Mental Illness, Developmental Disabilities, and Abuse and Neglect	20.1 Introduction to Working with Consumers Who Have a Mental Illness or a Developmental Disability	9.8 Identify the special needs of a consumer with mental illness 9.9 Identify the special needs of a consumer with intellectual and developmental disabilities
	20.2 Recognizing and Reporting Abuse and Neglect	2.7 Explain the direct-care worker’s responsibility to identify, prevent, and report abuse, exploitation, and neglect

Module 21. Consumer and Worker Rights; Managing Time and Stress	21.1 Consumer and Worker Rights	2.2 Respect the consumer’s right to privacy, respect, and dignity. 2.8 Describe the rights of consumers as addressed in the Americans with Disabilities Act (ADA) 3.4 Demonstrate respect and cultural sensitivity in communicating with others
	21.2 Managing Time	10.2 Demonstrate use of time-management and organizational skills
	21.3 Managing Stress	10.1 Recognize signs of burnout in self and others, and identify stress reduction techniques 10.3 Identify resources to maintain personal health and well-being 10.4 Identify options and strategies to respond to abusive behavior directed toward direct-care workers by consumers

PENNSYLVANIA DEPARTMENT OF EDUCATION - Bureau of Career and Technical Education

CURRICULUM CONTENT FOR THE NURSE AIDE TRAINING		Long Term Care	Home Health	Acute Care	Acute Rehab.	Hospice
Crosswalk of Objectives/Competencies for the Direct Care Worker						
1	ROLE AND FUNCTION					
1.1	Functions as an unlicensed individual in the role of a nurse aide within the legal and ethical standards set forth by the profession of nursing as regulated by the State Board of Nursing for Commonwealth of Pennsylvania.	x	x	x	x	x
1.1.1	Defines the role and function of the nurse aide and provides awareness of the legal limitations of being a nurse aide.	x	x	x	x	x
1.1.2	Recognizes the responsibilities of the nurse aide as a member of the health care team in an acute care, acute rehab., hospice, home health or LTC environment.	x	x	x	x	x
1.1.3	Differentiates between hospitals, long-term care agencies and home health agencies as to their purpose and nurse aide expectations.	x	x	x	x	x
1.1.4	Identifies the “chain of command” in the organizational structure of the health care agency.	x	x	x	x	x
1.1.5	Maintains acceptable personal hygiene and exhibits appropriate dress practices.	x	x	x	x	x
1.1.6	Recognizes the importance of punctuality and commitment on the job.	x	x	x	x	x
1.1.7	Recognizes role in maintaining service	x	x	x	x	x

	excellence values					
*1.1.8	Recognizes the responsibility to identify, prevent and report abuse, exploitation and neglect.	x	x	x	x	x
*1.1.9	Recognizes both physical and psychological indicators in self and others, and identifies stress reduction techniques.	x	x	x	x	x
*1.1.10	Demonstrates effective interpersonal conflict management skills.	x	x	x	x	x
	COMMUNICATION SKILLS					
1.2	Demonstrates appropriate and effective communication skills.	x	x	x	x	x
*1.2.1	Demonstrates effective, abuse-free verbal and non-verbal communication in keeping with the NA's role with clients and their families.	x	x	x	x	x
1.2.2	Observes by using the senses of sight, hearing, touch and smell to report client behavior to the licensed professional/practitioner/supervisor .	x	x	x	x	x
1.2.3	Documents observations using appropriate terms that are specific to the work environment	x	x	x	x	x
1.2.4	Recognizes the importance of reporting observations, measurements to the professional/practitioner/supervisor.	x	x	x	x	x
1.2.5	Recognizes the importance of maintaining the client's record.	x	x	x	x	x
1.2.6	Demonstrates effective communication skills with the staff and other disciplines	x	x	x	x	x
*1.2.7	Communicates in a respectful, adult manner, according to the client's stage of development and cultural background.	x	x	x	x	x

	INFECTION CONTROL					
1.3	Applies the basic principles of infection control.	x	x	x	x	x
1.3.1	Identifies how diseases are transmitted.	x	x	x	x	x
1.3.2	Demonstrates hand washing techniques.	x	x	x	x	x
1.3.3	Applies principles of Standard Precautions/Transmission-Based Precautions.	x	x	x	x	x
1.3.4	Performs basic cleaning and disinfecting tasks.	x	x	x	x	x
1.3.5	Demonstrates correct isolation and safety techniques in care of infectious clients.	x	x	x	x	x
1.3.6	Demonstrates knowledge of how the Immune system protects the body from infection and disease.	x	x	x	x	x
*1.3.7	Follows infection control measures to provide quality care.	x	x	x	x	x
1.3.8	Demonstrates use and disposal of personal protective equipment (PPE)	x	x	x	x	x
1.3.9	Recognizes role in following OSHA regulations	x	x	x	x	x
	SAFETY/EMERGENCY PROCEDURES					
1.4	Assists with emergency procedures.	x	x	x	x	x
1.4.1	Utilizes proper body mechanics.	x	x	x	x	x
1.4.2	Follows safety and emergency procedures.	x	x	x	x	x
*1.4.3	Identifies safety measures that prevent accidents to clients, including the proper use of alternative measures to restraints and safety devices.	x	x	x	x	x
1.4.4	Demonstrates proper use of safety devices.	x	x	x	x	x

1.4.5	Recognizes signs of choking and an obstructed airway.	x	x	x	x	x
1.4.6	Manages foreign body airway obstruction.	x	x	x	x	x
1.4.7	Calls for help when encountering convulsive disorders, loss of consciousness, shock, & hemorrhage. Assists client until professional help arrives.	x	x	x	x	x
1.4.8	Follows disaster procedures.	x	x	x	x	x
1.4.9	Reports emergencies accurately and immediately.	x	x	x	x	x
1.4.10	Identifies potential fire hazards.	x	x	x	x	x
*1.4.11	Follows appropriate guidelines for the use of restraints, safety devices and emergency procedures to provide abuse-free quality care.	x	x	x	x	x
Crosswalk of Objectives for the Direct Care Worker		Long Term Care	Home Health	Acute Care	Acute Rehab.	Hospice
	CLIENT'S RIGHTS					
1.5	Demonstrates behavior that maintains client and/or client's rights. (entity specific)	x	x	x	x	x
1.5.1	Provides privacy and maintenance of confidentiality.	x	x	x	x	x
1.5.2	Maintains confidentiality of patient history information as required by HIPPA.	x	x	x	x	x
1.5.3	Promotes the client's right to make personal choices to accommodate individual needs.	x	x	x	x	x
1.5.4	Gives assistance in resolving grievances.	x	x	x	x	x

1.5.5	Provides needed assistance in giving to and participating in client and family groups and other activities.	x	x	x	x	x
1.5.6	Maintains care and security of client's personal possessions.	x	x	x	x	x
*1.5.7	Maintains the client's environment and care through appropriate nurse aide behavior to minimize the need for physical and chemical restraints.	x	x	x	x	x
*1.5.8	Identifies types, examples and indicators of abuse including: physical abuse, psychological abuse, sexual abuse, exploitation and neglect.	x	x	x	x	x
*1.5.9	Identifies methods to <u>prevent</u> abuse, exploitation, neglect and improper use of physical or chemical restraints while providing care.	x	x	x	x	x
*1.5.10	Identifies procedures for <u>reporting</u> abuse, exploitation, neglect, or the improper use of physical or chemical restraints to appropriate supervisor, law enforcement or government authorities.	x	x	x	x	x
*1.5.11	Utilizes abuse prevention strategies in response to abusive behavior directed toward nurse aides by clients and families.	x	x	x	x	x
	CLIENT'S INDEPENDENCE					
1.6	Demonstrates behavior that promotes client or client's independence and prevents abuse.	x	x	x	x	x
*1.6.1	Demonstrates behavior that promotes client or client's independence and prevents abuse.	x	x	x	x	x
1.6.2	Demonstrates care of sensory challenged client. à. Feeding b. Ambulating c. Personal care d.	x	x	x	x	x

	Environment					
		X	X	X	X	X
2	PERSONAL CARE AND BASIC NURSING SKILLS					
*2.1	Demonstrates knowledge and applies the principles of basic nutrition to prevent neglect and exploitation.	X	X	X	X	X
2.1.1	Lists general principles of basic nutrition.	X	X	X	X	X
2.1.2	Demonstrates knowledge and understanding of modified diets	X	X	X	X	X
2.1.3	Reads the instructions for special diets.	X	X	X	X	X
2.1.4	Serves prepared food as instructed.	X	X	X	X	X
2.1.5	Identifies cultural and faith based practice variations in diet.	X	X	X	X	X
	REPORTING NUTRITIONAL ASSESSMENT CONDITIONS					
2.2	Recognizes and reports abnormal signs and symptoms of common diseases and conditions of the body systems. Examples are:	X	X	X	X	X
2.2.1	Respiratory conditions - Reports coughing, sneezing, elevated temperature, etc.	X	X	X	X	X
2.2.2	Endocrine conditions - Reports excessive thirst, frequent urination, change in urine output, drowsiness, excessive perspiration and headache, muscle spasms, etc.	X	X	X	X	X
2.2.3	Urinary conditions - Reports frequent urination, burning or pain on urination, change in color of urine, blood or sediment in urine and strong odors.	X	X	X	X	X
2.2.4	Circulatory conditions - Reports shortness of	X	X	X	X	X

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	breath, chest pain, blue color to lips, indigestion, sweating, change in vital signs.					
2.2.5	Nervous conditions - Reports dizziness; changes in vision such as seeing double, etc.; change in blood pressure; numbness in any part of the body; or inability to move arm or leg, loss of balance, slurred speech, etc.	x	x	x	x	x
2.2.6	Integumentary conditions - Reports break in skin, discoloration such as redness, black and blue areas, rash, itching, etc.	x	x	x	x	x
2.2.7	Digestive conditions - Reports nausea, vomiting, pain, inability to swallow, bowel movement changes such as color, diarrhea, or constipation.	x	x	x	x	x
2.2.8	Conditions of Immune System - Understands the basic structure and function as it relates to infection and disease.	x	x	x	x	x
2.2.9	Reproductive conditions - Reports bleeding, pain, discharge, itching, difficulty starting urination, etc.	x	x	x	x	x
2.2.10	Musculoskeletal conditions – Reports complaints of pain, swelling or redness of joints.	x	x	x	x	x
2.2.11	Special Senses conditions – Reports any drainage, inflammation or discoloration from the eyes, ears or any complaints.	x	x	x	x	x
2.2.12	Continues to list common diseases and conditions based on the population being served (such as Cancer, MRSA).	x	x	x	x	x
*2.2.13	Reports signs and symptoms of possible physical, psychological and sexual abuse, neglect and exploitation.	x	x	x	x	x

2						
Crosswalk of Objectives for the Direct Care Worker		Long Term Care	Home Health	Acute Care	Acute Rehab.	Hospice
2.3	Provides a safe, clean environment.	x	x	x	x	x
*2.3.1	Provides for the client a safe, clean and comfortable living environment.	x	x	x	x	x
2.3.2	Reports unsafe conditions.	x	x	x	x	x
2.3.3	Reports pests.	x	x	x	x	x
2.3.4	Reports nonfunctioning equipment.	x	x	x	x	x
2.3.5	Prepares soiled linen for laundry.	x	x	x	x	x
2.3.6	Assists with preparing unit for admission/transfer or following discharge.	x	x	x	x	x
*2.3.7	Arranges furniture and equipment for the client's convenience and safety.	x	x	x	x	x
2.4	Provides personal care as directed by the licensed professional/practitioner/supervisor.	x	x	x	x	x
*2.4.1	Follows nursing care principles to prevent client abuse, neglect, exploitation and improper use of physical and/or chemical restraints.	x	x	x	x	x
2.4.2	Demonstrates proper safety techniques when providing personal care.	x	x	x	x	x
2.4.3	Demonstrates proper bed-making procedures.	x	x	x	x	x

	a. Unoccupied	X	X	X	X	X
	b. Occupied	X	X	X	X	X
2.4.4	Provides for the client's privacy when providing personal care.	X	X	X	X	X
2.4.5	Assists the client to dress and undress.	X	X	X	X	X
2.4.6	Assists the client with bathing and personal grooming that is population specific.	X	X	X	X	X
	a. Shower	X	X	X	X	X
	b. Bed bath	X	X	X	X	X
	c. Whirlpool	X	X	X	X	X
2.4.7	Observes and reports condition of the skin.	X	X	X	X	X
2.4.8	Demonstrates measures to prevent decubitus ulcers: positioning, turning and applying heel and elbow protectors.	X	X	X	X	X
2.4.9	Shampoos and grooms hair.	X	X	X	X	X
2.4.10	Assists the client with shaving.	X	X	X	X	X
2.4.11	Assists the client with mouth care.	X	X	X	X	X
2.4.12	Administers mouth care for the unconscious client.	X	X	X	X	X
2.4.13	Demonstrates denture care.	X	X	X	X	X
2.4.14	Feeds clients oral table food in usual manner.	X	X	X	X	X
2.4.15	Distributes nourishment and water.	X	X	X	X	X
2.4.16	Assists the client in using the bathroom.	X	X	X	X	X
2.4.17	Assists the client un using	X	X	X	X	X
	a. Bedside commode	X	X	X	X	X
	b. Urinal	X	X	X	X	X

	c. Bedpan	x	x	x	x	x
2.4.18	Demonstrates perineal care:	x	x	x	x	x
	a. Male					
	b. Female	x	x	x	x	x
2.4.19	Provide catheter care.	x	x	x	x	x
3						
Crosswalk of Objectives for the Direct Care Worker		Long Term Care	Home Health	Acute Care	Acute Rehab.	Hospice
2.4	Provides personal care as directed by the licensed professional/practitioner/supervisor. (continued)	x	x	x	x	x
2.4.20	Provides:	x	x	x	x	x
	a. Foot care	x	x	x	x	x
	b. Basic care to fingernails	x	x	x	x	x

	c. Basic care to toenails	X	X	X	X	X
2.4.21	Applies elastic stockings.	X	X	X	X	X
2.4.22	Accurately measures and records:	X	X	X	X	X
	a. Intake				X	X
	b. Output		X	X	X	X
	c. Weight		X	X	X	X
	d. Height	X	X	X	X	X
	e. Temperature	X	X	X	X	X
	i. oral	X	X	X	X	X
	ii. axillary	X	X	X	X	X
	iii. Rectal (basic principles are taught - demonstration is not necessary)	X	X	X	X	X
	iv. electronic	X	X	X	X	X
	f. Pulse	X	X	X	X	X
	g. Respiration	X	X	X	X	X
	h. Blood pressure (remove)	X	X	X	X	X
	i. 1 step (standard)	X	X	X	X	X
	ii. 2 step	X	X	X	X	X
	i. Pain	X	X	X	X	X
2.4.23	Provides comfort measures for the client experiencing pain (such as a back rub).	X	X	X	X	X
2.4.24	Assists the professional/practioner/supervisor with a physical examination (such as taking vital signs and assisting with positioning, etc.).	X	X	X	X	X
2.4.25	Applies non-sterile dressing (such as a band-aid).	X	X	X	X	X

2.4.26	Applies a non-sterile compress and soaks.	x	x	x	x	x
2.4.27	Applies cold and/or heat applications.	x	x	x	x	x
2.4.28	Shampoos client's hair.	x	x	x	x	x
2.4.29	Applies an disposable brief	x	x	x	x	x
2.5	Provides care to client when death is imminent.	x	x	x	x	x
2.5.1	Discusses own feelings and attitude about death.	x	x	x	x	x
2.5.2	Explains how culture and religion influence a person's attitude toward death.	x	x	x	x	x
2.5.3	Discusses the stages of dying.	x	x	x	x	x
2.5.4	Identifies goals of hospice care.	x	x	x	x	x
2.5.5	Identifies complementary therapies utilized during the stages of dying.	x	x	x	x	x
2.5.6	Recognizes and reports the common signs of approaching death.	x	x	x	x	x
2.5.7	Provides postmortem care while maintaining the client's right to dignity and respect.	x	x	x	x	x
4						

Crosswalk of Objectives for the Direct Care Worker		Long Term Care	Home Health	Acute Care	Acute Rehab.	Hospice
3	RESTORATIVE CARE					
3.1	Demonstrates skills that incorporate principles of restorative care under the direction of a licensed professional/practitioner/supervisor.	x	x	x	x	x
3.1.1	Assists the client in bowel training and bladder training.	x	x	x	x	x
3.1.2	Assists the client in ADL's and encourage self-help activities.	x	x	x	x	x
3.1.3	Demonstrates the proper use of assistive devices, when assisting the client to:	x	x	x	x	x
	a. Ambulate (such as gait, belt, cane, walker, etc)	x	x	x	x	x
	b. Transfer (such as mechanical lift, stand aid, etc.)	x	x	x	x	x
	c. Eat (such as assistive eating devices, thickening, etc.)	x	x	x	x	x
	d. Dress (such as assistive dressing devices, etc.)	x	x	x	x	x
3.1.4	Performs active ROM exercises as instructed by the physical therapist or the professional/practitioner/supervisor.	x	x	x	x	x
3.1.5	Assists client with passive range of motion exercises as instructed by the physical therapist or the professional/practitioner.	x	x	x	x	x
3.1.6	Assists in care and use of prosthetic and orthotic devices (such as hearing aides, braces, splints, artificial limbs, etc.)	x	x	x	x	x

3.1.7	Assists the client in proper use of body mechanics.	x	x	x	x	x
	a. In bed	x	x	x	x	x
	b. In chair	x	x	x	x	x
	c. While ambulating	x	x	x	x	x
3.1.8	Assists the clients with:	x	x	x	x	x
	a. Dangling				x	x
	b. Standing				x	x
	c. Walking			x	x	x
3.1.9	Demonstrates proper turning and/or positioning in:	x	x	x	x	x
	a. Bed					
	b. Chair	x	x	x	x	x
3.1.10	Demonstrates proper technique for transferring client from:	x	x	x	x	x
	a. Bed to chair					
	b. Chair to bed	x	x	x	x	x
3.1.11	Assists the client with positioning devices.	x	x	x	x	x
3.1.12	Utilizes measures to prevent skin breakdown & circulatory changes caused by improper application and use of assistive devices.	x	x	x	x	x
*3.1.13	Provides appropriate restorative care to prevent abuse, neglect and exploitation.	x	x	x	x	x
3.1.14	Recognizes the importance of maintaining skin turgor and preventing breakdown.	x	x	x	x	x
4	BEHAVIORAL HEALTH AND SOCIAL SERVICE NEEDS					
4.1	Demonstrates basic skills by identifying the psychosocial characteristics of the populations	x	x	x	x	x

	being served in the nursing facility and/or by the health care agency including persons with mental retardation, mental illness, Alzheimer's disease and related disorders that cause cognitive impairment.					
4.1.1	Identifies the client's basic human needs for life and mental well-being.	x	x	x	x	x
4.1.2	Modifies his/her own behavior in response to client's behavior.	x	x	x	x	x
4.1.3	Identifies developmental tasks associated with the aging process.	x	x	x	x	x
4.1.4	Provides training in, and the opportunity for self-care according to client's capabilities.	x	x	x	x	x
4.1.5	Demonstrates principles of behavior management by reinforcing appropriate behavior and reducing or eliminating inappropriate behavior.	x	x	x	x	x
4.1.6	Allows the client to make personal choices, providing and reinforcing other behavior consistent with client's dignity.	x	x	x	x	x
4.1.7	Utilizes client's family as a source of emotional support.	x	x	x	x	x
4.1.8	Recognizes how age, illness and disability affect sexuality.	x	x	x	x	x
4.1.9	Provides opportunities for the client to express their personal faith and continue their religious practices.	x	x	x	x	x
*4.1.10	Provides for the mental health and social service needs of the client, including abuse prevention measures.	x	x	x	x	x

5	CARE OF COGNITIVELY IMPAIRED CLIENTS					
5.1	Demonstrates basic principles of validation therapy and other intervention strategies.	x	x	x	x	x
*5.2	Demonstrates intervention strategies to prevent abuse and neglect.	x	x	x	x	x
Crosswalk of Objectives for the Direct Care Worker		Long Term Care	Home Health	Acute Care	Acute Rehab.	Hospice
	Please add additional content, procedures or professional skills that are applicable for nurse aides in your health care setting.					
	1st revision - ad hoc committee					
	2nd revision - ad hoc committee					
	3rd revision - task force committee (May 14, 2009)					
	4th revision - task force committee July 28th, 2009 (pending entry)					

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PA CENTER FOR HEALTH CAREERS

Interdepartmental Meeting on Direct Care Worker Initiative Minutes

Wednesday, November 3rd, 2010, 4:00pm-5:00pm

I. Welcome and Roll Call-

In attendance:

Department of Labor & Industry, Deputy Secretary- Dr. Robert Garraty
Department of Education, Deputy Secretary -Amy Morton
Department of Health, Deputy Secretary - Stacey Mitchell
Department of Education, Director, Career and Technical Education- Lee Burket
The Department of Aging was absent from this meeting

Staff members in attendance: David Ranck, Teri-Lynn Judge, and Megan Finnell

II. Opening Remarks

- a. Dr. Garraty introduced the Center for Health Careers and the Direct Care Worker Project. Labor and Industry Secretary Sandy Vito delivered the Direct Care Workers Report to Governor Rendell in 2009. Two recommendations were flagged for immediate attention.
- b. First high priority recommendation – Consolidate functions related to nurse aides from three departments into one. Employers and educational providers view the consolidation of services as critical because of existing fragmentation.
- c. David Ranck stated that in the last five years the Department of Labor & Industry has invested \$30 million in nurse aide training. Dr. Garraty reinforced need for the Department of Labor & Industry to be involved in this process because of the investment of \$30 million in the last five years.
- d. The Direct Care Worker committee also recommended that the Department of Health should be the recipient of the oversight activities. However it was agreed unanimously that there should be no change in current fiscal agent.
- e. Second high priority recommendation - Requesting waiver from Center for Medicaid Services (CMS) for RN's and LPN's to have a waiver for their educational requirements to teach. It was agreed that David Ranck would check with the Department of Aging regarding the waiver process for submission to CMS.

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- III. Discussion regarding implementation of consolidation**
- a. Secretary Vito conferred with the secretaries from the Department of Health, Department of Education, and the Department of Long-term Care and Aging. She indicated that she received a favorable response from the secretaries to move forward with consolidating activities before the beginning of the new administration.
 - b. There was general discussion regarding considerations to make this plan happen, including:
 - Some employees on different retirement plans
 - Possible pay scale difference
 - Office space
 - Coordination with Human Resources and Unions
 - Possibility of implementation without moving staff
 - c. It was agreed unanimously that Labor and Industry will contact the Office of Administration's Human Resources department to discern the process to follow for these changes to occur.
 - d. Also agreed, Labor and Industry will follow up with all participants and David Ranck will contact Mary Malloy to bring her up to date on this meeting.

To: Dan Kuba
From: David Ranck
Subject: DCW Bridge Curriculum
Date: March 22, 2011

On March 17, 2011 we met with Sheri Weidman from the Department of Education along with her acting supervisor, Jerilynn Millvan, regarding the bridge curriculum that was done by PHI. We discussed only briefly the content of the curriculum as both of us read it previously and had done a cross walk from the PCA curriculum to the nurse aide curriculum.

The primary findings from our discussions are:

- The curriculum is well written and has followed an adult education model.
- There were no requirements in the PCA curriculum for a nurse to teach OBRA required components therefore the bridge curriculum does not qualify as a means to create the career ladder.
- Classes that were already conducted, in most cases, did not have a nurse participate to teach the OBRA required components, therefore none of these students are eligible to proceed to the nurse aide course without taking the entire nurse aide course.
- If we want to use this course in the future we would have to develop a system like currently exists in the PA Department of Education to provide oversight. This would mean that the programs would have to comply with OBRA requirements and be monitored by the Department of Education.
- An acceptable record system would have to be developed by the state like currently exists within the Department of Health to maintain records for PCA's.
- A testing process would have to be developed by the state to meet OBRA requirements to use at the conclusion of the PCA course.

Given those requirements by the state and federal oversight bodies we do not have an existing framework to move ahead using the bridge course. To do so would require a study to recommend additions and changes to the current oversight

bodies within the Department of Education, and the successful completion of a wavier to the US Department of Health and Human Services through our Department of Public Welfare. These activities will have a financial impact that would have to be determined.

Please advise me if you need further information.

Direct Care Worker Initiative

Background

- A committee composed of industry representatives, labor representatives, consumers, government officials and other advocates was appointed in February, 2005.
- The committee was charged with providing recommendations that would improve job quality, retention and ultimately improve the quality of services provided within PA's healthcare environment.
- The committee submitted a final report and recommendations to the Secretary of Labor and Industry in December, 2007.
- A representative smaller implementation committee was appointed in 2008 along with a second committee composed of representatives of the Departments of Welfare, Aging and Long Term Care, Education, Health and Labor and Industry.
- Both committees began meeting to address recommendations within the report as well as issues identified within the context of the recommendations.
- Following several meetings of the Interdepartmental Committee it was agreed that there was a significant lack of coordination of oversight activities shared by four departments.
- Discussions between the respective Secretaries of Aging and Long Term Care, Labor and Industry, Education, Health and Welfare resulted in agreement that the oversight activities should be centralized within the Department of Health. Additionally, it was agreed that the Department of Aging and Long Term Care should seek a waiver from HHS to allow PA to change requirements for nurse aide instructors because of the significant shortage experienced throughout the state, as well as the impending retirements of member within this group.
- The Governor's Office directed that the Governor's Office of Human Resources begin discussions with each impacted department to develop the plan for transferring programmatic services and employees to the Department of Health to centralize the oversight activities related to nurse aide training.
- Initial contact was made to respective departments with assistance from the Center for Health Careers. It was at this point that resignations of department secretaries began to occur and the project

was placed on hold until Governor Corbett's staff arrived to complete the recommendations.

Recommendations

- Policy staff begin discussions with the Governor's Office to determine if project should move forward.
- Submission of a wavier to the US Department of HHS should continue regardless of the overall project because of the current shortage and impending retirements of registered nurse faculty was adversely impacting the training of nurse aides throughout PA. This issue is shared equally by urban and rural areas of the state and employers have been requesting assistance with this issue for several years.

LEVEL 1 CURRICULUM FOR LONG-TERM LIVING DIRECT-CARE WORKERS

November 19, 2007

Section A. Introduction and Orientation to Long-Term Living Direct Care

Module & Time¹	Activities	Competencies	Training Methodologies	Assessment of Learning²
Module 1. Key Concepts Classroom: 3.5 hrs	1.1 Welcome, Introductions, Orientation to Training 1.2 Qualities of a Direct Care Worker	1.1 Explain the importance of the relationship between the consumer and the direct-care worker for quality of care 1.2 Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings 1.3 Explain the role of the direct-care worker in relation to the consumer receiving services in various long-term care settings	Interactive presentation, large-group exercise, small-group work, large-group discussion Interactive presentation, brainstorming, large-group discussion	 Written test Group discussion

¹ Time for Module 1 includes 15 minutes for a mid-module break, or closing. Modules 2-11 and 13-19 each include 30 minutes, for one break and warm-up or closing. Modules 12 and 20 each include 60 minutes for warm-up, closing, and two breaks. Total time for this curriculum is 77 hours.

² **Written tests** may be conducted at the end of the training day, or as part of a formal assessment. Relational skills and behaviors that reflect desired attitudes can be observed during **group discussions, role plays, and practice labs**. “**Practice lab**” refers to direct-care work stations set up within the training setting, including interactions with “mock” consumers, which are closely observed by the instructor. During **return demonstrations**, skills checklists are used to document the trainees’ skills and attitudes (indicated through interactions with the mock consumer); knowledge can also be assessed through questioning by the instructor. Such observation can be conducted during practice lab activities, whenever trainees feel they are ready for formal observation by the instructor, or formally at the end of training.

Level 1 Curriculum for Long-Term Living Direct-Care Workers: Detailed Outline
November 2007

	1.3 Key Concepts of Direct Care	<p>2.1 Listen to and observe the preferences of the consumer</p> <p>2.2 Respect the consumer's right to privacy, respect and dignity</p> <p>2.3 Demonstrate ways of promoting the consumer's independence</p> <p>2.4 Explain the philosophies of consumer-direction and independent living.</p> <p>2.6 Respect the confidentiality of consumer information and adhere to Health Insurance Portability and Accountability Act of 1996 (HIPAA) and employer confidentiality guidelines</p>	Interactive presentations, demonstration role plays, large-group discussions, small-group work	Written test Group discussion Role play Return demonstration
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Module & Time	Activities	Competencies	Training Methodologies	Assessment of Learning
Module 2. Work Settings, Teamwork, and Professionalism	2.1 Introduction to Work Settings	1.3 Explain the role of the direct-care worker in relation to the consumer receiving services in various long-term care settings 1.5 Explain the purpose of the service or care plan		Written test Group discussion Return demonstration
Classroom: 3.25 hrs Lab: .25 hrs	2.2 Teamwork and Team Building	1.2 Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings	Large-group exercise and discussion, interactive presentation, small-group work and discussion	Written test Group discussion
	2.3 Professionalism	1.4 Demonstrate professionalism and responsibility, including in timeliness and appearance	Role play, small-group work, group reports and discussion, large-group discussion	Role play Return demonstration

Section B. Foundational Knowledge, Attitudes, and Skills

Module & Time	Activities	Competencies	Training Methodologies	Assessment of Learning
Module 3. Infection Control Classroom: 2.5 hrs Lab: 1 hr	3.1 Overview of Infection	7.1 Demonstrate proper hand washing procedures 7.2 Demonstrate application of the principles of infection control in all activities 7.3 Demonstrate the use of standard precautions as indicated 7.5 Prepare soiled linen for laundry	Interactive presentation, pairs work/skills practice	Written test Return demonstration
	3.2 Infection Control Strategies and Standard Precautions			
	3.3 Demonstration: Hand Washing, Using Gloves, Mixing Universal Solutions, Disposing of Wastes			
	3.4 Practice Lab			
Module 4. Body Mechanics Classroom: 2.5 hrs Lab: 1 hr.	4.1 Group Warm-up	4.7a Turn and/or position consumer in bed and wheelchair 4.7b Transfer consumer from bed to wheelchair 8.1 Use proper body mechanics at all times and demonstrate safe transfer techniques	Large-group exercise, interactive presentation, demonstration, large-group discussion, practice triads	Written test Return demonstration
	4.2 Demonstrating Good Body Mechanics – Lifting an Object			
	4.3 Demonstrating Good Body Mechanics – Positioning a Person			
	4.4 Practice Lab			
Module 5. Body Systems and Common Diseases Classroom: 3.5 hrs	5.1 Body Systems	9.1 Describe basic anatomy and physiology of body systems 9.2 Recognize and report abnormal signs and symptoms of common diseases and conditions of body systems	Interactive presentation brainstorming, small-group work, large-group presentations	Written test
	5.2 Common Diseases			

Level 1 Curriculum for Long-Term Living Direct-Care Workers: Detailed Outline
November 2007

<p>Module 6. Working with Elders Classroom: 2.75 hrs Lab: .75 hrs</p>	6.1 Building Empathy	<p>9.3 Describe the normal aging process and its effects 9.7 Identify the specific needs of and demonstrate the ability for care for a sensory deprived consumer</p>	<p>Guided reflection, interactive presentation, pairs work, large-group discussion, small-group work, sensory deprivation experiences.</p>	<p>Written test Group discussion Role play</p>
	6.2 Physical Changes As We Age			
	6.3 Experiencing Physical Changes			
	6.4 Helping Consumers to Manage Physical Changes			
	6.5 Summary			
<p>Module 7. Respecting Differences Classroom: 2.5 hrs Lab: 1 hr</p>	7.1 People Bingo	<p>2.2 Respect the consumer's right to privacy, respect, and dignity 3.4 Demonstrate respect and cultural sensitivity in communicating with others</p>	<p>Interactive presentations, large-group exercises, large-group discussion, small-group work, pairs work, individual exercise</p>	<p>Group discussion Role play Return demonstration</p>
	7.2 Exploring Assumptions			
	7.3 Telling Your Story			
	7.4 Affirmations			
<p>Module 8. Communication: Listening and Talking Skills Classroom: 2 hrs Lab: 1.5 hrs</p>	8.1 Listening	<p>3.1 Explain the term "communication" including the difference between verbal and non-verbal communication 3.2 Demonstrate effective communication, including listening, paraphrasing, and asking open-ended questions</p>	<p>Interactive presentation, demonstration role plays, large-group discussion, pairs work, brainstorming, role plays</p>	<p>Written test Group discussion Role play Return demonstration</p>
	8.2 Paraphrasing			
	8.3 Asking Open-Ended Questions			
	8.4 Communication Skills Practice			

Section C. Person-Centered Care

Module & Time	Activities	Competencies	Training Methodologies	Assessment of Learning
Module 9. Supporting Consumers at Home Classroom: 3.5 hrs	9.1 Introduction to a Consumer Living at Home	1.1 Explain the importance of the relationship between the consumer and the direct-care worker for quality of care 1.2 Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings 1.3 Explain the role of the direct-care worker in relation to the consumer receiving services in various long-term care settings 2.1 Listen to and observe the preferences of the consumer 3.4 Demonstrate respect and cultural sensitivity in communication with others	Interactive presentation, pairs work, large-group discussion	Written test Group discussion Return demonstration
	9.2 Care of the Home	6.7 Assist consumers with care of the home and personal belongings	Interactive presentation, pairs exercise	Written test Return demonstration
	9.3 General Safety & Emergency Procedures in the Consumer's Home	6.8 Support a safe, clean and comfortable living environment 8.3 Explain procedures in case of emergencies	Large-group exercise, brainstorming, interactive presentation, large-group discussion	Written test Return demonstration
	9.4 Assisting with Self-Administered Medications; Care of Eyeglasses, Hearing Aids, and Prostheses	5.14 Assist consumers with self-administered medications 4.17 Clean & ensure appropriate function and care of appliances such as glasses, hearing aids, orthotics, prostheses, and assist with application/removal	Interactive presentation, pairs exercise, demonstration	Written test Return demonstration

Level 1 Curriculum for Long-Term Living Direct-Care Workers: Detailed Outline
November 2007

<p>Module 10. ADL: Ambulating Classroom: 2 hrs Lab: 1.5 hr</p>	<p>10.1 Assisting the Consumer to Stand, Transfer, and Use Assistive Devices for Ambulation</p>	<p>8.1 Use proper body mechanics at all times and demonstrate safe transfer techniques 4.12 Assist with walking</p>	<p>Interactive presentation, demonstration</p>	
	<p>10.2 Making a Bed</p>	<p>4.13 Make an occupied bed and unoccupied bed</p>	<p>Interactive presentation, demonstration</p>	
	<p>10.3 Practice Lab: Assisting to Stand, Transfer, and Ambulate; Plus, Making a Bed</p>	<p>4.12 Assist with walking 4.13 Make an occupied bed and unoccupied bed 8.1 Use proper body mechanics at all times and demonstrate safe transfer techniques</p>	<p>Practice triads (“direct-care worker,” “consumer,” and observer) rotating through work stations</p>	<p>Return demonstration</p>

Module & Time	Activities	Competencies	Training Methodologies	Assessment of Learning
<p>Module 11. Maintaining Dignity Classroom: 3.25 hrs Lab: .25 hrs</p>	<p>11.1 Introduction to an Elder Consumer in a Nursing Home</p>	<p>1.1 Explain the importance of the relationship between the consumer and the direct-care worker for quality of care 1.2 Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings 1.3 Explain the role of the direct-care worker in relation to the consumer receiving services in various long-term care settings 2.1 Listen to and observe the preferences of the consumer</p>	<p>Interactive presentation, small-group work, large-group discussion</p>	<p>Written test Group discussion Return demonstration</p>

Level 1 Curriculum for Long-Term Living Direct-Care Workers: Detailed Outline
November 2007

	<p>11.2 Maintaining Dignity in Personal Care</p>	<p>2.2 Respect the consumer's right to privacy, respect and dignity</p>	<p>Brainstorming, large-group discussion</p>	<p>Group discussion</p>
<p>11.3 Bathing</p>	<p>4.1 Assist with tub bath and shower 4.2 Provide bed baths</p>	<p>Interactive presentation, individual exercise, large-group discussion, pairs work, go-round</p>	<p>Role play Return demonstration Written test</p>	
<p>11.4 Demonstration: Bed Bath with Pericare</p>	<p>4.2 Provide bed baths 4.16 Provide perineal care (cleaning of genital and anal areas) 7.2 Demonstrate application of the principles of infection control in all activities 7.3 Demonstrate the use of standard precautions as indicated 5.13 Observe, record, and report as appropriate</p>	<p>Demonstration.</p>	<p>Group discussion Return demonstration</p>	

Level 1 Curriculum for Long-Term Living Direct-Care Workers: Detailed Outline
November 2007

<p>Module 12. ADL: Bathing (Personal Care)</p> <p>Classroom: 2 hrs</p> <p>Lab: 5 hrs</p>	<p>12.1 Demonstration: Shower & Tub-bath, Routine Skin Care, and Other Personal Care Tasks</p>	<p>4.1 Assist with tub bath and shower 4.3 Shampoo hair in bed 4.4 Assist with oral hygiene 4.5 Assist with fingernail and toenail care 4.6 Shave consumer 4.8 Provide consumer with back rubs, foot rubs, leg rubs, arm/hand rubs 4.9 Assist with routine skin care 5.13 Observe, record, and report as appropriate</p>	<p>Interactive presentation, demonstration, pairs work</p>	<p>Return demonstration</p>
	<p>12.2 Practice Lab: Bathing, Skin Care, and Other Personal Care Tasks</p>	<p>4.1 Assist with tub bath and shower 4.2 Provide bed baths 4.3 Shampoo hair in bed 4.4 Assist with oral hygiene 4.5 Assist with fingernail and toenail care 4.6 Shave consumer 4.8 Provide consumer with back rubs, foot rubs, leg rubs, arm/hand rubs 4.9 Assist with routine skin care 4.16 Provide perineal care (cleaning of genital and anal areas) 5.13 Observe, record, and report as appropriate</p>	<p>Practice triads (see 10.3)</p>	<p>Return demonstration</p>
	<p>12.3 Practice Lab and Return Demonstration (Modules 3, 4, 7, 8, 10, 11, and 12)</p>	<p>All the skills competencies covered so far.</p>	<p>Practice triads</p>	<p>Return demonstration</p>

Level 1 Curriculum for Long-Term Living Direct-Care Workers: Detailed Outline
November 2007

Module & Time	Activities	Competencies	Training Methodologies	Assessment of Learning
<p>Module 13. Working with Consumer with Dementia Classroom: 3 hrs Lab: .5 hrs</p>	<p>13.1 Introduction to a Consumer with Alzheimer's Disease</p>	<p>1.1 Explain the importance of the relationship between the consumer and the direct-care worker for quality of care 1.2 Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings 1.3 Explain the role of the direct-care worker in relation to the consumer receiving services in various long-term care settings 2.1 Listen to and observe the preferences of the consumer</p>	<p>Interactive presentation, large-group discussion</p>	<p>Written test Group discussion</p>
<p>13.2 Cognitive Impairment: Alzheimer's & Dementia</p>		<p>9.3 Describe the normal aging process and its effects 9.4 Identify the specific needs of a person with Alzheimer's and related dementia and demonstrate basic principles of intervention strategies</p>	<p>Role play; interactive presentation</p>	<p>Written test Role play</p>
<p>13.3 Working with Challenging Behaviors</p>		<p>2.1 Listen to and observe the preferences of the consumer 2.2 Respect the consumer's right to privacy, respect and dignity 3.3 Demonstrate ability to resolve conflict 3.4 Demonstrate respect and cultural sensitivity in communicating with others</p>	<p>Interactive presentation; demonstration role play and discussion; large-group discussion; small-group work and discussion</p>	<p>Group discussion Role play</p>

Level 1 Curriculum for Long-Term Living Direct-Care Workers: Detailed Outline
November 2007

<p>Module 14. ADL: Toileting</p> <p>Classroom: 2 hrs</p> <p>Lab: 1 hr</p>	14.1 Assisting with Use of the Toilet	4.14 Assist with basic toileting needs including assistance with disposable briefs, using a bathroom or commode	Interactive presentation, demonstration, "practice triads"	Written test Return demonstration
	14.2 Assisting with Activities of Daily Living for Persons with Dementia	4.1 Assist with tub bath and shower 4.2 Provide bed baths 4.10 Assist with eating and drinking 4.12 Assist with walking	Interactive presentation; small-group work; role plays and discussion; practice lab	Role play
	14.3 Building Relationships with the Consumer's Family	3.7 Demonstrate respectful and professional interaction with the consumer, significant other(s), and family members	Video and discussion; small-group work and discussion; large group discussion.	Role play Group discussion

Level 1 Curriculum for Long-Term Living Direct-Care Workers: Detailed Outline
November 2007

Module & Time	Activities	Competencies	Training Methodologies	Assessment of Learning
<p>Module 15. Working with a Consumer with Physical Disabilities</p> <p>Classroom: 2.5 hrs</p> <p>Lab: 1 hr</p>	<p>15.1 Introduction to Working with Consumers with Physical Disabilities</p>	<p>1.1 Explain the importance of the relationship between the consumer and the direct-care worker for quality of care</p> <p>1.2 Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings</p> <p>1.3 Explain the role of the direct-care worker in relation to the consumer receiving services</p> <p>9.5a Identify the needs of people with various physical disabilities</p> <p>2.10 Describe the rights of consumers as addressed in the Americans with Disabilities Act (ADA)</p>	<p>Interactive presentation, large-group discussion</p>	<p>Written test</p> <p>Group discussion</p>
	<p>15.2 Working with Self-Directing Consumers</p>	<p>2.1 Listen to and observe the preferences of the consumer</p> <p>2.2 Respect the consumer's right to privacy, respect and dignity</p> <p>2.3 Demonstrate ways of promoting the consumer's independence</p> <p>2.4 Explain the philosophies of consumer-direction and independent living</p>	<p>Individual exercises, large-group discussion, interactive presentations, small-group work</p>	<p>Written test</p> <p>Group discussion</p> <p>Role play</p>
	<p>15.3 Responding to Sexuality Issues of the Consumer</p>	<p>9.8 Describe how age, illness and disability affect sexuality</p> <p>3.3 Demonstrate ability to resolve conflict</p> <p>3.4 Demonstrate respect and cultural sensitivity in communicating with others</p>	<p>Interactive presentation, large-group discussion, large-group exercise</p>	<p>Written test</p> <p>Group discussion</p> <p>Role play</p>

Level 1 Curriculum for Long-Term Living Direct-Care Workers: Detailed Outline
November 2007

<p>Module 16. ADL: Dressing & Toileting (Part 2) Classroom: 1 hr Lab: 2 hrs</p>	<p>16.1 Dressing with Dignity</p>	<p>2.2 Respect the consumer's right to privacy, respect and dignity 4.11 Assist with dressing, including using elastic support stockings</p>	<p>Interactive presentations, demonstration, practice triads</p>	<p>Written test Return demonstration</p>
	<p>16.2 Demonstration: Assisting with Bedpan, Urinal, Portable Commode, and Catheter Care</p>	<p>4.15 Demonstrate proper use of bedpan, urinal, and commode</p>	<p>Interactive presentation, demonstration</p>	<p>Written test</p>
	<p>16.3 Practice Lab: Toileting (Part 2)</p>	<p>2.2 Respect the consumer's right to privacy, respect and dignity 4.14 Demonstrate proper use of bedpan, urinal, and commode 8.1 Use proper body mechanics at all times and demonstrate safe transfer techniques</p>	<p>Practice triads</p>	<p>Return demonstration</p>

Level 1 Curriculum for Long-Term Living Direct-Care Workers: Detailed Outline
November 2007

Module & Time	Activities	Competencies	Training Methodologies	Assessment of Learning
Module 17. Working with a Consumer Who Is Depressed Classroom: 2.25 hrs Lab: 1.25 hrs	17.1 Introduction to a Consumer Who is Depressed and Living in a Personal Care Home	1.1 Explain the importance of the relationship between the consumer and the direct-care worker for quality of care 1.2 Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings 1.3 Explain the role of the direct-care worker in relation to the consumer receiving services in various long-term care settings 2.1 Listen to and observe the preferences of the consumer	Interactive presentation, large- group discussion	Written test Group discussion
	17.2 Psychological and Social Changes of Aging 17.3 Depression and Aging	9.3 Describe the normal aging process and its effects	Large-group discussion, large- group exercise, small- group work and discussion, role play, large-group discussion Interactive presentation, small- group work, and large- group discussion	Written test Group discussion Role play

Level 1 Curriculum for Long-Term Living Direct-Care Workers: Detailed Outline
November 2007

	17.4 The “Exploring Options” Approach to Problem-solving	<p>2.1 Listen to and observe the preferences of the consumer</p> <p>2.2 Respect the consumer’s right to privacy, respect and dignity</p> <p>2.3 Demonstrate ways of promoting the consumer’s independence</p> <p>3.4 Demonstrate respect and cultural sensitivity in communicating with others</p> <p>3.5 Demonstrate the use of effective problem-solving skills</p>	Interactive presentation, brainstorming, discussion, and small-group work	Group discussion Role play Return demonstration
<p>Module 18. ADL: Eating</p> <p>Classroom: 1.25 hrs</p> <p>Lab: 2.25 hrs</p>	<p>18.1 Person-Directed Nutrition and Diet</p> <p>18.2 Practice Lab: Assistance During Mealtimes and Problem-Solving</p>	<p>6.1 Assist with meal planning, food preparation and serving, food shopping, storage and handling</p> <p>6.2 Assist with the preparation of simple modified diets</p> <p>3.4 Demonstrate respect and cultural sensitivity in communicating with others</p> <p>3.5 Demonstrate the use of effective problem-solving skills</p> <p>4.10 Assist with eating and drinking</p>	<p>Small-group work & discussion, interactive presentation, role play</p> <p>“Practice triads;” role plays</p>	<p>Written test</p> <p>Return demonstration</p> <p>Role play</p> <p>Return demonstration</p>

Module & Time	Activities	Competencies	Training Methodologies	Assessment of Learning
<p>Module 19. Practice Lab and Return Demonstration</p> <p>Lab: 3.5 hrs</p>	19.1 Practice Lab and Return Demonstration (Modules 14, 16, and 18)	All the skills competencies covered so far, particularly in Modules 14, 16, and 18.	Practice triads	Return demonstration

Section D. Other Issues That Apply Across Work Settings

Module & Time	Activities	Competencies	Training Methodologies	Assessment of Learning
<p>Module 20. Other Issues That Apply Across Work Settings</p>	<p>20.1 Introduction to Working with Consumers Who Have a Mental Illness or Developmental Disability</p>	<p>9.9a Identify the special needs of a consumer with mental illness 9.10a Identify the special needs of a consumer with intellectual and developmental disabilities</p>	<p>Interactive presentation, small-group work, and large-group discussion</p>	<p>Written test Group discussion Role play</p>
<p>Classroom: 5 hrs Lab: 2 hrs</p>	<p>20.2 Detection and Reporting of Abuse or Neglect</p>	<p>2.7 Explain the direct-care worker's responsibility to identify, prevent and report abuse, exploitation and neglect</p>	<p>Interactive presentation, video, large-group discussion, small-group work, role play</p>	<p>Written test Group discussion Role play</p>
	<p>20.3 Consumer and Worker Rights</p>	<p>2.10 Describe the rights of consumers as addressed in the Americans with Disabilities Act (ADA) 3.4 Demonstrate respect and cultural sensitivity in communicating with others 10.4 Identify options and strategies to respond to abusive behavior directed toward direct-care workers by consumers</p>	<p>Interactive presentation, small-group work, large-group discussion</p>	<p>Written test Group discussion Role play</p>
	<p>20.4 Managing Time and Stress</p>	<p>10.1 Recognize signs of burnout in self and others, and identify stress reduction techniques 10.2 Demonstrate use of time-management and organizational skills 10.3 Identify resources to maintain personal health and well-being 10.4 Identify options and strategies to respond to abusive behavior directed toward direct-care workers by consumers</p>	<p>Large-group discussion, small-group work/case scenarios, go-round</p>	<p>Written test Group discussion Role play</p>

Level 1 Curriculum -- Classroom: 54 hrs; Lab 23 hrs – Total Time: 77 hrs

DEFINITION OF CORE SKILL COMPETENCIES FOR ENTRY-LEVEL DIRECT-CARE WORKERS

Paraprofessional Healthcare Institute
March 2007

This section identifies the competencies that direct-care workers need to be skilled in to provide services to elders and consumers with disabilities in whatever setting they reside. We expect that workers who are competent in the entire set of skills defined here will be qualified to support consumers in their own homes whether under an agency or consumer-directed model, will have the necessary skills to become nursing assistants or home health aides according to federal regulations, and will be able to work in personal care homes, assisted living and adult day care

By competency we mean “*the capability to apply or use a set of related knowledge, skills, and abilities required to successfully perform ‘critical work functions’ or tasks in a defined work setting.*”¹ The value of using the term competency is that it brings the focus on what someone needs to objectively *know and do* in order to do a job proficiently. It takes the emphasis away from classroom hours and passing tests and puts the focus on-the-job performance. Definition of competencies can be used for a number of purposes including assessment of job readiness, curriculum development, designing performance evaluation systems and credentialing incumbent and experienced workers for what they have already learned on the job.

This list of competencies is based on work done in several states to determine the tasks that are common to direct-care workers in a variety of settings, as well as on competencies developed for the Department of Labor’s Home Health Aide and Certified Nursing Assistant Apprenticeships. It has been reviewed with a number of stakeholders who represent a variety of interests.

Each competency is categorized as core (C) or additional (A) It is proposed that the core competencies be required of direct care workers to work in any setting where consumers are assisted with the activities of daily living. (Home care, personal care, adult day care.) Demonstration of the entire set of competencies (C) + (A) will provide a portable credential that will enable a direct-care worker to work in all long-term care settings, including nursing homes and Medicare certified home care.

¹ US DOL Definition

**DEFINITION OF CORE SKILL COMPETENCIES FOR ENTRY-LEVEL
DIRECT-CARE WORKERS**

Paraprofessional Healthcare Institute

Level I: Core competencies required for Level A: Personal Care Worker (C)

Level II: Additional competencies required for Level B: Home Health Aid or for Certified Nurse Assistant (A) – Adapted for setting as appropriate.

1	Role of the Direct-Care Worker	I	II
1.1	Explain the importance of the relationship between the consumer and the direct-care worker for quality of care	C	
1.2	Define the role of the direct-care worker in relation to other members of the service team in various long-term care settings	C	
1.3	Explain the role of the direct-care worker in relation to the consumer receiving services in various long-term care settings	C	
1.4	Demonstrate professionalism and responsibility, including in timeliness and appearance	C	
1.5	Explain the purpose of the service or care plan	C	
1.6	Explain the role of the direct-care worker in supporting the consumer's engagement in community activities	C	

2	Consumer Rights, Ethics and Confidentiality	I	II
2.1	Listen to and observe the preferences of the consumer	C	
2.2	Respect the consumer's right to privacy, respect and dignity	C	
2.3	Demonstrate ways of promoting the consumer's independence	C	
2.4	Explain the philosophies of consumer-direction and independent living.	C	
2.5	Facilitate the consumer's desire to express their personal faith and observe religious practice as requested	C	
2.6	Respect the confidentiality of consumer information and adhere to Health Insurance Portability and Accountability Act of 1996 (HIPAA) and employer confidentiality guidelines	C	
2.7	Explain the direct-care worker's responsibility under PA law to identify, prevent and report abuse, exploitation and neglect and how to do that	C	
2.8	Identify types, examples and indicators of abuse, including physical abuse, psychological abuse, exploitation, neglect and improper use of physical and chemical restraints and methods to prevent them	C	

2.9	Explain the consumer's rights to make health care decisions, including advanced directives and living wills.	C	
2.10	Describe the rights of consumers as addressed in the Americans with Disabilities Act (ADA)	C	

3	Communication, Problem Solving and Relationship Skills	I	II
3.1	Explain the term "communication" including the difference between verbal and non-verbal communication	C	
3.2	Demonstrate effective communication, including listening, paraphrasing, and asking open-ended questions	C	
3.3	Demonstrate ability to resolve conflict	C	
3.4	Demonstrate respect and cultural sensitivity in communicating with others	C	
3.5	Demonstrate the use of effective problem-solving skills	C	
3.6	Serve as an advocate for the consumer as directed by the consumer	C	
3.7	Demonstrate respectful and professional interaction with the consumer, significant other(s), and family members	C	
3.8	Demonstrate basic language, reading, and written communication skills	C	

4	Personal Care Skills According to Consumer Preference and Service Plan	I	II
4.1	Assist with bathing	C	
4.2	Provide bed baths	C	
4.3	Shampoo hair in bed	C	
4.4	Assist with oral hygiene	C	
4.5	Assist with fingernail and toenail care	C	
4.6	Shave consumer	C	
4.7	Turn and/or position consumer in bed, wheelchair and lift	C	
4.8	Provide consumer with back rubs, foot rubs, leg rubs, arm/hand rubs	C	
4.9	Assist with routine skin care	C	
4.10	Assist with eating and drinking	C	
4.11	Assist with dressing	C	

4.12	Assist with walking	C	
4.13	Assist with the use of elastic support stockings	C	
4.14	Make an occupied bed and unoccupied bed	C	
4.15	Assist with toileting needs including demonstrating proper use of bedpan, urinals and/or commode	C	
4.16	Provide pericare care and cleaning of genital and anal areas	C	
4.17	Assist with use of catheters and daily catheter care	C	
4.18	Clean and ensure appropriate function and care of appliances such as glasses, hearing aids, orthotics, prostheses, and assist with application/removal	C	

5	Health Related Tasks According to Consumer Preference and Service Plan	I	II
5.1	Accurately measure and record temperature, pulse, and respiration	C	
5.2	Accurately measure and record blood pressure, height and weight		A
5.3	Collect routine urine, stool and sputum specimens according to proper procedures		A
5.4	Assist consumers with prescribed exercise programs, including walking, standing, transfer and passive range of motion exercises		A
5.5	Assist consumers who have lung disease with postural drainage		A
5.6	Assist with the use of prescribed medical equipment, supplies and devices		A
5.7	Assist with special skin care to prevent decubitus ulcers; observe, record and report skin conditions		A
5.8	Provide comfort measures to assist in relieving pain		A
5.9	Apply non-sterile dressing		A
5.10	Apply non-sterile compress and soak		A
5.11	Apply cold and/or heat applications		A
5.12	Assist consumers with ileostomy, colostomy, gastrostomy and tracheotomy care		A
5.13	Observe, record and report as appropriate	C	
5.14	Assist consumers with self-administered medications	C	

6	In-Home and Nutritional Support According to Consumer Preference and Service Plan	I	II
6.1	Assist with meal planning, food preparation and serving, food shopping, storage and handling	C	
6.2	Assist with the preparation of simple modified diets	C	
6.3	Prepare and assist consumers with complex modified diets		A
6.4	Assist consumer with fluid intake; measure and record		A
6.5	Assist and encourage consumer to consume nutritional supplements/snacks.		A
6.6	Assist consumers with family spending and budgeting		A
6.7	Assist consumers with care of the home and personal belongings	C	
6.8	Support a safe, clean and comfortable living environment	C	
6.9	Prepare soiled linen for laundry		A
6.10	Assist with preparing the unit for admission, transfer or following discharge		A

7	Infection Control	I	II
7.1	Demonstrate proper hand washing procedures	C	
7.2	Demonstrate application of the principles of infection control in all activities	C	
7.3	Demonstrate the use of standard precautions as indicated	C	
7.4	Demonstrate correct isolation and safety technique in care of consumers with infectious illness		A

8	Safety and Emergencies	I	II
8.1	Use proper body mechanics at all times and incorporate safe transfer and lifting techniques	C	
8.2	Demonstrate proper lifting technique when using lift equipment	C	
8.3	Explain procedures in case of emergencies	C	
8.4	Check equipment before use and notify supervisor of any problems identified	C	
8.5	Demonstrate how to perform CPR and the Heimlich Maneuver		A

9	Apply Knowledge to the Needs of Specific Consumers	I	II
9.1	Describe basic anatomy and physiology of body systems	C	
9.2	Recognize and report abnormal signs and symptoms of common diseases and conditions of body systems	C	
9.3	Describe the normal aging process and its effects	C	
9.4	Identify the specific needs of a person with Alzheimer's and related dementia and demonstrate basic principles of intervention strategies	C	
9.5	Identify the needs of and demonstrate the ability to care for people with various physical disabilities	C	
9.6	Identify the specific care needs of and demonstrate the ability to care for a person who is dying	C	
9.7	Identify the specific needs of and demonstrate the ability for care for a sensory deprived consumer	C	
9.8	Describe how age, illness and disability affect sexuality	C	
9.9	Identify the special needs of and demonstrate the ability to provide services to a consumer with mental illness	C	
9.10	Identify the special needs of and demonstrate the ability to provide services to a consumer with intellectual and developmental disabilities	C	

10	Self Care	A	B
10.1	Recognize signs of burnout in self and others, and identify stress reduction techniques	C	
10.2	Demonstrate use of time-management and organizational skills	C	
10.3	Identify resources to maintain personal health and well-being	C	
10.4	Identify options and strategies to respond to abusive behavior directed toward direct-care workers by consumers	C	