

ILLINOIS REGISTER

DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

1) Heading of the Part: Long-Term Care Assistants and Aides Training Programs Code

2) Code Citation: 77 Ill. Adm. Code 395

3) Section Numbers: Proposed Action:

395.50	Amend
395.55	New
395.100	Amend
395.110	Amend
395.120	Amend
395.130	Amend
395.140	Amend
395.150	Amend
395.155	New
395.156	New
395.160	Amend
395.162	New
395.165	New
395.170	Amend
395.171	New
395.173	Amend
395.174	Amend
395.175	Amend
395.190	Amend
395.300	Amend
395.310	Repeal
395.320	Amend
395.400	Amend

4) Statutory Authority: Nursing Home Care Act [210 ILCS 45] and the MR/DD Community Care Act [210 ILCS 47]

5) A Complete Description of the Subjects and Issues Involved:

The Long-Term Care Assistants and Aides Training Programs Code regulates the training of Certified Nursing Assistants, Child Care/Habilitation Aides, and Developmental Disabilities Aides, including minimum requirements for instructors and the curriculum.

The amendments are being undertaken to update and revamp the minimum requirements

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for the Basic Nursing Assistant Training Program (Section 395.300), which have not been changed since 1993, and to add course requirements and a curriculum for a Train the Trainer program.

The other extensive updates to Part 395 amend nearly every Section, add six new Sections and repeal one Section, completely revamping the Code, particularly the requirements for instructors of training programs.

The economic effect of this proposed rulemaking is unknown. Therefore, the Department requests any information that would assist in calculating this effect.

The Department anticipates adoption of this rulemaking approximately six to nine months after publication of the Notice in the *Illinois Register*.

- 6) Published studies or reports, and sources of underlying data, used to compose this rulemaking: None
- 7) Will this rulemaking replace an emergency rulemaking currently in effect? No
- 8) Does this rulemaking contain an automatic repeal date? No
- 9) Does this rulemaking contain incorporations by reference? Yes
- 10) Are there any other proposed rulemakings pending on this Part? No
- 11) Statement of Statewide Policy Objectives: This rulemaking may create a state mandate.
- 12) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking:

Interested persons may present their comments concerning this rulemaking within 45 days after this issue of the *Illinois Register* to:

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Division of Legal Services
Illinois Department of Public Health
535 West Jefferson St., 5th Floor
Springfield, Illinois 62761
217/782-2043
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- 13) Initial Regulatory Flexibility Analysis:
- A) Type of small businesses, small municipalities and not-for-profit corporations affected: community colleges or public schools, vocational schools, and long-term care facilities, home health agencies, and home nursing agencies.
 - B) Reporting, bookkeeping or other procedures required for compliance:
 - C) Types of professional skills necessary for compliance: nursing
- 14) Regulatory Agenda on which this rulemaking was summarized: July 2012

The full text of the Proposed Amendments begins on the next page:

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TITLE 77: PUBLIC HEALTH
CHAPTER I: DEPARTMENT OF PUBLIC HEALTH
SUBCHAPTER c: LONG-TERM CARE FACILITIES

PART 395
LONG-TERM CARE ASSISTANTS AND AIDES TRAINING PROGRAMS CODE

SUBPART A: PROGRAM APPLICATION AND APPROVAL PROCESS

Section	
395.50	Definitions
<u>395.55</u>	<u>Incorporated and Referenced Materials</u>
395.100	Program Sponsor
395.110	Application for Program Approval
395.120	Review Process and Program Approval
395.130	Review of Approved Training Program
395.140	Inactive Status
395.150	Minimum Hours of Instruction
<u>395.155</u>	<u>Train the Trainer Program</u>
<u>395.156</u>	<u>Train the Trainer Model Program</u>
395.160	Instructor Requirements
<u>395.162</u>	<u>Approved Evaluator</u>
<u>395.165</u>	<u>Program Coordinator</u>
395.170	Program Operation
<u>395.171</u>	<u>Health Care Worker Background Check</u>
395.173	Successful Completion of the Basic Nursing Assistant Training Program
395.174	Successful Completion of the Developmental Disabilities Aide or Basic Child Care/Habilitation Aide Training Program
395.175	Program Notification Requirements
395.180	Department Monitoring (Repealed)
395.190	Denial, Suspension, and Revocation of Program Approval
395.200	Other Programs Conducted by Facilities (Repealed)

SUBPART B: TRAINING PROGRAM CURRICULA REQUIREMENTS

Section	
395.300	Basic Nursing Assistant Training Program
395.310	Developmental Disabilities Aide Training Program (<u>Repealed</u>)
395.320	Basic Child Care/Habilitation Aide Training Program
395.330	Psychiatric Rehabilitation Services Aide Training Program
395.333	Waivered Psychiatric Rehabilitation Services Aide Training Program

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SUBPART C: PROFICIENCY EXAMINATION

Section
395.400 Proficiency Examination

AUTHORITY: Implementing and authorized by the Nursing Home Care Act [210 ILCS 45] and the ID/DD Community Care Act [210 ILCS 47].

SOURCE: Adopted at 13 Ill. Reg. 19474, effective December 1, 1989; amended at 17 Ill. Reg. 2984, effective February 22, 1993; emergency amendments at 20 Ill. Reg. 529, effective January 1, 1996 for a maximum of 150 days; emergency expired May 29, 1996; amended at 20 Ill. Reg. 10085, effective July 15, 1996; amended at 22 Ill. Reg. 4057, effective February 13, 1998; amended at 25 Ill. Reg. 4264, effective March 20, 2001; amended at 26 Ill. Reg. 2747, effective February 15, 2002; amended at 26 Ill. Reg. 14837, effective October 15, 2002; amended at 36 Ill. Reg. _____, effective _____.

SUBPART A: PROGRAM APPLICATION AND APPROVAL PROCESS

Section 395.50 Definitions

Ability-Centered Care – a comprehensive approach to attaining or maintaining the highest practicable physical, mental and psychosocial well-being, in which the resident’s abilities and competencies are recognized and incorporated in a plan of care to adapt and modify tasks to provide for the resident’s involvement at his or her maximum level.

Act - the Nursing Home Care Act [210 ILCS 45].

Activities of Daily Living (ADL) – tasks performed on a day-to-day basis, including, but not limited to, eating, dressing, bathing, toileting, transferring, or personal hygiene.

Alzheimer’s Instructor – a registered nurse who is approved by the Department based upon meeting the Alzheimer’s Instructor requirements of Section 395.160(b) of this Part and who is also an approved clinical instructor.

Approved Evaluator ~~evaluator~~ - a registered nurse who is an approved clinical instructor and has completed ~~attended~~ a Department-sponsored evaluator workshop; pursuant to Section 395.162 of this Part ~~meets the Instructor~~

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~~Requirements in Section 395.160 of this Part, and has no fiduciary connection with the facility by which the candidate is employed or will be employed within 30 days of the evaluation.~~

Approved Outside Evaluator – an Approved Evaluator who performs an evaluation of students in a training program sponsored by a long-term care facility, and who has no fiduciary connection, within 30 days before or after the evaluation, with the facility by which the student is employed,.

Approved Performance Skills – tasks generally performed by certified nursing assistants (CNAs) for which competency must be demonstrated, including, but not limited to: wash hands; perform oral hygiene; shave a resident; perform nail care; perform perineal care; give a partial bath; give a shower or tub bath; make an occupied bed; dress a resident; transfer a resident to a wheelchair using a transfer belt; transfer a resident using a mechanical lift; help a resident to ambulate with a transfer belt; feed a resident; calculate intake and output; place a resident in a side-lying position; perform passive range of motion; apply and remove personal protective equipment; measure temperature, pulse and respiration; measure and record blood pressure; measure and record height; and measure and record weight.

~~Approved manual skills – the following tasks demonstrated by a candidate: washing hands, performing oral hygiene, hair care or nail care for a client, shaving a client's face, taking a client's oral temperature and pulse, measuring a client's respiration and blood pressure, making an occupied and unoccupied bed, feeding and dressing a client, making a final room check prior to client occupancy, measuring a client's weight and height, placing a client in a side-lying position, performing passive range of motion on a client, calculating a client's intake and output of fluids, transferring a client to a wheelchair using a safety belt, and giving a client a partial bath.~~

Asepsis – a condition in which living pathogenic organisms are absent.

Basic Child Care/Habilitation Aide Instructor – an individual who meets the requirements of Section 390.160 (c) of this Part and is approved by the Department of Human Services for a period of no more than two years.

Basic Nursing Assistant Training Program (BNATP) – an approved course curriculum in a community college, community agency, or private business that prepares individuals for employment as CNAs.

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Cardiopulmonary Resuscitation (CPR) Instructor – a person approved by the Department and who is certified in cardiopulmonary resuscitation at the health care provider level or health care provider instructor level from a nationally recognized program.

Care – as used in this Part, the personal, restorative, or rehabilitative treatment of a resident in a health care setting by a CNA.

Certified Nursing Assistant or CNA – an individual who does not hold a professional license from the Department of Financial and Professional Regulation, or someone who volunteers to provide licensed services without pay; an individual who was grandfathered in, or has successfully completed the BNATP and competency examination, or has met the equivalency requirements of Section 300.663 of the Skilled Nursing and Intermediate Care Facilities Code; who provides nursing or nursing-related services for monetary compensation under the supervision of a licensed nurse; who has not had a period of 24 consecutive months, since his or her most recent competency examination or the date of being grandfathered in, during which he or she did not provide nursing or nursing-related services for monetary compensation under the supervision of a licensed nurse.

Child Care/Habilitation Aide - any person who provides nursing, personal or rehabilitative or habilitative care to residents of Intermediate Care Facilities for the Developmentally Disabled (ICF/DD) or residents of licensed Long-Term Care Facilities for Persons Under 22 Years of Age, regardless of title, and who is not otherwise licensed, ~~certified or registered~~ by the Department of Financial and Professional Regulation to render such care. Child Care/Habilitation aides shall ~~must~~ function under the supervision of a licensed nurse. Other titles often used to refer to Habilitation/Child Care Aides include, but are not limited to, Developmental Disabilities (DD) Aide, Direct Support Person (DSP), Mental Health Technician, Program Aide, and Program Technician.

Clinical Conference – a conference of short duration held during a clinical instruction to communicate information regarding direct resident care. Theory content shall not be presented.

Clinical Instruction – a teaching method used by an approved clinical instructor in a clinical setting in which the student explains and demonstrates competency of skills learned during theory instruction to a level accepted by the instructor.

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Clinical Instructor – a registered nurse who is approved by the Department based upon meeting the requirements of Section 395.160(a) of this Part and is an approved evaluator. This is the minimum requirement to teach the clinical component of the BNATP curriculum.

Competency Examination test - a comprehensive multiple choice test meeting the requirements of 42 CFR 483, and administered by the Department or its designee a school, agency or similar institution under a contract agreement with the Department. This examination shall be successfully completed within one year after the student's having completed the BNATP or having been deemed equivalent to a CNA through training or training and experience pursuant to 77 Ill. Adm. Code 300.663.

~~Clinical practice instruction – a teaching method used during the practical application of skill competencies (on-the-job training – OJT) in which the trainee explains and demonstrates skill competencies learned during the theory and OJT sections to an acceptable level in the presence of an OJT instructor.~~

~~Course Curriculum Coordinator – an individual in In each Habilitation/Basic Child Care Developmental Disabilities Aide Training Program, who is a qualified mental retardation professional who is responsible for planning, organization, management, coordination with training staff, compliance, documentation, and linkage with the Department and the Department of Mental Health and Developmental Disabilities. The Course Curriculum Coordinator is not required to be an instructor.~~

Cultural Competence – the ability to interact effectively with people of different cultures.

Department - the Illinois Department of Public Health.

~~Developmental Disabilities (DD) Aide – any person who provides nursing, personal or habilitative care to residents of Intermediate Care Facilities for the Developmentally Disabled, regardless of title, and who is not otherwise licensed, certified or registered to render medical care. Other titles often used to refer to DD Aides include, but are not limited to, Program Aides, Program Technicians and Habilitation Aides. DD Aides must function under the supervision of a licensed nurse or a Qualified Mental Retardation Professional (QMRP).~~

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Direct Access Worker – any individual who has access to or has the ability or potential to have access to a resident, a resident’s living quarters, or a resident’s financial, medical, or personal records through employment or through a contract with a facility or provider. A volunteer is included if the volunteer has duties that are equivalent to the duties of an employee or contracted worker who would be a direct access worker.

Direct Care – the provision of nursing care or assistance with feeding, dressing, movement, bathing, toileting or other personal needs, including home services as defined in the Home Health, Home Services and Home Nursing Agency Licensing Act [210 ILCS 55].

Direct ~~Contact~~ ~~contact~~ – the provision of any services to a client by an individual carrying out tasks usually ~~performed~~ ~~done~~ by nursing assistants ~~nurse-aides~~.

Evidence-Based Practice – recommended nursing interventions that have been shown to be effective when tested in clinical research.

Grandfathered CNA – an individual who has previously demonstrated to the satisfaction of the State that he or she had served as a nursing assistant at one or more facilities of the same employer in the State for at least 24 consecutive months before December 19, 1989. A grandfathered CNA may also be an individual who completed a training program before July 1, 1989 that would have met the requirements to be an approved training program if the approval had been offered at that time. Since the date the individual was grandfathered in as a CNA, that individual shall not have had a period of 24 consecutive months during which the individual did not provide nursing or nursing-related services for monetary compensation under the supervision of a licensed nurse. No additional individuals will be considered for grandfather status.

Holistic Care – care that incorporates the whole person, i.e., physical, psychological, emotional, and spiritual dimensions.

Home Health Aide – any person who meets the requirements of a CNA and provides part time and intermittent nursing services to a person in his or her residence according to a plan of treatment for illness or infirmity prescribed by a physician.

Interdisciplinary Team – a group of persons who represent those professions, disciplines, or service areas which are relevant to identifying an individual’s

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strengths and needs, and designs a program to meet those needs. This team shall include at least a physician, a social worker and other professionals. In ICF/DDs at least one member of the team shall be a Qualified Intellectual Disabilities Professional. The interdisciplinary team includes the resident; the resident's guardian; the resident's primary service providers, including staff most familiar with the resident; and other appropriate professionals and care givers as determined by the resident's needs.

Laboratory Instruction - a teaching method used during the theory section of the training program, requiring the student to demonstrate skill competencies in a supervised laboratory environment.

Laboratory Environment – a designated location for laboratory instruction that includes a minimum of one bed per five students, access to hand-washing facilities, and clinical instruction equipment and supplies.

Lead Instructor – the theory instructor who is responsible for providing day-to-day management of the class.

Licensed Practical Nurse (LPN) – a person with a valid license to practice as a licensed practical nurse under the Nurse Practice Act [225 ILCS 65].

Methodologies – instructional methods by which content or curriculum information is to be presented in a BNATP, i.e., lecture, discussion, audiovisual, demonstration, and group activities.

Nurse - a registered nurse or a licensed practical nurse as defined in the ~~Illinois~~ Nursing Nurse Practice Act of 1987 [225 ILCS 65]. (Section 1-118 of the Act)

Nursing Assistant Training and Competency Evaluation Program (NATCEP) – a training and competency program consisting of an approved BNATP, demonstration of required performance skills, and the written competency evaluation.

Nursing care – Activities that carry out the diagnostic, therapeutic, and rehabilitative plan as prescribed by the physician; care for the resident's environment; observing symptoms and reactions and taking necessary measures to carry out nursing procedures involving understanding of cause and effect in order to safeguard life and health.

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Personal Care - assistance with meals, dressing, movement, bathing or other personal needs or maintenance, or general supervision and oversight of the physical and mental well-being of an individual, who is incapable of maintaining a private, independent residence or who is incapable of managing his person whether or not a guardian has been appointed for such individual. (Section 1-120 of the Act)

Person-Directed Care – a philosophical approach to care focusing on individual rights and personal preferences.

Physician – any person licensed to practice medicine in all of its branches as provided by the Medical Practice Act of 1987 [225 ILCS 60].

Plan of Care – a strategy of action by the interdisciplinary team to address the needs of the individual.

Plan of Correction – a written document subject to the Department’s approval, which addresses a situation, condition, or practice constituting non-compliance by a training program. It shall include corrective actions specific to the cited deficiency, a procedure for implementation of the corrective actions, a monitoring procedure that ensures compliance with the requirements of this Part, the title of the person responsible for implementation, and the dated signature of the Program Coordinator.

Probation – an enforcement measure pursuant to Section 395.190, applied by the Department for non-compliance of a BNATP.

Program Cluster Scores Summary Reports – monthly, annual and biennial reports that provide a breakdown of training programs’ examination results by specific content area for the purpose of program improvement and monitoring.

Program Coordinator – a registered nurse who is approved by the Department, based upon meeting the requirements of Section 395.165(a). This individual is responsible for the planning, implementation, evaluation and overall coordination of a BNATP.

Program Sponsor – an entity that has been approved by the Department to conduct an approved BNATP. The entity types that may be approved as a program sponsor are ascribed in Section 395.100.

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Psychiatric Rehabilitation Services Aide (PRSA) – an individual who meets the training requirements of a Psychiatric Rehabilitation Services Aide pursuant to Section 395.330 of this Part.

Qualified Intellectual Disabilities ~~Mental Retardation~~ Professional or QIDP – a person who has at least one year of experience working directly with individuals with developmental disabilities and meets at least one of the following additional qualifications:

Is a licensed doctor of medicine or osteopathy; ~~Be a physician as defined in this Section.~~

Is ~~Be~~ a registered nurse; ~~as defined in this Section.~~

Holds ~~Hold~~ at least a bachelor's degree in one of the following fields: occupational therapy, physical therapy, psychology, social work, ~~speech or language pathology,~~ recreation (or a recreation specialty area such as art, dance, music, or physical therapies ~~education~~), ~~dietary services or dietetics,~~ or a human services field (such as sociology, special education, ~~or rehabilitation counseling, or psychology~~);-

Is a psychologist with a master's degree;

Is a speech pathologist or audiologist; or

Is a registered dietician.

Quality of Care – the necessary care and services to attain or maintain the highest practicable physical, mental, and psychosocial well-being, in accordance with the comprehensive assessment and plan of care.

Quality of Life – care provided in a manner and in an environment that promote maintenance or enhancement of each resident's quality of life.

Registered Nurse ~~nurse~~ (RN) - a person with a valid license to practice as a registered professional nurse under the ~~Illinois Nursing~~ Nurse Practice Act of 1987 [225 ILCS 65].

Resident – A person who is receiving medical care, personal care, maintenance, or general physical or mental oversight. The term resident is used

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interchangeably in this Part to mean patient, client or person as appropriate to the regulatory setting. The term resident in this Part should not be construed in any way to restrict the meaning to those living in long-term care facilities.

Special Content Instructor – a person who is approved by the Department or the Department of Human Services to teach content related to his/her area of expertise, based upon meeting the requirements of Section 395.160(e) of this Part.

Supervised laboratory—a teaching method utilized during the theory section of the program requiring the trainee to demonstrate skill competencies that were taught by the instructor as part of the theory section of the program.

Suspension – temporary withdrawal of a program sponsor’s approval to offer training program classes.

Syllabus – a document provided to the students by the BNATP outlining information necessary for completion of the training program; this information shall include, but not be limited to, program policies and requirements, content outline, and evaluation methods.

Theory Instruction – a teaching method using principles of education and learning in the classroom and laboratory environments to provide instruction to the student in accordance with the BNATP content outlined in Section 395.300 of this Part. Theory instruction includes laboratory instruction and is provided by a Theory Instructor.

Theory Instructor – a registered nurse who is approved by the Department based upon meeting the requirements of Section 395.160 of this Part and is an approved evaluator.

Train the Trainer Instructor – a registered nurse who is approved by the Department based upon meeting the requirements of Section 395.155(f) of this Part and is an approved evaluator.

Train the ~~The~~ Trainer ~~Workshop/Program~~ - a college-based program, of no fewer less than ~~31~~ 30 clock hours excluding meals and breaks, designed to prepare a registered nurse to teach in a BNATP ~~certified nurse aide (CNA) students~~. The program ~~course~~ includes the Alzheimer’s component and may include an Approved Evaluator Workshop. The Department will approve a Train the Trainer program based upon the Program’s meeting the requirements of Section 395.155

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~~of this Part. learning principles, teaching methods, curriculum development and instructional techniques; or the Department sponsored program held prior to October 1991.~~

Training Program – an approved course curriculum conducted by a program sponsor, which has not been suspended, for training of Certified Nursing Assistants, Basic Child Care/Habilitation Aides, or Psychiatric Rehabilitation Services Aides.

(Source: Amended at 36 Ill. Reg. _____, effective _____)

Section 395.55 Incorporated and Referenced Materials

- a) The following federal statutes are referenced in this Part:
- 1) Americans with Disabilities Act (42 USC 12101)
 - 2) Nursing Home Reform Amendments of the Omnibus Budget Reconciliation Act of 1987 (Public Law 100-203)
 - 3) Health Insurance Portability and Accountability Act (HIPAA) of 1996 (Public Law 104-191)
 - 4) Older Americans Act (Public Law 89-73)
- b) The following federal regulations are incorporated in this Part:
- 1) 42 CFR 483.151 State Review and Approval of Nurse Aide Training and Competency Evaluation Programs and Competency Evaluation Programs (October 1, 2010).
 - 2) 42 CFR 483.152 Requirements for Approval of a Nurse Aide Training and Competency Evaluation Program (October 1, 2010).
 - 3) 42 CFR 483.156 Registry of Nurse Aides (October 1, 2010).
- c) All incorporations by reference of federal regulations refer to the regulation on the date specified and do not include any amendments subsequent to the date specified.

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- d) The following State statutes are referenced in this Part:
- 1) Nursing Home Care Act [210 ILCS 45].
 - 2) Nurse Practice Act [225 ILCS 65].
 - 3) Medical Practice Act of 1987 [225 ILCS 60].
 - 4) Private Business and Vocational Schools Act [105 ILCS 425].
 - 5) Hospital Licensing Act [210 ILCS 85].
 - 6) Home Health, Home Services, and Home Nursing Agency Licensing Act [210 ILCS 55].
 - 7) Health Care Worker Background Check Act [225 ILCS 46].
 - 8) Assisted Living and Shared Housing Act [210 ILCS 9].
 - 9) ID/DD Community Care Act [210 ILCS 47].
 - 10) Specialized Mental Health Rehabilitation Act [210 ILCS 48].
- e) The following State rules are referenced in this Part:
- 1) Department of Public Health, Health Care Worker Background Check Code (77 Ill. Adm. Code 955).
 - 2) Department of Public Health, Practice and Procedure in Administrative Hearings (77 Ill. Adm. Code 100).
 - 3) State Board of Education, Private Business and Vocational Schools (23 Ill. Adm. Code 451).

(Source: Added at 65 Ill. Reg. _____, effective _____)

Section 395.100 Program Sponsor

Training program sponsors may be any one of the following:

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- a) A community college or other public school operated by the State ~~state~~ of Illinois or unit of local government.
- b) A private vocational or business school as defined in the Private Business and Vocational Schools Act [~~105 ILCS 425~~], which holds a valid certificate of approval or certificate of exemption issued by the State Board of Education under rules titled ~~entitled~~ "Private Business and Vocational Schools" (~~23 Ill. Adm. Code 451~~).
- c) A facility licensed by the Department under the Nursing Home Care Act, under the Hospital Licensing Act [~~210 ILCS 85~~] or under the Home Health, Home Services, and Home Nursing Agency Licensing Act [~~210 ILCS 55~~].

(Source: Amended at 36 Ill. Reg. _____, effective _____)

Section 395.110 Application for Program Approval

- a) The program sponsor shall submit an ~~a letter of~~ application for program approval to the Department at least 90 ~~ninety~~ days in advance of the scheduled beginning of each training program. If any part or portion of the originally approved program changes, a subsequent application for program approval shall be submitted to the Department at least 90 days in advance of the scheduled beginning of the new training program. The program sponsor shall not offer the training program prior to receipt of written approval from the Department. The Department will not grant retroactive approval of training programs.
 - 1) The program sponsor shall submit an application for each theory site operating under its sponsorship.
 - 2) The program sponsor shall submit an application for each program type under its sponsorship (i.e., community college, adult vocational, secondary, facility based, or private business or vocational school).
- b) The contents of the letter of application will be prescribed by the Department and will shall include at least the following information about the proposed program:
 - 1) The type of ~~A statement of whether the~~ training program being proposed is a:
 - a:

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- A) Basic Nursing Assistant Training Program;
 - ~~B) Developmental Disabilities Aide Training Program~~
 - B)C) Basic Child Care/Habilitation Aide Training Program, or
 - i) Developmental Disabilities Aide Training Program,
 - ii) Direct Support Person Training Program,
 - iii) Mental Health Technician Training Program,
 - iv) Program Technician Training Program, or
 - v) Any other common name for this type of training program;
or
 - ~~C)D)~~ Psychiatric Rehabilitation Services Aide Training Program.
- 2) A copy of the sponsor's certificate of approval issued by the State Board of Education or the Board of Higher Education, as appropriate, if the sponsor is a private business or, vocational school or a college.
- 3) A summary statement of the program ~~rationale~~, including the philosophy, rationale, and purpose of the program.
- 4) Either a ~~A~~ statement indicating that the Department's model program based on Section 395.300 of this Part is being used or an outline containing the ~~methodology, content, and objectives, content, and methodologies~~ for the training program. In either case:
- A) The outline or model program shall indicate the number of hours that will be dedicated to each component of the training program. This outline shall not preclude the instructor from varying the order of presentation of the outlined course components.
 - B) The outline or model program shall address each of the required curricula content requirements contained in Section 395.300 (Basic Nursing Assistant Training Program), ~~Section 395.310 (Developmental Disabilities Aides Training Program),~~ Section

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395.320 (Basic Child Care/Habilitation Aide Training Program), or Section 395.330 (Psychiatric Rehabilitation Services Aide Training Program).

- 5) A syllabus.
- 6) ~~5)~~ A completed master schedule, in a format prescribed by the Department, including, but not be limited to for the training program, which includes at least the following:
 - A) Identification of the program coordinator or curriculum coordinator, with contact information;
 - B) ~~A)~~ The location of theory and clinical sites, classroom designation, and scheduled dates and times of the training program;:-
 - C) ~~B)~~ The allocation of the daily hours and total hours of instruction, differentiating between theory, and clinical instruction, and clinical conferences, excluding meals, breaks, and field trips;:-
 - D) ~~C)~~ Identification of all instructors to be approved for clinical, theory, Alzheimer's and other dementias, CPR, and designated areas of instruction; theory and clinical instructors and approved evaluator and whether the instruction is theory or clinical.
 - D) ~~Curriculum Coordinator, for developmental disabilities aide training programs.~~
 - E) Identification of approved evaluators; and
 - F) Clinical site locations and signatures of the facility administrator or designee.
- 6) ~~Resumes describing the education, experience, and qualifications of each program instructor including a copy of any valid Illinois licenses, as applicable.~~
- 7) Any clinical site agreements for the use of facilities and equipment that are not owned or operated by the program sponsor. Agreements Such agreements shall be signed by the owner or operator of the facilities or

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equipment and ~~by the program sponsor, shall include the dates such facilities or equipment will be used, and a description of the classrooms, laboratory, clinical training equipment, and any other facilities or equipment that will be used in the program.~~

- 8) A copy or a description of the evaluation tools that will be used to evaluate the following aspects of the training program:
- A) Training program objectives, content, and methodology; ~~and instructors.~~
 - B) Training program instructor; ~~content.~~
 - C) Student Clinical performance, encompassing all skills taught, and for a BNATP Basic Nursing Assistant Training Program, the Department State-approved performance manual skills evaluation developed from the curriculum outlined in Section 395.300 of this Part.
 - i) Comprehensive final examination with answer key;
 - ii) Laboratory and clinical performance evaluation tools; and
 - iii) Clinical performance skills checklist.
- 9) A copy of the attendance policy;
- 10) A floor plan indicating:
- A) Classroom and laboratory dimensions;
 - B) The placement of laboratory equipment, including the location of the hand-washing sink;
 - C) Student seating accommodations; and
 - D) The location of audiovisual (AV) equipment.
- 11) A statement identifying other businesses and entities operating at this location.

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- c) The program sponsor for all programs except Basic Child Care/Habilitation Developmental Disabilities Aide Training Programs (or this type of program known by another name) shall submit the ~~letter of~~ application for approval of a training program to the Department at the ~~following~~ address provided on the application.:

~~Illinois Department of Public Health
Office of Health Care Regulation
Division of LTC Field Operations
525 West Jefferson Street
Springfield, Illinois 62761~~

- d) ~~No changes will be required in the program content of any training program, which was approved under rules in effect at the time of the adoption of amended rules, until a review by the Department indicates that revisions to the program content are needed to keep the program in compliance with the amended rules.~~
- d) ~~AGENCY NOTE:~~ The Department has a Memorandum of Understanding with the Department of Human Services for that agency to administer the approval of the Basic Child Care/Habilitation Developmental Disabilities Aide Training Programs (or this type of program known by another name) in accordance with the requirements of this Part. Questions concerning that type of program and correspondence should be directed to the Illinois Department of Human Services, Division Office of Developmental Disabilities, Bureau of Quality Management Human Resource Development, 319 East Madison, Suite 4J, Springfield, Illinois 62701.

(Source: Amended at 36 Ill. Reg. _____, effective _____)

Section 395.120 Review Process and Program Approval

- a) The Department will evaluate the application and proposed program for conformance to the program requirements contained in this Part. Based on this review, the Department will take one of the following actions regarding the application:
- 1) Grant approval of the proposed program.
 - 2) ~~Grant approval of the proposed program contingent on the receipt of~~

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~~additional materials, or revisions, needed to remedy any minor deficiencies in the application or proposed program, which would not prevent the program from being implemented, such as deficiencies in the number of hours assigned to cover different areas of content, which can be corrected by submitting a revised schedule or outline.~~

- ~~2)3)~~ Deny approval of the proposed program based on ~~any~~ major deficiencies in the application ~~or proposed program, which would prevent the program from being implemented, such as deficiencies in the qualifications of instructors or missing areas of content.~~
- b) When the Department finds that a proposed program fails to comply with the program requirements contained in this Part or 42 CFR 483.151(b)(2)(i) – (v) ~~(October 1, 1994, no further editions or amendments included)~~, the Department will notify the sponsor in writing ~~of the nature of the deficiencies, and will request additional or revised documentation necessary materials, or revisions, needed to remedy deficiencies in the application or proposed program.~~
- c) When the Department finds that a proposed program, along with any additional materials and revisions ~~that which~~ have been submitted, complies with the program requirements contained in this Part, the Department will issue a written notice of program approval to the program sponsor.
- d) The Department will issue an identification number to each approved BNATP ~~training program sponsor~~. The sponsor shall reference that number in any correspondence to the Department about the program.

(Source: Amended at 36 Ill. Reg. _____, effective _____)

Section 395.130 Review of Approved Training Program

- a) The Department will review each approved training program for renewal at least every two years ~~other year~~.
- b) The program renewal review shall evaluate compliance with this Part and include, if necessary, an on-site monitoring visit.
- c) Determination of the need for additional on-site visits and other monitoring activities by the Department will be based upon:

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- 1) The proportion of an approved training program's students who successfully complete the training program; ~~will be considered by the Department in determining the need for additional on-site visits and other monitoring activities.~~
- 2) The program's cluster scores summary reports;
- 3) The nature of complaints that may warrant an investigation by the Department;
- 4) Submission of incorrect documentation; and
- 5) A review of noncompliance issues that resulted in probation or the suspension of program approval (see Section 395.190).

(Source: Amended at 36 Ill. Reg. _____, effective _____)

Section 395.140 Inactive Status

- a) The Department shall place an approved training program on inactive status upon receipt of a written request from the program sponsor for placement on inactive status such action or if there has been no program activity for 24 consecutive months during the last year.
- b) ~~To return an approved training program that has been on inactive status for one year or less to active status, the sponsor of the program shall submit a written request to the Department detailing any changes in the approved training program and a master schedule in accordance with Section 395.110(b)(5) of this Part.~~
- b)e) To apply for a return to active status, an An approved training program that has been on inactive status ~~for more than one year~~ shall submit an application and materials a letter of application as required in Section 395.110 of this Part.
- c)d) The request for return to active status shall must be submitted no fewer than 9060 days prior to the scheduled beginning of the program.
- d) Based on a review of the application and materials for return to active status, the Department will follow the requirements of Section 395.120 of this Part.

(Source: Amended at 36 Ill. Reg. _____, effective _____)

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Section 395.150 Minimum Hours of Instruction

- a) Time frames for Basic Nursing Assistant Training Programs
- 1) Each program shall include a minimum of 120 hours of instruction, excluding breaks, ~~meals, lunch,~~ and any orientation to the program and clinical site ~~specific policies of the employing facility.~~
 - 2) The basic program content shall be presented in a minimum time frame of five ~~three~~ weeks, but cannot exceed 120 days, unless the training program is conducted by a community college or other educational institution on a term, semester, or trimester basis.
 - 3) The program shall include a minimum of 80 hours of theory instruction and 40 hours of clinical instruction. ~~There shall be a ratio of two hours of theory, including supervised laboratory, to each hour of supervised clinical practice instruction (i.e., 80 hours of theory and 40 hours of clinical). This ratio applies only to the minimum required 120 hours of instruction.~~
 - 4) The program shall include a ~~A~~ minimum of 12 hours of theory instruction related to Alzheimer's disease and other ~~related~~ dementias, as described in Section 395.300~~(i)(r) through (z)~~, ~~shall be included in each program, excluding breaks, meals, and clinical conferences. lunch, and any orientation to the specific policies of the employing facility.~~
 - 5) The program shall include a minimum of four hours of theory instruction in CPR.
 - 6)5) The program shall include a ~~A~~ minimum of 16 hours of training in the following areas, which shall ~~must~~ be conducted prior to any direct contact with a resident (42 CFR 483.152~~(b)(1)(a)(3-6)~~):
 - A) Communication and interpersonal skills;
 - B) Infection control;
 - C) Safety/emergency procedures, including the Heimlich maneuver;
 - D) Promoting residents' independence; and

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- E) Promoting residents' rights.
- b) Time frames for ~~Developmental Disabilities Aide Training Programs and Basic Child Care/Habilitation Aide Training Programs~~ Basic Child Care/Habilitation Aide Training Programs (or this type of program known by another name)
- 1) Each program shall include a minimum of 120 hours of instruction, excluding breaks, meals, lunch, and any orientation to the specific policies of the employing facility.
 - 2) The basic program content shall be presented in a minimum time frame of three weeks, but cannot exceed 120 days, unless the training program is conducted by a community college or other educational institution on a term, semester, or trimester basis.
 - 3) Training shall consist of 40 hours of approved classroom instruction and at least 80 hours of approved on-the-job training. ~~There shall be a ratio of one hour of theory, including supervised laboratory with the theory instructor, for every two hours of clinical practice instruction (on-the-job training). This ratio applies only to the minimum required 120 hours of instruction.~~
- c) Time frame requirements for Psychiatric Rehabilitation Services Aide Training Programs
- 1) Each program shall include a minimum of 120 hours of instruction, excluding breaks, meals, lunch, and any orientation to the specific policies of the employing facility.
 - 2) The basic program content shall be presented in a minimum time frame of three weeks, but cannot exceed 120 days.
 - 3) For the Health Care Skills Module only, there shall be a ratio of three hours of theory, including supervised laboratory instruction, to each hour of supervised clinical practice instruction. The other two modules shall ~~will~~ consist of theory and supervised laboratory instruction.
 - 4) A waived program may contain fewer than 120 hours if all students are individuals who have satisfactorily completed an Illinois approved

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BNATP Basic Nursing Assistant Training Program, and have at least one year of experience in the last three years working as a nursing assistant with persons with mental illness.

(Source: Amended at 36 Ill. Reg. _____, effective _____)

Section 395.155 Train the Trainer Program

- a) Requirements for Basic Nursing Assistant Instructor Train the Trainer Programs
 - 1) Each Train the Trainer program shall be college based, and the college shall have an active, approved BNATP.
 - 2) The Train the Trainer program shall include the Alzheimer's component and may include an Approved Evaluator Workshop.
 - 3) The college shall submit an application for program approval to the Department at least 90 days prior to the scheduled start date of the initial Train the Trainer Course.
 - 4) The application shall include, at a minimum, the following documentation:
 - A) A program summary, including the philosophy and purpose of the program;
 - B) A statement that the Department's model program based on Section 395.156 is being used;
 - C) An outline of the number of hours that will be dedicated to each component of the training program, with no fewer than 31 total hours, excluding breaks and meals;
 - D) A schedule of any modification to the model program presentation sequence;
 - E) A course syllabus, including the minimum required assignments;
 - F) A resume describing the education, experience, and qualifications of the instructor;

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- G) The method used to inform program participants of the qualifications required to become a Department-approved instructor teaching any portion of a BNATP;
- H) A sample of the certificate of completion that will be provided to participants who have successfully completed the Train the Trainer program or an independent course for Alzheimer's.
- b) Upon review of the required documentation as described in this Section, the Department will:
- 1) Request additional information, if needed;
 - 2) Mail an approval letter, including a Train the Trainer program number, to the program sponsor; or
 - 3) Mail a denial letter, stating the reasons for the denial, to the program sponsor.
- c) Subsequent Train the Trainer program schedules shall be submitted in writing to the Department 30 days prior to start of the course.
- d) An official class roster shall be submitted to the Department within 10 working days after course completion.
- e) Any changes to course sequence shall be submitted to the Department within 30 days prior to the course's scheduled start date.
- f) An approved Train the Trainer instructor shall meet the following requirements:
- 1) Be a Department-approved instructor (pursuant to Section 395.160 of this Part) for theory, clinical, and Alzheimer's, and an Approved Evaluator for the BNATP.
 - 2) Have four years of documented teaching experience within the last six years, two of which shall be as a theory instructor in a BNATP.
 - 3) Have completed a Department approved instructor training.

(Source: Added at 36 Ill. Reg. _____, effective _____)

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Section 395.156 Train the Trainer Model Program

The Train the Trainer Model Program shall include, at a minimum, the following curriculum.

- a) Module I – Course Contract
 - 1) Importance of contracts. Objectives: upon completion of this unit, the participant will be able to:
 - A) Articulate the importance of various contracts in defining course parameters, including a syllabus, clinical contracts, and cooperative agreements;
 - B) Discuss the importance of developing a mission and philosophy statement;
 - C) Explore instructor and student expectations in a BNATP;
 - D) Identify various legal issues related to course contracts, confidentiality of student instructor progress, and record keeping; and
 - E) Examine methods of the documentation of student and instructor understanding of the course contract.
 - 2) Course description. Objective: upon completion of this unit, the participant will be able to discuss examples of course descriptions.
 - 3) Course schedule. Objectives: upon completion of this unit, the participant will be able to:
 - A) Identify considerations made when developing a course schedule;
 - B) Identify methods used to communicate the course schedule to students; and
 - C) Review a sample Master Schedule.
 - 4) Code of conduct. Objectives: upon completion of this unit, the participant

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will be able to:

- A) Discuss aspects related to a CNA course code of conduct in both classroom and clinical environments;
 - B) Explore the components of an appearance/dress code; and
 - C) Describe the protocols needed to address student safety issues.
- 5) Attendance. Objectives: upon completion of this unit, the participant will be able to explain student guidelines related to:
- A) Attendance Requirements;
 - B) Notification;
 - C) Make-up policy; and
 - D) Mandatory content.
- 6) Health Requirements. Objective: upon completion of this unit, the participant will be able to identify the following required student health information:
- A) Physical examination;
 - B) Tuberculosis tests;
 - C) Hepatitis B;
 - D) Pregnancy; and
 - E) Restrictions.
- 7) Evaluation Methods. Objective: upon completion of this unit, the participant will be able to integrate appropriate evaluation methods related to:
- A) Grading policy;

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- B) Laboratory skills; and
 - C) Clinical skills.
- 8) Assignments. Objective: upon completion of this unit, the participant will be able to discuss the development of course assignments related to:
- A) Theory; and
 - B) Clinical instruction.
- 9) Special Needs. Objectives: upon completion of this unit, the participant will be able to identify special needs arrangements for students with disabilities. These arrangements include the following:
- A) Tutoring;
 - B) Study partner; and
 - C) Americans With Disabilities Act requirements related to program policies and reasonable accommodations.
- b) Module Two – Dynamics of Teaching
- 1) Principles of teaching. Objective: upon completion of this unit, the participant will have examined current teaching theories.
 - 2) Principles of learning. Objective: upon completion of this unit, the participant will be able to demonstrate understanding of current learning theories.
 - 3) Learning styles. Objectives: upon completion of this unit, the participant will be able to compare and contrast various learning styles, which include:
 - A) Visual;
 - B) Auditory;
 - C) Tactile;

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- D) Kinetic; and
- E) Combination of styles.
- 4) Influences. Objective: upon completion of this unit, the participant will be able to identify influences on the learner's educational experience, which include the following:
 - A) Culture;
 - B) Socio-economics; and
 - C) Age.
- c) Module Three: Course Development
 - 1) Behavioral learning objectives. Objective: upon completion of this unit, the participant will be able to develop measurable behavioral learning objectives.
 - 2) Curriculum Development. Objective: upon completion of this unit, the participant will be able to:
 - A) Compile a curriculum development plan, including mandatory content and task analysis;
 - B) Discuss the implementation of the Department's Model BNAT curriculum (see Section 395.300); and
 - C) Interpret the Department's curriculum/task list matrix.
 - 3) Ethical/legal use. Objective: upon completion of this unit, the participant will be able to discuss the ethical concerns and legal issues in regard to:
 - A) Plagiarism; and
 - B) Copyright infringement.
 - 4) Evaluative methods. Objective: upon completion of this unit, the

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participant will be able to:

- A) Compare and contrast various formats of written tests, which include, but are not limited to:
 - i) Multiple choice,
 - ii) True and false;
 - iii) Essay;
 - iv) Matching; and
 - v) Fill in the blank.
 - B) Discuss knowledge-based versus application-based testing.
 - C) Identify appropriate methods of skills testing.
 - D) Explore the use of test banks.
 - E) Identify internal or external tools used to perform program assessment. External tools may include, but are not limited to:
 - i) Program cluster summary report;
 - ii) Curriculum/task list matrix report; and
 - iii) Monthly program report.
- 5) Clinical Instruction. Objectives: upon completion of this unit, the participant will be able to complete the following:
- A) Summarize components of a pre- and post-conference;
 - B) Describe methods of student supervision during a clinical rotation in regard to observing and guiding;
 - C) Choose techniques to enhance communication;

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- D) Identify documentation performed by a clinical instructor; and
- E) Recognize the processes surrounding textbooks, which include reviewing, selecting, and ordering.

d) Module Four: Methodologies

- 1) Content delivery methods. Objectives: upon completion of this unit, the participant will be able to integrate a variety of teaching techniques into the curriculum, which may include, but are not limited to:

- A) Lecture;
- B) Discussion;
- C) PowerPoint;
- D) Handouts; and
- E) Study guide.

- 2) Classroom activities. Objectives: upon completion of this unit, the participant will be able to organize appropriate classroom learning activities such as:

- A) Icebreakers;
- B) Groups;
- C) Games;
- D) Case scenario;
- E) Projects/paper;
- F) Worksheets;
- G) Puzzles;
- H) Skits;

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- D) Role-playing; and
- J) Skills demonstrations.
- 3) Technology use. Objective: upon completion of this unit, the participant will be able to select appropriate audio/visual or other equipment for use in the course such as:
 - A) Overhead projection;
 - B) Document camera;
 - C) CD-Rom;
 - D) DVD; and
 - E) Internet.
- e) Module Five: Sample Content Areas
 - 1) Rehabilitation/Restorative care. Objectives: upon completion of this unit, the participant will be able to:
 - A) Explain the philosophy surrounding rehabilitation/restorative care;
 - B) Describe basic needs of the person involved in the rehabilitation/restorative care process;
 - C) Identify adaptive equipment that can be used for the person involved in the process.
 - 2) Communication. Objectives: upon the completion of this unit, the participant will be able to:
 - A) Describe the five principles of effective communication;
 - B) Discuss types of communication;
 - C) Identify methods of effective communication;

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- D) Explain the common barriers to effective communication; and
- E) Articulate various topics related to communication to include in the BNATP curriculum.
- 3) Current Issues/Stressors. Objective: upon the completion of this unit, the participant will be able to:
 - A) Identify common perceptions of CNAs and their role.
 - B) Explore common interpersonal conflicts experienced by CNAs in the workplace;
 - C) Identify methods to cope with the stress related to being short staffed; and
 - D) Recognize issues related to CNAs prioritizing resident care.
- f) Module Six: Teaching Demonstrations
 - 1) Demonstration guidelines. Objective: upon completion of this unit, the participant will be able to articulate guidelines for preparing a teaching demonstration.
 - 2) Lesson Plan. Objective: upon completion of this unit, the participant will be able to compile a lesson plan using a four-step criteria.
 - 3) Test Questions. Objective: upon completion of this unit, the participant will be able to write five appropriate test questions with rationales that correspond to the teaching simulation material.
 - 4) Individual teaching demonstration. Objective: upon completion of this unit, the participant will be able to perform an individual teaching demonstration.
 - 5) Analysis/critique. Objective: upon completion of this unit, the participant will be able to analyze teaching simulations through the use of verbal/written critiques.

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- g) Module Seven: Alzheimer's Disease (may be offered independently)
- 1) Description. Objective: upon completion of this unit, the participant will be able to provide an overview of Alzheimer's Disease and related disorders.
 - 2) Stages. Objective: upon completion of this unit, the participant will be able to identify the following stages of Alzheimer's Disease:
 - A) Early;
 - B) Middle;
 - C) Late; and
 - D) Terminal.
 - 3) Common Behaviors and Interventions. Objective: upon completion of this unit, the participant will be able to describe common behaviors of the person with Alzheimer's Disease and interventions used for specific behaviors, including, but not limited to, the following:
 - A) Rummaging;
 - B) Wandering;
 - C) Clinging;
 - D) Delusions;
 - E) Hallucinations;
 - F) Agitation;
 - G) Combativeness;
 - H) Sundowning;
 - I) Catastrophic reactions; and

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J) Sexually inappropriate behavior.

h) Module Eight: Approved Evaluator Workshop (may be offered independently and shall be presented only by Department staff or designee)

1) Federal Regulation. Objective: upon completion of this unit, the participant will be able to discuss federal laws and regulations that have an impact on the BNATP, which include, but are not limited to:

A) Omnibus Budget Reconciliation Act of 1987 (OBRA); and

B) Code of Federal Regulations (42 CFR 483.151, 42 CFR 483.152, and 42 CFR 483.156).

2) State Regulation. Objective: upon completion of this unit, the participant will be able to:

A) Identify Illinois administrative rules that govern an approved BNATP;

B) Describe the methods necessary to meet State requirements related to the Health Care Worker Background Check Act and Health Care Worker Background Check Code;

C) Assemble the forms required when conducting an approved BNATP in order to maintain compliance; and

D) Establish a plan for communicating information to the Department.

3) State Competency Testing. Objective: upon completion of this unit, the participant will be able to describe the methods necessary to ensure student competency testing in Illinois.

4) Relevant Websites. Objective: upon completion of this unit, the participant will be able to navigate websites relevant to a BNATP.

5) Approved Evaluator. Objective: upon completion of this unit, the participant will be able to:

A) Discuss the role and responsibilities of an Approved Evaluator;

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and

B) Explain the performance skill evaluation procedure.

6) Manual Skills Evaluation. Objective: upon completion of this unit, the participant will be able to demonstrate competence in the required performance skills according to the established standards and guidelines.

(Source: Added at 36 Ill. Reg. _____, effective _____)

Section 395.160 Instructor Requirements

- a) Requirements for Clinical and Theory Instructors in a BNATP Basic Nursing Assistant Program or a Basic Child Care/Habilitation Aide Training Program
- 1) The Department will evaluate each ~~Each course instructor shall be for~~ minimum requirements as set forth in this Section and will approve or deny approval of the instructor before the instructor provides program instruction. The program coordinator shall submit a request for instructor approval 60 days prior to the first day of the course. ~~a registered nurse with a minimum of two years nursing experience, who has no other duties while engaged in the training program. Instructors shall be required to have one year of experience as a registered nurse in one or both of the following areas:~~
 - 2) Each theory and clinical instructor shall:
 - A) Be a registered nurse with a minimum of two years of nursing experience;
 - B) Have no other duties while engaged in the training program;
 - C) Have successfully completed a Department-sponsored Approved Evaluator Workshop prior to initial approval and complete a Department-sponsored Approved Evaluator Workshop refresher course every five years thereafter;
 - D) Have one year of experience as a registered nurse in one or both of the following areas:

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- ~~i)-A)~~ Teaching theory in an accredited nurse ~~nurse's~~ training program; or-
 - ~~ii)-B)~~ Providing nursing care, including personal care and activities of daily living, to Caring for- the elderly or ~~for~~ the chronically ill adult ~~of any age through employment in a nursing facility, extended care unit, geriatrics department, chronic care unit, hospice, swing bed unit of a hospital, or other long term care setting.~~
- 3) Only approved clinical and approved theory instructors shall be used.
- 4)2) Each theory course instructor shall have completed a Department- approved Train the Trainer program. ~~also possess at least one of the following qualifications:~~
 - A) ~~A valid Illinois teaching certificate (or a provisional certificate).~~
 - B) ~~A certificate indicating completion of a Department approved train the trainer workshop/program.~~
 - C) ~~Evidence of at least one semester of formal teaching experience.~~
 - D) ~~College coursework during the previous six years, which includes at least one course in teaching/learning principles, curriculum development, teaching methods, or instructional techniques.~~
- 5) Each theory instructor shall complete a Department-approved Train the Trainer review program every five years.
- b) Requirements for Instructors of the Alzheimer's Disease and Related Dementias (Section 395.300(i) of this Part ~~(r) through (z)~~ portions ~~Portions~~ of a BNATP ~~Basic Nursing Assistant Program~~
 - 1) Each instructor shall meet the Clinical Instructor requirements in subsection (a). ~~Each instructor shall be a registered nurse, who has no other duties while engaged in the training program.~~
 - 2) Each instructor shall also provide documentation of completion of a Department-approved specialized workshop, course, seminar, or other

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approved training for instruction in Alzheimer's disease and related dementias. possess at least one of the following qualifications:

- A) ~~At least one year of experience providing services for patients with Alzheimer's disease and related dementias and at least one semester of formal teaching experience.~~
 - B) ~~Documentation of completion of a specialized workshop, course, seminar or other training for instruction in Alzheimer's disease and related dementias.~~
- c) Requirements for Instructors in a Basic Child Care/Habilitation Aide Training Program ~~Developmental Disabilities Aide Training Program~~
- 1) ~~The course curriculum coordinator shall monitor monitors the training program, and shall ensure Developmental Disabilities Aide Training Program and ensures that only approved Basic Child Care/Habilitation Aide instructors are used, that instructors are qualified and are instructing the program as required, and that the required documentation is maintained.~~
 - 2) Each classroom program ~~instructor of theory~~ instructor shall meet at least one of the following requirements:
 - A) ~~Be a QIDP Qualified Mental Retardation Professional~~ with at least one year of experience with developmental disabilities programs;
 - B) Have a valid Illinois teaching certificate with at least one year of experience with developmental disabilities programs;
 - C) Be a community college or college instructor with at least one year of teaching experience and familiarization with developmental disabilities programs; or
 - D) Be a special content instructor with at least one year of experience in his or her field of expertise and with at least one year of experience working with individuals with developmental disabilities. ~~Be a registered nurse with at least one year of experience with developmental disabilities programs.~~

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- d) Requirements for Instructors in a Psychiatric Rehabilitation Services Aide Training Program
- 1) Each program instructor shall meet the clinical instructor requirements in subsection (a) ~~submit verification of successful completion of a train-the-trainer workshop,~~ for each module taught, approved by the Department of Human Services' Office of Mental Health.
 - 2) Instructors for the Introduction to Mental Illness and Psychiatric Rehabilitation Module and the Psychiatric Rehabilitation Skills Module shall either:
 - A) Be a community college or college instructor with at least one year of teaching experience and familiarization with programs for individuals with serious mental illness; or
 - B) Have a bachelor's degree in a mental health-related field or be a certified psychiatric nurse and have at least three years of experience providing services to persons with serious mental illness.
 - 3) Instructors for the Health Care Skills Module shall be a registered nurse with a minimum of two years of nursing experience. Instructors shall be required to have one year of experience as a registered nurse in one or both of the following areas:
 - A) Teaching an accredited nurse training program;
 - B) Caring for persons with serious mental illness through employment in a residential setting.
- e) ~~Supplemental Instructors (Special Content Instructor Instructor) in a BNATP Basic Nursing Assistant Program and Basic Child Care/Habilitation Aide Program shall~~ Developmental Disabilities Aide Program must have at least one year of experience in their fields of expertise. These would include, but not be limited to, registered nurses, licensed practical nurses, pharmacists, dieticians, social workers, sanitarians, fire safety experts, nursing home administrators, gerontologists, psychologists, physical and occupational therapists, activities specialists, speech/language/hearing therapists, and resident rights experts- (42 CFR 483.152(a)(5)(iv)).

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- f) Only Department-approved CPR instructors may be used. A CPR instructor shall provide current documentation of training at the health care provider level or health care provider instructor level from a nationally recognized program. Documentation of current CPR certification at this level shall be maintained and provided to the Department.

(Source: Amended at 36 Ill. Reg. _____, effective _____)

Section 395.162 Approved Evaluator

- a) Requirements for an Approved Evaluator and an Approved Outside Evaluator:
- 1) Shall be an approved clinical instructor and meet the requirements in Section 395.160(a) of this Part;
 - 2) Shall have successfully completed a Department-sponsored Approved Evaluator Workshop prior to initial approval and complete a Department sponsored Approved Evaluator Workshop refresher course every five years thereafter;
- b) For a facility-based BNATP, the program's Clinical Instructor/Approved Evaluator shall determine competencies on all approved performance skills. An Approved Evaluator shall have no fiduciary connection, within 30 days before or after the evaluation, with the facility at which the student is employed or will be employed.
- c) An Approved Evaluator shall have the following responsibilities:
- 1) Evaluation of performance skills in conjunction with an approved BNATP;
 - 2) Evaluation of performance skills as an Approved Outside Evaluator for a facility-based program; and
 - 3) Evaluation of performance skills as part of the CNA recertification process.

(Source: Added at 36 Ill. Reg. _____, effective _____)

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Section 395.165 Program Coordinator

- a) Requirements for Program Coordinators of a BNATP – only an approved program coordinator shall be used.
- b) Program Coordinators of a BNATP shall have the following responsibilities:
 - 1) Planning, implementing, evaluating, and coordinating a BNATP as required in this Part;
 - 2) Planning, implementing, evaluating, and coordinating competency testing submission;
 - 3) Planning, implementing, evaluating, and coordinating criminal background check submission;
 - 4) Completing, verifying, and submitting accurate documentation as required in this Part
 - 5) Functioning as the primary contact in communications with the Department;
 - 6) Formulating, implementing, and communicating corrective measures as required by the Department; and
 - 7) Notifying the Department, in writing and within five business days, after a change in program coordinator.

(Source: Added at 36 Ill. Reg. _____, effective _____)

Section 395.170 Program Operation

- a) *An educational entity, other than a secondary school, conducting a Nurse Aide Training Program shall initiate a UCIA criminal history records check in accordance with the requirements of the Health Care Worker Background Check Act [225 ILCS 46] prior to entry of an individual into the training program. A secondary school may initiate a UCIA criminal history record check prior to the entry of an individual into a training program. (Section 3-206(a-0.5) of the Act)*
- b) For the purpose of this Section, *"initiate" means the obtaining of the*

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~~authorization for a record check from a student. (Section 15 of the Health Care Worker Background Check Act) The educational entity shall transmit all necessary information and fees to the Illinois State Police within 10 working days after receipt of the authorization. (Section 15(3) of the Health Care Worker Background Check Act) Authorization shall be requested on the first day of class.~~

- e) ~~The results of the criminal history record check shall be attached to the student's competency test application. If the student does not complete a test application or takes the competency test prior to receiving the results of the criminal history record check, the program shall submit the results to the Department. The program shall also provide the student with a copy of the results.~~
- a)d) The program shall provide counseling to all individuals seeking admission to the program concerning the Health Care Worker Background Check Act and the Health Care Worker Background Check Code. The counseling shall ~~must~~ include, at a minimum:
- 1) ~~Notification~~ notification that a fingerprint-based UCIA criminal history records ~~record~~ check will be initiated ~~in accordance with subsection (a) above;~~
 - 2) ~~A~~ a clear statement that a fingerprint-based criminal history records check UCIA Criminal Background Check is required for the individual to work as a direct access worker, CNA nursing assistant, developmental disabilities aide, or basic child care/habilitation aide in Illinois; and
 - 3) ~~A~~ a listing of those offenses in Section 25 of the Health Care Worker Background Check Act Sections of the Criminal Code of 1961 [720 ILCS 5], the Cannabis Control Act [720 ILCS 550], and the Illinois Controlled Substances Act [720 ILCS 570] for which a conviction would disqualify the individual from finding employment as a direct access worker, CNA nursing assistant, or basic child care/habilitation aide unless the individual obtains a waiver pursuant to Section 40 of the Health Care Worker Background Check Act.
- b)e) ~~A master schedule shall be submitted to the Department 15 business days Ten working days prior to the start of the actual training program, an updated master schedule, in accordance with Section 395.110(b)(65) of this Part, shall be submitted to the Department.~~

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- c)f) Any change in program content, objectives, or instructors shall be submitted to the Department at least 30 ~~thirty~~ days prior to program start date ~~delivery~~.
- d) Unscheduled changes in the master schedule shall be promptly reported to the Department.
- e)g) A BNATP ~~In the Basic Nursing Assistant Training Program, the program~~ shall require each student to show competency of Department-approved performance manual skills by hands-on return demonstration. The performance manual skills evaluation shall be conducted by an Approved Evaluator ~~approved evaluator~~. If the program is facility based, an Approved Outside Evaluator shall perform an additional evaluation of performance skills. ~~Approved evaluators employed by a facility may not evaluate students trained by the facility program. The facility shall assure that an approved evaluator who is not an approved instructor meets the requirements of Section 395.160 of this Part.~~
- f) The student-to-instructor ratio shall be 10 students per one clinical instructor and 15 students per one laboratory instructor.
- g) The BNATP shall provide access to medical equipment and supplies for student practice and demonstration of the required skills outlined in the model program.

(Source: Amended at 36 Ill. Reg. _____, effective _____)

Section 395.171 Health Care Worker Background Check

A training program shall comply with the Health Care Worker Background Check Act and the Health Care Worker Background Check Code.

(Source: Added at 36 Ill. Reg. _____, effective _____)

Section 395.173 Successful Completion of the Basic Nursing Assistant Training Program

- a) A student shall be considered to have successfully completed the BNATP training program when he or she has: all of the following are met: The student has
- 1) Completed a minimum of ~~completed at least~~ 80 hours of theory and 40 hours of clinical instruction, including the required hours of content in accordance with Section 395.150 of this Part; and

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- 2) Demonstrated ~~demonstrated~~ competence in the Department-approved performance manual skills;:-
- b) A student shall ~~must~~ pass the Department-established written competency examination test.

(Source: Amended at 36 Ill. Reg. _____, effective _____)

Section 395.174 Successful Completion of the ~~Developmental Disabilities Aide or Basic Child Care/Habilitation Aide Training Program~~

A student shall be considered to have successfully completed the training program when he or she ~~the student~~ has completed the classroom and on-the-job training requirements ~~theory and clinical instruction and tests/quizzes/exams in accordance with the sponsor's policies.~~

(Source: Amended at 36 Ill. Reg. _____, effective _____)

Section 395.175 Program Notification Requirements

The program sponsor shall submit, within 30 days after program completion, an official roster of all students ~~a list of all trainees~~ who have successfully completed the training program. The official roster list ~~list~~ shall include, but is not limited to, the following required information:

- a) Student identification, including name, ~~Name,~~ complete home address, and Social Security number ~~of the trainee;~~
- b) Training program identification number ~~Identification number of the training program;~~
- c) Program start and end dates ~~completion date;~~
- d) Signature, or other verification as prescribed by the Department, of the Program Instructor and Approved Evaluator ~~program instructor and approved evaluator,~~ when appropriate, or Curriculum Coordinator ~~curriculum coordinator,~~ as applicable. (Any additional signatures are optional.)

(Source: Amended at 36 Ill. Reg. _____, effective _____)

Section 395.190 Denial, Suspension, and Revocation of Program Approval

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- a) When the Department finds that a proposed program, along with any additional information and revisions ~~that~~ ~~which~~ are submitted, fails to comply with the program requirements contained in this Part or 42 CFR 483.151(b)(2)(i) – (v), the Department will notify the sponsor in writing of denial of program approval. The notice to the sponsor shall state the reasons for the denial and the right of the sponsor to appeal the denial and to a hearing before the Department.

- b) When the Department, upon evaluation or during monitoring, finds that an approved program does not comply with the program requirements contained in this Part or 42 CFR 483.151(b)(2)(i) – (v), the Department will notify the sponsor in writing of the finding of non-compliance ~~of the program~~ and the reasons for the finding.
 - 1) Findings of non-compliance include, but are not limited to:
 - A) The instructor is not approved by the Department;
 - B) The instructor does not meet the requirements of Section 395.160 of this Part;
 - C) The program lacks an Approved Evaluator;
 - D) The program is not conducted in accordance with the master schedule;
 - E) The official roster of students is not submitted to the Department within 30 days after program completion;
 - F) The instruction does not follow the approved curriculum;
 - G) The instruction is being held at a location other than the approved site or sites;
 - H) The program does not satisfy the requirement of 120 hours of training;
 - I) The master schedule was not received within 15 days prior to the first scheduled class day;
 - J) The program exceeds the student-to-instructor ratio at the clinical

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site;

K) The program exceeds the student-to-instructor ratio in a laboratory setting;

L) The laboratory environment does not meet requirements in Section 395.50 of this Part;

M) The theory instruction site does not meet student needs for space, comfort, and learning; or

N) There was no review of the approved training program pursuant to Section 395.130 of this Part.

2) The BNATP shall submit a written plan of correction with completion dates to address all findings of non-compliance within 10 days following receipt of the Department's notification.

3) A BNATP found in non-compliance may be subject to follow-up monitoring by the Department if necessary to ensure correction.

c) ~~When the Department determines that the findings of non-compliance finds that any conditions stated in the written notice of non-compliance issued under subsection (b) of this Section have not been corrected within thirty days after the date of issuance of such notice, the Department will place the BNATP on probationary status will revoke or suspend its approval of the program.~~

1) ~~The Department will notify the BNATP in writing regarding probationary status, including conditions of probation and the duration of the probationary period shall suspend approval when the program fails to substantially comply with the approved program plan during the operation of the program. Substantial failure to comply with the approved program plan includes program instruction being conducted contrary to the master schedule, contrary to the approved content, by an individual other than the approved instructor, or at a location other than the approved site or sites.~~

2) When the Department determines that the findings of non-compliance in the written notice issued under subsection (b) of this Section have been corrected, the Department will remove the BNATP from probationary status. The Department will revoke approval when an approved program

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~~fails to comply with the program requirements of this Part or 42 CFR 483.151(b)(2)(i) – (v).~~

- 3) The Department will notify the BNATP in writing when the probationary status has been lifted.
- d) When the Department determines that the findings of non-compliance in the written notice of probation issued under subsection (c) of this Section have not been corrected, the Department will suspend or revoke its approval of the program.
 - 1) The Department will notify the BNATP in writing regarding the suspension status, including the duration of suspension and conditions of reinstatement.
 - 2) A BNATP placed on suspension shall not conduct nursing assistant training programs until notified by the Department in writing.
 - 3) The Department will notify the BNATP in writing when the suspension has been lifted.
 - 4) A revoked BNATP shall not conduct nursing assistant training programs.
 - 5) ~~3)~~ When the approval of a program has been suspended or revoked for reasons other than 42 CFR 483.151(b)(2)(i) – (v), the program sponsor shall have a right to appeal the suspension or revocation and to a hearing before the Department.
- e) ~~d)~~ When the approval of a program has been denied, suspended, or revoked, for reasons other than 42 CFR 483.151(b)(2)(i) – (v), the program sponsor may submit a written appeal of the action and request for a hearing within 10 ~~ten~~ calendar days after notification of the decision to deny, revoke, or suspend approval.
- f) ~~e)~~ All hearings under this Part shall be conducted in accordance with the Department's Rules of Practice and Procedure in Administrative Hearings (~~77 Ill. Adm. Code 100~~).

(Source: Amended at 36 Ill. Reg. _____, effective _____)

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SUBPART B: TRAINING PROGRAM CURRICULA REQUIREMENTS

Section 395.300 Basic Nursing Assistant Training Program

The BNATP ~~Basic Nursing Assistant Training Program~~ shall include, at a minimum, the following:

- a) Module I – Introduction to Health Care
 - 1) Functions of Health Care Organizations. Objectives: upon completion of this unit, the student will be able to:
 - A) Describe the purposes and services of health care facilities/agencies, which include, but are not limited to, the following health care settings:
 - i) Long-term care facilities;
 - ii) Hospitals;
 - iii) Rehabilitation facilities;
 - iv) Home health agencies; and
 - v) Hospice care.
 - B) Person-Directed Care Across All Settings. Objectives: upon completion of the unit, the student will be able to:
 - i) Explain the philosophy of person-directed care;
 - ii) Discuss the concepts of person-directed care, which are self-determination, individual needs, ability focused, person before task, individualized choices, relationship building, holistic focused, and spontaneous activities;
 - iii) Contrast person-directed care with task-centered care;
 - iv) Explain how the CNA can apply the concepts to provide person-directed care; and

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- v) Discuss the impact of a person-directed care model on those involved, including caregiver, elders and the health care facility.
- 2) The Interdisciplinary Team. Objectives: upon completion of this unit, the student will be able to:
- A) Discuss the purpose of the Interdisciplinary Team;
 - B) Describe ways to enhance the ability of the Interdisciplinary Team to accomplish its purpose;
 - C) Describe the role of each member of the Interdisciplinary Team;
 - D) Examine ways in which a CNA can become an effective team member; and
 - E) Discuss the crucial role of the CNA with the health care team.
- 3) The CNA Role Across Health Care Settings. Objectives: upon completion of this unit, the student will be able to:
- A) Demonstrate professional behaviors expected of a CNA in appearance and behaviors;
 - B) Describe work ethics for CNAs, including qualities, legal implications and ethical behaviors;
 - C) Identify competency standards in CNA practice, which include standardized testing and maintaining safety;
 - D) Discuss person-directed qualities by describing the attributes of:
 - i) An effective communicator, and demonstrate effective interpersonal communication techniques;
 - ii) A resident advocate, and describe methods to promote a resident's independence in decision making;

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- iii) A relationship builder, and examine ways to build effective interpersonal relationships; and
 - iv) An effective team player, and describe ways to promote the quality of life for persons in the CNA's care.
 - E) Discuss the importance of the scope of practice for a CNA;
 - F) Examine the legal limits of the CNA role;
 - G) Explain the importance of a job description for a CNA;
 - H) Explore the components of a CNA job description; and
 - I) Discuss the importance of delegation and list the five rights of delegation:
 - i) Right task;
 - ii) Right circumstance;
 - iii) Right person;
 - iv) Right direction/communication; and
 - v) Right supervision.
- 4) Nursing Assistant as a Para-professional. Objective: upon completion of this unit, the student will be able to:
 - A) Discuss current State and federal regulations related to CNA certification;
 - B) Explain the requirements for maintaining CNA certification on the Health Care Worker Registry, which include accessing, updating information, and maintaining certification;
 - C) Discuss the purpose of and disqualifying convictions for the Health Care Worker Background Check; and

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- D) Develop awareness of resources to enhance career development for CNAs through CNA organizations, continuing education, and career ladders.
- 5) Information Sharing. Objectives: upon completion of this unit, the student will be able to:
 - A) Know frequently used medical terminology and abbreviations;
 - B) Describe the purpose and list components of the health care record;
 - C) Discuss pertinent information that should be reported to the nurse, and give examples of observations that need to be reported immediately;
 - D) Know the legal aspects of recording in the health care record;
 - E) Discuss the requirements for recording in the health care record; and
 - F) Describe how the Interdisciplinary Team works together to develop an individualized plan of care:
 - i) Define the nursing process;
 - ii) Differentiate between the role of the CNA and the role of the nurse in the nursing process;
 - iii) List the steps of the nursing process;
 - iv) Differentiate between objective and subjective information; and
 - v) Discuss the role and the responsibilities of the CNA in reporting observations, developing a plan of care, and following the person's individualized plan of care.
- b) Module II – Rights and Relationships
 - 1) Rights. Objectives: upon completion of this unit, the student will be able

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to:

- A) Identify basic human rights;
- B) Discuss the importance of State and federal regulations in promoting resident rights:
 - i) Describe the purpose of the Health Insurance Portability and Accountability Act (HIPAA);
 - ii) Explain the role of the CNA in ensuring compliance with HIPAA;
 - iii) Identify resident rights according to Omnibus Budget Reconciliation Act of 1987 (OBRA);
 - iv) Discuss how following the State and federal regulations enhances the resident's quality of life;
 - v) Discuss how following the State and federal regulations enhances the resident's quality of care; and
 - iii) Describe the purpose of the Ombudsman Program (Older Americans Act).
- C) Identify key concepts for person-directed care and discuss ways to apply the concepts for person-directed care.
 - i) Discuss the importance, principles, and methods of building relationships with residents and family. The principles include, but are not limited to, trust, respect, and commitment;
 - ii) Discuss methods for building relationships;
 - iii) Discuss ways to promote care partnerships;
 - iv) Discuss strategies the CNA can use to support a culture of home;

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- v) Examine the CNA's role in promoting care partnerships;
 - vi) Differentiate between care practices that are person-directed versus an institutional model; and
 - vii) Discuss some of the limitations that the CNA may encounter focusing on person-directed care.
- D) Discuss the importance and describe the principles of culture competence:
- i) Examine ways in which the culture of an elder may differ from the culture of the caregiver, such as generational, communication, family, and religious differences; and differences in customs; and
 - ii) Recognize the impact of the CNA's views and values on the care provided.
- E) Discuss: abuse, neglect, and theft:
- i) Describe the types of abuse, neglect, and theft that occur in the health care setting;
 - ii) Discuss ways that elder abuse, neglect, and theft can be prevented;
 - iii) Describe indications of abuse, neglect, and theft;
 - iv) Explain the CNA's role in reporting elder abuse, neglect, and theft;
 - v) Discuss requirements for reporting abuse, neglect, and theft; and
 - vi) Discuss consequences of abusing, neglecting, or stealing from a resident.
- 2) Holistic Care. Objectives: upon completion of this unit, the student will be able to:

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- A) Explain the importance and describe the components of holistic care, which include, but are not limited to:
 - i) Physical;
 - ii) Social;
 - iii) Psychological; and
 - iv) Spiritual.
 - B) Discuss the culture of aging:
 - i) Describe the impact that physical changes may have on a person's self-image;
 - ii) Discuss the psychological effects of loss on the elder;
 - iii) Discuss the impact of aging on the family; and
 - iv) Describe how elders are viewed in society.
 - C) Describe ways in which the CNA can meet basic human needs of the elder and implement evidence-based practices to provide holistic care.
- 3) Communication. Objectives: upon completion of this unit, the student will be able to:
- A) List the components of communication;
 - B) Describe the principles of communication;
 - C) Identify the types of communication:
 - i) Distinguish between verbal and non-verbal communication; and
 - ii) Describe the appropriate use of touch in communication.

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- D) Identify effective techniques for enhancing communication, which include, but are not limited to:
 - i) Active listening;
 - ii) Focusing on feelings;
 - iii) Providing feedback;
 - iv) Observing non-verbal clues; and
 - v) Defusing anger.

- E) Discuss barriers to the communication process, which include, but are not limited to:
 - i) Language;
 - ii) Culture;
 - iii) Perception; and
 - iv) Situation.

- F) Discuss the CNA's responsibility for effective communication.

- 4) Interpersonal Relationships. Objectives: upon completion of this unit, the student will be able to:
 - A) Describe professional boundaries in relationships with residents;
 - B) Discuss the importance of developing therapeutic relationships;
 - C) Discuss the importance of building relationships within the health care team; and
 - D) Describe appropriate relationship boundaries for a CNA as a member of the health care team.

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- c) Module III – Infection Control in the Health Care Setting
- 1) Infection Control Issues. Objectives: upon completion of this unit, the student will be able to explain the following:
- A) Microorganisms
- i) List the different types of microorganisms;
 - ii) Differentiate between non-pathogens and pathogens;
 - iii) Describe the role normal flora play in resisting infection;
 - iv) Explain the importance of practicing asepsis in order to decrease a person’s chance of developing a facility-acquired infection;
 - v) Identify common microbes that are drug resistant;
 - vi) Describe the implications of drug-resistant microbes; and
 - vii) List the requirements that microorganisms need for survival and growth.
- B) Chain of infection
- i) Explain the role that each link in the chain of infection plays in transmitting disease; and
 - ii) Identify factors that increase a person’s risk of acquiring an infection.
- C) Signs and symptoms of infection
- i) List and describe signs and symptoms of infection, which include, but are not limited to, pain, heat, redness, swelling, and change in resident behavior; and
 - ii) List ways in which a CNA can prevent the spread of infection.

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- D) Asepsis in health care
 - i) Differentiate between clean and sterile techniques; and
 - ii) Describe principles for medical asepsis.
 - E) State and federal regulations. Discuss the role of the CNA in meeting current State and federal regulations related to infection control in health care settings;
 - F) Skills in hand hygiene
 - i) Identify situations requiring hand hygiene techniques;
 - ii) Describe techniques for proper hand hygiene; and
 - iii) Demonstrate proper hand hygiene techniques.
 - G) Skills in isolation techniques
 - i) Discuss the impact of isolation on a person's well-being;
 - ii) Differentiate between standard precautions and transmission-based precautions;
 - iii) Contrast nursing care for persons with each category of transmission-based precautions;
 - iv) Demonstrate procedures according to established guidelines for Personal Protective Equipment (PPE);
 - v) Select the appropriate PPE for both standard and transmission-based precautions; and
 - vi) Demonstrate the procedure of removing PPE used in isolation.
- 2) Equipment and Supplies. Objectives: upon completion of this unit, the student will be able to:

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- A) Discuss methods of disinfection;
 - B) Discuss methods of sterilization; and
 - C) Explain the role of the CNA in properly caring for equipment and supplies.
- d) Module IV – Emergency Procedures
- 1) Fire Safety. Objectives: upon completion of this unit, the student will be able to:
 - A) List the three main types of fire:
 - i) Oil/grease;
 - ii) Electrical; and
 - iii) Paper/wood.
 - B) List the three elements necessary for a fire;
 - C) Describe risk factors for a fire, which include, but are not limited to:
 - i) Oxygen;
 - ii) Impaired cognition;
 - iii) Electrical hazards; and
 - iv) Smoking.
 - D) Explain safety precautions when oxygen is in use;
 - E) Describe the responsibility of the CNA in fire prevention;
 - F) Describe the actions a CNA should take in the event of a fire, including;

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- i) Initial response;
 - ii) Demonstrating the proper use of a fire extinguisher; and
 - iii) Listing methods other than a fire extinguisher that may be used to extinguish a fire.

- 2) Disasters. Objectives: upon completion of this unit, the student will be able to:
 - A) Describe appropriate actions of the CNA in response to natural disasters, which include, but are not limited to:
 - i) Storm/tornado;
 - ii) Severe weather;
 - iii) Floods; and
 - iv) Earthquake.

 - B) Describe appropriate actions of the CNA in response to man-made disasters, which include, but are not limited to:
 - i) Bomb threats; and
 - ii) Terrorist attacks.

 - C) Explain the role of the CNA in relation to emergency preparedness.

- 3) Foreign Body Airway Obstruction. Objectives: upon completion of this unit, the student will be able to:
 - A) Differentiate between partial airway obstruction and complete airway obstruction;

 - B) Demonstrate the procedures for dislodging a foreign body in:

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- i) A conscious victim; and
 - ii) An unconscious victim.
 - 4) Incidents. Objectives: upon completion of this unit, the student will be able to:
 - A) Identify the responsibility of the CNA when:
 - i) Assisting a resident who has fallen;
 - ii) A resident has eloped;
 - iii) A resident has sustained a thermal injury;
 - iv) A resident has a skin tear or bruise; and
 - v) A resident has ingested a harmful substance.
 - B) Identify the role of the CNA in providing psychosocial support after an incident/emergency.
 - 5) State and Federal Regulations. Objective: upon completion of this unit, the student will be able to review current State and federal regulations pertaining to resident rights during an emergency.
- e) Module V – Injury Prevention in the Health Care Environment
 - 1) Risk Management. Objectives: upon completion of this unit, the student will be able to:
 - A) Explain and discuss State and federal regulations
 - i) Explain the role of the CNA in meeting current State and federal regulations pertaining to injury;
 - ii) Discuss the role of the Occupational Safety and Health Administration (OSHA) in relation to injury prevention; and

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iii) Explain the purpose of the Material Safety Data Sheets.

B) Explain and discuss ergonomics

i) Explain the importance of ergonomics to the health care worker;

ii) Describe risk factors for the CNA that may contribute to injury;

iii) Demonstrate consistent use of body mechanics while providing care;

iv) Explain the principles of body mechanics;

v) Discuss techniques to ensure proper body mechanics; and

vi) Describe equipment to assist in promoting body mechanics.

2) Resident Safety. Objectives: upon completion of this unit, the student will be able to:

A) Discuss the importance of maintaining safety for the resident;

B) Identify factors in the elderly that contribute to an increased risk for injury;

C) Determine the CNA responsibility regarding each of the following safety issues:

i) Falls;

ii) Elopement;

iii) Resident identification;

iv) Thermal injury;

v) Skin tears;

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- vi) Choking; and
- vii) Poisoning.
- D) Explain and discuss restraint safety:
 - i) Analyze the adverse psychological and physical effects of restraining a resident;
 - ii) Explain how to maintain resident's rights when a safety device or restraint must be applied;
 - iii) Discuss the legal implications of restraint usage;
 - iv) Discuss the right of a resident not to be restrained;
 - v) Discuss industry movement toward restraint-free environments;
 - vi) Explore the various alternatives to applying restraints;
 - vii) Demonstrate application of a less restrictive alternative;
 - viii) Recognize when a device is considered a restraint; and
 - ix) Compare and contrast chemical and physical restraints with less restrictive alternatives and positioning devices.
- E) Examine the responsibilities of the CNA in maintaining resident safety in regard to:
 - i) Person-directed strategy;
 - ii) Observation of actual risk and potential risk;
 - iii) Documentation; and
 - iv) Reporting.
- 3) Personal Safety. Objectives: Upon completion of this unit, the student

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will be able to:

- A) Describe environmental factors that have an impact on personal safety in the workplace;
 - B) Explain and discuss workplace violence
 - i) Discuss the various types of violence encountered in the work environment;
 - ii) Explain risk factors for violence in the workplace; and
 - iii) Discuss techniques to decrease the likelihood of encountering workplace violence.
- 4) Equipment Safety. Objectives: upon completion of this unit, the student will be able to:
- A) Discuss the responsibility of the CNA for assuring safe use of equipment; and
 - B) Examine the importance of proper reporting of unsafe equipment.
- 5) Documentation. Objectives: upon completion of this unit, the student will be able to:
- A) Describe various types of documentation required when safety infractions have occurred; and
 - B) Discuss the responsibility of the CNA for documenting problems related to safety.
- f) Module VI – Care of the Resident
- 1) Resident Living Space. Objectives: upon completion of this unit, the student will be able to:
 - A) Explain why a comfortable environment is important to a person's well-being;

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- B) Identify and discuss factors related to residential living space
- i) Identify the environmental factors that can affect a person's comfort in his or her living space; and
 - ii) Discuss the importance of personal belongings in the person's environment.
- C) Explain and discuss the role of furniture and equipment in residential living space
- i) Discuss safety issues when operating a bed;
 - ii) Demonstrate how to operate a bed;
 - iii) Examine reasons for use of various bed positions;
 - iv) Demonstrate placing a hospital bed in various positions;
 - v) Explain how the over-bed table is used by the health care team and the resident;
 - vi) Demonstrate how to raise and lower the over-bed table;
 - vii) Describe how the bedside stand is used by the health care team and the resident;
 - viii) Explain why curtains and screening devices are important for the purposes of privacy;
 - ix) Identify the limitations of curtains and screening devices; and
 - x) Identify other equipment that is generally part of a resident's room.
- D) Explain the rules for proper maintenance of the resident's living space;
- E) Explain and discuss call system devices

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- i) Demonstrate prompt response to signal lights or call system devices;
 - ii) Explain various types of call systems; and
 - iii) Discuss use of alternatives if a call system fails.
- F) Explain and discuss bed making
- i) Explain the importance of bed making for the person's comfort and well-being, encouraging personal preferences, and identifying the person's preferences when handling personal linens.
 - ii) Explain and demonstrate aseptic techniques when handling linens;
 - iii) Discuss the guidelines for making beds;
 - iv) Explain the difference between an unoccupied and occupied bed; and
 - v) Demonstrate making a closed bed, an open bed, and an occupied bed according to established standards.
- G) Examine the importance of frequent observations of the resident in his/her living space, including, but not limited to:
- i) Side rails;
 - ii) Bed position;
 - iii) Call light;
 - iv) Safety alarms;
 - v) Personal items;
 - vi) Linens; and

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- vii) Personal preferences.
- H) Demonstrate consistent maintenance of resident's comfort and safety.
- 2) Admission, Transfer, Discharge. Objectives: upon completion of this unit, the student will be able to:
 - A) Discuss admission procedures
 - i) Compare and contrast admission to various types of health care settings;
 - ii) Discuss the emotional responses a person may experience when admitted to a health care facility;
 - iii) Identify the equipment needed to admit a person;
 - iv) Describe the process for admitting a person to the facility; and
 - v) Recognize the CNA's role in the care of a person being admitted.
 - B) Discuss room transfers
 - i) Identify the need for room transfers;
 - ii) Discuss the emotional responses that a person may experience when transferred to a different room;
 - iii) Describe the process used to transfer a resident from one room to another;
 - iv) Recognize the CNA's role in the care of a person transferring to a different room; and
 - v) Discuss the strategies the CNA uses to support a smooth transition to another room.

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- C) Discuss discharge procedures
 - i) Identify places to which person may be discharged;
 - ii) Discuss the emotional responses that a person may experience when being discharged to various facilities;
 - iii) Described the process for discharging a resident; and
 - iv) Recognize the CNA's role in the care of the person being discharged.

- D) Demonstrate skills: height, weight
 - i) Identify the purpose of obtaining height and weight measurements; and
 - ii) Demonstrate obtaining a person's height and weight measurements according to established standards.

- 3) Psychosocial Concerns. Objectives: upon completion of this unit, the student will be able to:
 - A) Explain the importance of recognizing psychosocial concerns;
 - B) Discuss psychosocial concerns common to residents;
 - C) Describe common behaviors associated with how a person is feeling;
 - D) Recognize the CNA's role in meeting the resident's psychosocial needs, which include:
 - i) Person-directed strategies;
 - ii) Observations;
 - iii) Documentation; and

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iv) Reporting.

- 4) Promoting Resident Comfort and Managing Pain. Objectives: upon completion of this unit, the student will be able to:
- A) Recognize indicators that a resident is not comfortable and the CNA's role in maintaining a person's comfort, which include:
- i) Person-directed strategies;
- ii) Observations;
- iii) Documentation; and
- iv) Reporting.
- B) Discuss the importance of identifying when a person is experiencing pain.
- i) Recognize indicators of a person experiencing pain;
- ii) Compare various methods used for pain level evaluation;
- iii) Examine non-pharmacological methods that a CNA may use to assist a person in managing pain, which may include massage, imagery, relaxation technique, music, or pet therapy;
- iv) Recognize the CNA's role in caring for a person experiencing pain, which includes person-directed strategies, observations, documentation, and reporting.
- 5) Body Structure. Objectives: upon completion of this unit, the student will be able to explain the organization of the human body, including cells, tissue, organs, and systems.
- 6) Integumentary System. Objectives: upon completion of this unit, the student will be able to:
- A) Identify the structures of the integumentary system;

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- B) Identify the functions of the integumentary system;
- C) Discuss how changes in the skin may affect a person's life physically, psychologically, and socially;
- D) Discuss healthy skin
 - i) Discuss the importance of maintaining healthy skin;
 - ii) Describe factors affecting the maintenance of healthy skin; and
 - iii) Recognize the CNA's role in promoting healthy skin.
- E) Discuss common health concerns
 - i) Identify various skin conditions, such as too moist, too dry, poor skin turgor, alterations in color, fragility, and allergic reactions;
 - ii) Discuss common communicable diseases affecting the skin, such as shingles, scabies, fungal infections, and pediculosis; and
 - iii) Discuss common injuries to the skin and examine various methods to prevent injuries, which include, but are not limited to, skin tears, contusions, and burns.
- F) Discuss pressure ulcers
 - i) Identify the persons at risk for developing pressure ulcers;
 - ii) Identify the stages of pressure ulcers;
 - iii) List the sites where pressure ulcers are likely to develop;
 - iv) List the causes of pressure ulcers;
 - v) Explain interventions the CNA can take to prevent pressure

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ulcers;

vi) Describe various treatments for pressure ulcers; and

vii) Examine various actions taken by the CNA to care for the person with skin abnormalities.

G) Recognize the CNA's role in preventing pressure ulcers, which includes:

i) Person-directed strategies;

ii) Observations;

iii) Documentation; and

iv) Reporting.

H) Explain and demonstrate oral hygiene skills

i) Explain why oral hygiene helps meet the person's basic needs;

ii) Identify the supplies needed for oral hygiene;

iii) Demonstrate how to assist the person to brush his/her teeth according to established standards;

iv) Demonstrate how to brush a person's teeth according to established standards;

v) Describe how to floss a person's teeth according to established standards;

vi) Describe special measures a CNA needs to practice when handling dentures;

vii) Demonstrate cleaning care of dentures according to established standards;

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- viii) Demonstrate insertion of dentures;
 - ix) Demonstrate removal of dentures;
 - x) Describe the special measures that need to be taken when providing mouth care for the unconscious resident;
 - xi) Explain when mouth care should be given to the unconscious resident;
 - xii) Describe how to perform mouth care on an unconscious resident according to established standards; and
 - xiii) Recognize the CNA's role when providing oral hygiene.
- I) Discuss bathing skills
- i) Explain why bathing is important for meeting basic needs;
 - ii) Identify the factors that influence the bathing method chosen by a person and the health care team;
 - iii) Discuss the bathing schedule;
 - iv) Compare various types of skin care products;
 - v) Recognize the CNA's role in the application of skin care products;
 - vi) Describe the procedural steps for various types of bathing, such as complete bed bath, partial bath, tub bath, and shower;
 - vii) Perform a complete bed bath according to established standards;
 - viii) Demonstrate giving a partial bed bath according to established standards;
 - ix) Explain procedures used when assisting a person to take a

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tub bath according to established standards;

x) Demonstrate procedures used when assisting a person to take a shower according to established standards;

xi) Discuss alternatives to traditional bathing methods; and

xii) Recognize the CNA's role in bathing the resident.

J) Discuss and identify back massage skills

i) Identify the purpose of a back massage; and

ii) Demonstrate a back massage according to established standards.

K) Explain and discuss perineal care skills

i) Explain the purpose of perineal care;

ii) Discuss the indications for perineal care;

iii) Demonstrate female and male perineal care according to established standards; and

iv) Recognize the role of the CNA in providing perineal care.

L) Identify and demonstrate hair care skills

i) Identify the importance of providing hair care;

ii) Demonstrate brushing and combing hair according to established standards;

iii) Explain various methods of shampooing hair; and

iv) Recognize the CNA's role in providing hair care.

M) Explain and demonstrate shaving skills

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- i) Explain the importance of shaving as it relates to meeting basic needs;
- ii) Demonstrate a shave according to established standards; and
- iii) Recognize the CNA's role in shaving a resident.

N) Explain and demonstrate nail care skills

- i) Identify the importance of nail care;
- ii) Discuss nail care for a person with special conditions, such as diabetes, impaired circulation, and fungus;
- iii) Demonstrate nail care according to established standards;
- iv) Differentiate between nail care for hands and feet; and
- v) Recognize the CNA's role in providing nail care to the resident.

O) Explain and demonstrate dressing and undressing skills

- i) Identify the importance of being appropriately dressed;
- ii) Demonstrate dressing and undressing a person according to established standards;
- iii) Describe special considerations, such as physical limitation, medical equipment, and special needs in dressing and undressing;
- iv) Discuss the impact of appropriate dress on a person's quality of life and comfort; and
- v) Recognize the CNA's role in dressing and undressing a resident.

P) Discuss applications

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- i) Identify various types of applications;
 - ii) Compare and contrast moist and dry applications;
 - iii) Explain the purpose and principles involved in the application of heat;
 - iv) Describe the effects of heat applications;
 - v) Explain the purpose and principles involved in the application of cold;
 - vi) Describe the effects of cold applications;
 - vii) Describe the procedure used for various applications;
 - viii) Identify a person at risk for complications associated with various applications; and
 - ix) Recognize the CNA's role in caring for a person receiving therapeutic application.
- 7) Musculoskeletal System. Objectives: upon completion of this unit, the student will be able to:
- A) Describe the structures of the musculoskeletal system, including the following:
 - i) The types of bones;
 - ii) The function and types of joints;
 - iii) The major functions of muscles; and
 - iv) The types of muscles.
 - B) Describe the functions of the musculoskeletal system;
 - C) Discuss how age-related changes in the musculoskeletal system

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may affect a person's life physically, psychologically, and socially;

- D) Identify the complications of immobility, including, but not limited to, contractures and atrophy;
- E) Explain the importance of preventing complications of immobility and identify interventions to prevent these complications;
- F) Identify common health concerns
 - i) Arthritis. Identify types of arthritis and recognize the CNA's role in caring for the person with arthritis, such as person-directed strategies, observations, documentation, and reporting.
 - ii) Fractures. Identify types of fractures and describe common causes of fractures, including osteoporosis; recognize the CNA's role in caring for the person in a cast, in traction, or who has had a hip fracture or hip replacement.
 - iii) Amputation. Identify common causes of amputation and describe the impact of an amputation on a person's life. Recognize the CNA's role in caring for the person with an amputation.
- G) Discuss range of motion exercise skills
 - i) Identify the purpose of range of motion;
 - ii) Explain the safety and comfort guidelines for range of motion exercises;
 - iii) Identify types of range of motion exercises, including active, passive, and active-assistive;
 - iv) Describe and demonstrate the movements of range of motion exercise, which include abduction, adduction, extension, flexion, plantar flexion, dorsi-flexion, opposition, internal rotation, external rotation, pronation, and supination; and

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- v) Recognize the CNA's role in performing range of motion exercises.
- H) Discuss prosthetic and orthotic devices skills
 - i) Identify the purpose of prosthetic and orthotic devices;
 - ii) Describe the types of prosthetic and orthotic devices; and
 - iii) Describe how to apply and remove various prosthetic and orthotic devices.
- I) Discuss lifting and moving skills
 - i) Identify the principles of lifting and moving;
 - ii) Demonstrate various methods for turning a person on his/her side;
 - iii) Demonstrate various methods for moving a person to the head of the bed;
 - iv) Demonstrate various methods for moving a person to the side of the bed;
 - v) Demonstrate various types of lifts; and
 - vi) Recognize the CNA's role in lifting and moving.
- J) Discuss repositioning skills
 - i) Identify the purpose of repositioning;
 - ii) Explain the principles of repositioning;
 - iii) Demonstrate various types of positions; and
 - iv) Recognize the CNA's role in repositioning the resident.

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- K) Discuss transfer skills

 - i) Explain the principles of transferring a person safely;
 - ii) Demonstrate various procedures for transferring a resident using a transfer/gait belt, including the proper application of a transfer/gait belt;
 - iii) Demonstrate various procedures for transferring a resident to a stretcher; and
 - iv) Recognize the CNA's role in transferring a resident.

- L) Discuss ambulating skills

 - i) Discuss the importance of ambulation;
 - ii) Explain the principles of ambulation;
 - iii) Describe assistive devices used for ambulation, such as transfer/gait belts, walkers, and canes; and
 - iv) Demonstrate various ambulation techniques, and recognize the CNA's role in ambulation of a resident.

- M) Discuss transporting skills

 - i) Explain the principles of transporting;
 - ii) Demonstrate various methods of transporting a person; and
 - iii) Recognize the CNA's role in transporting the resident.

- 8) Gastrointestinal System. Objectives: upon completion of this unit, the student will be able to:

 - A) Identify the structures of the gastrointestinal system;
 - B) Identify the functions of the gastrointestinal system;

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- C) Discuss how age-related changes in the gastrointestinal system may affect a person's life physically, psychologically, and socially;
- D) Discuss basic nutrition
 - i) Identify the importance of nutrition;
 - ii) Discuss healthy nutrition based on the daily requirements; and
 - iii) Identify basic food groups and discuss factors affecting a person's nutrition.
- E) Discuss hydration
 - i) Identify the importance of hydration;
 - ii) Explain the principles of hydration; and
 - iii) Discuss factors affecting a person's hydration.
- F) Discuss therapeutic diets/nourishments
 - i) Identify the purpose of therapeutic diets/nourishments;
 - ii) Explain the principles of therapeutic diets/nourishments;
 - iii) Describe the various types of therapeutic diets;
 - iv) Identify the various types of supplements and nourishments; and
 - v) Recognize the CNA's role in caring for the person receiving a therapeutic diet/nourishment.
- G) Discuss dining experience
 - i) Identify the importance of creating a positive dining experience;

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- ii) Explain the principles involved in the dining experience;
 - iii) Describe methods of creating a person-directed dining experience;
 - iv) Discuss types of dining experiences, including restaurant style and buffet; and
 - v) Recognize the CNA's role in supporting the dining experience.
- H) Discuss assistance with the dining experience
- i) Identify the importance of providing assistance during dining;
 - ii) Explain the principles involved in providing assistance during dining, which include positioning, prep and set up, and assistive devices;
 - iii) Demonstrate safety measures when assisting with the dining experience;
 - iv) Demonstrate assisting the person to eat according to established standards;
 - v) Demonstrate adaptations for assisting a person with special needs. Special needs may include, but are not limited to, visual and cognitive impairment;
 - vi) Discuss special concerns, such as recognizing indications of dysphagia, squirreling or pocketing of food, and aspiration;
 - vii) Demonstrate aspiration precautions; and
 - vii) Recognize the CNA's role in assisting with the dining experience.
- D) Discuss bowel elimination

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- i) Identify the characteristics of normal bowel elimination;
 - ii) Identify the resident's normal bowel habits/patterns;
 - iii) Discuss the factors affecting bowel elimination;
 - iv) Discuss how age-related changes affect bowel elimination;
 - v) Describe common health concerns association with bowel elimination, which include, but are not limited to, constipation and diarrhea;
 - vi) Recognize the CNA's role regarding bowel elimination;
 - vii) Demonstrate assisting a resident with bowel elimination procedures, which include, but are not limited to, bedpans, commodes, briefs, and incontinent care, according to established standards; and
 - viii) Describe the procedures for collecting a stool specimen.
- 9) Urinary System. Objectives: upon completion of this unit, the student will be able to:
- A) Identify the structures of the urinary system;
 - B) Identify the functions of the urinary system;
 - C) Discuss how age-related changes in the urinary system may affect a person's life physically, psychologically, and socially; and
 - D) Describe common health concerns associated with urinary elimination, including urinary tract infection and incontinence.
 - E) Discuss intake and output
 - i) Explain the purpose of measuring intake and output;
 - ii) Describe the guidelines for intake and output;

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- iii) Demonstrate the measurement of intake and output according to established standards; and
- iv) Recognize the CNA's role in caring for the person on intake and output.
- F) Discuss urinary elimination
 - i) Identify characteristics of normal urinary elimination;
 - ii) Identify the residents' urinary elimination habits/patterns;
 - iii) Discuss factors affecting urinary elimination;
 - iv) Demonstrate the procedure for assisting a resident to use a urinal, bedpan, or commode/toilet;
 - v) Describe the use of various incontinence products;
 - vi) Identify types of urinary incontinence;
 - vii) Describe methods of prevention of urinary incontinence;
 - viii) Describe the CNA's role in the care of the incontinent resident;
 - ix) Discuss the purpose of urinary catheters;
 - x) Describe the types of urinary catheters;
 - xi) Describe the CNA's role in caring for a resident with an indwelling urinary catheter;
 - xii) Describe the procedures for collecting various urinary specimens; and
 - xiii) Recognize the CNA's role in regard to urinary elimination.
- 10) The Reproductive System. Objectives: upon completion of this unit, the

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student will be able to:

- A) Identify the structures of the reproductive system;
 - B) Identify the functions of the reproductive system;
 - C) Discuss how age-related changes in the reproductive system may affect a person's life physically, psychologically, and socially.
 - D) Differentiate between sex and sexuality, including:
 - i) Discuss promoting sexuality;
 - ii) Recognize the importance of maintaining sensitivity related to a person's sexuality; and
 - iii) Discuss ways that a person may inappropriately express sexuality, and describe interventions that the CNA may use when caring for sexually aggressive residents and residents who display inappropriate sexually explicit public behaviors.
 - E) Discuss Common Health Concerns of Sexually Transmitted Diseases
 - i) Define sexually transmitted diseases;
 - ii) Identify the various types of sexually transmitted diseases;
 - iii) Describe the signs and symptoms of the various sexually transmitted diseases; and
 - iv) Recognize the CNA's role in caring for the person with a sexually transmitted disease.
- 11) The Cardiovascular System. Objectives: upon completion of this unit, the student will be able to:
- A) Identify the structures of the cardiovascular system;

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- B) Identify the functions of the cardiovascular system;
 - C) Discuss how age-related changes in the cardiovascular system may affect a person's life physically, psychologically, and socially;
 - D) Identify the signs/symptoms of various cardiovascular diseases, which include, but are not limited to:
 - i) Hypertension;
 - ii) Coronary artery disease;
 - iii) Angina pectoris;
 - iv) Myocardial infarction; and
 - v) Congestive heart failure.
 - E) Recognize the CNA's role in caring for the person with a cardiovascular disease;
 - F) Discuss dietary modification related to cardiovascular diseases; and
 - G) Describe the role of the CNA in the application and removal of anti-embolism stockings (TED hose).
- 12) The Respiratory System. Objectives: upon completion of this unit, the student will be able to:
- A) Identify the structures of the respiratory system;
 - B) Identify the functions of the respiratory system;
 - C) Discuss how age-related changes in the respiratory system may affect a person's life physically, psychologically, and socially.
 - D) Discuss common health concerns
 - i) Identify various types of chronic obstructive pulmonary

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diseases (COPD);

ii) Discuss the psychosocial needs of the resident with COPD;

iii) Describe the signs and symptoms of various respiratory illnesses, which include asthma, pneumonia, and tuberculosis; and

iv) Recognize the CNA's role in caring for the person with a respiratory illness.

E) Discuss oxygen therapy

i) Identify the purpose of oxygen therapy;

ii) Explain the principles involved in oxygen therapy;

iii) Identify the types of oxygen delivery;

iv) Recognize the CNA's role in caring for the person receiving oxygen therapy;

v) Identify the purpose of artificial ventilation; and

vi) Recognize the CNA's role in caring for a person with a ventilator.

F) Identify the purposes of sputum collection and explain the procedure used when collecting a sputum specimen.

G) Discuss vital signs

i) Identify the purpose of measuring temperature;

ii) Identify the types of thermometers;

iii) Identify sites where temperature may be measured;

iv) Demonstrate obtaining an oral temperature according to established standards;

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- v) Identify the purpose of measuring the pulse;
 - vi) Identify the sites where a pulse may be measured;
 - vii) Demonstrate obtaining a pulse according to established standards;
 - viii) Identify the purpose of measuring respirations;
 - ix) Discuss various respiratory patterns;
 - x) Demonstrate obtaining respiration according to established standards;
 - xi) Identify the purpose of measuring a blood pressure;
 - xii) Explain the principles involved in obtaining a blood pressure;
 - xiii) Demonstrate obtaining a blood pressure according to established standards; and
 - xiv) Recognize the CNA's role in measuring vital signs.
- H) Discuss CPR
- i) Discuss the purpose of performing CPR;
 - ii) Explain the principles involved in providing CPR.;
 - iii) Demonstrate the performance of CPR, including one-rescuer adult, child, and infant CPR and two rescuer adult, child, and infant CPR;
 - iv) Demonstrate the performance of foreign airway obstruction for adult, child, and infant victims; and
 - v) Recognize the CNA's role related to CPR.

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- 13) The Nervous System. Objectives: upon completion of this unit, the student will be able to:
- A) Identify the structures of the nervous system;
 - B) Identify the functions of the nervous system;
 - C) Discuss how age-related changes in the nervous system may affect a person's life physically, psychologically, and socially.
 - D) Discuss common health concerns
 - i) Discuss the signs and symptoms of various nervous disorders, including cerebrovascular accident, Parkinson's disease, multiple sclerosis, and types of traumatic injuries;
 - ii) Identify communication problems resulting from hearing disorders;
 - iii) Discuss communication strategies when caring for a resident with a hearing disorder;
 - iv) Identify special concerns associated with caring for a resident with a visual disorder;
 - v) Discuss ways the CNA can promote independence of the person with a visual disorder; and
 - vi) Recognize the CNA's role in caring for the person with various nervous system disorders, including observations, critical thinking, documentation, and reporting.
- D) Discuss hearing instrument skills
- i) Identify the purpose of hearing instruments;
 - ii) Discuss the various types of hearing instruments;
 - iii) Explain the insertion and removal of the hearing instrument; and

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- iv) Recognize the CNA's role in caring for a person with a hearing instrument.
 - E) Discuss visual aids skills
 - i) Identify the purpose of visual aids;
 - ii) Discuss the various types of visual aids;
 - iii) Explain the care of visual aids; and
 - iv) Recognize the CNA's role in caring for a person with visual aids.
- g) Module VII – Fundamentals of Rehabilitation/Restorative Care
 - 1) Philosophy. Objectives: upon completion of this unit, the student will be able to:
 - A) Explain the philosophy of rehabilitation;
 - B) Review basic human needs;
 - C) Identify individual motivations for the resident participating in rehabilitation; and
 - D) Apply holism to the philosophy of rehabilitation.
 - 2) Objective: upon completion of this unit, the student will be able to discuss principles of rehabilitation.
 - 3) Objective: upon completion of this unit, the student will be able to compare and contrast rehabilitation and restorative nursing.
 - 4) Objective: upon completion of this unit, the student will be able to identify the members of the rehabilitation team.
 - 5) Objective: upon completion of this unit, the student will be able to identify State and federal regulations that have an impact on

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rehabilitation/restorative care.

- 6) Objective: upon completion of this unit, the student will be able to recognize the CNA's role in providing rehabilitation/restorative care, which includes:
- A) Importance;
 - B) Care-giving modifications;
 - C) Observations;
 - D) Reporting; and
 - E) Documentation.
- 7) ADL Programs. Objectives: upon completion of this unit, the student will be able to:
- A) Describe the types of ADL programs available for persons needing rehabilitation/restorative care, which include, but are not limited to:
 - i) Eating;
 - ii) Dressing/grooming;
 - iii) Mobility; and
 - iv) Communication.
 - B) Explain the purpose of ADL programs;
 - C) Discuss adaptive devices
 - i) Describe the adaptive devices available to assist with performance of ADL;
 - ii) Explain the purpose of adaptive devices; and

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- iii) Recognize the CNA's role in caring for the person using an adaptive device, including importance, care-giving modification, observations, reporting, and documentation.

h) Module VIII – End-of-Life Care

- 1) End-of-Life Issues. Objectives: upon completion of this unit, the student will be able to:

- A) Discuss attitudes

- i) Discuss the impact that spiritual and cultural beliefs have on one's attitudes; and
- ii) Examine one's feelings about providing care for the terminally ill resident.

- B) Explore legal issues associated with end-of-life care, which include, but are not limited to:

- i) Self-determination;
- ii) Guardianship;
- iii) Advance directives, including the significance of living wills and power of attorney; and
- iv) Implications of do-not-resuscitate (DNR) orders.

- 2) State and Federal Regulations. Objectives: upon completion of this unit, the student will be able to discuss current State and federal regulations related to end-of-life issues, such as:

- A) Resident rights;

- B) Resident behaviors and facility practices;

- C) Quality of life; and

- D) Quality of care.

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- 3) Care of a Dying Person. Objectives: upon completion of this unit, the student will be able to:
- A) Discuss physical aspects
- i) Identify the signs of approaching death;
 - ii) Discuss how to meet the dying person's rights;
 - iii) Discuss ways to promote comfort for the dying resident; and
 - iv) Recognize the CNA's role in meeting the physical needs of the dying person.
- B) Discuss psychosocial aspects
- i) Discuss the importance of celebrating a person's life;
 - ii) Describe strategies to celebrate a person's life;
 - iii) Describe the grieving process as it may pertain to the dying person, friends/loved ones, and the care givers;
 - iv) Discuss various facility practices to honor deceased residents; and
 - v) Recognize the CNA's role in meeting the psychosocial needs of the dying person, which include observations, critical thinking, documentation, and reporting.
- C) Discuss hospice care
- i) Discuss the philosophy of hospice care;
 - ii) Discuss the goals of hospice care; and
 - iii) Describe ways that hospice is incorporated into the plan of care.

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- 4) Post-mortem care. Objectives: upon completion of this unit, the student will be able to:
 - A) Explain the principles involved in caring for the body after death; and
 - B) Perform postmortem care according to established facility practices.

- i) Module IX – Alzheimer’s and Other Dementias
 - 1) Cognitive Impairment. Objectives: upon completion of this unit, the student will be able to:
 - A) Differentiate between normal aging and dementias;
 - B) Describe how dementias are diagnosed;
 - C) List types of reversible dementia; and
 - D) List types of non-reversible dementia.
 - 2) Alzheimer’s Disease. Objectives: upon completion of this unit, the student will be able to:
 - A) Describe the physical changes that occur as the person progresses through Alzheimer’s Disease; and
 - B) List the signs and symptoms of Alzheimer’s Disease.
 - 3) Impacts of Cognitive Impairments. Objectives: upon completion of this unit, the student will be able to describe the impact of cognitive impairment on society, the family, and the individual.
 - 4) State and Federal Regulations. Objectives: upon completion of this unit, the student will be able to discuss current State and federal regulations related to the care of the person with dementia.
 - 5) Ability Centered Care

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- A) Overview. Objectives: upon completion of this unit, the student will be able to:
- i) Discuss the philosophy of person-directed, ability-centered care;
 - ii) Describe the goals of ability-centered care;
 - iii) Discuss the importance of a team approach in caring for a person with dementia; and
 - iv) Discuss the role of the CNA in providing ability-centered care.
- B) Therapeutic environment. Objectives: upon completion of this unit, the student will be able to:
- i) Discuss elements of a therapeutic environment; and
 - ii) Discuss creative strategies to promote a therapeutic environment.
- C) Communication. Objectives: upon completion of this unit, the student will be able to:
- i) Describe how challenges in communication change as the person progresses through the stages of dementia;
 - ii) Discuss creative strategies to enhance communication; and
 - iii) Discuss appropriate techniques for physical touch with someone with dementia.
- D) Relationships. Objectives; upon completion of this unit, the student will be able to:
- i) Examine the importance of relationships between care givers and the person who has dementia; and

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- ii) Describe ways that the CNA can enhance his/her relationship with the person with dementia.
- E) Activities. Objectives: upon completion of this unit, the student will be able to:
 - i) Discuss examples of activities appropriate for persons in different stages of dementia;
 - ii) Discuss approaches the CNA can use to engage residents in activities;
 - iii) Compare and contrast traditional versus non-traditional activities; and
 - iv) Compare and contrast structured versus spontaneous activities.
- F) Activities of daily living (ADL). Objectives: upon completion of this unit, the student will be able to:
 - i) Discuss the purpose of restorative goals, including improving performance, maintaining abilities; and preventing complications;
 - ii) Explore physical challenges, psychosocial challenges, environmental challenges and approaches to support resident's independence related to each ADL, which include, but are not limited to, dressing, bathing, grooming, oral hygiene, toileting; and eating/nutritional issues.
- 6) Understanding Behaviors as Unmet Needs. Objectives: upon completion of this unit, the student will be able to:
 - A) Explain the difference between symptoms and behaviors;
 - B) Describe defense mechanism/coping behaviors used to compensate for cognitive impairment;
 - C) Examine ways in which the CNA can diminish behavioral

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challenges;

D) Explore creative strategies to manage common behavioral challenges:

i) Purposeful wandering;

ii) Agitation and aggression;

iii) Catastrophic reaction;

iv) Combativeness;

v) Delusions/hallucinations/paranoia;

vi) Rummaging and hoarding;

vii) Sexual behavior;

viii) Sleep disturbances;

ix) Sundowning;

x) Wanting to go home;

xi) Indifference;

xii) Purposeful waking; and

xiii) Other behaviors.

7) Safety. Objectives: upon completion of this unit, the student will be able to:

A) Describe challenges in maintaining the safety of the resident while supporting the resident's need to remain active. These include physical, psychosocial, and environmental challenges and;

B) Investigate creative strategies to provide for the safety of the person with dementia.

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- 8) Psychosocial Needs. Objectives: upon completion of this unit, the student will be able to:
- A) Discuss the Person with Dementia
 - i) Describe role changes and reversals that the person with dementia experiences;
 - ii) Identify stressors;
 - iii) Discuss grief and loss issues; and
 - iv) Describe coping strategies for the person with dementia, including understanding disease progression, realistic expectations, and self-care.
 - B) Discuss Family and Loved Ones
 - i) Describe the role changes and reversals that family members go through when a loved one has dementia;
 - ii) Describe ways to manage the stresses of caring for persons with cognitive impairment;
 - iii) Discuss grief and loss issues; and
 - iv) Discuss the psychological support that family and loved ones might need in coping with dementia.
 - C) Discuss Care Givers and Staff
 - i) Identify stressors;
 - ii) Discuss grief and loss issues; and
 - iii) Describe coping strategies for those caring for persons with cognitive impairment, including understanding disease progression, realistic expectations, self-care, and recognizing burnout.

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- 9) Resources. Objectives: upon completion of this unit, the student will be able to identify community resources available to the following:
- i) Person with dementia;
 - ii) Families and loved ones; and
 - iii) Care givers and staff.
- a) ~~Module I—Introduction to Health Care Systems~~
- 1) ~~Functions of health care facilities. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~differentiate between the hospital, long term care facility, and home health aide programs as to their basic purposes and what each expects of the nursing assistant;~~
 - B) ~~define the functions of the nursing assistant and be aware of the ethical implications and the legal limitations; and~~
 - C) ~~develop a beginning understanding and appreciation of the responsibility of the nursing assistant as a member of the health care team.~~
 - 2) ~~Home Health Agencies and the health care professions. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~discuss the purpose and organization of a home health agency;~~
 - B) ~~identify the members of the home health care team and their respective tasks; and~~
 - C) ~~apply learned basic nursing procedures to the home setting making appropriate modifications.~~
 - 3) ~~Philosophy of patient care. Objectives: Upon completion of this unit of instruction, the student will be able to:~~

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- A) ~~understand the uniqueness and reward of caring for the geriatric patient;~~
 - B) ~~demonstrate an awareness of the ethics involved in the position; and~~
 - C) ~~develop an understanding of the patient family relationship.~~
- 4) ~~The role of the multidisciplinary health care team. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
- A) ~~define the role of the nursing assistant in the long term care facility;~~
 - B) ~~identify and discuss roles of the multidisciplinary team and the integration of services for the total care of the patient; and~~
 - C) ~~identify the "chain of command" in the organizational structure of a long term care facility.~~
- 5) ~~Personal qualities of the nursing assistant. Objectives: Upon completion of this unit of instruction, the student will meet expectations of facilities by being able to:~~
- A) ~~meet standards of appearance and general behavior;~~
 - B) ~~be aware of the importance of punctuality and confidentiality; and~~
 - C) ~~demonstrate an awareness of empathy and compassion, particularly to the elderly.~~
- 6) ~~Duties of the nurse assistant. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
- A) ~~develop an understanding of nursing assistant duties;~~
 - B) ~~develop an understanding of the whys of patient care, such as infection control, safety, and residents' rights; and~~
 - C) ~~define the functions of the nursing assistant and be aware of legal~~

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implications.

- 7) ~~Medical terminology. Objectives: Upon completion of this unit of instruction, the student will meet expectations of facilities by being able to:~~
 - A) ~~develop an awareness of the very basic abbreviations and symbols utilized in medical terminology; and~~
 - B) ~~meet the written standards for charting on the medical record.~~
- 8) ~~Recording. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~demonstrate an awareness of the principles of accurate observation and recording; and~~
 - B) ~~discuss the various forms utilized in the medical record system.~~
- b) ~~Module II—Introduction to the patient.~~
 - 1) ~~Resident Rights. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~provide privacy and maintenance of confidentiality;~~
 - B) ~~assist residents to make personal choices to accommodate their individual needs; and~~
 - C) ~~maintain reasonable care of the personal possessions of residents.~~
 - 2) ~~Communication and interpersonal relationships with patients, families and others. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~develop an awareness of appropriate communication between staff/patients, staff/families, families/patient, staff/staff;~~
 - B) ~~develop communication techniques; and~~

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- ~~C) demonstrate the ability to understand verbal and nonverbal communication.~~
- 3) ~~Psychological needs of patient and family. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - ~~A) develop an awareness of sensitivity to the patient's need for feelings of self worth;~~
 - ~~B) demonstrate the ability to listen; and~~
 - ~~C) understand the necessity to develop and maintain harmony between patient and family.~~
- 4) ~~Normal growth and development. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - ~~A) list and describe various priorities of needs of residents;~~
 - ~~B) describe the continuum of life cycle; and~~
 - ~~C) develop an awareness of normalcy and deviations.~~
- e) ~~Module III— Your working environment.~~
 - 1) ~~Cleanliness in the health care setting and patient homes. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - ~~A) define the principles of medical asepsis;~~
 - ~~B) demonstrate an awareness of the importance of cleanliness in health care institutions; and~~
 - ~~C) demonstrate the ability to modify medical asepsis technique for the home setting.~~
 - 2) ~~Principles of handwashing. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - ~~A) discuss the need for handwashing before and after each task and~~

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- ~~before and after direct patient contact;~~
- ~~B) demonstrate that an understanding of good handwashing technique will prevent the spread of disease; and~~
 - ~~C) demonstrate the ability to wash hands using the learned technique.~~
- 3) ~~Principles of disinfection. Objectives: upon completion of this unit of instruction, the student will be able to:~~
- ~~A) List the methods of disinfection;~~
 - ~~B) demonstrate an awareness of handling disinfected articles; and~~
 - ~~C) differentiate between “clean” and “dirty.”~~
- 4) ~~Principles of sterilization. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
- ~~A) explain the relationship between microorganisms and infection control;~~
 - ~~B) list the conditions necessary for microorganism growth; and~~
 - ~~C) develop an awareness of the process of killing all bacteria.~~
- 5) ~~Techniques of disinfection. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
- ~~A) discuss the various methods of disinfecting;~~
 - ~~B) develop an awareness of relevant time necessary for disinfection; and~~
 - ~~C) list articles that can be safely disinfected.~~
- 6) ~~Maintaining equipment and supplies. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
- ~~A) develop an understanding of the proper usage of equipment used in~~

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- ~~the personal/nursing care of residents;~~
- ~~B) demonstrate proper usage, cleaning and storing of equipment; and~~
 - ~~C) develop an awareness of the reporting system relevant to proper maintenance of equipment.~~
- d) ~~Module IV— Safety.~~
- ~~1) Body mechanics. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - ~~A) discuss techniques of proper body mechanics;~~
 - ~~B) demonstrate good body mechanics for the benefit of the patient and nursing assistant; and~~
 - ~~C) relate use of body mechanics to basic musculo-skeletal anatomy.~~
 - ~~2) Fire safety. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - ~~A) identify potential fire hazards;~~
 - ~~B) identify and apply facility's procedures for safety, fire and disaster; and~~
 - ~~C) state his/her role in facility's fire and disaster plan.~~
 - ~~3) Disaster. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - ~~A) identify designated supervisory personnel in the event of disaster;~~
 - ~~B) develop an understanding of the disaster manual; and~~
 - ~~C) state his/her role in facility's safety, fire and disaster plan.~~
 - ~~4) Heimlich maneuver. Objectives: Upon completion of this unit of instruction, the student will be able to:~~

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- A) ~~list signs of choking; and~~
 - B) ~~demonstrate the Heimlich maneuver.~~
- e) ~~Module V— The patient's unit. Bedmaking procedures (unoccupied and occupied). Objectives: Upon completion of this unit of instruction, the student will be able to:~~
- 1) ~~identify the patient's need for a clean and comfortable environment;~~
 - 2) ~~identify the purpose of and procedure for making the unoccupied and occupied bed; and~~
 - 3) ~~demonstrate proper bedmaking procedure.~~
- f) ~~Module VI— Lifting, moving and transporting patients.~~
- 1) ~~In bed. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~describe briefly the musculo-skeletal system;~~
 - B) ~~realize needs for motion in joints and muscle activity; and~~
 - C) ~~maintain correct body alignment.~~
 - 2) ~~Ambulatory. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~safely ambulate patients;~~
 - B) ~~demonstrate proper body mechanics; and~~
 - C) ~~develop an awareness of the physical ability of each patient.~~
 - 3) ~~Wheelchair. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~apply safety principles involved in transporting patient in~~

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- ~~wheelchair;~~
- B) ~~demonstrate proper body mechanics; and~~
- C) ~~provide for privacy when transferring the patient from bed to wheelchair.~~
- 4) ~~Stretcher. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~identify and apply rules for safety for patient transfer;~~
 - B) ~~demonstrate good body mechanics; and~~
 - C) ~~provide for privacy when transferring the patient from bed to stretcher.~~
- g) ~~Module VII—Basic Anatomy.~~
 - 1) ~~Contents:~~
 - A) ~~Anatomy of the Skeletal System;~~
 - B) ~~Anatomy of the Circulatory System;~~
 - C) ~~Anatomy of the Digestive System;~~
 - D) ~~Anatomy of the Respiratory System;~~
 - E) ~~Anatomy of the Urinary System;~~
 - F) ~~Anatomy of the Muscular System; and~~
 - G) ~~Functioning of the human body as related to the disease process.~~
 - 2) ~~Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~develop an understanding of human anatomy and its relationship to normal function;~~

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- B) ~~identify and discuss simple disease processes; and~~
- C) ~~explain how body systems work together.~~
- h) ~~Module VIII—Personal care of the patient.~~
 - 1) ~~Contents:~~
 - A) ~~Oral hygiene;~~
 - B) ~~Bathing procedures;~~
 - C) ~~Care of the back, feet and skin; and~~
 - D) ~~Observing and reporting.~~
 - 2) ~~Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~identify basic human needs (physical, emotional, social and religious) of the patient;~~
 - B) ~~demonstrate the ability to recognize basic human needs in patient behavior;~~
 - C) ~~demonstrate proper medical asepsis technique;~~
 - D) ~~demonstrate methods to detect incipient or manifest decubitus ulcers;~~
 - E) ~~demonstrate measures to prevent decubitus ulcers, such as proper positioning and turning;~~
 - F) ~~identify the patient's need for a clean environment; and~~
 - G) ~~observe and report care given.~~
- i) ~~Module IX—Nutrition.~~

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- 1) ~~Diets and therapeutic diets. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~describe briefly the use of basic nutrients~~
 - B) ~~list the basic four groups and name daily requirements of each; and~~
 - C) ~~identify modified diets and understand the reasons for modification.~~

- 2) ~~Feeding techniques. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~describe briefly the anatomy of digestion;~~
 - B) ~~develop an awareness of the patient's eating limitations; and~~
 - C) ~~serve and assist patient with feeding.~~

- 3) ~~Nourishments. Objectives: upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~develop an understanding of intermittent nourishments and dietary supplements;~~
 - B) ~~demonstrate the ability to properly distribute nourishments; and~~
 - C) ~~accurately report and record diet and fluid intake.~~

- j) ~~Module X—Fluid balance.~~
 - 1) ~~Measuring fluid intake and output. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~describe briefly the anatomy of elimination;~~
 - B) ~~demonstrate the ability to measure intake and output; and~~
 - C) ~~accurately report and record intake and output.~~

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- 2) ~~Forcing and restricting fluids. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~identify problems associated and bowel and bladder management;~~
 - B) ~~develop an understanding of fluid balance in the body; and~~
 - C) ~~accurately report and record patient's fluid intake.~~
- 3) ~~Specimen collection. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~describe briefly the anatomy related to body discharge and elimination;~~
 - B) ~~demonstrate how to collect stool, urine, and other specimens; and~~
 - C) ~~accurately report and record urinary, fecal, and other output.~~
- k) ~~Module XI—Observing and recording vital signs.~~
 - 1) ~~Contents:~~
 - A) ~~Taking the temperature;~~
 - B) ~~Taking pulse;~~
 - C) ~~Taking respirations;~~
 - D) ~~Taking blood pressure;~~
 - E) ~~Recording vital signs; and~~
 - F) ~~Measuring height and weight.~~
 - 2) ~~Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~state the meaning and importance of temperature, pulse, respirations, and blood pressure;~~

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- B) ~~demonstrate how to properly measure temperature, pulse, respirations, and blood pressure;~~
 - C) ~~accurately report and record temperature, pulse, respirations, and blood pressure; and~~
 - D) ~~demonstrate how to accurately measure and record height and weight.~~
- 1) ~~Module XII—Supportive care.~~
- 1) ~~Heat applications. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~describe the various methods of heat application;~~
 - B) ~~demonstrate the use of safety measures involved in applying hot applications; and~~
 - C) ~~report and record treatment given.~~
 - 2) ~~Cold applications. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~describe the various methods of cold applications;~~
 - B) ~~demonstrate the use and safety measures involved in applying cold applications; and~~
 - C) ~~report and record treatment given.~~
 - 3) ~~Enemas. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~describe briefly the anatomy of elimination;~~
 - B) ~~demonstrate how to administer an enema; and~~
 - C) ~~accurately report and record the procedures and results.~~

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- 4) ~~The vaginal douche—external and internal. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~describe briefly the anatomy of the reproductive system;~~
 - B) ~~demonstrate the procedure of administering an external and internal douche; and~~
 - C) ~~accurately report and record the procedure.~~
- 5) ~~Catheters and tubing. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~develop a basic understanding of the use of catheters and tubing;~~
 - B) ~~discuss the use of specific catheters and tubing; and~~
 - C) ~~develop an understanding of the maintenance and storage of catheters and tubing.~~
- m) ~~Module XIII—Fundamentals of Rehabilitation Nursing.~~
 - 1) ~~of rehabilitation nursing. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~discuss the intrinsic worth of affected persons;~~
 - B) ~~develop a beginning understanding of the fundamentals of rehabilitation; and~~
 - C) ~~identify methods of treating the whole patient for restoration of function.~~
 - 2) ~~Principles of rehabilitation nursing. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~demonstrate an understanding of the concepts of rehabilitation nursing;~~

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- B) ~~identify the four cardinal principles of rehabilitation nursing; and~~
- C) ~~develop an awareness of the treatment process of rehabilitation as well as the legal implications.~~
- 3) ~~Concepts of activities of daily living. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~describe and discuss the use of adaptive tools for the disabled person;~~
 - B) ~~develop an awareness of sensitivity to the patient's need for feelings of self-esteem; and~~
 - C) ~~motivate the patient to work toward independence and self-care.~~
- n) ~~Module XIV—Patient care planning.~~
 - 1) ~~Contents:~~
 - A) ~~Patient admission;~~
 - B) ~~Patient transfer; and~~
 - C) ~~Patient discharge.~~
 - 2) ~~Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~be aware of the emotional implications of admission, transfer, and discharge;~~
 - B) ~~demonstrate the procedures for admission, transfer, and discharge; and~~
 - C) ~~observe, report, and record accurately.~~
- o) ~~Module XV—The patient in isolation.~~
 - 1) ~~Isolation techniques. Objective: Upon completion of this unit of~~

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~~instruction, the student will be able to:~~

- ~~A) discuss communicable diseases and the nature of isolation techniques;~~
- ~~B) differentiate between “clean” and “dirty”; and~~
- ~~C) discuss that difference between regular and reverse isolation procedures.~~

2) ~~Physiological aspects of isolation. Objectives: Upon completion of this unit of instruction, the student will be able to:~~

- ~~A) demonstrate isolation precautions and procedure;~~
- ~~B) demonstrate isolation procedures including handwashing, masking, gowning, food and elimination precautions; and~~
- ~~C) accurately report and record isolation procedures.~~

3) ~~Psychological aspects of isolation. Objectives: Upon completion of this unit of instruction, the student will be able to:~~

- ~~A) be aware and empathetic to the patient’s fear and loneliness;~~
- ~~B) identify outward behavior of the isolated patient; and~~
- ~~C) accurately observe and record patient’s emotional reaction to the isolation process.~~

4) ~~Isolation in the home. Objectives: Upon completion of this unit of instruction, the student will be able to:~~

- ~~A) apply learned isolation techniques making necessary modifications for home care;~~
- ~~B) communicate effectively with the patient and family relevant to the isolation process; and~~
- ~~C) accurately observe, report, and record the isolation techniques.~~

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- p) ~~Module XVI—Care of the terminally ill patient.~~
- 1) ~~Contents:~~
 - A) ~~Psychological needs of the patient; and~~
 - B) ~~Psychological needs of the family.~~
 - 2) ~~Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - A) ~~identify and describe the rights of the dying patient and his/her family;~~
 - B) ~~discuss attitudes and feelings about death and dying;~~
 - C) ~~describe the physical and psychological changes in the patient as death approaches; and~~
 - D) ~~discuss the grieving process of the patient and family.~~
- q) ~~Module XVII—Care of the body (postmortem care). Objectives: Upon completion of this unit of instruction, the student will be able to:~~
- 1) ~~develop an awareness for respect for the body after death occurs;~~
 - 2) ~~develop an understanding for good body alignment after death; and~~
 - 3) ~~demonstrate nursing care after death.~~
- r) ~~Module XVIII—Aging and Dementia. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
- 1) ~~Identify the differences between the normal aging process and cognitive dysfunction disease processes;~~
 - 2) ~~Define dementia and pseudo-dementia;~~
 - A) ~~Reversible; and~~

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- B) ~~Non-reversible.~~
- 3) ~~List the common terminology used to describe difference types of dementia:~~
 - A) ~~Alzheimer's Disease (AD);~~
 - B) ~~Senile Dementia of the Alzheimer's Type (SDAT);~~
 - C) ~~Multi-Infaret Dementia (MID)~~
 - D) ~~Organic Brain Syndrome (OBS)~~
- 4) ~~Discuss how dementias are currently diagnosed.~~
- s) ~~Module XIX—Alzheimer's Disease (AD) and Related Disorders (RD). Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - 1) ~~Identify the potential health, social and economic impacts of AD and RD:~~
 - A) ~~Society;~~
 - B) ~~Family; and~~
 - C) ~~Individual.~~
 - 2) ~~List the primary signs, symptoms and associated features of AD and RD.~~
 - 3) ~~Discuss memory loss, sensory impairments, perceptual dysfunction, and cognitive and physical changes normally associated with AD and RD.~~
- t) ~~Module XX—Communications. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - 1) ~~Identify the elements of verbal/nonverbal communication between staff/resident;~~
 - 2) ~~Discuss the expected language and communication changes in AD and RD~~

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residents;

3) ~~Identify effective techniques for enhancing communications; and~~

4) ~~Discuss the importance of touch and companionship to the AD and RD resident.~~

u) ~~Module XXI—Care and Treatment Modalities. Objectives: Upon completion of this unit of instruction, the student will be able to:~~

1) ~~Discuss the inter-disciplinary nature of treatment in the care of AD and RD residents;~~

2) ~~Identify the importance of observation and ways to monitor the behavior and safety of the AD and RD resident;~~

3) ~~Identify the importance of: consistency in approach; focusing on ability; task breakdown techniques; cueing and distracting techniques;~~

4) ~~Discuss the difference in approaching activities of daily living (ADL), such as dressing, bathing, grooming, oral hygiene, bowel, bladder, and skin care;~~

5) ~~List the physical changes and their effects on the AD resident.~~

v) ~~Module XXII—Behavior Issues and Management Techniques. Objectives: Upon completion of this unit of instruction, the student will be able to:~~

1) ~~Discuss the common mood and behavioral disturbances of residents with a progressive dementing disorder:~~

A) ~~Agitation;~~

B) ~~Anxiety;~~

C) ~~Catastrophic Reactions;~~

D) ~~Clinging;~~

E) ~~Combativeness;~~

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- F) ~~Delusions/hallucinations;~~
- G) ~~Inappropriate sexual behaviors;~~
- H) ~~Rummaging/hoarding;~~
- I) ~~Sleep disturbance;~~
- J) ~~Sundowning (increasing intensity of symptoms during evening hours);~~
- K) ~~Suspiciousness; and~~
- L) ~~Wandering/pacing.~~
- 2) ~~Identify specific techniques or approaches used to support residents ability:~~
 - A) ~~Behavior;~~
 - B) ~~Cause;~~
 - C) ~~Staff intervention/response; and~~
 - D) ~~Environment.~~
- w) ~~Module XXIII—Activities. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
 - 1) ~~Identify appropriate activities based on the individual's mood and behavioral needs:~~
 - A) ~~Individual;~~
 - B) ~~Small group; and~~
 - C) ~~Large group.~~
 - 2) ~~Discuss the importance, significance and types of familiar tasks to support~~

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~~normalization.~~

- x) ~~Module XXIV—Nutrition and Dietary Factors. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
- ~~1) Identify cognitive and physiological changes of AD and RD residents that affect nutrition and feeding patterns;~~
 - ~~2) Discuss potential feeding problems, complications, and eating behaviors; and~~
 - ~~3) List approaches for maintaining good nutrition and enhancing mealtime.~~
- y) ~~Module XXV—Family Role and Community Resources. Objectives: Upon completion of this unit of instruction, the student will be able to:~~
- ~~1) Define family, significant other, and the sandwich generation (individuals caring for both their children and their elderly parents);~~
 - ~~2) Identify role changes and role reversal;~~
 - ~~3) Discuss the extent of family caregiving prior to Nursing Home placement;~~
 - ~~4) Discuss the impact of chronic stress on family systems;~~
 - ~~5) Discuss the impact of caring for the AD and RD family member or resident on the primary caregiver.~~
 - ~~6) Identify interventions appropriate for assisting family caregivers to cope with their stress;~~
 - ~~7) Identify the different community resources available and their role in the care and treatment of AD and RD residents both inside and outside the facility setting; and~~
 - ~~8) Discuss how local chapters of the Alzheimer's Disease and Related Disorders Association (ADRDA) can assist the resident, the family caregiver and the facility.~~
- z) ~~Module XXVI—Staff Support. Objectives: Upon completion of this unit of~~

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~~instruction, the student will be able to:~~

- ~~1) Identify stress factors involved in caring for persons with irreversible cognitive decline;~~
 - ~~2) Identify coping mechanisms used by the individual resident to compensate for irreversible cognitive decline; and~~
 - ~~3) Identify coping mechanisms that are used during the death, dying and bereavement process by the facility and facility staff.~~
- aa) ~~Module XXVII—Cardiopulmonary Resuscitation. Objective: Upon completion of this unit of instruction, the student will be able to initiate basic cardiopulmonary resuscitation. After the training, certification in the provision of basic life support by an American Heart Association or American Red Cross certified training program may be offered as an option for this unit, but such certification is not a pre-requisite for the student's satisfactory completion of this unit of instruction.~~

(Source: Amended at 36 Ill. Reg. _____, effective _____)

Section 395.310 Developmental Disabilities Aide Training Program (Repealed)

~~The Developmental Disabilities (DD) Aide Training Program shall include the following values, themes, and principles, which are considered to be current best practice by the developmental disabilities service system leaders in the field: active treatment, advocacy, choice/preference, communication/active listening, confidentiality, documentation, involvement/participation, normalization/age appropriate outcomes for people, people first language, quality assurance, respect/dignity, rights/responsibilities, self advocacy/empowerment, customer satisfaction, and appreciation for diversity. At a minimum, the curriculum will also include the following:~~

- a) **Orientation**
 - ~~1) Functions of long term care facilities for individuals with developmental disabilities~~
 - ~~2) The health care professions, support services for individuals with developmental disabilities and community social service agencies~~
 - ~~3) Philosophy of residential care and community living~~

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- 4) ~~Role of the interdisciplinary team~~
- 5) ~~Job duties and responsibilities of the DD Aide~~
- b) ~~Introduction to the Residents~~
 - 1) ~~Types and styles of communication with residents~~
 - 2) ~~Communication and interpersonal relationships with residents, families and others~~
 - 3) ~~Psychosocial needs of residents, their family, and others~~
 - 4) ~~The growth and development process~~
 - 5) ~~Characteristics and types of developmental disabilities~~
 - 6) ~~Resident's adjustment to death and dying~~
- e) ~~Fundamentals of Habilitation Planning~~
 - 1) ~~Philosophy of achieving independent living skills~~
 - 2) ~~Introduction to the individual habilitation plan including the role of each employee in the habilitation process~~
 - 3) ~~Habilitation plan assessment procedures and goal/future planning~~
 - 4) ~~The role of the employee in the admission, transfer and discharge processes~~
 - 5) ~~The role of the employee in basic resident care planning and procedures~~
- d) ~~Techniques of Habilitation Planning and Implementation. The role of the employee in social habilitation, including:~~
 - 1) ~~Activities of daily living (ADL)~~
 - 2) ~~Therapeutic and leisure time activities~~

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- 3) Education
 - 4) Community living adjustment
 - 5) Behavior development
 - 6) Behavior management and self control
 - 7) Effect of drugs in behavior management and illness
 - 8) Effective total communication
 - 9) Pre-vocational and vocational training
 - 10) Nutrition and fluid intake
 - 11) Diets and therapeutic diets
- e) Principles of Record Keeping
- 1) History and use of facility records with special emphasis on the role of the employee in the record keeping process
 - 2) Content and organization of resident records
 - 3) Recording methods for progress notes, universal notes, ADC notes and habilitation reviews
 - 4) Writing effective progress notes
 - 5) Confidentiality
 - 6) Recording admission, transfer and discharge information
- f) Safety
- 1) Basic fire safety
 - 2) Emergency and disaster procedures

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- 3) ~~Injury prevention techniques~~
- 4) ~~Household daily safety procedures including body mechanics~~
- g) ~~Facility Environment~~
 - 1) ~~Creating normalized environment for daily living activities~~
 - 2) ~~Importance of cleanliness of the facility, use of equipment and supplies~~
- h) ~~Principles of Disease Control~~
 - 1) ~~Introduction to micro-organisms causing resident illness and disease~~
 - 2) ~~Teaching of disinfection and sanitation~~
- i) ~~Emergency Medical Procedures~~
 - 1) ~~Cardiopulmonary resuscitation (CPR)~~
 - 2) ~~Seizures~~
 - 3) ~~Drug reactions~~
 - 4) ~~Traumas~~
 - 5) ~~Heimlich maneuver~~
- j) ~~Resident Rights~~
 - 1) ~~Basic civil, human and legal rights of residents~~
 - 2) ~~Protection of residents' personal property~~
- k) ~~Bodily Functions~~
 - 1) ~~Helping residents to understand their body functions~~
 - 2) ~~Personal hygiene~~

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3) ~~Human sexual behavior~~

(Source: Repealed at 36 Ill. Reg. _____, effective _____)

Section 395.320 Basic Child Care/Habilitation Aide Training Program

The Child Care/Habilitation Aides training program shall include the following values, themes, and principles, which are considered to be current best practice by the developmental disabilities service system leaders in the field: abuse and neglect issues; active treatment; advocacy; choice/preference; communication/active listening; confidentiality; documentation; involvement/participation; age-appropriate outcomes for people; people-first language; quality assurance; respect/dignity; rights/responsibilities; self-advocacy/empowerment; customer satisfaction; and appreciation for diversity. At a minimum, the curriculum shall also include the following:

a) Orientation:

- 1) Functions of long-term care facilities for individuals with developmental disabilities;
- 2) The health care professions and support services for individuals with developmental disabilities, and community social service agencies;
- 3) Philosophy of community inclusion;
- 4) Role of the interdisciplinary team; and
- 5) Job duties and responsibilities of the Child Care/Habilitation Aide.

b) Introduction to the Residents:

- 1) Types and styles of communicating with people;
- 2) Communication and interpersonal relationships;
- 3) Psychosocial needs;
- 4) The growth and development process;
- 5) Characteristics and types of developmental disabilities; and

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- 6) A resident's adjustment to death and dying.
- c) Fundamentals of Habilitation Planning:
- 1) Philosophy of achieving independent living skills:
 - 2) Introduction to the individual habilitation plan, including the role of each employee in the habilitation process;
 - 3) Habilitation plan assessment procedures and goal/future planning;
 - 4) The role of the employee in the admission, transfer, and discharge processes; and
 - 5) The role of the employee in basic resident care planning and procedures.
- d) Techniques of Habilitation Planning and Implementation. The role of the employee in social habilitation, including:
- 1) ADLs;
 - 2) Therapeutic and leisure time activities;
 - 3) Education;
 - 4) Community living adjustment;
 - 5) Behavior development;
 - 6) Behavior management and self-control;
 - 7) Effect of drugs in behavior management and illness;
 - 8) Effective total communication;
 - 9) Pre-vocational and vocational training;
 - 10) Nutrition and fluid intake; and

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11) Diets and therapeutic diets.

e) Principles of Record Keeping:

1) The history and use of facility records with special emphasis on the role of the employee in the record-keeping process;

2) The content and organization of resident records;

3) Recording methods for progress notes, universal notes, ADL notes and habilitation reviews;

4) Writing effective progress notes;

5) Confidentiality; and

6) Recording admission, transfer, and discharge information.

f) Safety:

1) Basic fire safety;

2) Emergency and disaster procedures;

3) Injury prevention techniques; and

4) Household daily safety procedures, including body mechanics.

g) Facility Environment:

1) Creating a normalized environment for daily living activities; and

2) The importance of cleanliness of the facility; use of equipment; and supplies.

h) Principles of Disease Control:

1) Introduction to micro-organisms that cause resident illness and disease; and

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- 2) The teaching of disinfection and sanitation.
- i) Emergency Medical Procedures:
 - 1) CPR;
 - 2) Seizures;
 - 3) Drug reactions;
 - 4) Traumas; and
 - 5) Heimlich maneuver.
- j) Resident Rights:
 - 1) Basic civil, human, and legal rights of residents; and
 - 2) Protecting residents' personal property.
- k) Bodily Functions:
 - 1) Helping residents to understand their bodily functions;
 - 2) Personal hygiene; and
 - 3) Human sexual behavior.

~~The Basic Child Care/Habilitation Aide Training Program shall include at a minimum:~~

- a) ~~Orientation:~~
 - 1) ~~Functions of health care facilities.~~
 - 2) ~~Health care professions.~~
 - 3) ~~Philosophy of resident care.~~
 - 4) ~~The role of the interdisciplinary or multidisciplinary health care team.~~

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- 5) ~~Personal qualities of the Aide.~~
- 6) ~~Duties of the Aide.~~
- 7) ~~Medical terminology.~~
- 8) ~~Record keeping.~~
- 9) ~~Residents' rights.~~
- b) ~~Introduction to the resident.~~
 - 1) ~~Communication and interpersonal relationships and residents, families and others.~~
 - 2) ~~Psychological needs of resident and family.~~
 - 3) ~~Normal growth and development.~~
 - 4) ~~Characteristics of developmental disabilities and mental illnesses.~~
- e) ~~Your working environment.~~
 - 1) ~~Cleanliness in the health care setting.~~
 - 2) ~~Principles of handwashing.~~
 - 3) ~~Principles of disinfection.~~
 - 4) ~~Principles of sterilization.~~
 - 5) ~~Techniques of disinfection.~~
 - 6) ~~Maintaining equipment and supplies.~~
- d) ~~Safety.~~
 - 1) ~~Body mechanics.~~
 - 2) ~~Fire safety.~~

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- 3) ~~Disaster.~~
- e) ~~Emergency Medical Procedures.~~
 - 1) ~~CPR.~~
 - 2) ~~Seizures.~~
 - 3) ~~Drug reactions.~~
 - 4) ~~Heimlich maneuver.~~
 - 5) ~~Trauma.~~
- f) ~~The resident's unit. Bedmaking procedures (unoccupied and occupied).~~
- g) ~~Lifting, moving and transporting residents.~~
 - 1) ~~In bed.~~
 - 2) ~~Ambulatory.~~
 - 3) ~~Wheelchair.~~
 - 4) ~~Stretcher.~~
- h) ~~Basic Anatomy~~
 - 1) ~~Skeletal System.~~
 - 2) ~~Circulatory System.~~
 - 3) ~~Digestive System.~~
 - 4) ~~Respiratory System.~~
 - 5) ~~Urinary System.~~
 - 6) ~~Functioning of the human body as related to the disease process.~~

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- i) ~~Personal care of the resident.~~
 - 1) ~~Oral hygiene.~~
 - 2) ~~Bathing procedures.~~
 - 3) ~~Care of the back, feet and skin.~~
 - 4) ~~Observing and reporting.~~
 - 5) ~~Personal hygiene.~~

- j) ~~Nutrition.~~
 - 1) ~~Diets and therapeutic diets.~~
 - 2) ~~Feeding techniques.~~
 - 3) ~~Nourishments.~~
 - 4) ~~Fluid intake.~~

- k) ~~Fluid balance.~~
 - 1) ~~Measuring fluid intake and output.~~
 - 2) ~~Forcing and restricting fluids.~~
 - 3) ~~Specimen collection.~~

- l) ~~Observing and recording vital signs.~~
 - 1) ~~Taking the temperature.~~
 - 2) ~~Taking pulse.~~
 - 3) ~~Taking respirations.~~
 - 4) ~~Taking blood pressure.~~

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- 5) ~~Recording vital signs.~~
- m) ~~Supportive care.~~
 - 1) ~~Heat applications.~~
 - 2) ~~Cold applications.~~
 - 3) ~~Enemas.~~
 - 4) ~~The vaginal douche (external and internal).~~
 - 5) ~~Preparing the resident for surgery physiologically.~~
 - 6) ~~Preparing the resident for surgery psychologically.~~
 - 7) ~~Care for the post-operative resident's physiological needs.~~
 - 8) ~~Care for the post-operative resident's psychological needs.~~
 - 9) ~~Side effects of various medications.~~
- n) ~~Fundamentals of (Re)habilitation.~~
 - 1) ~~Physical.~~
 - 2) ~~Social.~~
 - 3) ~~Psychosocial.~~
 - 4) ~~Behavioral.~~
- o) ~~Resident care planning.~~
 - 1) ~~Individual Habilitation Plan.~~
 - 2) ~~Individual Education Plan.~~
 - 3) ~~Admission.~~

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- 4) ~~Transfer.~~
- 5) ~~Discharge.~~
- 6) ~~Home visits.~~
- p) ~~The resident in isolation.~~
 - 1) ~~Isolation techniques.~~
 - 2) ~~Physiological aspects of isolation.~~
 - 3) ~~Psychological aspects of isolation.~~
- q) ~~Care of the terminally ill resident.~~
 - 1) ~~Psychological needs of the resident.~~
 - 2) ~~Psychological needs of the family.~~
- r) ~~Care of the body (Postmortum care).~~

(Source: Amended at 36 Ill. Reg. _____, effective _____)

SUBPART C: PROFICIENCY EXAMINATION

Section 395.400 Proficiency Examination

- a) The basic nursing assistant proficiency examination will be the ~~Department~~State- approved competency examination evaluation, with both written and performance manual skills components, developed from the curriculum outlined outlines in Section 395.300 of this Part.
 - 1) The written examination will be developed from a pool of standardized written test questions, only a portion of which are used in any one examination.
 - 2) The Department will verify that the written test questions address each course requirement as specified in the modules presented in Section

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395.300 of this Part.

- 3) A facility may proctor the examination but shall not score it. Scoring will be done only by the Department or its designee.
 - 4) The skills demonstration part of the evaluation will require the student to exhibit his or her ability to perform each of the approved performance skills.
 - 5) A record of successful completion of the competency evaluation will be included in the Health Care Worker Registry.
- b) A student who has completed an approved BNATP shall be allowed three opportunities to pass the written competency examination within twelve months after the program completion date. Any examinee who fails to successfully pass the proficiency examination within the first 45 days of employment must enroll in and successfully complete an approved Basic Nursing Assistant Training Program or Developmental Disabilities Aide Training Program.

(Source: Amended at 36 Ill. Reg. _____, effective _____)