COMPETENCY-BASED OCCUPATIONAL FRAMEWORK FOR REGISTERED APPRENTICESHIP

Certified Nursing Assistant (CNA) (Existing title: Nurse Assistant) ONET Code: 31-1014.00

RAPIDS Code: 0824CB

Created: September 2019 Updated: July 2020

This project has been funded, either wholly or in part, with Federal funds from the Department of Labor, Employment and Training Administration under Contract Number DOL-ETA-15-C-0087. The contents of this publication do not necessarily reflect the views or policies of the Department of Labor, nor does mention of trade names, commercial products, or organizations imply endorsement of the same by the US Government.

For more information, contact:

Diana Elliott, PhD, Senior Research Associate, Urban Institute: delliott@urban.org Robert Lerman, PhD, Institute Fellow, Urban Institute: rlerman@urban.org





ABOUT THE URBAN INSTITUTE

The nonprofit Urban Institute is dedicated to elevating the debate on social and economic policy. For nearly five decades, Urban scholars have conducted research and offered evidence-based solutions that improve lives and strengthen communities across a rapidly urbanizing world. Their objective research helps expand opportunities for all, reduce hardship among the most vulnerable, and strengthen the effectiveness of the public sector.

Acknowledgments

We are grateful to Rebecca von Loewenfeldt of the Healthcare Career Advancement Program ("H-CAP") for their help with this document. We also thank the representatives of the health and medical field who contributed to this effort, including the following professionals.

William Myhre, senior director of workforce transformation/HR Staten Island Performing Provider System Staten Island, NY

Kathy Page, partnership manager District214 High School District Arlington Heights, IL

Dr. Marcella Zipp, director of grants and special programs District214 High School District *Arlington Heights, IL*

Heather Keller, director of apprentice training Medcerts *Greater Detroit Area, MI*

Barbara Westrick, program director Medcerts Greater Detroit Area, MI

Dana Janssen, chief product officer Medcerts *Greater Detroit Area*, MI

Corinne Elridge, president and CEO California Long-Term Care Education Center *Los Angeles, California*

Contents

Acknowledgments	ii
Competency-Based Occupational Frameworks	1
Components of the Competency-Based Occupational Framework	2
Using the Competency-Based Occupational Framework to Develop a Registered Apprenticesh	
Certified Nursing Assistant Occupational Overview	4
Occupational Purpose and Context	4
Potential Job Titles	4
Attitudes and Behaviors	4
Apprenticeship Prerequisites	4
Occupational Pathways	5
Certifications, Licensure, and Other Credential Requirements	5
Job Functions	5
Stackable Programs	6
Options and Specializations	6
Levels	6
Work Process Schedule	7
Related Technical Instruction Plan	11
Cross-Cutting Competencies	12
Detailed Job Functions	14
Job Function 1: Provide basic nursing care	14
Job Function 2: Transfer and reposition patient or resident	17
Job Function 3: Provide basic nursing treatments and procedures	19
Job Function 4: Follow infection control procedures	23
Job Function 5: Follow safety and emergency procedures	26
Job Function 6: Communication	29
Job Function 7: Care for cognitively impaired patients and residents	31
Job Function 8: Maintain standards of professional care and develop professional skills	33
Job Function 9: Additional basic nursing care authorized by some states	35
References	
Statement of Indpendence	

Competency-Based Occupational Frameworks

The Urban Institute, under contract with the US Department of Labor, has worked with employers, subject matter experts, labor unions, trade associations, credentialing organizations, and academics to develop Competency-Based Occupational Frameworks (CBOFs) for Registered Apprenticeship programs. These frameworks define the **purpose** of an occupation, the **job functions** that are carried out to fulfill that purpose, the **competencies** that enable the apprentice to execute those job functions well, and the **performance criteria** that define the specific knowledge, skills, and personal attributes associated with high performance in the workplace. This organizational hierarchy—job purpose, job functions, competencies, performance criteria—is designed to illustrate that performing work well requires more than just acquiring discrete knowledge elements or developing a series of manual skills. To perform a job well, the employee must be able to assimilate knowledge and skills learned in various settings, recall and apply that information to the present situation, and carry out work activities using sound professional judgment, demonstrating an appropriate attitude or disposition and achieving a level of speed and accuracy necessary to meet the employer's business need.

The table below compares the terminology of Functional Analysis with that of traditional Occupational Task Analysis to illustrate the important similarities and differences. While both identify the key technical elements of an occupation, functional analysis includes the identification of behaviors, attributes, and characteristics of workers necessary to meet an employer's expectations.

Framework Terminology	Traditional Task Analysis Terminology
Job Function: the work activities that are carried out to fulfill the job purpose	Job Duties: roles and responsibilities associated with an occupation
Competency: the actions an individual takes and the attitudes he/she displays to complete those activities	Task: a unit of work or set of activities needed to produce some result
Performance Criteria: the specific knowledge, skills, dispositions, attributes, speed, and accuracy associated with meeting the employer's expectations	Subtask: the independent actions taken to perform a unit of work or activity

Although designed for use in competency-based apprenticeship, these Competency-Based Occupational Frameworks also support time-based apprenticeship by defining more clearly and precisely what an apprentice is expected to learn and do during the allocated time period.

CBOFs are comprehensive to encompass the full range of jobs that may be performed by individuals in the same occupation. As employers or sponsors develop their individual apprenticeship programs, they can extract from or add to the framework to meet their unique organizational needs.

Components of the Competency-Based Occupational Framework

Occupational Overview: This section of the framework provides a description of the occupation including its purpose, the setting in which the job is performed, and unique features of the occupation.

Work Process Schedule: This section includes the job functions and competencies that would likely be included in an apprenticeship sponsor's application for registration. These frameworks provide a point of reference that has already been vetted by industry leaders so sponsors can develop new programs knowing that they will meet or exceed the consensus expectations of peers. Sponsors maintain the ability to customize their programs to meet their unique needs, but omission of a significant number of job functions or competencies should raise questions about whether or not the program has correctly identified the occupation of interest.

Cross-Cutting Competencies: These competencies are common among all workers and focus on the underlying knowledge, attitudes, personal attributes, and interpersonal skills that are important regardless of the occupation. That said, while these competencies are important to all occupations, the relative importance of some versus others may change from one occupation to the next. These relative differences are illustrated in this part of the CBOF and can be used to design pre-apprenticeship programs or design effective screening tools when recruiting apprentices to the program.

Detailed Job Function Analysis: This portion of the framework includes considerable detail and is designed to support curriculum designers and trainers in developing and administering the program. The detail in this section may be confusing to those seeking a more succinct, higher-level view of the program. For this reason, we recommend that the Work Process Schedule be the focus of program planning activities, leaving the detailed job function analysis sections to instructional designers as they engage in their development work.

- Related Technical Instruction: Under each job function appears a list of foundational knowledge, skills, tools, and technologies that would likely be taught in the classroom to enable the apprentice's on-the-job training safety and success.
- b. Performance Criteria: Under each competency, we provide recommended performance criteria that could be used to differentiate between minimally, moderately, and highly competent apprentices. These performance criteria are generally skills based rather than knowledge based, but may also include dispositional and behavioral competencies.

Using the Competency-Based Occupational Framework to Develop a Registered Apprenticeship Program

When developing a registered apprenticeship program, the Work Process Schedule included in this CBOF provides an overview of the job functions and competencies an expert peer group deemed to be important to this occupation. The Work Process Schedule in this document can be used directly, or modified and used to describe your program content and design as part of your registration application.

When designing the curriculum to support the apprenticeship program—including on-the-job training and related technical instruction—the information the Detailed Job Functions section could be helpful. These more detailed job function documents include recommendations for the key knowledge and skills that might be included in the classroom instruction designed to support a given job function, and the performance criteria provided under each competency could be helpful to trainers and mentors in evaluating apprentice performance and insuring inter-rater reliability when multiple mentors are involved.

Certified Nursing Assistant Occupational Overview

Occupational Purpose and Context

Certified Nursing Assistants (CNAs) provide basic patient care under direction of nursing staff. They perform actions related to patient care, including feeding, dressing, grooming, moving patients, and caring for patients' environmental conditions by changing linens and other actions.

Potential Job Titles

Reported job titles include Certified Nursing Assistant (CNA), Certified Nurse Aide (CNA), Licensed Nursing Assistant (LNA), Nursing Care Attendant, Nursing Attendant, Nurse's Aide, Nursing Aide, Nursing Assistant, State Tested Nursing Assistant (STNA), Certified Medication Aide (CMA), and Geriatric Nursing Assistant (GNA)

Attitudes and Behaviors

People who are successful in becoming Certified Nursing Assistants are compassionate and caring with their patients or nursing home residents. Successful CNAs exhibit social and cultural perceptiveness and are observant of the health status of their patients. CNAs are detail-oriented and conscientious, performing their duties reliably in a way that does not harm patients and minimizes their own risk of injury or exposure to pathogens. CNAs possess coordination and body control to support or assist with movement and actions of patients and residents. CNAs must have the stamina to work on their feet for long periods and maintain their performance throughout the day.

Other terms commonly used to describe attitudes and behaviors of Certified Nursing Assistants include: mentally alert, maintaining a positive attitude, desiring to expand skills and able to take constructive criticism, honest, patient, ethical, reliable, and confident.

Apprenticeship Prerequisites

Certified Nursing Assistants generally must have completed a high school diploma or equivalent. Certification programs are offered by community colleges and some medical facilities. Such programs generally require 6 to 12 weeks of course work in basic nursing skills, anatomy, and physiology. Participation in a training program requires a complete background check, documentation of current required immunizations and current Healthcare Provider Cardiopulmonary Resuscitation (CPR) certification. The CNA exam for certification has two components: a written exam and a clinical skills exam. CNA program students must undergo drug screening before employment.

Occupational Pathways

Certified Nursing Assistants typically enter the occupation having already completed certification that includes clinical skill training and testing. Some Certified Nursing Assistants have previous work experience as Home Health Aides. Continuing education can be required for renewal of certification.

Health care occupations that Certified Nursing Assistants often progress into may include advanced or specialized Certified Nursing Assistant, patient care technician and other clinical medicine, health care, and laboratory positions. With additional training and certification, some certified nursing assistants progress to becoming a Licensed Practical Nurse (LPN).

Certifications, Licensure, and Other Credential Requirements

Credential	Offered by	Before, During, or After Apprenticeship
Nursing Assistant Certification	See individual state requirements	Before
Medication Aide Certification	National Council of State Boards of Nursing (NCSBN)	After

Job Functions

Job Functions	Core or Optional
1. Provide basic nursing care	Core
2. Transfer and reposition patient or resident	Core
3. Provide basic nursing treatments and procedures	Core
4. Follow infection control procedures	Core
5. Follow safety and emergency procedures	Core
6. Communication	Core
7. Care for cognitively impaired patients and residents	Core
8. Maintain standards of professional care and develop professional skills	Core
9. Additional basic nursing care authorized by some states	Optional

Stackable Programs

This occupational framework is designed to link to the following additional framework(s) as part of a career laddering pathway.

Stackable Programs	Base or Higher Level	Stacks on Top of
n/a		

Options and Specializations

The following options and specializations have been identified for this occupation. The Work Process Schedule and individual job function outlines indicate which job functions and competencies were deemed by industry advisors to be optional. Work Process Schedules for Specializations are included at the end of this document.

Options and Specializations	Option	Specialization
n/a		

Levels

Industry advisors have indicated that individuals in this occupation may function at different levels, based on the nature of their work, the amount of time spent in an apprenticeship, the level of skills or knowledge mastery, and the degree of independence in performing the job or supervisory/management responsibilities.

Level	Distinguishing Features	Added Competencies	Added Time Requirements
n/a			

Work Process Schedule

Certified Nursing Assistant

WORK PROCESS SCHEDULE

(Existing title: Nurse Assistant)

Job Title: Certified Nursing Assistant				
Level:	Specialization:			
Stackable Program:YesNo				
Base Occupation Name:				
Company Contact:				
Address:	Phone:	Email:		
Apprenticeship Type: X_Competency Based Time Based Hybrid	Prerequisites:			

Job Function 1: Provide basic nursing care				
Competencies	Core or Optional	RTI	TLO	
A. Follow the patient's or resident's plan of care	Core			
B. Assist with nurses' examinations and procedures	Core			
C. Take and record vital signs	Core			
D. Measure and record height and weight	Core			
E. Frequently check patient or resident status	Core			
F. Recognize and report abnormal changes	Core			
G. Assist with collection of specimens	Core			
H. Assist with provision of end-of-life care	Core			

ONET Code: 31-1014.00 RAPIDS Code: 0824CB

Job Function 2: Transfer and reposition patient or resident				
Compe	tencies	Core or Optional	RTI	TLO
A.	Position and/or turn patient or resident to prevent bed sores and ulcers	Core		
В.	Transfer patient or resident from bed to wheelchair or wheelchair to bed	Core		
C.	Transfer patients or residents from bed to stretcher	Core		
D.	Assist with ambulation	Core		

Job Function 3: Provide basic nursing treatments and procedures					
Compe	tencies	Core or Optional	RTI	TLO	
Α.	Bathe and shower patient or resident	Core			
В.	Groom patient or resident	Core			
C.	Provide oral care	Core			
D.	Dress patient or resident	Core			
E.	Assist patient or resident with using the toilet	Core			
F.	Assist with eating and hydration	Core			
G.	Feed a patient or resident who cannot on their own	Core			
Н.	Provide foot and hand care	Core			
I.	Provide skin care	Core			
J.	Assist patients and residents with personal equipment and devices	Core			
К.	Maintain patients' and residents' environment	Core			
L.	Provide physical comfort measures	Core			
M.	Provide basic restorative care	Core			

Job Function 4: Follow infection control procedures				
Compe	tencies	Core or Optional	RTI	TLO
A.	Evaluate and maintain a safe environment	Core		
В.	Report signs and symptoms to licensed professionals	Core		
C.	Maintain hand hygiene	Core		
D.	Use personal protective equipment	Core		
E.	Maintain isolation	Core		
F.	Practice respiratory hygiene/cough etiquette	Core		
G.	Safely deal with sharps	Core		

Job Fur	Job Function 5: Follow safety and emergency procedures					
Compe	tencies	Core or Optional	RTI	TLO		
А.	Recognize and respond to Foreign Body Airway Obstruction (FBAO)	Core				
B.	Recognize and respond to other medical emergencies: cardiac arrest, stroke, and bleeding/hemorrhage	Core				
C.	Recognize and respond to convulsions	Core				
D.	Prevent and respond to falls	Core				
E.	Prevent and respond to burns and scalds	Core				
F.	Prevent and respond to poisoning	Core				
G.	Maintain and respond to patient alarm systems	Core				
H.	Handle hazardous waste	Core				
I.	Follow oxygen safety	Core				
J.	Prepare for facility emergencies	Core				
К.	Protect self from harm through workplace accidents or violence	Core				

Job Fur	Job Function 6: Communication					
Compe	tencies	Core or Optional	RTI	TLO		
А.	Exchange information with patients and residents	Core				
В.	Communicate with visually impaired patients and residents	Core				
C.	Communicate with hearing impaired patients and residents	Core				
D.	Encourage family involvement in patient and resident care	Core				
E.	Communicate with staff and other care providers	Core				
F.	Assist with admission, discharge, and transfer	Core				

Job Function 7: Care for cognitively impaired patients and residents					
Competencies	Core or Optional	RTI	TLO		
A. Address unique needs of individuals with dementia	Core				
B. Communicate with cognitively impaired patients and residents	Core				
C. Monitor the mobility of cognitively impaired patients and residents	Core				

Job Function 8: Maintain standards of professional care and develop professional skills

Competencies	Core or Optional	RTI	TLO
A. Provide privacy and maintain confidentiality	Core		
B. Promote patients' and residents' rights to make choices that accommodate their needs	Core		
C. Promote esteem and dignity	Core		
D. Promote sense of security	Core		
E. Avoid the need for restraints in accordance with current professional standards	Core		
F. Participate in performance-improvement and cost-containment programs	Core		

Job Function 9: Additional basic nursing care authorized by some states						
Competencies	Core or Optional	RTI	TLO			
A. Assist with medication management	Optional					
B. Manage wound care	Optional					
C. Manage catheter and tube care	Optional					
D. Communicate medical information	Optional					

Related Technical Instruction Plan

The following is an example of a typical related technical instruction plan of coursework required for certification in the State of Maryland as offered by the Community College of Baltimore County. Instruction plans and certification requirements will vary by state and educational entity.

COURSE NAME: Certified Nursing Assistant Theory	Course Number: AHL 170 Hours: 60
LEARNING OBJECTIVES	
Prepare to apply for state certification as both a Certified Nursing Assistant (C Assistant (GNA) and become a vital part of the health care team. Learn to work the direct supervision of a nurse and acquire skills in assisting with activities or with meals, personal grooming, and more. Additional responsibilities involve b obtaining a patient's vital signs.	in various settings under daily living such as helping

COURSE NAME: Nursing Assistant Clinical	Course Number: AHL 171 Hours: 40
LEARNING OBJECTIVES	
Work under the supervision of an RN or LPN as you prepare to apply for Marylan both a Certified Nursing Assistant (CNA) and a Geriatric Nursing Assistant (GNA with activities of daily living, which may include helping patients/clients with me and toileting—the CNA's or GNA's primary duties. Additional responsibilities inv nursing skills such as obtaining a patient's/client's vital signs (i.e., pulse rate, bloo	A). You'll learn to assist als, personal grooming, olve performing basic

COURSE NAME: Cardiopulmonary Resuscitation for Health Care Providers	Course Number: AHE 805	
	Hours: 7	
LEARNING OBJECTIVES		
This course is designed to provide the nurse, allied health worker, or general stu	dent with information	
about cardiopulmonary resuscitation. Upon completion of the course, the student will receive an		
American Heart Association CPR card. Topics covered include the signs and syn respiratory arrest, risk factors of heart disease, and the skills to perform CPR. C		
completion of this course the student will (1) describe the signs and symptoms of		
(2) demonstrate one and two rescuer CPR; (3) demonstrate automated external	•	
demonstrate management of an obstructed airway; and (5) demonstrate infant	resuscitation.	

Cross-Cutting Competencies

	COMPETENCY**	0	1	2	3	4	5	6	7	8
	Interpersonal Skills									
ness	Integrity									
Personal Effectiveness	Professionalism									
	Initiative									
nal E	Dependability and Reliability									
erso	Adaptability and Flexibility									
d	Lifelong Learning									
	Reading									
	Writing									
uic.	Mathematics									
Academic	Science and Technology									
Ac	Communication									
	Critical and Analytical Thinking									
	Basic Computer Skills									
	Teamwork									
	Customer Focus									
	Planning and Organization									
a	Creative Thinking									
Workplace	Problem Solving and Decision Making									
/ork	Working with Tools and Technology									
\$	Checking, Examining, and Recording									
	Business Fundamentals									
	Sustainable									
	Health and Safety									

** The names of the cross-cutting competencies come from the US Department of Labor's Competency Model Clearinghouse, and definitions for each can be viewed at "Building Blocks Model," Competency Model Clearinghouse, accessed June 19, 2020,

https://www.careeronestop.org/CompetencyModel/competency-models/building-blocks-model.aspx.

Cross-cutting competencies identify transferable skills—sometimes called "soft skills" or "employability skills"—that are important for workplace success, regardless of a person's occupation. Still, the relative importance of specific cross-cutting competencies differs from occupation to occupation. The cross-cutting competencies table, above, provides information about which of these competencies is most important to be successful in a particular occupation. This information can be useful to employers or intermediaries in screening and selecting candidates for apprenticeship programs, or to pre-apprenticeship providers who seek to prepare individuals for successful entry into an apprenticeship program.

The scoring system utilized to evaluate competency levels required in each cross-cutting skill aligns with the recommendations of the Lumina Foundation's Connecting Credentials Framework. The framework can be found t "Connecting Credentials: A Beta Credentials Framework," Lumina Foundation, April 29, 2015, http://connectingcredentials.org/wp-content/uploads/2015/05/ConnectingCredentials-4-29-30.pdf.

Detailed Job Functions

Job Function 1: Provide basic nursing care

Related Technical Instruction						
KNOWLEDGE	SKILLS	TOOLS & TECHNOLOGIES				
 Systolic/diastolic blood pressure Hypertension/hypotension Normal blood pressure Normal heart rate Palliative care Post mortem care 	 Take apical pulse Take brachial pulse Take carotid pulse Measure blood pressure Measure respiratory rate Measure respiratory rate of sleeping patient Urine specimen collection Stool specimen collection 	 Call light Oral thermometer (electronic) Axillary thermometer Tympanic thermometer Temporal thermometer Stethoscope Sphygmomanometer Pulse oximeter 				

Competency A: Follow the patient's or resident's plan of care	Core or Optional
PERFORMANCE CRITERIA	
1. Obtain patient's or resident's plan of care as provided by nurse or senior staff	Core
 Identify the treatments and services to be performed by the certified nursing assistant 	Core
3. Participate in care planning, when requested	Core
4. Confirm patient's or resident's identity before any treatment or service	Core
5. Explain plan of care to patient or resident as needed	Core

Competency B: Assist with nurses' examinations and procedures		
PERFORMANCE CRITERIA		
1. Assist nurse with dressing changes	Core	
2. Help position patients and residents during examinations and procedures	Core	
3. Set up testing and treatment equipment under nurse direction	Core	
4. Assist with stocking supplies as directed	Optional	

Competency C: Take and record vital signs	Core or Optional
PERFORMANCE CRITERIA	
1. Take radial pulse accurately	Core
2. Measure respiration accurately	Core

3.	Record blood pressure accurately	Core
4.	Record temperature accurately (oral, rectal, tympanic, axillary)	Core
5.	Perform accurate pulse oximetry	Core

Competency D: Measure and record height and weight	Core or Optional
PERFORMANCE CRITERIA	
1. Measure correct height of a standing patient or resident	Core
2. Measure correct height of patient or resident in bed	Core
3. Measure correct weight of a patient or resident	Core

Com	petency E: Frequently check patient or resident status	Core or Optional
PERFO	RMANCE CRITERIA	
1.	Check patient status routinely during shift	Core
2.	Monitor intubations for obvious signs of disconnection, blockage, or bleeding (nasogastric tubing, gastrostomy tubes, intravenous tubing, and catheters)	Core
3.	Check bedridden patient or resident for signs of skin breakdown	Core
4.	Monitor dialysis patient for signs of infection	Core
5.	Make sure resident has access to call light	Core
6.	Answer call light promptly	Core
7.	Report concerns to supervisor promptly and clearly	Core

Competency F: Recognize and report abnormal changes	Core or Optional
PERFORMANCE CRITERIA	
1. Recognize abnormal changes in body function	Core
2. Recognize changes in body color	Core
3. Recognize changes in movement and sensation	Core
4. Observe signs and symptoms of pain	Core
5. Recognize acute changes in metal status—confusion, lethargy, delirium	Core
6. Recognize signs of self-harm or suicidal intent	Core
7. Identify behavior changes linked to depression	Core
8. Report changes to supervisor promptly and clearly	Core

Competency G: Assist with collection of specimens	Core or Optional
PERFORMANCE CRITERIA	
1. Collect stool specimens appropriately	Core
2. Collect routine urine specimens appropriately	Core

3.	Collect clean-catch urine specimens appropriately	Core
4.	Collect sputum specimens appropriately	Core
5.	Assist with specimen labeling as appropriate	Core
6.	Bring specimens and proper documentation to the appropriate personnel	Core

Com	petency H: Assist with provision of end-of-life care	Core or Optional
PERFO	RMANCE CRITERIA	
1.	Facilitate patient's or resident's care wishes for end of life	Core
2.	Anticipate and prepare responses for the common signs and symptoms during active dying	Core
3.	Provide best possible care for patients and their families during the "imminent" phase of dying	Core
4.	Assist in caring for the body after death, as directed by nurse or other staff	Core

Job Function 2: Transfer and reposition patient or resident

Related Technical Instruction		
KNOWLEDGE	SKILLS	TOOLS & TECHNOLOGIES
 Fowler's position Semi-Fowler's position Lateral position Supine position 	 Assist with movement to head of bed Use a gait belt to assist with ambulation Transfer to a chair Transfer to a wheelchair Transfer to a stretcher/shower bed Use a mechanical lift 	 Cane Walker Gait belt (transfer belt) Stretcher Mechanical lift

preve	petency A: Position and/or turn patient or resident to ent bed sores and ulcers	Core or Optional
PERFO	RMANCE CRITERIA	
1.	Avoid self-injury by using proper body mechanics	Core
2.	Properly use bed rails or other supports for turning	Core
3.	Support affected limbs during repositioning	Core
4.	Move patient or resident gently and without rushing	Core
5.	Encourage patient or resident to assist, if able	Core
6.	Align patient's or resident's shoulders above hips, head and neck straight, and arms and legs in natural position	Core
7.	Reposition patient or resident every two hours or more frequently as warranted	Core

	petency B: Transfer patient or resident from bed to elchair or wheelchair to bed	Core or Optional
PERFC	DRMANCE CRITERIA	
1.	Avoid self-injury by using proper body mechanics	Core
2.	Assess need for assistance from others or from a mechanical lift and request help as needed	Core
3.	Gather equipment and arrange furniture as needed before transfer	Core
4.	Put resident or patient in non-skid foot attire as needed	Core
5.	Take care for catheters, tubing, or devices during transfer	Core
6.	Brace chair firmly against bed with wheels locked and leg rests removed	Core
7.	Move patient or resident to sitting position on bed with legs dangling (if patient or resident has a weak side, transfer toward stronger side)	Core

Competency C: Transfer patients or residents from bed to stretcher	
PERFORMANCE CRITERIA	
1. Avoid self-injury by using proper body mechanics	Core
2. Assist at least two coworkers	Core
3. Explain transfer to patient or resident	Core
4. Take care of catheters, tubing, or devices during transfer	Core
5. Ensure patient or resident is covered and positioned for comfort before leaving	Core

Competency D: Assist with ambulation	Core or Optional
PERFORMANCE CRITERIA	
1. Encourage or assist with walking as appropriate	Core
2. Encourage use of walker or cane as appropriate	Core
3. Stand behind and on weaker side or patient or resident	Core
4. Observe patient or resident for signs or discomfort or fatigue	Core

Job Function 3: Provide basic nursing treatments and procedures

Related Technical Instruction		
KNOWLEDGE	SKILLS	TOOLS & TECHNOLOGIES
 Principles of nutrition Modified diets Mechanically altered diets Thickened liquids Aspiration Principles of hydration Fluid overload Dehydration "npo" ("nothing by mouth") Epidermis Dermis Subcutaneous tissue Braden scale Passive range of motion Active range of motion 	 Assist with a walker Assist with a cane Shampoo Perineal care Back rubs Bed shampoo Oral care—teeth Oral care—dentures Oral care—unconscious Nail care Foot care Gown change Dress a dependent patient or resident Assist with bathroom use Empty urinary drainage bag Apply incontinent brief Make a bed Make a bed Feed a patient or resident Passive range of motion exercises Splint application Nasal cannula care Hearing aid care Application of elastic/compression stockings 	 Electric razor Safety razor Comb or brush Gown Bedside commode Bedpan/fracture pan Urinal Plate guards Eating utensils with enlarged handles Drinking cups Nonskid plates Float heels Bed cradle Abdominal binder Abduction pillow Knee immobilizer Palm cones Nasal cannula Hearing aid Elastic/compression stockings Gastronomy tube Jejunostomy tube Nasogastric tube

Com	petency A: Bathe and shower patient or resident	Core or Optional
PERFO	RMANCE CRITERIA	
1.	Gather linens and supplies and assure the room is warm enough	Core
2.	Respect patient's or resident's privacy during bath or shower and while moving them to or from the bath or shower	Core
3.	Observe skin for indications of damage or bruising	Core
4.	Shower and/or shampoo patient or resident	Core

Competency B: Groom patient or resident	Core or Optional
PERFORMANCE CRITERIA	
1. Learn and support grooming preferences as much as possible	Core
2. Perform hair care	Core
3. Apply cosmetics	Core
4. Prepare for surgery, treatment, or examination	Core

Competency C: Provide oral care	Core or Optional
PERFORMANCE CRITERIA	
1. Learn and follow preferences for timing of oral care, to the extent possible	Core
2. Provide appropriate oral care	Core
3. Provide appropriate oral care for unconscious patient or resident	Core
4. Provide appropriate denture care for patient or resident with dentures	Core

Competency D: Dress patient or resident	Core or Optional
PERFORMANCE CRITERIA	
1. Learn and follow preferences for clothing choice, to the extent possible	Core
2. Dress affected limbs first; undress affected limbs last	Core
3. Dress patient or resident at an appropriately careful pace	Core

Competency E: Assist patient or resident with using the t	toilet Core or Optional
PERFORMANCE CRITERIA	
1. Learn and follow choice of toileting times, to the extent possible	Core
2. Provide for chance to urinate/defecate 30 minutes after liquids/food, to extent possible	the Core
3. Promptly answer call lights	Core
4. Assist with transferring patient or resident to urinal/toilet, as appropriat	e Core
5. Assist with bed/fracture pan	Core
6. Empty urinary drainage bag	Core
7. Provide urinary catheter care	Core
8. Change incontinent briefs as needed	Core

Com	petency F: Assist with eating and hydration	Core or Optional
PERFO	RMANCE CRITERIA	
1.	Review diet card before serving meal to confirm correct diet	Core
2.	Support menu preferences and choice of eating times to the extent possible	Core
3.	Assist with eating, as needed	Core
4.	Encourage residents to eat as much of a meal as possible	Core
5.	Monitor for signs of fluid overload	Core
6.	Estimate and record amounts of meal intake, as needed	Core
7.	Watch for indications of aspiration	Core

Competency G: Feed a patient or resident who cannot feed on their own	Core or Optional
PERFORMANCE CRITERIA	
1. Use appropriate techniques for feeding visually impaired patients or residents	Core
2. Use appropriate techniques for feeding patients or residents with history of stroke	Core
3. Use appropriate techniques for feeding patients or residents with Parkinsonism	Core
4. Monitor feeding tubes for patients who are not fed orally	Core

Competency H: Provide foot and hand care	Core or Optional
PERFORMANCE CRITERIA	
1. Provide basic foot care	Core
2. Provide basic hand/nail care	Core

Competency I: Provide skin care	Core or Optional
PERFORMANCE CRITERIA	
1. Inspect skin for indications of ulceration, skin friction, or shear	Core
2. Manage moisture	Core
3. Minimize pressure with pressure-reducing devices	Core

Competency J: Assist patients and residents with personal equipment and devices	Core or Optional
PERFORMANCE CRITERIA	
1. Assist with prosthetic care	Core
2. Assist with hearing aid care	Core
3. Assist with care of glasses and artificial eyes	Core

4.	Assist with care and application of compression stockings	Core

Competency K: Maintain patients' and residents' environment	Core or Optional
PERFORMANCE CRITERIA	
1. Maintain clean and uncluttered space	Core
2. Follow preferred bed time and waking time, to the extent possible	Core
3. Provide opportunities for preferred recreational and social activities, to the extent possible	Core

Competency L: Provide physical comfort measures	Core or Optional	
PERFORMANCE CRITERIA		
1. Provide back rubs	Core	
2. Provide other physical comfort measures as appropriate	Core	

Com	petency M: Provide basic restorative care	Core or Optional	
PERFORMANCE CRITERIA			
1.	Safely and effectively administer passive range of motion exercise for shoulder	Core	
2.	Safely and effectively administer passive range or motion exercise for knee	Core	
3.	Safely and effectively administer passive range or motion exercise for elbow and wrist	Core	
4.	Safely and effectively guide patient or resident through active range of motion exercises	Core	
5.	Assist with ambulation aids	Core	
6.	Assist with splints	Core	
7.	Assist with basic restorative nursing devices: abdominal binder, abduction pillow, knee immobilizer, and palm cone	Core	

Job Function 4: Follow infection control procedures

KNOWLEDGE	SKILLS	TOOLS & TECHNOLOGIES
 Blood borne pathogens Center for disease control (CDC) guidelines Health care associated infections (HAI) Chains of infection Systemic and localized infections Facility-specific infection control policies Pathogens Portals of entry and exit Reservoirs Acquired immune deficiency syndrome (AIDS) Clostridium difficile Hepatitis Influenza Coronavirus Methicillin resistant staphylococcus aureus (MRSA) Pediculosis Scabies Occupational safety and health administration (OSHA) standards Tuberculosis (TB) Vancomycin resistant enterococcus (VRE) 	 Hand washing Alcohol-based hand rub Standard precautions Airborne precautions Contact precautions Droplet precautions Disinfection Handling clean linen Securing soiled linen 	 Personal protective equipment (PPE): gloves Personal protective equipment (PPE): mask Personal protective equipment (PPE): gown

Competency A: Evaluate and maintain a safe environment	Core or Optional	
PERFORMANCE CRITERIA		
1. Take precautions against airborne transmission	Core	
2. Take precautions against contact transmission	Core	
3. Taks precautions against droplet transmission	Core	
4. Maintain surveillance for potential infectious hazards	Core	
5. Provide regular cleaning and disinfection of environmental surfaces and areas	Core	

Competency B: Report signs and symptoms to licensed professionals	Core or Optional		
PERFORMANCE CRITERIA			
1. Report signs of potential local or systemic infection	Core		
2. Report signs or symptoms that could indicate contagious disease	Core		
3. Report indications of noncompliance or potential infectivity of environment	Core		

Competency C: Maintain hand hygiene	Core or Optional
PERFORMANCE CRITERIA	
1. Wash hands when hands are visibly soiled	Core
2. Wash hands before eating	Core
3. Wash hands after using restroom	Core
4. Wash hands after caring for person with known or suspected infectious diarrhea	Core
 Wash hands after known or suspected exposure to spores (for example, Clostridium difficile) 	Core
6. Follow appropriate steps/procedure for hand washing	Core
7. Use alcohol-based hand sanitizer immediately before touching any patient	Core
8. Use alcohol-based hand sanitizer before any aseptic task and before handling any invasive medical device	Core
 Use alcohol-based hand sanitizer before moving from work on a soiled body site to a clean body site on the same patient 	Core
10. Use alcohol-based hand sanitizer after touching a patient or the patient's immediate environment	Core
11. Use alcohol-based hand sanitizer after any contact with blood, body fluids, or contaminated surfaces	Core
12. Use alcohol-based hand sanitizer before putting on gloves and immediately after removing gloves	Core
13. Follow appropriate steps/procedures for alcohol hand rubs	Core
14. Perform hand hygiene after hands have been in contact with respiratory secretions	Core

Competency D: Use personal protective equipment	Core or Optional	
PERFORMANCE CRITERIA		
1. Don gloves with appropriate technique	Core	
2. Don gown with appropriate technique	Core	
3. Don mask with appropriate technique	Core	
4. Appropriately dispose of contaminated equipment and supplies	Core	

Competency E: Maintain isolation	Core or Optional
PERFORMANCE CRITERIA	
1. Label an isolated patient's room per facility guidelines	Core
2. Take prescribed steps before entering an isolated patient's room	Core
3. Wear appropriate protective clothing	Core
4. Take prescribed steps after leaving an isolated patient's room	Core

Com	petency F: Practice respiratory hygiene/cough etiquette	Core or Optional
PERFC	RMANCE CRITERIA	
1.	Cover mouth or/and nose when coughing or sneezing	Core
2.	Use and dispose of tissues	Core
3.	Perform hand hygiene after hands have been in contact with respiratory secretions	Core

Com	petency G: Safely deal with sharps	Core or Optional	
PERFO	PERFORMANCE CRITERIA		
1.	Wear gloves when handling sharps	Core	
2.	Handle devices in a way that will not injure others	Core	
3.	Use instruments to grasp sharps, where possible	Core	
4.	Place sharps in a basin instead of hand-to-hand passage, where possible	Core	
5.	Announce when passing sharps to another	Core	
6.	Do not recap, bend, or break needles that have been used	Core	

Job Function 5: Follow safety and emergency procedures

Related Technical Instru	iction	
KNOWLEDGE	SKILLS	TOOLS & TECHNOLOGIES
 Cardiac arrest Choking Hemorrhage Hemiplegia Paralysis Poisoning Scalds Seizure/convulsions Shock Locations of exits and stairways Locations of fire alarms and blankets 	 Heimlich Maneuver Cardiopulmonary Resuscitation Body mechanics for avoiding injuries while lifting and transferring patients 	 Fire extinguisher Fire blanket Sharps containers Biohazardous waste containers Smoking apron Cigarette extension Mug with spill-preventing lid Material safety data sheets Oxygen tank Liquid oxygen

Airw	petency A: Recognize and respond to Foreign Body ay Obstruction (FBAO)	Core or Optional
PERFO	RMANCE CRITERIA	
1.	Locate and remove potential choking hazards	Core
2.	Take account of patient risk factors: stroke, unconsciousness, and cognitive impairment	Core
3.	Watch for signs of choking	Core
4.	Correctly use Heimlich Maneuver or removes foreign body from mouth during choking emergency	Core
5.	Notify nurse immediately in a choking emergency	Core

Competency B: Recognize and respond to other medical emergencies: cardiac arrest, stroke, and bleeding/hemorrhage	Core or Optional
PERFORMANCE CRITERIA	
1. Take account of patient risk factors	Core
2. Notify nurse immediately in a medical emergency and take note of start time	Core
3. Remain with patient until help arrives	Core
4. Initiate CPR as needed, if qualified	Core
 Apply direct pressure to bleeding wounds and elevate bleeding limbs above heart as needed 	Core

Competency C: Recognize and respond to convulsions		Core or Optional	
PERFO	PERFORMANCE CRITERIA		
1.	Call for nurse immediately and take note of start time	Core	
2.	Remain with patient	Core	
3.	Place padding under patient's head and move furniture away as needed	Core	
4.	Do not restrain patient or put anything in patient's mouth	Core	
5.	Assist nurse with positioning patient as directed	Core	

Com	petency D: Prevent and respond to falls	Core or Optional
PERFO	RMANCE CRITERIA	
1.	Take account of patient risk factors	Core
2.	Remove environmental risk factors, clutter, uneven surfaces, and poor lighting	Core
3.	Eases patient to floor during a fall	Core
4.	Maintain patient's position	Core
5.	Call for help immediately	Core

Competency E: Prevent and respond to burns and scalds	Core or Optional
PERFORMANCE CRITERIA	
1. Take account of patient risk factors: stroke, paralysis, and cognitive impairment	Core
2. Minimize and monitor environmental risk factors: smoking and hot liquids	Core
3. Call for nurse immediately	Core

Competency F: Prevent and respond to po	isoning Core or Optional
PERFORMANCE CRITERIA	
1. Take account of patient risk factors: cognitive impa medication	rment, hoarding, and Core
 Store medications properly and minimize or remove poisoning hazards 	other environmental Core
3. Call for nurse immediately and take note of time	Core

Competency G: Maintain and respond to patient alarm systems	Core or Optional
PERFORMANCE CRITERIA	
1. Monitor and maintain functioning and accessibility of patient alarm systems	Core
2. Respond to alarms immediately	Core

Competency H: Handle hazardous waste		Core or Optional
PERFC	RMANCE CRITERIA	
1.	Identify biohazardous and inflammable materials, including potentially contagious materials	Core
2.	Follow policies and procedures for handling biohazardous materials	Core
3.	Follow procedures for handling inflammable materials	Core
4.	Follow directed procedures to ensure the safe implementation of internal and external radiation therapy	Core

Competency I: Follow oxygen safety	
PERFORMANCE CRITERIA	
1. Keep fire hazards and electrical equipment away from Oxygen-rich environmen	its Core
2. Turn off oxygen in case of fire	Core
3. Monitor nasal cannula for signs of skin breakdown	Core

Com	petency J: Prepare for facility emergencies	Core or Optional
PERFO	RMANCE CRITERIA	
1.	Follow general fire response guidelines to remove, activate, contain, and extinguish	Core
2.	Follow prescribed facility evacuation plan	Core
3.	Provide appropriate patient assistance in an evacuation emergency (ambulatory, needs assistance, dependent)	Core
4.	Take standard actions against smoke inhalation prevention (stay low, cover mouth with wet cloth)	Core
5.	Use fire extinguisher when needed (pull, aim, squeeze, sweep)	Core
6.	Follow facility disaster protocols	Core
7.	Follow weather emergency protocols (such as snow closures)	Optional
8.	Follow protocols for power outages	Optional

Competency K: Protect self from harm through workplace accidents or violence	Core or Optional
PERFORMANCE CRITERIA	
1. Use appropriate body mechanics and request help to minimize musculoskeletal injuries	Core
2. Record unusual incidents involving patients, visitors, or any persons on site (errors, injuries, falls, potential for violent behavior)	Core

Job Function 6: Communication

Related Technical Instruction			
KNOWLEDGE	SKILLS	TOOLS & TECHNOLOGIES	
 Cultural differences Cultural diversity 	 Interpret nonverbal communication Distinguish objective from subjective information Cultural humility Cultural sensitivity Cross-cultural communication 	Communication boards	

Competency A: Exchange information with patients and residents	
PERFORMANCE CRITERIA	
1. Engage in active communication with patient or resident: formulate message, receive messages, observe for feedback	Core
2. Identify and report barriers to communication	Core
3. Use cultural perspectives to interpret patient or resident behavior	Core
4. Respond to patient's or resident's unique needs	Core
5. Recognize the need for an interpreter	Core
6. Pass along care questions to nurse as appropriate	Core
7. Provide and be attuned to both verbal and nonverbal communication	Core

Competency B: Communicate with visually impaired patients and residents	
PERFORMANCE CRITERIA	
1. State name and role	Core
2. Describe things and persons	Core
3. Let patient/resident know when you are leaving or entering the room	Core
4. Explain actions	Core
5. Touch patient/resident, if appropriate	Core

Competency C: Communicate with hearing impaired patients and residents	
PERFORMANCE CRITERIA	
1. Face resident	Core
2. Use expressions and gestures	Core
3. Use sign language or communication boards as appropriate	Core

Γ	4.	Use short sentences	Core
	5.	Speak slowly and distinctly	Core
	6.	Make sure hearing aids are functioning and accessible, as needed	Core

Competency D: Encourage family involvement in patient and resident care	
PERFORMANCE CRITERIA	
1. Encourage family and patient to contribute to plan of care	Core
2. Enlist family and patient support to follow plan of care	Core
3. Accommodate patient, resident, and family cultural; religious; and spiritual needs	Core
4. Ask insurance and health questions and facilitate communication with billing administrators or other appropriate staff	Core

Competency E: Communicate with staff and other care providers	
PERFORMANCE CRITERIA	
1. Participate in staff reports	Core
2. Report facility issues	Core
3. Communicate all acute conditions requiring immediate care from a nurse	Core
4. Follow chain of command in providing information and asking questions	Core
5. Communicate professionally to convey and receive respect	Core

Competency F: Assist with admission, discharge, and transfer	Core or Optional
PERFORMANCE CRITERIA	
1. Assist with admission of patients and residents	Core
2. Assist with discharge and transfer of patients and residents	Core

Job Function 7: Care for cognitively impaired patients and residents

Related Technical Instruction		
KNOWLEDGE	SKILLS	TOOLS & TECHNOLOGIES
 Unique needs of persons with dementia Exit-seeking and other common behaviors of persons with dementia 	 Reality orientation—using calendars, clocks, signs, and lists to assist and cue residents with cognitive impairment 	 Nonskid socks/shoes Floor mats

Competency A: Address unique needs of individuals with dementia		
PERFO	RMANCE CRITERIA	
1.	Avoid excessive noise and light	Core
2.	Use appropriate responses to behavior (e.g., identifies reactions to overstimulate and takes steps to de-escalate)	Core
3.	Provide extra precautions in anticipation that cognitively impaired persons are at elevated risk of some medical emergencies (e.g., offsetting elevated fall risks by using nonskid socks, shoes, and floor mats)	Core
4.	Use methods to reduce the effects of cognitive impairments, such as reality orientation	Core
5.	Use therapeutic exercises for cognitively impaired patients and residents with limited movement	Core
6.	Provide and supervise activities once enjoyed by residents, such as gardening, baking, and listening to music	Core
7.	Provide access to mind-stimulating activities, such as coloring	Core

Competency B: Communicate with cognitively impaired patients and residents	Core or Optional
PERFORMANCE CRITERIA	
1. Repeat messages frequently	Core
2. Use short sentences and simple words	Core
3. Provide both verbal and nonverbal cues	Core

Competency C: Monitor the mobility of cognitively impaired patients and residents	
PERFORMANCE CRITERIA	
1. Identify and alert staff to exit-seeking behavior	Core

2.	Participate in plans that identify all individuals and monitor individuals classified as elopement risks	Core
3.	Check electronic bracelets	Core
4.	Familiarize self with coded entries and alarmed doors and protocols for when alarms are tripped	Core

Job Function 8: Maintain standards of professional care and develop professional skills

Related Technical Instruction			
KNOWLEDGE	SKILLS	TOOLS & TECHNOLOGIES	
 Health Insurance Portability and Accountability Act (HIPAA) Types of or indications of abuse: verbal, physical, emotional/mental, financial, and sexual Principles of informed consent Signs of neglect 	Alternatives to physical restraint, chemical restraint, or involuntary seclusion	Online resources for professional and skill development	

Competency A: Provide privacy and maintain confidentiality	Core or Optional
PERFORMANCE CRITERIA	
1. Preserve confidentiality; maintain information as private	Core
2. Follow HIPAA guidelines for medical information at all times	Core
3. Respect privacy of patient's or resident's phone and mail communication	Core
4. Refrain from gossip or social media mentions	Core

Competency B: Promote patients' and residents' rights to make choices that accommodate their needs			
PERFORMANCE CRITERIA			
1. Make sure patient or resident is informed of rights	Core		
2. Obtain informed consent for procedures when possible	Core		
3. Support patient's or resident's exercise of rights	Core		
4. Facilitate communication with billing administrators or other appropriate staff for insurance issues and health questions	Core		
5. Assist patient or resident in participating in decisions about treatments and care providers, to the extent possible	Core		
6. Respect and report refusal of care, to the extent possible	Core		
7. Support the right to voice grievances	Core		
8. Support the right to visit and be visited	Core		
 Support patient's or resident's right to retain and use possessions to the extent possible 	Core		
10. Support patient's or resident's right to self-administer medication as appropriate	Core		

Competency C: Promote esteem and dignity			
PERFORMANCE CRITERIA			
1. Address patients and residents by their preferred titles and names	Core		
2. Avoid unnecessary physical exposure during patient or resident care	Core		
3. Knock before entering	Core		

Competency D: Promote sense of security			
PERFORMANCE CRITERIA			
1. Protect property from misappropriation by labeling and monitoring	Core		
2. Protect from potential violence, including by other residents	Core		
3. Protect from abuse-verbal, physical, emotional, sexual, or financial	Core		
4. Report signs of abuse, maltreatment, or neglect	Core		

Competency E: Avoid the need for restraints in accordance with current professional standards			
PERFORMANCE CRITERIA			
1. Minimize recourse to physical restraint	Core		
2. Minimize recourse to chemical restraint	Core		
3. Minimize recourse to involuntary seclusion	Core		
4. Monitor restrained patients closely for entrapment or other emergencies	Core		

Competency F: Participate in performance-improvement and cost-containment programs	Core or Optional		
PERFORMANCE CRITERIA			
1. Participate in facility performance-improvement programs	Core		
2. Participate in facility cost-containment programs	Core		
3. Maintain professional certification	Core		
4. Engage in continued learning for evolving concerns like recognizing symptoms of airborne disease, team participation, and conflict resolution	Core		
5. Continue professional training and growth	Core		

Job Function 9: Additional basic nursing care authorized by some states

Note: Most states restrict certified nursing assistants to activities under the eight job functions listed above and legally forbid activities described below. However, eleven states permit Certified Nursing Assistants with the proper training to perform a few specified additional activities. Please consult state guidelines with respect to activities under the following job function.

Related Technical Instruction

KNOWLEDGE	SKILLS	TOOLS & TECHNOLOGIES
(See individual state guidelines for permitted activities, if any, related to this competency.)	(See individual state guidelines for permitted activities, if any, related to this competency.)	(See individual state guidelines for permitted activities, if any, related to this competency.)

Competency A: Assist with medication management	Core or Optional	
PERFORMANCE CRITERIA		
1. (See individual state guidelines for permitted activities, if any, related to this competency.)	Optional	

Competency B: Manage wound care	Core or Optional	
PERFORMANCE CRITERIA		
1. (See individual state guidelines for permitted activities, if any, related to this competency.)	Optional	

Competency C: Manage catheter and tube care	Core or Optional
PERFORMANCE CRITERIA	
1. (See individual state guidelines for permitted activities, if any, related to this competency.)	s Optional

Competency D: Communicate medical information	Core or Optional
PERFORMANCE CRITERIA	
1. (See individual state guidelines for permitted activities, if any, related to this competency.)	Optional

References

- "42 CFR § 483.152—Requirements for Approval of a Nurse Aide Training and Competency Evaluation Program," Legal Information Institute, accessed July 2020, https://www.law.cornell.edu/cfr/text/42/483.152,
- "Department of Labor Occupational Outlook Handbook: Nursing Assistants and Orderlies," US Bureau of Labor Statistics, updated April 10, 2020, https://www.bls.gov/ooh/healthcare/nursing-assistants.htm.
- McMullen, Tara L., Barbara Resnick, Jennie Chin-Hansen, Jeanne M. Geiger-Brown, Nancy Miller, and Robert Rubenstein. 2015. "Certified Nurse Aide Scope of Practice: State-by-State Differences in Allowable Delegated Activities." *Journal of the American Medical Directors Association* 16 (1): 20–24.
- "National Network of Career Nursing Assistants," accessed July 2020, https://cna-network.org/.
- NCSBN (National Council of State Boards of Nursing). 2015. "Report of Findings from the 2014 Nurse Aide Job Analysis and Knowledge, Skill, and Ability Study." Chicago: NCSBN.
- "Nurse Aide Curriculum," Indiana State Department of Health, updated November 19, 2015, https://www.in.gov/isdh/files/Indiana_Nurse_Aide_Curriculum.pdf.
- "State Rules and Regulations Pertaining to Nurses Aide Training and Competency," accessed July 2020, http://www.hpm.umn.edu/nhregsplus/NH%20Regs%20by%20Topic/NH%20Regs%20Topic%20Pdfs/CNA%20Train ing/category_administration_nursing_aide_training_and_competency.pdf
- "Summary report for 31-1014.00 Nursing Assistants," O*NET Online, accessed July 2020, https://www.onetonline.org/link/summary/31-1014.00#:~:text=Summary%20Report%20for%3A-,31%2D1014.00%20%2D%20Nursing%20Assistants,move%20patients%2C%20or%20change%20linens.

STATEMENT OF INDEPENDENCE

The Urban Institute strives to meet the highest standards of integrity and quality in its research and analyses and in the evidence-based policy recommendations offered by its researchers and experts. We believe that operating consistent with the values of independence, rigor, and transparency is essential to maintaining those standards. As an organization, the Urban Institute does not take positions on issues, but it does empower and support its experts in sharing their own evidence-based views and policy recommendations that have been shaped by scholarship. Funders do not determine our research findings or the insights and recommendations of our experts. Urban scholars and experts are expected to be objective and follow the evidence wherever it may lead.



500 L'Enfant Plaza SW Washington, DC 20024

www.urban.org