



Georgia **NURSE AIDE**

written (or oral) examination
& skills evaluation

CANDIDATE HANDBOOK

October 2014

QUICK REFERENCE

NACES PLUS FOUNDATION, INC.

Georgia NNAAP®

8501 North Mopac Expressway, Suite 400

Austin, TX 78759

(866) 432-2865

Fax: 1 (866) 95NACES / 1 (866) 956-2237

Hours of Operation 8:30 a.m. – 6:30 p.m.

(Eastern Time Zone)

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- Obtain a Candidate Handbook
- Obtain an application for testing
- Obtain registration information
- Cancel and reschedule an examination
- Inquire about special examination requests and services
- Change your current address or name ***before*** testing
- Request an excused absence

Refer any additional questions to:

ALLIANT GEORGIA MEDICAL CARE FOUNDATION

Nurse Aide Program

P O Box 105753

Atlanta, GA 30348

www.mmis.georgia.gov

(800) 414-4358

(678) 527-3010 (Local)

Hours of Operation 8:00 a.m. – 5:00 p.m.

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PEARSON VUE®

Georgia NNAAP®

PO Box 13785

Philadelphia, PA 19101-3785

(877) 244-1694

Hours of Operation 8:00 a.m. – 5:00 p.m.

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Call Pearson VUE to:

- Obtain information regarding your Score Report
- Request a duplicate Score Report
- Obtain information regarding your examination

Go to Pearson VUE's website (www.pearsonvue.com) to:

- Download a Candidate Handbook
- Download an Application
- View Regional Test Site testing dates
- Download Spanish Skills Listing

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NNAAP® Written Exam Content Outline and Practical Skills Listing
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INTRODUCTION

This handbook is designed for candidates seeking Nurse Aide certification in Georgia. It describes the process of applying for and taking the National Nurse Aide Assessment Program (NNAAP®) Examination.

The Alliant Georgia Medical Care Foundation has contracted with Pearson VUE®, a nationally recognized leading provider of assessment services to regulatory agencies and national associations. Pearson VUE will develop, score, and report the results of the NNAAP® Examination for the Georgia Nurse Aide Registry. The Nurse Aide Competency Evaluation Service (NACES) will be working with Pearson VUE to schedule and administer the examination.

NATIONAL NURSE AIDE ASSESSMENT PROGRAM (NNAAP®)

The Nursing Home Reform Act, adopted by Congress as part of the Omnibus Budget Reconciliation Act of 1987 (OBRA '87), was designed to improve the quality of care in long-term health care facilities and to define training and evaluation standards for nurse aides who work in such facilities. Each state is responsible for following the terms of this federal law.

The National Nurse Aide Assessment Program (NNAAP®) is an examination program designed to determine minimal competency to become a certified nurse aide in your state. The NNAAP was developed by the National Council of State Boards of Nursing, Inc., (NCSBN) to meet the nurse aide evaluation requirement of federal and state laws and regulations. Pearson VUE is the authorized administrator of the NNAAP in your state.

The NNAAP Examination is an evaluation of nurse aide-related knowledge, skills, and abilities. The NNAAP Examination is made up of both a Written (or Oral) Examination and a Skills Evaluation. The purpose of the NNAAP Examination is to test that you understand and can safely perform the job of an entry-level nurse aide.

EXAM OVERVIEW

You will be allowed to choose between a Written or Oral Examination. All exams are in English. The two parts of the NNAAP Examination process, the Written (or Oral) Examination and the Skills Evaluation, will be administered on the same day. You must pass both parts to be certified and listed on the Georgia Nurse Aide Registry.

The Written Examination consists of seventy (70) multiple-choice questions written in English. Sample examination questions are provided in this handbook.

An Oral Examination available in English or Spanish may be taken in place of the Written Examination. The English or Spanish Oral Examination consists of sixty (60) multiple-choice questions and ten (10) multiple-choice reading comprehension questions provided on a cassette tape. You will be asked to listen to a cassette tape of the Oral Examination and follow along in the test booklet as the questions are read aloud on the tape. **If you want to take the Oral Examination, you must request it when you submit your application.**

At the Skills Evaluation you will be asked to perform five (5) randomly selected nurse aide skills. You will be given twenty-five (25) minutes to complete the five (5) skills. You will be rated on these skills by a Nurse Aide Evaluator. You must successfully demonstrate all five (5) skills to pass the Skills Evaluation. A complete listing of the skills is shown on pages 26 to 41.

See *The Written (or Oral) Exam* and *The Skills Evaluation* for more details about the NNAAP Examination.

ELIGIBILITY

All candidates applying to take the NNAAP Examination in Georgia **MUST** complete an *Application for Registration by Competency Examination* form using one of the below listed eligibility routes. The completed application, fees, signed copy of your U.S. Government-issued Social Security card, a photo I.D. and your training completion form or certificate (if applicable) must be submitted to NACES.

NOTE: If any required document is not attached to the application, you will not be scheduled for testing until the required documentation is received by NACES.

E1 – NEW NURSE AIDE CANDIDATES

All applicants who have successfully completed a Georgia state-approved Nurse Aide training program.

Candidates must pass both portions of the NNAAP examination within (1) year **from the completion date of a training program** or within three (3) test attempts, whichever comes first, in order to be placed on the GA Nurse Aide Registry. Candidates must submit a non-deficient completed application to NACES before the one-year training expiration date in order to be scheduled for the skills and written/oral competency examination. If the candidate's exam is scheduled past the one-year expiration date, he/she will be allowed to reschedule ONE time and the new examination date must be scheduled within one month of the original date. If the testing application is received after the one-year training expiration date, the candidate must re-train, re-register under Eligibility Route E1 and provide a new training completion date.

Required Documents:

- Legible copy of training certificate
(Must be notarized **AFTER** the course is completed and signed by instructor; must show completion date)
- Legible copy of Social Security Card
- Legible copy of Photo Bearing I.D. card

Eligibility Routes continue on following page

E2 – LPN/RN CANDIDATES

Applicants who are currently licensed in Georgia or in another state w/in the U.S.

Candidates must pass both portions of the NNAAP examination within (1) year **from the application receipt date** or within three (3) test attempts, whichever comes first, in order to be placed on the GA Nurse Aide Registry. Candidates must submit a non-deficient completed application to NACES before one-year expiration date in order to be scheduled for the skills and/or written/oral competency examination. If the candidate's exam is scheduled past the one-year expiration date, he/she will be allowed to reschedule ONE time and the new examination date must be scheduled within one month of the original date. If the testing application is received after the one-year training expiration date, the candidate must re-train and re-test under Eligibility Route E1 (New Nurse Aide Candidate).

Required Documents:

- Legible copy of LPN/RN license
- Legible copy of Social Security Card
- Legible copy of Photo Bearing I.D. card

E3 – OUT-OF-STATE TRAINED NURSE AIDE

Applicants who received training at a state-approved training program in a state other than Georgia and are not yet listed on another state's registry.

Candidates must pass both portions of the NNAAP examination within (1) year **from the completion date of the out of State training program** or within three (3) test attempts, whichever comes first, in order to be placed on the GA Nurse Aide Registry. Candidates must submit a non-deficient completed application to NACES before the one-year out of State training expiration date in order to be scheduled for the skills and written/oral competency examination. If the candidate's exam is scheduled past the one-year out of State expiration date, he/she will be allowed to reschedule ONE time and the new examination date must be scheduled within one month of the original date. If the testing application is received after the one-year training expiration date, the candidate must re-train and re-test under Eligibility Route E1 (New Nurse Aide Candidate).

Eligibility Routes continue on following page

Required Documents:

- Legible copy of training certificate (Must be signed by instructor; must show completion date. Must also list state where candidate trained.)
- Legible copy of Social Security Card
- Legible copy of Photo Bearing I.D. card

**E4 – OUT-OF-STATE TRAINED
NURSE AIDE – LAPSED**

Applicants who received training at a state-approved training program in a state other than Georgia whose registration has lapsed.

Required Documents:

- Legible copy of OFFICIAL out-of-state registry verification showing in Good Standing (no findings)
- Must list state where trained
- Legible copy of Social Security Card
- Legible copy of Photo Bearing I.D. card

NOTE: Candidate must pass both portions of the NNAAP examination within three (3) test attempts and within three (3) years following the certification expiration date. The three (3) examination attempts begin from the moment the candidate takes the first examination. If the examination is not passed within three (3) attempts, the candidate must re-train and re-test under Eligibility Route E1 (New Nurse Aide Candidate).

Candidate must submit a non-deficient completed application to NACES before three-year lapsed expiration date in order to be scheduled for the written/oral and skills competency examination. If the candidate's exam is scheduled past the three-year expiration date, he/she will be allowed to reschedule ONE time and the new examination date must be scheduled within one month of the original date. If the testing application is received after the three-year lapsed expiration date, the candidate must re-train and re-test under Eligibility Route E1 (New Nurse Aide Candidate).

E5 – GEORGIA LAPSED OR EXPIRED REGISTRATION

Applicants whose Georgia certification has lapsed or expired.

Required Documents:

- Legible copy of Social Security Card
- Legible copy of Photo Bearing I.D. card
- Certification Number
- Expiration Date

NOTE: Candidate must pass both portions of the NNAAP examination within three (3) test attempts and within three (3) years following the certification expiration date. The three (3) examination attempts begin from the moment the candidate takes the first examination. If the examination is not passed within three (3) attempts, the candidate must re-train and re-test under Eligibility Route E1 (New Nurse Aide Candidate).

Candidate must submit a non-deficient completed application to NACES before three-year lapsed expiration date in order to be scheduled for the written/oral and skills competency examination. If the candidate's exam is scheduled past the three-year expiration date, he/she will be allowed to reschedule ONE time and the new examination date must be scheduled within one month of the original date. If the testing application is received after the three-year lapsed expiration date, the candidate must re-train and re-test under Eligibility Route E1 (New Nurse Aide Candidate).

E6 – RECIPROCITY CANDIDATES

Applicants who have an unexpired verification on another state's registry, but who have not worked as a nurse aide in the past two (2) years (24 months), or who are listed in the other state as not eligible to work in a Long Term Care Facility.

Candidates must pass both portions of the NNAAP examination within (1) year or within three (3) test attempts, whichever comes first, in order to be placed on the GA Nurse Aide Registry. Candidates must submit a non-deficient completed application to NACES **before the one-year GMCF Approval to Test Letter expiration date** in order to be scheduled for the skills and/or written/oral competency examination. If the candidate's exam is scheduled past the one-year GMCF Approval to Test Letter expiration date, he/she will be allowed to reschedule ONE time and the new examination date must be scheduled within one month of the original date. If the testing application is received after the one-year GMCF Approval to Test Letter expiration date, the candidate will not be scheduled to test and the information will be forwarded to the GMCF. Candidates may have to re-train and re-test under Eligibility Route E1 (New Nurse Aide Candidate).

Required Documents:

- Copy of not expired GMCF Approval to Test Letter
- Legible copy of Social Security Card
- Legible copy of Photo Bearing I.D. card

APPLICATION AND SCHEDULING

FILLING OUT AN APPLICATION

You may get an examination application from your nurse aide training program, or by contacting NACES. You may also print one from the Pearson VUE website at www.pearsonvue.com.

- You are responsible for completing the appropriate sections of the Examination Application. You may ask someone from your nurse aide training program or facility employer for assistance in completing the application.
- If you need help or have any questions about the application, please contact a NACES Customer Service Representative at (866) 432-2865.
- Mail your completed application, required documents, and appropriate fees **together in one envelope** to:

NACES Plus Foundation, Inc.

Georgia NNAAP®

8501 North Mopac Expressway, Suite 400

Austin, TX 78759

This information must be received by NACES at least twelve (12) business days before the examination date.

EXAM FEES

The fees listed below have been established for the NNAAP Examination in Georgia.

Written Examination & Skills Evaluation	<i>(both)</i>	\$112
Oral Examination (English) & Skills Evaluation	<i>(both)</i>	\$112
Oral Examination (Spanish) & Skills Evaluation	<i>(both)</i>	\$112
Written Examination ONLY	<i>(re-test)</i>	\$27
Oral Examination ONLY (English)	<i>(re-test)</i>	\$27
Oral Examination ONLY (Spanish)	<i>(re-test)</i>	\$27
Skills Evaluation ONLY	<i>(re-test)</i>	\$85

The first time you test, you must schedule both the Written (or Oral) Examination and the Skills Evaluation.

Continued next page

Payment must be made in the form of a money order, certified check, Pearson VUE voucher, or company check made payable to “NACES”. Even if it is from your employer, the money order, certified check, Pearson VUE voucher, or company check must display your name so it can be applied to your examination. If you are not currently employed in a nursing home, you may pay the fee yourself. Company checks may pay for more than one candidate. **Personal checks and cash will not be accepted. Fees are non-refundable and non-transferable once submitted to NACES.**

Under federal and Georgia state laws, candidates employed as nurse aides in nursing homes that participate in Medicaid/Medicare programs are prohibited from paying their examination fees. Employers must pay the examination fee and any re-test fee for those candidates in their employ as nurse aides or candidates who have a written commitment or signed acceptance of employment on file in a Medicaid-certified nursing home.

EXAM SCHEDULING

Once NACES receives your application, required documents, and fees, they will schedule you for testing. You will not be scheduled to test until all required materials are received. NACES will mail your Authorization to Test Notice (yellow confirmation postcard) to you at the address listed on your application within forty-eight (48) hours.

AUTHORIZATION TO TEST NOTICE

Your Authorization to Test Notice (yellow confirmation postcard) has important information about the examination. If you do not get your Authorization of Test Notice (yellow confirmation postcard) within ten (10) business days, call NACES at (866) 432-2865. NACES is NOT responsible for lost, misdirected, or delayed mail.

TESTING LOCATIONS

The nurse aide examination (both parts) will be given by NACES at a Regional Test Site. Please visit www.pearsonvue.com or call (877) 244-1694 to determine the schedule of the test site most convenient to you. When accessing Pearson VUE’s website, click on the second tab labeled “Test Taker Services” (next to the “Home” menu), and select “Georgia Nurse Aides” from the drop down menu. Then, select “Regional Test Sites and Test Schedules.”

ACCOMMODATIONS

Pearson VUE complies with the provisions of the Americans with Disabilities Act as amended. The purpose of accommodations is to provide candidates with full access to the test. Accommodations are not a guarantee of improved performance or test completion. Pearson VUE provides reasonable and appropriate accommodations to individuals with documented disabilities who demonstrate a need for accommodations.

Test accommodations may include things such as:

- A separate testing room
- Extra testing time
- A Reader or Recorder, for individuals with mobility or vision impairments and cannot read or write on their own
- An amplified stethoscope

Test accommodations are individualized and considered on a case-by-case basis. All candidates who are requesting accommodations because of a disability must provide appropriate documentation of their condition and how it is expected to affect their ability to take the test under standard conditions.

This may include:

- Supporting documentation from the professional who diagnosed the condition, including the credentials that qualify the professional to make this diagnosis
- A description of past accommodations the candidate has received

The steps to follow when requesting test accommodations vary, depending on your test program. To begin, go to <http://pearsonvue.com/accommodations>, and then select your test program from the alphabetized list. Candidates who have additional questions concerning test accommodations may contact the ADA Coordinator at accommodationspearsonvue@pearson.com.

CANCELLATION AND RESCHEDULING

If you are unable to attend your scheduled examination, you **MUST** call NACES by close of business **at least five (5) business days** before the examination date to reschedule (Saturday and Sunday and national holidays are not considered business days). If you do not call NACES **at least five (5) business days** in advance of your examination date to reschedule, and do not show up for your scheduled examination, your fee will **NOT** be refunded and cannot be transferred to a new examination date. You may not give your examination date to another person.

If your examination is scheduled **past the one- or three-year expiration date** (see Eligibility Routes for additional information), you will be allowed to reschedule ONE time only and the new examination date must be scheduled within one month of the original scheduled examination date. If the testing application is received after the one or three year expiration date, you must re-train and re-test under Eligibility Route E1 (New Nurse Aide Candidate).

If you notify NACES in time, there is no penalty and your fee may be transferred to your new examination date. If your employer paid for your examination fee, you should tell them about missing the examination. Let them know how you have handled rescheduling and when you plan to re-test.

REFUNDS

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

ABSENCE POLICY

Since unexpected situations occasionally occur, NACES will consider excusing an absence from a scheduled examination in certain situations.

Acceptable reasons for rescheduling are as follows:

- Illness of yourself or a member of your immediate family
- Death in the family
- Disabling traffic accident
- Court appearance or jury duty
- Military duty
- Weather emergency

Requests for excused absences must be made in writing and received **within ten (10) business days** following the scheduled examination. This request must include veri-

fication of your absence from an appropriate source. For example, if you had jury duty, you must supply a copy of your court notice.

If your examination was scheduled **past the one- or three-year expiration date** (see Eligibility Routes for additional information) and you were unable to attend due to any of the acceptable reasons for rescheduling as listed above, you will be allowed only ONE opportunity to apply for an Excused Absence. It is your responsibility to contact NACES to ensure your request was properly received. **Any requests and/or documentation submitted past ten (10) business days following your scheduled examination will be denied and you will be required to re-train and re-test under Eligibility Route E1 (New Nurse Aide Candidate).**

The decision of NACES to approve or deny the excused absence is final.

WEATHER EMERGENCIES

Examinations will be delayed or cancelled only in emergencies. If severe weather or a natural disaster makes the test center inaccessible or unsafe, the examination will be delayed or cancelled. If the examination has been cancelled, you will be rescheduled for the next available examination at that site.

EXAM DAY

CHECKING IN

You must arrive 30 minutes prior to your scheduled time for BOTH the written and skills examinations. If you are late for the written examination you will not be allowed to test and your fees will not be refunded. If you missed your written examination and are scheduled for a skills evaluation, please arrive 30 minutes prior to your scheduled time. Skills Evaluation test times are approximate. You will be required to check in for both the written and for the skills examinations. You will be required to present proper identification.

WHAT TO BRING

You must have the following items with you when you take the examination:

- Two (2) forms proper identification
- Three (3) No. 2 pencils (sharpened)
- Eraser
- Watch with a second hand

No other materials will be allowed.

PROPER IDENTIFICATION

Candidates are required to bring two (2) forms of official signature-bearing identification to the test site, one of which must be a photo identification, and one of which must be a U.S. Government-issued Social Security Card (no letters from the Social Security Office will be accepted). Nurse Aide applicants who are in the armed services may use their current U.S. Military I.D. in place of a Social Security (SS) card. The test taker's SS number must be on the I.D. if used. Sponsor or Dependent Military I.D.s are NOT accepted in place of SS Card, but can be used as a second I.D. (one with photo) when presented with a valid SS card. All identification must be **current (not expired)** and no birth certificates will be accepted. If a candidate fails to present proper identification, he or she may not test. Photocopies of identification will NOT be accepted. Examples of proper photo identification include:

- U.S. Government-issued driver's license
- Georgia-issued voter I.D. card
- Georgia Temporary driver's license
- State-issued identification card
- Passport
- Alien registration card
- Signed Photo High School I.D. (for high school students)
- Signed Photo University I.D. (for university students)
- U.S.-issued Photo Bearing Signed Military I.D. if not used in lieu of Social Security Card
- Certificate of Naturalization

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

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

SECURITY AND CHEATING

If you give help to or receive help from anyone during the examination, the examination will be stopped. The incident will be reported to the Alliant Georgia Medical Care Foundation for review, and your examination will not be scored (see *Testing Policies*).

Please note that all examination questions, each form of the examination, and all other examination materials are copyrighted by, the property of, or licensed to the National

Council State Board of Nursing. Consequently, any distribution of the examination content or materials through any form of reproduction, or through oral or written communication, is strictly prohibited and punishable by law. ***Anyone who removes or tries to remove examination materials or information from the test site will be prosecuted.***

TESTING POLICIES

The following policies are observed at each test center.

LATENESS

Plan to arrive about thirty (30) minutes before the examination starts. If you are late for your scheduled examination, or do not bring all of your required materials, you will **NOT** be allowed to test and your examination fee will **NOT** be returned. If you are late for the Written (or Oral) Examination, but arrive on time for the Skills Evaluation, you **will** be allowed to take the Skills Evaluation.

If you are late for your Skills Evaluation or do not bring all your required materials, you will **NOT** be allowed to test and you will be required to re-apply and pay another examination fee (see *Cancellation* for more details).

ELECTRONIC DEVICES

Cellular phones, beepers, or any other electronic devices are not permitted to be used and must be turned off during testing. There is no place for storage of personal belongings at the test center.

STUDY AIDS

You are not permitted to take personal belongings such as briefcases, large bags, study materials, extra books, or papers into the examination room. Any such materials brought into the examination room will be collected and returned to you when you have completed the examination. Pearson VUE is not responsible for lost or misplaced items.

EATING/DRINKING/SMOKING

You are not permitted to eat, drink, or smoke during the examination.

MISCONDUCT

If you are discovered causing a disturbance of any kind or engaging in any kind of misconduct, you will be dismissed from the examination and the incident will be reported to the Alliant Georgia Medical Care Foundation.

GUESTS/VISITORS

No guests, visitors, pets, or children are allowed at the test center.

THE WRITTEN (OR ORAL) EXAM

WRITTEN EXAM

The Nurse Aide Evaluator will hand out materials and give instructions for taking the Written Examination. The Written Examination has seventy (70) multiple-choice questions. You will have two (2) hours to complete the Written Examination. You will be told when fifteen (15) minutes remain. Fill in only one (1) oval on the answer sheet for each question. Markings in the test booklet will **NOT** be accepted as answers. Your answers must appear on the separate answer sheet. Sample questions for the Written Examination are located on page 14.

ENGLISH OR SPANISH ORAL EXAM

An English or Spanish Oral Examination may be taken in place of the Written Examination. You must request an English or Spanish Oral Examination when filling out your application. The Oral Examination is provided on a cassette tape. A cassette player and earphones are provided at the test center. You will be asked to listen to a tape of the Oral Examination and follow along in the test booklet as the questions are read aloud on the tape.

The Oral Examination consists of two (2) parts, and you must pass both parts to pass the Oral Examination. The first part of the Oral Examination has sixty (60) multiple-choice questions. Each of these questions is read twice. As each question is read, you will be asked to choose the correct answer and mark it on your answer sheet.

The second part of the Oral Examination has ten (10) multiple-choice questions. These questions test your ability to speak a minimum amount of English by recognizing common words used as a nurse aide in long-term care facilities. Each word is read three (3) times. You are asked to match the word you hear on the tape to the written word in the test booklet. As you find the match, you mark your answer on the answer sheet.

You have up to two (2) hours to complete the Oral Examination. You will be told when fifteen (15) minutes remain. Fill in only one (1) oval on the answer sheet for each question. You may write in the test booklet, but markings in the test booklet will **NOT** be accepted as answers. Your answers must appear on the separate answer sheet.

WRITTEN (OR ORAL) EXAM CONTENT OUTLINE

The revised 2011 NNAAP® Examination Content Outline is based on the findings from the *2009 Job Analysis of Nurse Aides* published by NCSBN in spring 2010. The examination content outline went into effect January 2011.

The NNAAP written examination is comprised of 70 multiple-choice items; 10 are pretest items (non-scored) on which statistical information will be collected. The NNAAP oral examination is comprised of 60 multiple-choice items and 10 reading comprehension (word recognition) items. The candidate is allowed to choose between a written and an oral examination.

	<i>% of the exam</i>	<i># of questions in the exam</i>
I. Physical Care Skills		
A. Activities of Daily Living.....	14%	8
1. Hygiene		
2. Dressing and Grooming		
3. Nutrition and Hydration		
4. Elimination		
5. Rest/Sleep/Comfort		
B. Basic Nursing Skills.....	39%	24
1. Infection Control		
2. Safety/Emergency		
3. Therapeutic/Technical Procedures		
4. Data Collection and Reporting		
C. Restorative Skills.....	7%	4
1. Prevention		
2. Self Care/Independence		
II. Psychosocial Care Skills		
A. Emotional and Mental Health Needs	11%	6
B. Spiritual and Cultural Needs	2%	2
III. Role of the Nurse Aide		
A. Communication.....	8%	5
B. Client Rights	7%	4
C. Legal and Ethical Behavior.....	3%	2
D. Member of the Health Care Team	9%	5

SAMPLE QUESTIONS

The following questions are samples of the kinds of questions that you will find on the Written Examination. Check your answers to these questions in the box below.

- 1. The client's call light should always be placed:**
 - (A) on the bed
 - (B) within the client's reach
 - (C) on the client's right side
 - (D) over the side rail
- 2. Which of the following items is used in the prevention and treatment of bedsores or pressure sores?**
 - (A) rubber sheet
 - (B) air mattress
 - (C) emesis basin
 - (D) restraint
- 3. When caring for a dying client, the nurse aide should:**
 - (A) keep the client's room dark and quiet
 - (B) allow client to express his feelings
 - (C) change the subject if client talks about death
 - (D) contact the client's minister, priest or rabbi
- 4. What does the abbreviation ADL mean?**
 - (A) Ad Lib
 - (B) As Doctor Likes
 - (C) Activities of Daily Living
 - (D) After Daylight
- 5. After giving a client a back rub, the nurse aide should always note:**
 - (A) the last time the client had a back rub
 - (B) any change in the client's skin
 - (C) client's weight
 - (D) amount of lotion used
- 6. How should the nurse aide communicate with a client who has a hearing loss?**
 - (A) face the client when speaking
 - (B) repeat the statement
 - (C) shout so that the client can hear
 - (D) use a high-pitched voice

1. B 2. B 3. B 4. C 5. B 6. A

Correct Answers

SELF-ASSESSMENT READING TEST

The two-part Self-Assessment Reading Test that appears below will help you decide if you should consider taking the Oral Examination instead of the Written Examination. To complete the reading test, follow the instructions provided below and select the answer to each question. When you have completed the reading test, you will be able to determine the number of questions you answered correctly.

PART 1: VOCABULARY

- Circle the best answer to each question.
- When you have finished, check your answers using the answer key on page 20.
- Count up the number of correct answers.
- If your score is less than 17, you may have difficulty reading the Written Examination and should consider taking the Oral Examination.
 - You go to a doctor when you _____.**
(A) feel sleepy (D) need money
(B) need socks (E) need clothes
(C) feel sick
 - A person who flies an airplane is its _____.**
(A) pilot (D) surgeon
(B) steward (E) director
(C) mother
 - You use a _____ to write.**
(A) bow (D) carpenter
(B) calculator (E) needle
(C) pencil
 - To EXIT a room means to _____ it.**
(A) enter (D) read
(B) leave (E) interrupt
(C) forget
 - A wedding is a joyous _____.**
(A) focus (D) occasion
(B) vehicle (E) civilization
(C) balloon
 - To REQUIRE something means to _____ it.**
(A) need (D) understand
(B) have (E) hear
(C) forget

go to next page

7. **You _____ something to find its length.**
(A) slice
(B) lock
(C) measure
(D) force
(E) tape
8. **Soup is served in a _____.**
(A) plate
(B) bowl
(C) fork
(D) chair
(E) closet
9. **To accompany someone means to _____.**
(A) disagree with him
(B) work for him
(C) go with him
(D) speak to him
(E) choose him
10. **A nursing home resident receives _____ from the staff.**
(A) quality
(B) fame
(C) interruption
(D) care
(E) work
11. **Medicine is used to _____ pain.**
(A) widen
(B) conjure
(C) enliven
(D) increase
(E) relieve
12. **To DRENCH the flowers means to _____ them.**
(A) steam
(B) drink
(C) touch
(D) soak
(E) anger
13. **A bicycle is a means of _____.**
(A) nourishment
(B) transportation
(C) prediction
(D) collision
(E) walking
14. **When someone speaks in a whisper, it may be difficult to _____.**
(A) deceive
(B) understand
(C) frighten
(D) estimate
(E) regulate

go to next page

SELF-ASSESSMENT READING TEST

PART 2: COMPREHENSION

In this part of the reading test you will be provided with a series of brief paragraphs. You are to read each paragraph and then answer the questions that appear after the paragraph.

There are many different kinds of fish. All fish live in water. They use their tails and fins to swim.

15. **Fish live in _____.**
- (A) cups
 - (B) houses
 - (C) air
 - (D) water
 - (E) fountains
16. **Fish use their _____ to swim.**
- (A) tails
 - (B) heads
 - (C) gills
 - (D) lungs
 - (E) floats

Maria grew up on a farm. She loved the work on the farm. She knew when all of the crops had to be planted. She would like a job on a farm or in a flower garden.

17. **Maria has had experience as a _____.**
- (A) guide
 - (B) farmer
 - (C) driver
 - (D) nurse
 - (E) teacher
18. **She would like to work in _____.**
- (A) an office
 - (B) a library
 - (C) a garden
 - (D) a hospital
 - (E) a supermarket
19. **As a child Maria lived _____.**
- (A) in the city
 - (B) in an apartment
 - (C) on a farm
 - (D) in a large house
 - (E) on the beach

go to next page

Carolyn has a good job. She is a nurse in a large hospital. Every day she can help many people. She enjoys this very much. She also makes a good salary. Each month she can pay her bills and save some money.

20. Carolyn works in a _____.
- (A) hospital
 - (B) doctor's office
 - (C) garage
 - (D) school
 - (E) library
21. One of the things Carolyn enjoys is _____.
- (A) working in an office
 - (B) helping people
 - (C) reading books
 - (D) working late hours
 - (E) driving a car
22. With her salary she can pay her bills and _____.
- (A) buy furniture
 - (B) give to charity
 - (C) save money
 - (D) buy new clothes
 - (E) pay for college

*This completes the
Self-Assessment Reading Test.*

Answers

- | | | | |
|------|-------|-------|-------|
| 1. C | 7. C | 13. B | 19. C |
| 2. A | 8. B | 14. B | 20. A |
| 3. C | 9. C | 15. D | 21. B |
| 4. B | 10. D | 16. A | 22. C |
| 5. D | 11. E | 17. B | |
| 6. A | 12. D | 18. C | |

If your score is less than 17, you may have difficulty reading the Written Examination and should consider taking the Oral Examination in place of the Written Examination.

THE SKILLS EVALUATION

WHAT TO EXPECT

SETTING

The Skills Evaluation is set up to resemble an actual caregiving situation. The Skills Evaluation area will look similar to your work setting. It will have all the equipment necessary to perform the assigned skills. The Skills Evaluation will be administered by a Nurse Aide Evaluator. Before your skills evaluation begins, the evaluator will show you where equipment is located and answer questions about operating the equipment.

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

See pages 26-41 for the complete skills listing.

WHO WILL ACT AS A CLIENT?

The part of the “client” will be played by a candidate who volunteers to act as a weakened elderly person. While you perform the skills, speak to the candidate volunteer as you would speak to an actual client in a nurse aide work setting. You are encouraged to speak to the candidate volunteer not only because it is part of quality care, but also because it will help you to relax as you perform the skills.

CANDIDATE VOLUNTEER REQUIREMENTS

You will need to act as a candidate volunteer for another nurse aide’s Skills Evaluation and play the role of a nursing home patient (client). The evaluator will give you verbal instructions that will describe how you should act in performing the role of the client.

CANDIDATE DRESS REQUIREMENTS

You **must wear flat, slip-on, non-skid shoes**; a loose-fitting top with short sleeves that can be rolled up to the shoulder, or tank top; and loose fitting pants that can be rolled up. You will be required to put a gown on over your clothing. In no case may candidates remove clothing down to undergarments.

Prior to beginning the exam, you should inform the evaluator of any food or latex allergy or sensitivity to skin soaps or lotion. Any limitations to range of motion must also be communicated to the evaluator prior to the start of the skills examination.

For infection control purposes, you should not come to the test site with open areas/sores on the skin. Candidates with any open areas or sores on their skin should reschedule their skills test to a later date after their skin fully heals.

THE TASKS

The NNAAP Skills List contains all of the skills that you may be asked to demonstrate during the Skills Evaluation. Each skill represents a task that you will be asked to perform in your job and has been broken down into a series of steps.

A step that is highlighted in *bold type* is called a **Critical Element Step**. Critical Element Steps are important steps that must be performed correctly in order for you to pass the skill. If you leave out a Critical Element Step or do not perform a Critical Element Step properly, you will not pass the skill. However, if you perform only the Critical Element Step correctly in a skill, you do not automatically pass that skill. You must also correctly demonstrate enough steps to meet the passing standard (or *cut score*) for each skill.

Before your Skills Evaluation begins, the Nurse Aide Evaluator will give you an instruction card that will list the five (5) skills selected for you to perform. Hand-washing will always be one of the skills to be performed. The remaining four (4) skills are randomly chosen from the complete set of skills listings on pages 26 to 41 of this handbook. You are strongly encouraged to perform the skills in the order they are listed on the instruction card.

If you make a mistake, say so, and you will be instructed to tell the evaluator which step(s) is to be corrected and then to perform the step(s). You will not have to redo the entire skill, just the steps you wish to correct. There are, however, some exceptions to this rule. If you fail to put on gloves or take them off when it is required to do so and the evaluator reminds you to do so, for infection control purposes, then you will not receive credit for attempting to correct this step. If you wish to correct an order-dependent step (a step stating that an action should be performed **before** or **after** another step) and you fail to say **when** the corrected step should be performed, you will not receive credit for the correction.

Once you begin a new skill, you may not go back to correct a previous skill. The Nurse Aide Evaluator will not answer questions **during** the Skills Evaluation and will not tell you whether you performed a skill correctly. You may not receive help from anyone during the Skills Evaluation. If you do have any questions, please ask them before the Skills Evaluation begins.

One (1) of the four (4) randomly-selected skills will include a measurement skill (see the section below, *Recording A Measurement*, for more information regarding measurement skills).

You must successfully complete five (5) out of the five (5) skills in the skill form to pass the Skills Evaluation. You will have twenty-five (25) minutes to demonstrate all five (5) skills.

When you have completed your skills evaluation, the evaluator will direct you to wash your hands. Although this will not effect your examination results, for the purposes of infection control, you must wash your hands.

RECORDING A MEASUREMENT

The NNAAP Skills Evaluation requires every candidate to perform one measurement skill, such as blood pressure, radial pulse, respirations, urine output, or weight. You will be given a special form, called a Recording Sheet for Measurement Skills, to write down, or *record*, the measurement. For example, if performing the *Measures and Records Blood Pressure* skill, you will write the complete systolic and diastolic pressures of your blood pressure reading in a box labeled Candidate Results.

On the following page is a copy of the recording sheet that will be used during the skills exam. The candidate must record his/her results in the Candidate Results box on this sheet. This sheet will be used to record the results of the following measurement skills:

- Measures and Records Blood Pressure
- Measures and Records Weight of Ambulatory Client
- Measures and Records Urinary Output
- Counts and Records Radial Pulse
- Counts and Records Respirations



RECORDING SHEET FOR MEASUREMENT SKILLS

Date _____

Test Site ID _____

CANDIDATE NAME _____

CANDIDATE ID _____

EVALUATOR NAME _____

EVALUATOR ID _____

SAMPLE

SKILL TESTED

Evaluator must check one box next to the skill being tested.

Blood Pressure

Respirations

Urine Output

Radial Pulse

Weight

CANDIDATE RESULTS	EVALUATOR RESULTS

PEARSON

TIPS FOR THE SKILLS EVALUATION

- You will be expected to perform the skills as you would in a nursing home setting. When water is required, you must use running water. All candidates will be required to perform the *Hand Hygiene* skill. The evaluator will inform you after you have washed your hands for the first time that you should just tell him or her when you would wash your hands during your performance of the rest of the skills, rather than actually washing them for each skill. For all steps other than hand-washing, you must actually perform the skill in order to receive credit. You may not simply tell the evaluator what you would do for simulating a step. For example, you may not simply tell the evaluator that you would wash the client. You must actually demonstrate washing the client. You may not simply tell the evaluator that you would feed the client. You must actually demonstrate feeding the client.
- After you have introduced yourself to the client for the first time, it is not necessary for you to introduce yourself each time you begin a new skill.
- To receive full credit for a measurement skill, you must accurately make the required measurement and then write that measurement on the *Recording Sheet for Measurement Skills*. The evaluator will provide the Recording Sheet to you at the test site. A sample of the Recording Sheet is shown on page 24 of this handbook. You are encouraged to become familiar with the Recording Sheet before your scheduled test date.
- You must know how to operate both a standing and a non-digital bathroom scale and must know how to set both types of scales to zero.
- You **may not bring** any of your own equipment to the test site (i.e. transfer/gait belt).
- It is important for you to place the call signal within the client's reach whenever you leave the client.
- *Where the word "client" appears, it refers to the person receiving care.*

SKILLS LISTING

The 22 skills that follow are arranged in alphabetical order, except for the *Hand Hygiene (Hand Washing)* skill. Hand Hygiene is listed first as a reminder of the importance of performing this skill before all other skills. The numbered lines below each skill are the steps needed to perform that skill. Critical Element Steps are in **bold** type. (All skills are to be performed as listed below without exception. If special accommodations are needed please refer to the Accommodations section on page 9.)

HAND HYGIENE (HAND WASHING)

- 1 Address client by name and introduces self to client by name
- 2 Turns on water at sink
- 3 Wets hands and wrists thoroughly
- 4 Applies soap to hands
- 5 **Lathers all surfaces of wrists, hands, and fingers producing friction, for at least 20 (twenty) seconds, keeping hands lower than the elbows and the fingertips down**
- 6 Cleans fingernails by rubbing fingertips against palms of the opposite hand
- 7 **Rinse all surfaces of wrists, hands, and fingers, keeping hands lower than the elbows and the fingertips down**
- 8 Uses clean, dry paper towel/towels to dry all surfaces of hands, wrists, and fingers then disposes of paper towel/towels into waste container
- 9 Uses clean, dry paper towel/towels to turn off faucet then disposes of paper towel/towels into waste container or uses knee/foot control to turn off faucet
- 10 Does not touch inside of sink at any time

APPLIES ONE KNEE-HIGH ELASTIC STOCKING

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Client is in supine position (lying down in bed) while stocking is applied
- 4 Turns stocking inside-out, at least to the heel

Skill continues

- 5 Places foot of stocking over toes, foot, and heel
- 6 Pulls top of stocking over foot, heel, and leg
- 7 Moves foot and leg gently and naturally, avoiding force and over-extension of limb and joints
- 8 Finishes procedure with no twists or wrinkles and heel of stocking, if present, is over heel and opening in toe area (if present) is either over or under toe area**
- 9 Signaling device is within reach and bed is in low position
- 10 After completing skill, wash hands

ASSISTS TO AMBULATE USING TRANSFER BELT

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Before assisting to stand, client is wearing shoes**
- 3 Before assisting to stand, bed is at a safe level
- 4 Before assisting to stand, checks and/or locks bed wheels
- 5 Before assisting to stand, client is assisted to sitting position with feet flat on the floor**
- 6 Before assisting to stand, applies transfer belt securely at the waist over clothing/gown
- 7 Before assisting to stand, provides instructions to enable client to assist in standing including prearranged signal to alert client to begin standing
- 8 Stands facing client positioning self to ensure safety of candidate and client during transfer. Counts to three (or says other prearranged signal) to alert client to begin standing
- 9 On signal, gradually assists client to stand by grasping transfer belt on both sides with an upward grasp (candidate's hands are in upward position), and maintaining stability of client's legs
- 10 Walks slightly behind and to one side of client for a distance of ten (10) feet, while holding onto the belt
- 11 After ambulation, assists client to bed and removes transfer belt
- 12 Signaling device is within reach and bed is in low position
- 13 After completing skill, wash hands

ASSISTS WITH USE OF BEDPAN

- 1 Explains procedure speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before placing bedpan, lowers head of bed
- 4 Puts on clean gloves before handling bedpan
- 5 Places bedpan correctly under client's buttocks**
- 6 Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 7 After positioning client on bedpan and removing gloves, raises head of bed
- 8 Toilet tissue is within reach
- 9 Hand wipe is within reach and client is instructed to clean hands with hand wipe when finished
- 10 Signaling device within reach and client is asked to signal when finished
- 11 Puts on clean gloves before removing bedpan
- 12 Head of bed is lowered before bedpan is removed
- 13 Avoids overexposure of client
- 14 Empties and rinses bedpan and pours rinse into toilet
- 15 After rinsing bedpan, places bedpan in designated dirty supply area
- 16 After placing bedpan in designated dirty supply area, removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 17 Signaling device is within reach and bed is in low position

CLEANS UPPER OR LOWER DENTURE

- 1 Puts on clean gloves before handling denture
- 2 Bottom of sink is lined and/or sink is partially filled with water before denture is held over sink
- 3 Rinses denture in moderate temperature running water before brushing them
- 4 Applies toothpaste to toothbrush
- 5 Brushes surfaces of denture
- 6 Rinses surfaces of denture under moderate temperature running water
- 7 Before placing denture into cup, rinses denture cup and lid

Skill continues

- 8 Places denture in denture cup with moderate temperature water/solution and places lid on cup
- 9 Rinses toothbrush and places in designated toothbrush basin/container
- 10 Maintains clean technique with placement of toothbrush and denture
- 11 Sink liner is removed and disposed of appropriately and/or sink is drained
- 12 After rinsing equipment and disposing of sink liner, removes and disposes of gloves (without contaminating self) into waste container and washes hands

COUNTS AND RECORDS RADIAL PULSE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Places fingertips on thumb side of client's wrist to locate radial pulse
- 3 Count beats for one full minute
- 4 Signaling device is within reach
- 5 Before recording, washes hands
- 6 After obtaining pulse by palpating in radial artery position, records pulse rate within plus or minus 4 beats of evaluator's reading**

COUNTS AND RECORDS RESPIRATIONS

- 1 Explains procedure (for testing purposes), speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Counts respirations for one full minute
- 3 Signaling device is within reach
- 4 Washes hands
- 5 Records respiration rate within plus or minus 2 breaths of evaluator's reading**

DONNING AND REMOVING PPE (GOWN AND GLOVES)

- 1 Picks up gown and unfolds
- 2 Facing the back opening of the gown places arms through each sleeve
- 3 Fastens the neck opening
- 4 Secures gown at waist making sure that back of clothing is covered by gown (as much as possible)
- 5 Puts on gloves
- 6 Cuffs of gloves overlap cuffs of gown
- 7 **Before removing gown, with one gloved hand, grasps the other glove at the palm, remove glove**
- 8 **Slips fingers from ungloved hand underneath cuff of remaining glove at wrist, and removes glove turning it inside out as it is removed**
- 9 Disposes of gloves into designated waste container without contaminating self
- 10 After removing gloves, unfastens gown at neck and waist
- 11 After removing gloves, removes gown without touching outside of gown
- 12 While removing gown, holds gown away from body without touching the floor, turns gown inward and keeps it inside out
- 13 Disposes of gown in designated container without contaminating self
- 14 After completing skill, washes hands

DRESSES CLIENT WITH AFFECTED (WEAK) RIGHT ARM

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Asks which shirt he/she would like to wear and dresses him/her in shirt of choice
- 4 While avoiding overexposure of client, removes gown from the unaffected side first, then removes gown from the affected side and disposes of gown into soiled linen container
- 5 **Assists to put the right (affected/weak) arm through the right sleeve of the shirt before placing garment on left (unaffected) arm**
- 6 While putting on shirt, moves body gently and naturally, avoiding force and over-extension of limbs and joints

Skill continues

- 7 Finishes with clothing in place
- 8 Signaling device is within reach and bed is in low position
- 9 After completing skill, washes hands

FEEDS CLIENT WHO CANNOT FEED SELF

- 1 Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Before feeding, looks at name card on tray and asks client to state name
- 3 Before feeding client, client is in an upright sitting position (75-90 degrees)**
- 4 Places tray where the food can be easily seen by client
- 5 Candidate cleans client's hands with hand wipe before beginning feeding
- 6 Candidate sits facing client during feeding
- 7 Tells client what foods are on tray and asks what client would like to eat first
- 8 Using spoon, offers client one bite of each type of food on tray, telling client the content of each spoonful
- 9 Offers beverage at least once during meal
- 10 Candidate asks client if they are ready for next bite of food or sip of beverage
- 11 At end of meal, candidate cleans client's mouth and hands with wipes
- 12 Removes food tray and places tray in designated dirty supply area
- 13 Signaling device is within client's reach
- 14 After completing skill, washes hands

GIVES MODIFIED BED BATH (FACE AND ONE ARM, HAND AND UNDERARM)

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Removes gown and places in soiled linen container, while avoiding overexposure of the client
- 4 Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water
- 5 Puts on clean gloves before washing client
- 6 Beginning with eyes, washes eyes with wet washcloth (no soap), using a different area of the washcloth for each stroke, washing inner aspect to outer aspect then proceeds to wash face**
- 7 Dries face with towel
- 8 Exposes one arm and places towel underneath arm
- 9 Applies soap to wet washcloth
- 10 Washes arm, hand, and underarm keeping rest of body covered
- 11 Rinses and dries arm, hand, and underarm
- 12 Moves body gently and naturally, avoiding force and over-extension of limbs and joints
- 13 Puts clean gown on client
- 14 Empties, rinses, and dries basin
- 15 After rinsing and drying basin, places basin in designated dirty supply area
- 16 Disposes of linen into soiled linen container
- 17 Avoids contact between candidate clothing and used linens
- 18 After placing basin in designated dirty supply area, and disposing of used linen, removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 19 Signaling device is within reach and bed is in low position

MEASURES AND RECORDS BLOOD PRESSURE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Before using stethoscope, wipes bell/diaphragm and earpieces of stethoscope with alcohol
- 3 Client's arm is positioned with palm up and upper arm is exposed
- 4 Feels for brachial artery on inner aspect of arm, at bend of elbow
- 5 Places blood pressure cuff snugly on client's upper arm, with sensor/arrow over brachial artery site
- 6 Earpieces of stethoscope are in ears and bell/diaphragm is over brachial artery site
- 7 Candidate inflates cuff between 160 mm Hg to 180 mm Hg. If beat heard immediately upon cuff deflation, completely deflate cuff. Re-inflate cuff to no more than 200 mm Hg
- 8 Deflates cuff slowly and notes the **first** sound (systolic reading), and **last** sound (diastolic reading) (If rounding needed, measurements are rounded **UP** to the nearest 2 mm of mercury)
- 9 Removes cuff
- 10 Signaling device is within reach
- 11 Before recording, washes hands
- 12 **After obtaining reading using BP cuff and stethoscope, records both systolic and diastolic pressures each within plus or minus 8 mm of evaluator's reading**

MEASURES AND RECORDS URINARY OUTPUT

- 1 Puts on clean gloves before handling bedpan
- 2 Pours the contents of the bedpan into measuring container without spilling or splashing urine outside of container
- 3 Measures the amount of urine at eye level with container on flat surface
- 4 After measuring urine, empties contents of measuring container into toilet
- 5 Rinses measuring container and pours rinse into toilet
- 6 Rinses bedpan and pours rinse into toilet
- 7 After rinsing equipment, and before recording output, removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 8 Records contents of container within plus or minus 25 ml/cc of evaluator's reading**

MEASURES AND RECORDS WEIGHT OF AMBULATORY CLIENT

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Client has shoes on before walking to scale
- 3 Before client steps on scale, candidate sets scale to zero
- 4 While client steps onto scale, candidate stands next to scale and assists client, if needed, onto center of scale; then obtains client's weight
- 5 While client steps off scale, candidate stands next to scale and assists client, if needed, off scale before recording weight
- 6 Before recording, washes hands
- 7 Records weight based on indicator on scale. Weight is within plus or minus 2 lbs of evaluator's reading (If weight recorded in kg weight is within plus or minus 0.9 kg of evaluator's reading)**

PERFORMS MODIFIED PASSIVE RANGE OF MOTION (PROM) FOR ONE KNEE AND ONE ANKLE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Instructs client to inform candidate if pain is experienced during exercise
- 4 Supports leg at knee and ankle while performing range of motion for knee
- 5 Bends the knee and then returns leg to client's normal position (extension/flexion) (AT LEAST 3 TIMES unless pain is verbalized)
- 6 Supports foot and ankle close to the bed while performing range of motion for ankle
- 7 Pushes/pulls foot toward head (dorsiflexion), and pushes/pulls foot down, toes point down (plantar flexion) (AT LEAST 3 TIMES unless pain is verbalized)
- 8 While supporting the limb, moves joints gently, slowly, and smoothly through the range of motion, discontinuing exercise if client verbalizes pain**
- 9 Signaling device is within reach and bed is in low position
- 10 After completing skill, washes hands

PERFORMS MODIFIED PASSIVE RANGE OF MOTION (PROM) FOR ONE SHOULDER

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Instructs client to inform candidate if pain experienced during exercise
- 4 Supports client's upper and lower arm while performing range of motion for shoulder
- 5 **Raises client's straightened arm from side position upward toward head to ear level and returns arm down to side of body (flexion/extension) (AT LEAST 3 TIMES unless pain is verbalized). Supporting the limb, moves joint gently, slowly, and smoothly through the range of motion, discontinuing exercise if client verbalizes pain**
- 6 **Moves client's straightened arm away from the side of body to shoulder level and returns to side of body (abduction/adduction) (AT LEAST 3 TIMES unless pain is verbalized). Supporting the limb, moves joint gently, slowly, and smoothly through the range of motion, discontinuing exercise if client verbalizes pain**
- 7 Signaling device is within reach and bed is in low position
- 8 After completing skill, washes hands

POSITIONS ON SIDE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before turning, lowers head of bed
- 4 Raises side rail on side to which body will be turned
- 5 Slowly rolls onto side as one unit toward raised side rail
- 6 Places or adjusts pillow under head for support
- 7 Candidate positions client so that client is not lying on arm
- 8 Supports top arm with supportive device
- 9 Places supportive device behind client's back
- 10 Places supportive device between legs with top knee flexed; knee and ankle supported
- 11 Signaling device is within reach and bed is in low position
- 12 After completing skill, washes hands

PROVIDES CATHETER CARE FOR FEMALE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water
- 4 Puts on clean gloves before washing
- 5 Places linen protector under perineal area before washing
- 6 Exposes area surrounding catheter while avoiding overexposure of client
- 7 Applies soap to wet washcloth
- 8 While holding catheter at meatus without tugging, cleans at least four inches of catheter from meatus, moving in only one direction (i.e., away from meatus) using a clean area of the cloth for each stroke**
- 9 While holding catheter at meatus without tugging, rinses at least four inches of catheter from meatus, moving only in one direction, away from meatus, using a clean area of the cloth for each stroke**
- 10 While holding catheter at meatus without tugging, dries at least four inches of catheter moving away from meatus
- 11 Empties, rinses, and dries basin
- 12 After rinsing and drying basin, places basin in designated dirty supply area
- 13 Disposes of used linen into soiled linen container and disposes of linen protector appropriately
- 14 Avoids contact between candidate clothing and used linen
- 15 After disposing of used linen and cleaning equipment, removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 16 Signaling device is within reach and bed is in low position

PROVIDES FOOT CARE ON ONE FOOT

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water
- 4 Basin is in a comfortable position for client and on protective barrier
- 5 Puts on clean gloves before washing foot
- 6 Client's bare foot is placed into the water
- 7 Applies soap to wet washcloth
- 8 Lifts foot from water and washes foot (including between the toes)
- 9 Foot is rinsed (including between the toes)
- 10 Dries foot (including between the toes)
- 11 Applies lotion to top and bottom of foot, removing excess (if any) with a towel
- 12 Supports foot and ankle during procedure
- 13 Empties, rinses, and dries basin
- 14 After rinsing and drying basin, places basin in designated dirty supply area
- 15 Disposes of used linen into soiled linen container
- 16 After cleaning foot and equipment, and disposing of used linen, removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 17 Signaling device is within reach

PROVIDES MOUTH CARE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before providing mouth care, client is in upright sitting position (75-90 degrees)
- 4 Puts on clean gloves before cleaning mouth
- 5 Places clothing protector across chest before providing mouth care
- 6 Secures cup of water and moistens toothbrush
- 7 Before cleaning mouth, applies toothpaste to moistened toothbrush
- 8 Cleans mouth (including tongue and surfaces of teeth), using gentle motions**
- 9 Maintains clean technique with placement of toothbrush
- 10 Candidate holds emesis basin to chin while client rinses mouth
- 11 Candidate wipes mouth and removes clothing protector
- 12 After rinsing toothbrush, empty, rinse and dry the basin and place used toothbrush in designated basin/container
- 13 Places basin and toothbrush in designated dirty supply area
- 14 Disposes of used linen into soiled linen container
- 15 After placing basin and toothbrush in designated dirty supply area, and disposing of used linen, removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 16 Signaling device is within reach and bed is in low position

PROVIDES PERINEAL CARE (PERI-CARE) FOR FEMALE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water
- 4 Puts on clean gloves before washing perineal area
- 5 Places pad/ linen protector under perineal area before washing
- 6 Exposes perineal area while avoiding overexposure of client
- 7 Applies soap to wet washcloth
- 8 Washes genital area, moving from front to back, while using a clean area of the washcloth for each stroke**
- 9 Using clean washcloth, rinses soap from genital area, moving from front to back, while using a clean area of the washcloth for each stroke**
- 10 Dries genital area moving from front to back with towel
- 11 After washing genital area, turns to side, then washes and rinses rectal area moving from front to back using a clean area of washcloth for each stroke. Dries with towel**
- 12 Repositions client
- 13 Empties, rinses, and dries basin
- 14 After rinsing and drying basin, places basin in designated dirty supply area
- 15 Disposes of used linen into soiled linen container and disposes of linen protector appropriately
- 16 Avoids contact between candidate clothing and used linen
- 17 After disposing of used linen, and placing used equipment in designated dirty supply area, removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 18 Signaling device is within reach and bed is in low position

TRANSFERS FROM BED TO WHEELCHAIR USING TRANSFER BELT

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before assisting to stand, wheelchair is positioned along side of bed, at head of bed facing foot or foot of bed facing head
- 4 Before assisting to stand, footrests are folded up or removed
- 5 Before assisting to stand, bed is at a safe level
- 6 Before assisting to stand, locks wheels on wheelchair**
- 7 Before assisting to stand, checks and/or locks bed wheels
- 8 Before assisting to stand, client is assisted to a sitting position with feet flat on the floor**
- 9 Before assisting to stand, client is wearing shoes
- 10 Before assisting to stand, applies transfer belt securely at the waist over clothing/gown
- 11 Before assisting to stand, provides instructions to enable client to assist in transfer including prearranged signal to alert when to begin standing
- 12 Stands facing client positioning self to ensure safety of candidate and client during transfer. Counts to three (or says other prearranged signal) to alert client to begin standing
- 13 On signal, gradually assists client to stand by grasping transfer belt on both sides with an upward grasp (candidate's hands are in upward position) and maintaining stability of client's legs
- 14 Assists client to turn to stand in front of wheelchair with back of client's legs against wheelchair
- 15 Lowers client into wheelchair
- 16 Positions client with hips touching back of wheelchair and transfer belt is removed
- 17 Positions feet on footrests
- 18 Signaling device is within reach
- 19 After completing skill, washes hands

SCORE REPORTING

EXAM RESULTS

The Nurse Aide Evaluator will not answer questions about your Score Report. If you have questions about your Score Report, or the content of the examination, call Pearson VUE at (877) 244-1694. **Results will not be given over the phone.**

WRITTEN (OR ENGLISH OR SPANISH ORAL) EXAM

After you finish the Written (or English or Spanish Oral) Examination, the Nurse Aide Evaluator will fax your answer sheet for scoring. Within approximately ten (10) minutes (from the time the answer sheet was faxed), you will receive an official Score Report. The Score Report will indicate whether you have passed or failed the Written (or English or Spanish Oral) Examination.

SKILLS EVALUATION

The Nurse Aide Evaluator will also fax your Skills Evaluation results for scoring. After the Nurse Aide Evaluator evaluates your performance, he or she will fax the Skills Evaluation answer sheet for scoring. Within approximately ten (10) minutes (from the time the answer sheet was faxed), you will receive an official Score Report. The Score Report will indicate whether you have passed or failed the Skills Evaluation.

Occasionally, due to technical difficulties, Score Reports may not be received at the test center on the day of testing. If this happens your answer sheet will be mailed to Pearson VUE for handscoring. Your Score Report will then be mailed out to you within 5-7 business days after testing. For questions regarding delayed Score Reports, please contact Pearson VUE at (877) 244-1694.

FAILING

If you fail the Written (or English or Spanish Oral) Examination or the Skills Evaluation, your Score Report will provide you with information on how to re-take either or both parts of the evaluation. A new examination fee is required each time you re-take any part of the NNAAP Examination. To re-take either or both parts, you must submit your official Score Report or a new application and a re-take fee to NACES.

State and federal regulations allow you three (3) attempts to pass both the Skills Evaluation and the Written (or English or Spanish Oral) Examination. If you should fail either part or both parts three (3) times, within one (1) year from the completion date of your training program, you will be required to successfully complete a state-approved training program and re-take both parts. You must take and pass both the Written (or Oral) Examination and the Skills Evaluation to be placed on the Georgia Nurse Aide Registry.

HOW TO READ A FAILING SCORE REPORT

If you do not pass the Skills Evaluation, you will receive a Failing Score Report. The score report will list the five (5) skills that you performed and a score of *Satisfactory* or *Unsatisfactory* for each skill. Any skill with an *Unsatisfactory* result is considered a failed skill. You must receive a *Satisfactory* result on all five (5) skills to pass the Skills Evaluation.

Use your failing Score Report as an aid in studying to re-take the Skills Evaluation. A failed skill will show the reason for the failure. You may not have performed the steps of a skill correctly, or you may have forgotten a step, especially a Critical Element Step.

The failing Score Report will list steps that were missed or incorrect—look for numbers printed directly under a skill marked *Unsatisfactory*. A list of all the skills and the steps needed for each skill can be found in this handbook. Find the skill you failed, and study the steps, especially steps listed as *Unsatisfactory* on the score report.

In the example on the following page, a candidate received a result of *Unsatisfactory* on the skill *Hand Hygiene*. The numbers 1, 5, and 10 printed below the skill refer to steps that were missed or performed incorrectly. To study for re-taking the Skills Evaluation, this candidate should turn to the Skills Listing in this handbook, look for the *Hand Hygiene* skill, and review all the steps, especially steps 1, 5, and 10.

Georgia NNAAP® Examination Results	
Exam: Skills	Result: Fail
Skills Performance:	
Hand Hygiene 1, 5, 10	Unsatisfactory
Provides Mouth Care	Satisfactory
Measures and Records Blood Pressure	Satisfactory
Puts One Knee-High Elastic Stocking on Client	Satisfactory
Assists Client to Ambulate using transfer belt	Satisfactory

A sample of a Failing Score Report

PASSING

Once you have passed both the Written (or Oral) Examination and the Skills Evaluation, your name will be submitted to the Alliant Georgia Nurse Aide Registry. You may view your name on the Registry by going to www.mmis.georgia.gov (click the **Nurse Aide** tab). If you have any questions regarding your listing on the Registry you may contact the Georgia Medical Care Foundation, Monday through Friday from 8:00 a.m. to 5:00 p.m. (E.S.T.) at **(800) 414-4358** or locally at **(678) 527-3010**.

DUPLICATE SCORE REPORT

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

GRIEVANCE PROCESS

OVERVIEW

Each candidate has a right to file a grievance to complain or contest the results of their Nurse Aide Exam. The NACES Plus Foundation, Inc. (NACES) will follow-up on each grievance within 30 days of receipt of the candidate grievance letter.

No grievance will be investigated if it is not received in writing by the NACES Plus Foundation, Inc.

PROCESS

All grievances must be in writing. The candidate must provide as much detail as possible in a grievance letter and forward it to NACES Plus Foundation, Inc. with a copy of the failed score report within 30 days of their exam date. After receipt of the grievance letter, the appropriate RN Associate Program Director will investigate the complaint. Once the investigation is complete, the RN Associate Program Director will draft a letter back to the candidate informing him/her of the outcome of the investigation. If an error was made by the evaluator, NACES, or Pearson VUE, the candidate will be allowed to retest at no additional cost.

THE REGISTRY

CHANGE OF ADDRESS OR NAME

The Georgia Nurse Aide Registry must be kept informed of your current address and name.

There is no charge for changing your name or address on the Registry. You may notify the Registry of a name or address change by using the Address or Name Change Reporting Form on the Nurse Aide Registry website (www.mmis.georgia.gov and click the **Nurse Aide** tab). Alternately, you may call the Nurse Aide Registry at **(800) 414-4358** or locally at **(678) 527-3010** to change your mailing address on the Registry.

If your name changes at any time after you are placed on the Registry, you must send written notification of this change to the Registry. Please remember, however, that if you changed your name, you **MUST** provide official documentation along with your notification. Written documentation must include 1) a COPY of your signed social security card with the new name on it, AND 2) a COPY of a court-issued marriage certificate, divorce decree, or other legal document that demonstrates the name change. Your notification must include your previous name, current name, mailing address, phone number, and Social Security number. All documents provided to the Registry in support of your name change **MUST** be official and legal documents. Any documents provided may be subject to verification with the issuing source.

Failure to inform the Registry of an address or name change may jeopardize your listing status. A correct address is required for you to receive notification for renewal.

LISTING RENEWAL

Nurse aides on the Georgia Nurse Aide Registry must renew their registry listing to remain eligible for employment as a nurse aide. To be eligible for renewal based on employment, you must work for pay, performing nursing-related services, for at least eight (8) hours every twenty-four (24) consecutive months under the supervision of a nurse. This employment must be documented and reported to the Nurse Aide Registry prior to each listing expiration date. The listing expiration date is twenty-four (24) months from either the date of your

last successful competency examination or last recertification date, whichever is more recent. A new competency examination is required if you do not work in a qualifying position for a twenty-four (24) month period or more.

Failure to inform the Registry of an address or name change may jeopardize your listing status. A correct address is required for you to receive notification for renewal.

RENEWAL NOTICE

Approximately sixty (60) days before the expiration of your Registry listing, the Registry will send a Renewal Application to the mailing address listed for you on the Registry. It is your responsibility to renew by the expiration date, even if you do not receive the Renewal Application from the Registry. If you do not receive a Renewal Application, or you misplace it, a *Nurse Aide Renewal Application* is available on the Registry web site www.mmis.georgia.gov (click the **Nurse Aide** tab).

When you receive your Renewal Application, you will need a signature from your current or most recent employer to complete the employment verification section of the Application. The date of hire on your Renewal Application **MUST** be a date prior to the date your listing expired.

RENEWAL FEE

There is **no fee** for re-listing on the Georgia Nurse Aide Registry.

For more information about re-activating a lapsed Nurse Aide Registry listing, please call the Georgia Nurse Aide Registry at **(800) 414-4358** or locally at **(678) 527-3010**.

Georgia Nurse Aide

REQUEST FOR DUPLICATE SCORE REPORT OR HANDSCORED ANSWER SHEET

DIRECTIONS:

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

Duplicate Score Report

Handscore

FEE:

\$15 each. Please enclose a certified check or money order made payable to “Pearson VUE Processing Center”. Do not send cash. Write the Pearson VUE identification number found on your Score Report or your Social Security number on your payment.

SEND TO:

Georgia Duplicate Score Report/Handscore Request
Pearson VUE Processing Center
PO Box 822749
Philadelphia, PA 19182-2745

AMOUNT ENCLOSED:

\$ _____

PLEASE COMPLETE BOTH SIDES OF THIS FORM

PLEASE COMPLETE THE FOLLOWING FORM WITH YOUR CURRENT NAME AND ADDRESS. ALL INFORMATION MUST BE COMPLETE AND ACCURATE TO ENSURE PROPER PROCESSING.

Name _____

Street _____

City _____ State _____ Zip _____

Tel. (_____) _____ Pearson VUE Identification Number or Social Security Number _____

IF THE ABOVE INFORMATION WAS DIFFERENT AT THE TIME YOU WERE TESTED, PLEASE INDICATE ORIGINAL INFORMATION.

Name _____

Street _____

City _____ State _____ Zip _____

Tel. (_____) _____

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

Your Signature _____ Date _____

PLEASE COMPLETE BOTH SIDES OF THIS FORM

