COMMONWEALTH OF VIRGINIA DEPARTMENT OF HEALTH PROFESSIONS BOARD OF NURSING

Perimeter Center

9960 Mayland Drive, Suite 300 Richmond, Virginia 23233-1463 (804) 367-4569

Application to Establish A Nurse Aide Education Program

(Please type)

Agency:
Street:
City:
Phone Number:
Phone Number: (Area Code) e-mail Address
Administrative Officer of the Program:
Name Title
Program Coordinator (Must be a Registered Nurse):
General Program Elements:
Program Title:
Beginning Date of First Class:
Frequency of program offering:
Maximum number of learners in each program session:
Hours: Total; Classroom (including Core Hours and Skills Lab); Clinical
Faculty to learner clinical ratio:
Nursing facility based (licensed nursing home or Medicare/Medicaid certified skilled or intermediate facility/unit): Yes No
Financial support and resources sufficient to meet the Board of Nursing Regulations:
··

Type (licensed nursing home;

$\textbf{3.a.} \quad \textbf{Clinical Resource}(s) \textbf{ used for Clinical Learning Experiences of Students:}$

	Address	medicare/medicaid certified units)
penalties as provided in 42 CFI	R 483151(b)(2) (Medicare and Med	nces of students been subject to penalty or dicaid Programs, Nurse Aide Training and g the past two years? Yes No
If "yes", state name of agen	cy.	
	cy.	
If "yes", state name of agen		ients, visitors and staff when in the clinical sett
If "yes", state name of agen		ients, visitors and staff when in the clinical sett
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5. Instructional Personnel:

A. Primary Instructor								
1. Name:_			Virginia R.N. lic	ense number:				
	or copy of Multi-State Pr	rivilege Compact L	icense and numb	er				
2. List wo	2. List work experiences as a Registered Nurse for the past five years.							
Dates	Employer, Address &	Туре	Type	Duties/Responsibilities				

Dates		Employer, Address &	Type	Type	Duties/Responsibilities
From	To	Phone Number	Facility	Clients	

3. Competence to teach adults

a. Course(s) **beyond basic nursing education** taken and completed in principles and methods of adult learning.

		The second secon		<u></u>
Dates	School & Location	Course Title &	Clock Hours	Credit Hours
From T	o	Description		C.E.U.S.
	Include date and location of Trair			
	Trainer for Nurse Aide Program			

b. Experience in teaching adult learners within the past five years.

Dates		Adult Learner	Agency & Location	Duties
From	To	Population(s) Taught		

B. 1. Other Instructional Personnel (Registered Nurse)

a. N	ame:				Virginia	R.N. li	cense num	ıber:
_		or a copy of Multi-State				numbe	r:	
	irect	patient care experience as an	R.N. fo	r the past f				
Dates		Employer, Address &			Direct Pati		re	
From To)	Phone Number			Experie	Experience		
a Cor		anaa ta taaah adulta.						
		ence to teach adults:	. oduoot	ion takan d	and aamplatad i	n nrin	sinles and	mathada af adult laamir
	. Co	urse(s) beyond basic nursing	euucai					Credit Hours or
Dates	То	School & Location		Course T		Cloc	k Hours	
From	10			Descripti	ЮП			C.E.U.S.
2.	Exp	erience in teaching adult learr	ners witl	hin the pas	t five years.			
Dates	2.15	Adult Learner	1	ncy & Loca	•		Dutie	S
From	То	Population(s) Taught	1150	ney ac Bota			Batte	S
		.,						

	or a copy of Multi-Sta	ite Privile	ge Compa	ct License and 1	number:		
Dates	nationt care experience for th						
Dates	patient care experience for ti	ne past fiv	e years.				
From To	Employer, Address &			Direct Pati	ient Care		
	Phone Number			Experie	nce		
e Compe	tence to teach adults:						
_	Course(s) beyond basic nurs	sing educ	ation take	n and complete	d in princi	ples and	methods of adult lea
Dates	School & Location		Course	e Title &		Hours	Credit Hours o
From To			Desci	ription			C.E.U.S.
2.	Experience in teaching adult	learners	within the	past five years.			
Dates	Adult Learner	Age	ncy & Loca	tion		Duties	
From To	Population(s) Taught						

B. 3. Other Instructional Personnel (Resource Personnel)

me		Credential(s)	Role in Nurse Aide Program	Years of Experience in his/her field								
			Tole in Pruise Plus Program	m morner nere								
6.	Classroom Facilities:											
			ons of comfort, safety, lighting, space									
	(include audio-visual equip	oment, teaching mod	dels, manikins, bed, bedside unit, hand	i wasning stations, etc.).								
7.	Records of Graduates' Pe	erformance:										
7.												
7.	a. Describe record keeping	g system for maintai	ning reports from the testing service of									
7.	a. Describe record keeping performance of graduates of	g system for maintai on the state approv e	ed competency evaluation and how f									
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7.	a. Describe record keeping performance of graduates of	g system for maintai on the state approv e	ed competency evaluation and how f									
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7.	a. Describe record keeping performance of graduates or reviewed with faculty and	g system for maintai on the state approv e the curriculum adjus	ed competency evaluation and how fisted as needed.	frequently these reports will be								
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8. Records of Disposition of Complaints:

9.

Curriculum Content: For each area of curriculum content listed be	elow, please indicate	the unit and page numb
n the topical outline or objectives where content is included.	71	1 0
	Unit No. of	Page No. of
1. Initial Core Curriculum (at least 16 hours).	<u>Instruction</u>	Topical Outline
a. Communication & interpersonal skills.		
b. Infection control.		
c. Safety and emergency measures, including		
dealing with obstructed airways and fall prevention.		
d. Promoting client independence.		
e. Respecting clients' rights.		
D. D'. (1211)		
2. Basic Skills.		
a. Recognizing changes in body functioning and the		
importance of reporting such changes to a supervisor.		
b. Measuring and recording routine vital signs.		
c. Measuring and recording height and weight.		
d. Caring for the clients' environment.		
e. Measuring and recording fluid and food intake and output.	-	
f. Performing basic emergency measures.		
g. Caring for client when death is imminent.		
g. Caring for enem when death is imminion.		
3. Personal Care Skills.		
a. Bathing and oral hygiene.		
b. Grooming.		
c. Dressing.		
d. Toileting.		
e. Assisting with eating and hydration including		
proper feeding techniques.		
f. Caring for skin, to include prevention of pressure ulcers.		
g. Transfer, positioning and turning.		

		Unit No. of Instruction	Page No. of Topical Outline
4 Ind	ividual Client's Needs Including Mental Health	<u>mstruction</u>	Topical Outline
	Social Service Needs.		
-			
a.	Modifying the aide's behavior in response to		
	behavior of clients.		
b.	Identifying developmental tasks associated with		
	the aging process.		
c.	Demonstrating principles of behavior management by		
	reinforcing appropriate behavior and causing		
	inappropriate behavior to be reduced or eliminated.		
d.	Demonstrating skills supporting age appropriate behavior		
	by allowing the client to make personal choices, and by		
	providing and reinforcing other behavior consistent with		
	clients' dignity.		
e.	Utilizing client's family or concerned others as a source		
	of emotional support.		
f.	Responding appropriately to client's behavior; including,		
	but not limited to, aggressive behavior and language.		
g.	Providing appropriate clinical care to the aged and disabled.		
h.	Providing culturally sensitive care.		
5 Core	e of the Cognitively or sensory (visual and auditory) Impaired C	Tiont	
J. Care	e of the Cognitivery of sensory (visual and additory) imparred C	Jileiit.	
a.	Using techniques for addressing the unique needs		
ш.	And behaviors of individuals with dementia		
	(Alzheimer's and others).		
b.			
	impaired residents.		
c.	Demonstrating an understanding of and responding		
	appropriately to the behavior of cognitively or sensory		
	impaired clients.		
d.	Using methods to reduce the effects of		
	cognitive impairment.		
6. Skil	ls for Basic Restorative Services.		
a.	Using assistive devices in transferring, ambulation,		
1_	eating and dressing.		
b.	Maintaining range of motion.		
c.	Turning and positioning, both in bed and chair.		
d.	Bowel and bladder training. Caring for and using prosthetic and orthotic devices		
e. f.	Caring for and using prosthetic and orthotic devices. Teaching the client in self-care according to the client's		
1.	abilities as directed by a supervisor.		
	aumines as directed by a supervisor.		

(Curriculum content continued, # 9)		Unit No. of Instruction	Page -9 - Page No. of Topical Outline
7. Clients' Rights.			<u> </u>
 a. Providing privacy and maintain b. Promoting the client's right to accommodate individual nee c. Giving assistance in resolving g d. Providing assistance necessary and family groups and other ac e. Maintaining care and security of personal possessions. f. Promoting the resident's rights mistreatment and neglect and to 	make personal choices eds. grievances and disputes. to participate in client tivities. of the client's to be free from abuse, he need to report any		
g. Avoiding the need for restraints current professional standards.			
8. Legal and regulatory aspects of pra- including, but not limited to, consec- misappropriation of client property	quences of abuse, neglect,		
9. Occupational health and safety mean	sures.		
10. Appropriate management of confli	ct.		
ATTACH TO THIS APPLICATION A	DESCRIPTION OF THE PR	ROGRAM INCLUDI	NG:
 Program Objectives. Unit Objectives (stated in behavior) Topical outline and sequence for each of the Classroom Schedule. Clinical Schedule. Teaching Methods. Evaluation Methods (classroom an Revenue of Evidence of Providing each student in certain health care facilities, and the Copy of Business License and Buil Copy of signed Agreement of Coop I certify that the information in this applicat program for which approval by the Virginia 	d clinical). urces sufficient to meet Board to a copy of applicable law regard a list of crimes which pose a biding/Zoning Permit peration for clinical experience tion, including attachments, according to the control of the contro	of Nursing requirement of the control of the contro	checks for employment nent.
	Signature of Administra	ative Officer or Program	n Coordinator
	Phone Number: ()_		
(Form may be copied)	Date:		

Email:_____

Revised July 2011