

**WorkForce21 – Workforce Development Series
Health Support Specialist**

Table of Contents

Health Support Specialist Registered Apprenticeship Program Introduction	1
USDoL Summary	2
Definitions	3-4
Qualifications for Apprenticeship	5-6
1. Certified Nurse Aide	
Description	7
Work Processes Schedule (Competencies)	7-9
Health Support Specialist Related Theoretical Instruction	10
Related Theoretical Instruction: Medical Terminology	11
Related Theoretical Instruction: CPR/First Aid/AED	12
Related Theoretical Instruction: Dementia Care	13-14
Related Theoretical Instruction: Culture Change	15
2. Rehabilitative Aide	
Description	16
Work Processes Schedule (Competencies)	16-18
Related Theoretical Instruction	19
3. Certified Medication Aide	
Description	20
Work Processes Schedule (Competencies)	20-28
Related Theoretical Instruction	29
4. Environmental Services	
Description	30
Work Processes Schedule (Competencies)	30-33
Related Theoretical Instruction	34
5. Dining Services	
Description	35
Work Processes Schedule (Competencies)	35-38
Related Theoretical Instruction	39
6. Advanced Health Support Specialist	
Introduction	40
Description-Home Health Aide	41
Work Processes Schedule (Competencies)	41
Related Theoretical Instruction	42
7. Activity Director	
Description	43
Work Processes Schedule (Competencies)	43
Related Theoretical Instruction	44

Health Support Specialist Registered Apprenticeship Program (Universal Worker)

The Health Support Specialist Registered Apprenticeship Program allows adult care facilities to assist new and current employees through a career ladder to become a Universal Worker. Apprentices are able to begin the career ladder while being employed full time at the facility in three different areas involving Health Care. This will allow the apprentice to work under the direction of a Mentor and Licensed Nurse (an employee whom is deemed skilled by the participating facility apprenticeship committee in his or her area) to increase their skills and knowledge through additional on-the-job training. Health Support Specialist Apprentices will become involved with the residents from a person-centered approach, working with residents together as a team.

The apprentices obtain state certifications upon completion of training at the facility as a CNA and/or CMA. These classes are taught through an area community or technical college. The certificate of completion as a Rehabilitative Aide is earned through the local community college or technical school. Certificates are also obtained in CPR/First Aid and ServSafe (a National Restaurant Association Education Program). The ServSafe certificate allows for increased knowledge of personal hygiene in relation to food safety, maintenance of sanitary facilities and equipment, and food safety from the purchasing of food through receiving, preparation, and service. Upon completion of the Health Support Specialist Registered Apprenticeship program, the apprentice will receive a Completion of Apprenticeship certificate.

Apprentices may be employed in Dietary service or Environmental services, which do not require a certificate to work in the facility while attending related instruction to obtain certification as a CNA and/or CMA. Related instruction in Dietary services and Environmental services along with on-the-job learning will allow the adult care facilities the advantage of addressing the critical shortage areas in their facilities, while providing increased quality of care and quality of life for the residents of their facilities. A medical terminology course will also be required to assist the student with charting and documentation. This course will assist employees obtain additional skills and knowledge to help ensure the smooth flow of documentation to other team members.

The work process includes competencies for the Health Support Specialist to increase knowledge and skills necessary to meet the needs of the growing geriatric population beyond the required related theoretical instruction.

Advanced specialty training for the adult care facilities utilizing Home Health Aides (HHA) and Activity Professionals will also be taught through a local community or technical college. Related instruction in Dietary services and Environmental services along with on-the-job-learning will allow the adult care facilities the advantage of addressing the critical shortage areas in their facilities, while providing increased quality of care and quality of life for the residents of their facilities. The Health Support Specialist Registered Apprenticeship Program allows facilities to grow their own employees and be better prepared to meet the needs of our aging population by addressing staff retention with less staff turn over and increased skills. With the addition of Registered Apprenticeship to the current certifications, adult care facilities will be able to build a better-prepared and skilled work force.

USDoL Approved Summary

HEALTH SUPPORT SPECIALIST

O*NET-SOC CODE: 31-1011.00

RAIS CODE: 1086AA

Description: The Health Support Specialist allows adult care facilities to assist new and current employees through a career ladder to become a Universal Worker. Provide care to elders living in a household/adult care residential facility. The primary role is to protect, sustain and nurture the elders by providing assistance with activities of daily living and meeting other needs as required. The core goal of the work of the Health Support Specialist will be to provide assistance, which promotes a high quality of life and a positive elder hood. The responsibilities of the Health Support Specialist include care of the elder and the elder's environment including cooking, laundry and housekeeping. The Health Support Specialist is a member of a self-managed work team and is responsible for coordinating aspects of the teams work.

Definitions

Apprentice:

Any individual employed by the employer meeting the qualifications described in the Standards of Apprenticeship who has signed an Apprenticeship Agreement providing for training and related instruction under these Standards, and who is registered with the Registration Agency.

Apprenticeship Agreement:

The written agreement between the apprentice and the Apprenticeship Committee setting forth the responsibilities and obligations of all parties to the Apprenticeship Agreement with respect to the apprentices employment and training under these Standards. Each apprenticeship agreement must be registered with the Registration Agency.

Apprentice Committee:

The Apprenticeship Committee established by the sponsor under these Standards who will be charged with the operation of the program.

Certification of Completion of Apprenticeship:

The Certificate of Completion of Apprenticeship issued by the Registration Agency to those registered apprentices certified and documented as successfully completing the apprentice training requirements outlined in these Standards of Apprenticeship.

Employer:

Generally, an employer means any person or organization that employs an apprentice under these Apprenticeship Standards.

Employer Acceptance Agreement:

The written agreement between the sponsoring organization and the individual employer wishing to participate in the apprenticeship program under which these Standards are registered.

Mentor:

An individual who has documented sufficient skill and knowledge of an occupation, either through formal apprenticeship or through practical on-the-job experience and formal training. This individual is recognized by his/her employer as being fully qualified to perform the work of the occupation.

On-The-Job-Learning:

Tasks learned on-the-job in which the apprentice must be proficient before a completion certificate is granted. The learning must be through structured, supervised work experience.

Program Sponsor:

The Apprenticeship Committee in whose name these Standards will be registered, and who will have full responsibility for administration and operation of the Registered Apprenticeship program.

Related Instruction:

An organized and systematic form of instruction designed to provide the apprentice with knowledge of the theoretical and technical subjects related to his/her occupation.

Standards of Apprenticeship:

This entire document including any future modifications or additions approved by the Registration Agency.

Supervision of Apprenticeship Program:

An individual designated by the program sponsor to supervise or have charge and direction of an apprentice.

Term: Competency based

Competency Total hours: 2,500 – 5,000

Theoretical Instruction Total hours: 386

Qualifications for Apprenticeship

Age:

Apprentices must not be less than 16 years of age.

Education:

A high school diploma or GED equivalency is required. Applicant must provide an official transcript(s) for high school and post high school education and training. All GED records must be submitted if applicable.

Physical:

Applicants will be physically capable of performing the essential functions of the apprenticeship program, with or without a reasonable accommodation, and without posing a direct threat to the health and safety of the individual or others. Applicants may be subject to a physical agility or fitness test, or screened for the current illegal use of drugs or both on acceptance into the program and prior to being employed.

Ratio of Apprentices to Mentor:

The ratio of peer-mentor to apprentices is the ideal standard for training the maximum number of apprentices while insuring proper supervision, training, safety, and continuity of employment. The ratio for peer-mentor to apprentice will be no greater than 1-1 on any given shift. Supervision of apprentices will always remain under the direct supervision of the charge nurse.

Term of Apprenticeship:

The term for Health Support Specialist shall be competency based for minimum of 1 year with on-the-job learning attainment supplemented by the required hours of related instruction.

Work Experience:

During the Registered Apprenticeship, the apprentice will receive such on-the-job learning and related theoretical instruction in all phases of the occupation necessary to develop the skills and competence detailed in the apprentice work process outline. The on-the-job learning will be under the direction and guidance of the departmental supervisor of the apprentice(s).

The related instruction will be correlated as closely as possible to the practical experience and training received on-the-job. Each apprentice will be notified of the number of college credits available during each related instruction phase of the apprenticeship. The Apprenticeship Committee will be responsible for contacting the appropriate Community College or Vocational School to set up the related instruction. This allows related instruction to be taught at the facility per memorandum of agreement with the Registered Apprenticeship Program.

Supervision of Apprentices:

The employer will be responsible for training apprentice on the job. Apprentices will be under the general supervision of the employer and under the direct supervision of the mentors and charge nurse to whom they are assigned. The supervisor of the apprentice(s) designated by the employer will, with the advice and assistance of the Apprentice Committee, be responsible for the apprentices work assignments and ensuring the apprentice is working under the supervision of a skilled mentor and charge nurse, the evaluation of work performance, and the completion and submission of progress reports to the apprenticeship Committee.

Certificate of Completion of Apprenticeship:

Upon successful and satisfactory completion of the requirements of the Registered Apprenticeship program as established in the Standards, the facility will certify completion in writing to the Registration Agency and request that a Certificate of Completion of Apprenticeship be awarded to the completing apprentice(s). Each request shall be accompanied by the requested documentation for both the on-the-job learning and the related instruction as may be required by the Registration Agency.

Amendments or Modifications:

These Standards may be amended or modified at any time by the sponsor provided that no amendment or modification adopted shall alter any Apprenticeship Agreement in force at the time without the consent of all parties. Such amendment or modification will be submitted to the Registration Agency for approval and registration prior to being placed in effect. A copy of each amendment or modification adopted will be furnished to each apprentice to whom the amendment or modification applies.

**WORK PROCESSES SCHEDULE
 CERTIFIED NURSE AIDE
 O*NET-SOC CODE: 31-1011.00
 RAIS CODE: 1086AA**

Description: Certified Nurse Aide apprentices will have a combination of classroom and clinical instruction on basic patient care. Skills learned include daily personal hygiene, activities of daily living (ADL'S), bed baths, accurate recording of vital signs, correct patient positioning and transfer of patients. Complete an accurate compliance to HIPPA guidelines, including rights and social service needs of residents and their families.

		APPROXIMATE HOURS
1.	Communication	
	a. Demonstrate how professional attitude and behavior enhances communication among CNA, resident, resident's family and staff.	1-2
	b. Explain how the Nurse Aide promotes independence and resident's rights.	1-2
2.	Resident Care	
	a. Explain the Nurse Aid's responsibilities in health care delivery and identify who is responsible for actions of the nurse aide.	20-40
	b. Demonstrate effective hand washing techniques following all rules of asepsis, including hand washing when entering and leaving the residents room.	20-40
	c. Recognize safety precautions to avoid resident injuries.	40-80
	d. Describe and demonstrate disaster and/or fire escape plans.	40-80
	e. Demonstrate practices that reduce the transfer of infection in residents living area, bathroom and disposal of soiled articles and cleaning equipment after resident use.	20-40
	f. Demonstrate the correct use of disposable gloves when in with body fluids, blood, urine, vomitus and saliva.	20-40
	g. Demonstrate correct feeding techniques, identifying safety measures, encouraging independence and how to promote fluid intake.	40-80
	h. Assist or provide a bath using shower, tub, sponge or bed bath while providing: <ol style="list-style-type: none"> 1. Privacy 2. Safety 3. Correct water temperature 4. Comfortable environment 	4-8
	i. Encourage independence with appropriate choices with dressing and undressing.	20-40
	j. Assist residents with urination and bowel elimination needs providing for safety and privacy while using the toilet commode, bedpan or urinal.	20-40
	k. Demonstrate accurate perineal cleansing to prevent genitourinary infections.	20-40
	l. Demonstrate safe transfers, using the gate belt and/or mechanical lift from: <ol style="list-style-type: none"> 1. Bed to chair 	20-40

	2. Chair to toilet/commode	
m.	Identify important body mechanics for personal and resident safety.	20-40
n.	Demonstrate:	20-40
	1. Log roll to side of bed	
	2. Turn, reposition	
	3. Assist resident to sitting position	
o.	Assist with ambulation so that the resident feels safe and utilizes assistive devices when needed.	20-40
p.	Simulate the Heimlich maneuver technique	20-40
q.	Assist and/or provide grooming assistance for resident including oral care/mouth, gums, teeth or dentures, nail soaking and cleaning, filing, hair brushing or combing, beard care or shaving. Assist residents dress per resident's choice and activity.	20-40
r.	Describe and demonstrate skin care, demonstrate when, what and to whom observations need to be reported.	20-40
s.	Demonstrate accurate measurement and recording of weight and height measurement and recording of vital signs:	20-40
	1. Temperature	
	2. Pulse	
	3. Respirations	
	4. Blood pressure	
3.	Restorative Care	20-40
a.	Explain the Nurse Aide's responsibility in restorative care	
b.	Explain how to follow the residents care plan	
c.	Demonstrate safety techniques involved with restorative care	
d.	Understanding and reporting of early signs and symptoms of complications	
e.	Demonstrate safe transfer methods	
4.	Resident Rights	4-8
a.	Understand and describe the rights of residents in an Adult Care facility	
5.	Documentation	10-20
a.	Explain documentation and Nurse Aide responsibilities	
b.	Understand legal aspects of documentation	
c.	Understand and know appropriate Medical Terminology	
6.	Infection Control	20-40
a.	Demonstrate correct hand washing technique	
b.	Understand medical asepsis	
c.	Demonstrate isolation precautions	
d.	Understand blood borne pathogen standards	
7.	Safety	20-40
a.	Describe a safe environment	
b.	Describe accident risk factors	
c.	Understand how to prevent falls	
d.	Understand how to prevent burns	
e.	Understand how to prevent poisoning	

- r. Understand how to prevent suffocation
- g. Explain and demonstrate how to prevent equipment accidents
- h. Demonstrate wheel chair safety
- i. Explain how to properly handle hazardous substances
- j. Explain the correct handling of a fire extinguisher

Total Hours

500 - 1000

**RELATED INSTRUCTION OUTLINE
 CERTIFIED NURSE AIDE
 O*NET-SOC CODE: 3 1-1011.00
 RAIS CODE: 1086AA**

**APPROXIMATE
 HOURS**

Classroom training includes:

1.	Medical Ethics	5
2.	Objectives	1
3.	Job Description	2
4.	Resident Relations	5
5.	Public Relations	2
6.	Concept of Caring	6
7.	Aseptic Techniques	2
8.	Safety precautions	2
	a. fire	
	b. disaster	
9.	Body Systems	65
	a. musculoskeletal	
	b. respiratory	
	c. circulatory	
	d. digestive	
	e. urinary	
	f. skin, hair, nails	
	g. endocrine	
	h. reproductive	
	i. nervous	
	j. special senses, eyes, ears, and tongue	
Total Hours		90

**RELATED INSTRUCTION OUTLINE
MEDICAL TERMINOLOGY
O*NET-SOC CODE: 31-1011.00
RAIS CODE: 1086AA**

	APPROXIMATE HOURS
a. Know and understand formation of medical words.	8
b. Define prefixes and suffixes, root words, and combining forms.	8
c. Name the different areas of medicine and its specialties.	2
d. Use anatomical and directional terms appropriately.	5
e. Identify all body systems.	4
f. Understand basic anatomy and physiology.	8
g. Use medical words and abbreviations.	2
h. Understand and use conversion tables.	2
i. Use correct pronunciation of terms.	2
j. Read and write medical terminology.	3
k. Be exposed to Spanish translations.	2
Total Hours	45

**RELATED INSTRUCTION OUTLINE
CPR/FIRST AID/AED
O*NET-SOC CODE: 31-1011.00
RAIS CODE: 1086AA**

Description: This course is designed to prepare individuals to respond to injuries and sudden illnesses that may arise in everyday life. This is a first aid and cardiopulmonary resuscitation training program. It is offered to give individuals the knowledge and skills necessary to prevent, recognize, and provide basic care for injuries and sudden illnesses until medical personnel arrive and take over. Apprentices will focus on the basic knowledge of CPR/First Aid/AED lecture and skills and then will demonstrate the skills that they learned.

	APPROXIMATE HOURS
1. Demonstrate the correct procedures in adult CPR.	2
2. Demonstrate the correct procedures in child CPR.	1
3. Demonstrate the correct procedures in infant CPR.	1
4. Demonstrate the correct procedure of using an AED device.	1
5. Identify signs and symptoms of a heart attack, heat/cold related injuries, broken bones and other first aid related topics.	2
6. Recognize when to use rescue breathing as opposed to cardiopulmonary resuscitation.	2
7. Name and demonstrate the basic steps of how to respond in an emergency.	1
8. Legal aspects involved in giving CPR and first aid.	1
9. Identify ways of preventing disease transmission.	1
10. Demonstrate the correct procedure in rescue breathing for the adult, child, and infant.	2
11. Identify situations in which prioritizing care is necessary.	1
Total Hours	15

**RELATED INSTRUCTION OUTLINE
 DEMENTIA CARE
 O*NET-SOC CODE: 31-1011.00
 RAIS CODE: 1086AA**

	APPROXIMATE HOURS
1. Normal Aging a. Aging in America (Facts vs. Stereotypes and Myths) b. General Principles of aging <ul style="list-style-type: none"> i. Things that contribute to how people age ii. Age-Associated changes c. Memory and Aging	2
2. Overview of Alzheimer’s disease and other Dementing illnesses a. Defining Dementia and Delirium b. Conditions that cause Dementia and Delirium c. Alzheimer’s Disease d. Description e. Statistics f. Diagnosis and Risk Factors g. Suggested Stages-Global Deterioration Scale	3
3. Effective communication techniques with the person with memory loss. a. Defining communication b. Barriers to normal communication c. Sensory changes and communication d. Tips for communication effectively with the person with AD	3
4. Common Behaviors and Challenges Associated with Alzheimer’s disease a. Identification of common Behaviors and Challenges b. Common Triggers to Unwanted Behaviors c. Suggested Approaches to behaviors	2
5. Personal Care Issues a. Identification of Personal Care Issues b. Suggested Approaches to Avoid, Defuse, Cope with difficulties in providing care.	2
6. Developing a Meaningful Activities Program for the Memory Impaired Older Adult a. The components of a meaningful activities program b. Categories and types of activities c. Examples of activities that work well	2

7. Family Caregiver Issues	2
a. Issues families face when dealing with AD	
b. Family caregiver Options and Coping Strategies	
c. Common Issues for family and Professional Caregivers	
d. Positive Aspects of Aging	
Total Hours	16

**RELATED INSTRUCTION OUTLINE
CULTURE CHANGE (SAMPLE)
O*NET-SOC CODE: 31-1011.00
RAIS CODE: 1086AA**

Goal: To improve the well being of elders and those who care for them by transforming the communities in which they live and work. By the end of the 10-week program apprentices will understand the three plagues of nursing home care and the antidotes to eliminate them.

	APPROXIMATE HOURS
Session 1: The three plagues of loneliness, helplessness and boredom account for the bulk of suffering among our elders.	2
Session 2: An Elder-centered community commits to creating a Human Habitat where life revolves around close and continuing contact with plants, animals and children. It is these relationships that provide the young and old alike with pathway to alike worth living.	2
Session 3: Loving companionship is the antidote to loneliness; Elders deserve easy access to human and animal companionship.	1.5
Session 4: An Elder-centered community creates opportunity to give as well as receive care. This is the antidote to helplessness.	1.5
Session 5: An Elder-centered community imbues daily life with variety and spontaneity by creating an environment in which unexpected and unpredictable interactions and happenings can take place. This is the antidote to boredom.	2
Session 6: Meaningless activity corrodes the human spirit. The opportunity to do things that we find meaningful is essential to human health.	2
Session 7: Medical treatment should be the servant of genuine human caring, never its master.	2
Session 8: An Elder-centered community honors its Elders by de-emphasizing top-down bureaucratic authority and seeking instead to place the maximum possible decision-making authority into the hands of the Elders or into the hands of those closest to them.	2
Session 9: Creating an Elder-centered community is a never-ending process. Human growth must never be separated from human life.	2
Session 10: Wise leadership is the lifeblood of any struggle against the three plagues. For it, there can be no substitute.	2.5
Session 11: The magic wand. This part of the Eden Alternative training creates a paradigm shift from the institutional model to person centered care (culture change) and implementation of the previous principles.	2.5
Total Hours	22

**WORK PROCESSES SCHEDULE
REHABILITATIVE AIDE
O*NET-SOC CODE 31-1011.00
RAIS CODE: 1086AA**

Description: The Rehabilitative Aide performs restorative duties under the supervision of a Registered Nurse. An alternate is designated who must also complete the Rehabilitative Aide course. The alternate is used as necessary. The Rehabilitative Aide is a critical team member, due to the many hours they spend in “hands-on” activities with the resident. Observing the resident and reporting concerns are important roles. The Rehabilitative Aide often contributes to the team by providing special information on the resident, gathered by their close daily interactions with the resident.

		APPROXIMATE HOURS
1.	Range of Motion (passive) The apprentice will demonstrate the use of passive range of motion to increase flexibility.	20-40
2.	Range of Motion (active) The apprentice will demonstrate the use of Active-assist.	20-40
3.	Splint or Brace Assistance a. The apprentice will demonstrate the correct way to apply splint applications. b. The apprentice will demonstrate the correct care and cleaning of splints. c. The apprentice will demonstrate the proper adjustment of straps. d. The apprentice will demonstrate how to set up and maintain a splinting schedule. e. The apprentice will demonstrate proper removal of a splint. f. The apprentice will demonstrate how to document where, breakdown of a splint. g. The apprentice will know whom to contact if problems arise.	20-40
4.	Bed Mobility a. The apprentice will know the importance in assisting the resident in moving from side to side to promote self care. b. The apprentice will demonstrate the correct protocol for the resident to move in bed. c. The apprentice will demonstrate how to use adaptive methods or equipment to assist the resident with self positioning in bed. d. The apprentice will demonstrate and understand the importance of mat activities.	20-40

- 5. Transfer** 20-40
- a. Demonstrate transfer activities moving from one surface or plane.
 - b. Demonstrate the correct use of assistive devices for transfers:
 - i. Wheelchair
 - ii. Walker
 - iii. Railing
 - iv. 3N1 Commode
 - v. Bath bench
 - vi. Shower bench
 - c. Demonstrate strengthening exercises for upper and lower extremities to improve transfer skill level.
 - d. Demonstrate sitting balance exercise.
 - e. Provide resident education for safety training.
 - f. Demonstrate protective reflex training.
 - g. Demonstrate walking training.
 - h. Demonstrate balance exercises
- 6. Dressing or Grooming** 20-40
- a. Demonstrate upper extremity strengthening exercise.
 - b. Know and understand the importance of fine motor training programs.
 - c. Understand adaptive methods/adaptive equipment.
 - d. Understand task segmentation, cuing, Hands on training.
 - e. Understand repetition training in sequencing.
 - f. Demonstrate activities that involve dressing, undressing, undressing, bathing, or grooming, or hygiene, with instruction and training, with or without physical assist.
- 7. Eating or swallowing** 20-40
- a. Demonstrate use of assistive devices.
 - b. Demonstrate Hands-on patterning or cuing.
 - c. Demonstrate the correct posture for feeding.
 - d. Demonstrate the correct set-up of equipment.
 - e. Demonstrate postural exercises that facilitate alignment in the chin-tuck position for swallowing.
- 8. Amputation/Prosthesis Care** 20-40
- a. Demonstrate the correct application and removal of a prosthesis.
 - b. Demonstrate wellness care of a stump.
- 9. Communication** 20-40
- a. Explain the use of adaptive equipment.
 - b. Understand self performance activities in functional communication.
 - c. Understand the importance of scheduled periodic evaluations by a licensed nurse.
 - d. Know the importance of documenting the evaluation in the clinical record.
 - e. Understand the importance of supervision by nursing staff documentation.

10. Documentation	20-40
a. Understand measurable objectives.	
b. Understand documentation in a care plan.	
Total Hours	200-400

**RELATED INSTRUCTION OUTLINE
REHABILITATIVE AIDE
O*NET-SOC CODE: 31-1011.00
RAIS CODE: 1086AA**

Qualifications: Successful completion of a Certified Nurse Aide Program.

		APPROXIMATE HOURS
1.	Range of Motion	4
2.	Splint or Brace Assistant	2
3.	Bed Mobility	4
4.	Transfer	4
5.	Walking	4
6.	Dressing or Grooming	2
7.	Eating or Swallowing	2
8.	Amputation/Prosthesis Care	2
9.	Communication	2
10.	Other	1
11.	Documentation	2
12.	Determination of Services	1
Total Hours		30

**WORK PROCESSES SCHEDULE
CERTIFIED MEDICATION AIDE
O*NET-SOC CODE: 31-1011.00
RAIS CODE: 1086AA**

Description (Prerequisite Certified Nurse Aide): Provides training to the apprentice to develop the skills required for the Medication aide. This course includes the development of medicine knowledge, use of medicines, affects of medicine, administering medications, including preparation and accurate distribution of medicine for safety of the resident.

	APPROXIMATE HOURS
Safety and Medication Administration: Pharmacodynamics	37.5-75
1. Define pharmacokinetics.	
2. Define medication action.	
3. Explain the relationship between medication and drugs.	
4. State the four basic medication actions.	
5. Name and describe the four body processes that affect medication action.	
6. Identify factors influencing medication action and identify their effects.	
7. Define medication effects.	
8. State the difference between therapeutic effects and side effects.	
9. Differentiate between local and systemic effects.	
10. Recognize descriptions of major adverse reactions.	
11. Identify the meaning for the terms, which describe unwanted medication reactions.	
12. Differentiate between synergism and antagonism.	
13. Explain the difference between physiological and physical medication dependence.	
14. Name classifications of drugs that are commonly abused.	
Safety and Medication Administration: Forms of Medication	37.5-75
1. Identify forms in which medications are available and implications for effective use.	
2. Tell how lotions, liniments, and ointments should be applied.	
3. State the correct procedures for storing and using tinctures, fluid extracts, elixirs, spirits and suspensions.	
4. Explain what delayed-release tablets and capsules are and how they should be given to residents.	
5. State the rules for giving enteric-coated tablets and capsules.	
6. List and describe the routes for administering medications.	
7. Explain who is qualified to give medications by the parenteral route.	
Safety and Medication Administration: Mathematics, Weights, and Measures	37.5-75
1. Identify what professionals are responsible for calculating drug dosages.	

2. Identify the importance of correct dose measurement.
3. Correctly read and write lower case roman numbers ½ through 30.
4. Define the prefixes used in the metric system.
5. Add and subtract fractions decimals.
6. Describe the disadvantages of the household system of measurement and medication use.
7. List two drugs that are measured in units, convert grams to milligrams, and vice versa.
8. List some of the most common equivalents among the different systems of measurement.

Safety and Drug Administration: Drug Standards and Names 37.5-75

1. Define drug standards and tell how they are determined.
2. Explain why drug standards are necessary.
3. Identify the need of "U.S.P." following a drug name.
4. List and describe two types of names by which drugs are known.
5. Differentiate between generic and brand names for drugs.

Safety and Drug Administration: Drug Resources Information 37.5-75

1. Identify names of resources for drug information.
2. Demonstrate ability to use drug resources to obtain drug information.

Drugs and Body Systems: Urinary System 37.5-75

1. Identify basic structures and functions of the urinary system.
2. State the three functions of the urinary system.
3. Define the key terms for the urinary system, especially:
 - a. Anuria
 - b. Catheter
 - c. Dysuria
 - d. Hematuria
 - e. Incontinence
 - f. Nephritis
 - g. PH
 - h. Pyuria
4. Explain how changes in the urine give clues to disorders in the urinary system.
5. Define the symptoms of urinary system disorders and fluid imbalances.
6. Describe the causes of dehydration and its treatment.
7. Describe the following drug groups or treatments by giving examples of common medications or treatments and their actions, and listing nursing care and side effects associated with that type of drug/treatment:
 - a. Antispasmodics
 - b. Antibiotics
 - c. Urinary antiseptics
 - d. Urinary analgesics
 - e. Diuretics
 - f. Replacement electrolytes (potassium, calcium, etc.)

8. Identify drugs used to treat urinary tract disorders and nursing measures to promote effectiveness.
9. State the purposes of a urinary catheter.
10. Identify nursing actions to monitor a diuretic's actions, to observe for complications and promote comfort for the resident.
11. Identify the reason that potassium replacement drugs are used with diuretics.
12. Identify nursing actions to prevent medication reactions.

Drugs and Body Systems: Respiratory System

37.5-75

1. Identify the major structures and functions of the respiratory system.
2. Describe the mechanisms of breathing.
3. Explain how gases are exchanged in the lungs.
4. List the normal respiratory rate.
5. Describe the major respiratory disorders
6. List and describe common signs and symptoms of respiratory disorders using correct medical terms.
7. Describe the actions, give examples, nursing care and side effects for these drug groups: antihistamines, decongestants, and bronchodilators.
8. Explain and demonstrate how to administer medication through a meter dose inhaler.
9. Explain and demonstrate how to administer medication using a nasal inhaler.

Drugs and Body Systems: Digestive System

37.5-75

1. Identify the basic structures and functions of the digestive (gastrointestinal) system.
2. State the five main functions of the gastrointestinal (GI) system.
3. Name the major parts of the GI system and tell what they do.
4. Define the symptoms of gastrointestinal disorders.
5. Describe the major gastrointestinal disorders for which medications are prescribed.
6. Describe the actions, give examples, nursing care and side effects for these drug groups:
 - a. Antacids
 - b. Antisecretory drug
 - c. Digestants
 - d. Antiflatulents
 - e. Emetics
 - f. Antiemetics
 - g. Anticholinergics
 - h. Antispasmodics
 - i. Diarrhea medications
 - j. Cathartics (laxatives and purgatives)
 - k. Antiparasitics
7. Discuss non-drug means of controlling diarrhea and for preventing and correcting constipation.
9. Identify principles to remember in administering medications for the digestive system safely.

Drugs and Body Systems: Nervous Systems

37.5-75

1. Identify the two major divisions of the nervous system.
1. Describe the common structures associated with these divisions.
2. Use the appropriate terms associated with signs of nervous system disorders.
3. Describe disorders of the nervous system, especially those associated with aging: Parkinson's disease, myasthenia gravis, multiple sclerosis, drug induced movement disorders, seizure disorders, stroke, tumors, inflammation and infections.
4. Identify related medications and treatments for disorders of the nervous system.
5. Discuss implications for nursing care and side effects of medications associated with major nervous system disorders.
6. Describe the actions and give examples of the following drug groups: CNS cerebral stimulants, respiratory stimulants, CNS depressants, narcotic and non-narcotic analgesics, antidepressants sedative/hypnotics, antipsychotics, antimanic psychotherapeutic, and anti-Parkinson's disease drugs.
7. Identify drugs that are often involved in drug abuse.
8. Describe general nursing care when giving medications for the nervous system.
9. List medications, which may result in transient or permanent drug-induced movement disorders.
10. Describe several mental conditions for which psychotropic medications may be given as treatment.
11. List medications, which may result in a high potential for the resident to fall.
12. Define pain.
13. Describe the advantage of scheduled pain medication versus PRN Medication for chronic pain control.
14. Define placebo. Discuss the ethical issues associated with using placebos.

Drugs and Body Systems: Drugs Affecting the Special Senses: Eye

37.5-75

1. Identify basic structures and functions of the eye, terms and abbreviations referring to the eye.
2. Describe the mechanisms of sight.
3. Describe the effects of aging on the structures of vision.
4. Identify major disorders of the eyes and vision.
5. List terms and abbreviations associated with providing medications to the eyes.
6. Describe the proper procedures for administering eye drops and ointments.
7. Identify measures, which help ensure safety for the resident with glaucoma.
8. Identify the name and actions of drugs used to treat glaucoma.
9. Identify reasons why anti-infective drugs may be used in the eye and give some examples of drugs used.
10. Identify actions, uses and names for eye lubricants.

Drugs and Body Systems: Drugs Affecting the Special Senses: Ear

37.5-75

1. Identify major structures of the ear and their functions.

2. Describe the effects of aging on auditory structures and functions.
3. Describe the major disorders of the ear for which medications are given.
4. Describe the actions and give examples of nursing care and side effects of these drug groups for disorders affecting the ear: antibiotics, anti-inflammatory, vasoconstrictives, antihistamines, analgesics, and ear wax softeners.
5. Describe the methods/steps/proper procedure for correctly administering ear medications.

Drugs and Body Systems: Musculoskeletal Systems 37.5-75

1. Identify the major structures, functions of the musculoskeletal system.
2. Identify the major disorders that affect the musculoskeletal system, especially associated with aging.
3. Explain the difference between gout, osteoarthritis and rheumatoid arthritis.
4. Discuss malfunctions of bone marrow and their effects on the blood.
5. Name related medications, their actions, uses, side effects and implications in treatment of musculoskeletal disorders.
6. Describe the usual care of residents with musculoskeletal disorders, especially as it relates to medication administration.

Drugs and Body Systems: Endocrine System 37.5-75

1. Identify the major structures and functions of the endocrine system.
2. Describe the regulatory mechanisms of the endocrine system.
3. Illustrate why disorders may be prefixed with “hypo” or “hyper”. Give examples of disorders of the endocrine system names in the manner.
4. Give examples of drugs used for hormone replacement therapy for thyroid diseases, pituitary disorders, and diabetes.
5. Use correct medical terms when referring to parts of the endocrine system and symptoms of hormone imbalances.
6. Describe how the body malfunctions in diabetes and what changes occur in the urine of an untreated diabetic.
7. State what factors influence the diabetic resident’s insulin needs.
8. Identify diet, activity and medication as treatments of diabetes.
9. List the kinds of insulin available for treatment of diabetes mellitus.
10. Recognize the symptoms of hyperglycemia and hypoglycemia and explain how they are treated.
11. Give examples of oral hypoglycemics used for diabetes treatment and explain how they work.
12. State names, action, side effects of oral hypoglycemia agents.
13. Explain why diabetics must have frequent blood tests.
14. State the actions of glucocorticoids and mineral corticoids and give examples of each.
15. List at least three uses of corticosteroids.
16. List at least five possible side effects of long-term corticosteroid therapy.

Drugs and Body Systems: Reproductive System 37.5-75

1. Name the main parts of the male and the female internal and external genitalia
2. Use correct medical terms to describe the parts, functions, and disorders of the reproductive system.

3. Name the hormones produced by the male and female gonads and tell what they do.
4. Describe the actions of gonadotropins, oxytocin, and prolactin.
5. Recognize descriptions of the major disorders that affect the reproductive system.
6. List the main uses of hormones in drug therapy.
7. State the major side effects of sex hormone therapy.
8. State action, side effects and names of male and female hormones used as medication.

Drugs and Body Systems: Integumentary System

37.5-75

1. Identify three layers of skin, their location, structure, and other structures located within the skin.
2. Describe the major functions of the skin.
3. Identify common changes in the integumentary system associated with aging.
4. Describe major disorders affecting the skin.
5. Identify related medications, nursing care and side effects for the major skin disorders.
6. Identify non-drug measures to help treat skin disorders.
7. Identify general issues for skin and skin care, specific types of dressing and methods of administering skin medications.

Drugs and Body Systems: Anti-Infective Agents

37.5-75

1. Identify cause, control measures, signs and symptoms of infection.
2. Describe methods of reducing infection.
3. Discuss how aging contributes to increased risk for infection(s).
4. Identify terms describing topical anti-infective agents.
5. Name topical anti-infective agents and actions.
6. Identify terms describing systemic anti-infective agents.
7. Recognize some of the common drugs, nursing care and side effects in following groups:
 - a. Pencillin's
 - b. Cephalosporins
 - c. Sulfonamides
 - d. Fluoroquinolones
 - e. Tetracycline
 - f. Aminoglycosides
 - g. Macrolide, lincomycin, and clindamycin
 - h. Vancomycin
 - i. Metronidazole
 - j. Antiviral
 - k. Antifungal
8. Demonstrate methods of identifying action, use, side effects, adverse reactions, interactions with food or other drugs, contraindications, and special nursing care which should be considered in giving medications.
9. Describe what actions the medication aide should take in administering medication which may result in changes in laboratory results or which place the resident at particular risk for:
 - a. Bleeding

- b. Heart rate changes
 - c. Breathing difficulties
 - d. Gastrointestinal upset
10. Name signs or symptoms of a medication sensitivity reaction.
 11. Describe methods of preventing medications sensitivity reactions.
 12. Name the most severe form of medication sensitivity reaction and how the medication aide should respond in the event a resident has this type of reaction.

Drugs and Body Systems: Vitamins, Minerals, and Herbs

37.5-75

1. Identify the major food groups from the Food Guide Pyramid.
2. State what general functions vitamins have in the body.
3. Discuss situations when vitamins may be used.
4. Give some examples of vitamins.
5. Discuss the general differences among: fat-soluble and water-soluble vitamins, macrominerals and microminerals.
6. Identify resources for adult Recommended Daily Allowances for the major vitamins and minerals.
7. Identify the actions and give examples of iron preparations.
8. State the measures to use when administering iron to minimize side effects.
9. Identify the action and give an example of calcium medications.
10. Give examples of alternatives to traditional pharmacological interventions.
11. Describe common herbal and food supplements and their uses.
12. Explain some of the adverse effects which herbal remedies can produce.

Administration of Medications: Preparing to Administer Medications

37.5-75

1. Identify ways in which drugs are supplied to the nursing home.
2. Describe unit dose and multiple dose packaging of drugs.
3. Explain proper storage of medicines in the medication room, medication cart and resident's bedroom.
4. Describe proper storage of controlled drugs.
5. Identify proper methods to store equipment and supplies related to the administration of medications.
6. Describe a method to verify medications orders.
7. Explain the responsibility of the medication aide in questioning medication orders, including what to do if the order is not clear or legible.
8. Discuss methods for ordering drugs from the pharmacy.
9. Identify the basic components of a medication order.
10. Transcribe orders from the ordering practitioner for medications/treatments under the supervision of a licensed nurse.
11. List times on the clock using "military time".
12. Communicate medications administered and the resident's responses to medications to the licensed nurse.
13. Explain how a Kardex, medication cards, and a Medication Administration Record (MAR) are used to communicate medication orders. Demonstrate how to document administration of a medication.
14. Explain how controlled substances can be accounted for at the beginning of each shift and why this is done.
15. Identify and demonstrate specific techniques to administer medications using the "Five Rights" of medication administration including

- techniques for specific forms of medications.
- 16. Identify and demonstrate ways to prevent the transfer of infection.
- 17. List three ways to identify the resident.
- 18. Identify potential sources for errors.
- 19. Identify drugs, which may require special controls or record keeping, and name the controls, which are used.

Administration of Medication: Recording Medication Administration 37.5-75

- 1. Identify general guidelines to follow in recording medication administration.
- 2. Describe the content of a resident's clinical record.
- 3. Document accurately activities related to administration of medications and treatment.
- 4. Describe the principles of clinical documentation.
- 5. Demonstrate how to correct an error in a resident's clinical record.
- 6. Describe how to document a medication that was not administered, held, or refused.
- 7. Identify appropriate documentation procedures when medication is given at times other than when regularly scheduled.
- 8. Demonstrate the process for correcting an error.
- 9. Demonstrate the process for documenting a late entry in a clinical record.
- 10. Discuss why it is important to follow federal/state laws/regulations and facility policy when documenting in a resident's record.
- 11. Record resident's response to medication.
- 12. Report medication errors immediately to the licensed nurse supervisor.

Administration of Medications: Administering Medications of the Elderly 37.5-75

- 1. Describe the major changes that take place in the various body systems during aging.
- 2. State why treatment of elderly residents must be individualized according to each person's needs.
- 3. Describe the effects of aging on absorption, distribution, metabolism and excretion of drugs.
- 4. Explain how medication orders are usually adjusted to take into account the pharmacokinetics of the older resident.
- 5. Explain why the presence of more diseases in old age makes drug therapy more complicated.
- 6. State what types of adverse reactions health care workers must look for in administering drugs to the aged.
- 7. Explain how elderly residents are affected by the attitudes and actions of health care workers.
- 8. Review safe medication administration practice and the principles that are specific for the elderly resident.
- 9. Explain how you can overcome the difficulties of administering medications to the elderly.
- 10. List ways in which residents can take an active part in their own medication therapy.
- 11. Identify and demonstrate methods of safe and effective drug administration by the following routes:

- a. Oral
 - b. Inhaler
 - c. Nebulizer
 - d. Rectal
 - e. Vaginal
 - f. Eye
 - g. Ear
 - h. Skin
12. Demonstrate the use of standard precautions when administering medications.
13. Correctly use military time.
14. Correctly identify, use and write abbreviations for medication forms, routes, administration times and general medical abbreviations.

Total Hours

750-1500

**RELATED INSTRUCTION OUTLINE
 CERTIFIED MEDICATION AIDE
 O*NET-SOC CODE: 31-1011.00
 RAIS CODE: 1086AA**

		APPROXIMATE HOURS
1.	Safety and Medication Administration: Pharmacodynamics	4
2.	Safety and Drug Administration: Forms of Medications	4
3.	Safety and Drug Administration: Mathematics, Weights, and Measures	10
4.	Safety and Drug Administration: Drug Standards and Names	4
5.	Safety and Drug Administration: Drug Resources Information	4
6.	Drugs and Body Systems: Urinary Systems	4
7.	Drugs and Body Systems: Respiratory System	4
8.	Drugs and Body Systems: Digestive Systems	4
9.	Drugs and Body Systems: Nervous System	4
10.	Drugs and Body Systems: Drugs Affecting the Special Senses: Eye	4
11.	Drugs and Body Systems: Drugs Affecting the Special Senses: Ear	4
12.	Drugs and Body Systems: Musculoskeletal System	4
13.	Drugs and Body Systems: Endocrine System	4
14.	Drugs and Body Systems: Reproductive System	4
15.	Drugs and Body Systems: Integumentary System	4
16.	Drugs and Body Systems: Anti-Infective Agents	4
17.	Drugs and Body Systems: Vitamins, Minerals and Herbs	4
18.	Administration of Medications: Preparing to Administer Medications	4
19.	Administration of Medications: Recording Medication Administration	6
20.	Administration of Medications: Administering Medications to the Elderly	6
	Total Hours	90

**WORK PROCESSES SCHEDULE
ENVIRONMENTAL SERVICES
O*NET-SOC CODE: 31-1011.00
RAIS CODE: 1086AA**

Description: Apprentices will learn to maintain a clean environment by completing housekeeping, laundering, and simple maintenance tasks within the guidelines of facility policies and procedures in addition to knowledge of State and Federal regulations.

	APPROXIMATE HOURS
Introduction to environmental Services	24-48
Department policies	
Familiarization	
1. Facility Layout	
2. Department Names	
3. Employee Health	
4. Equipment	
5. Central Supply	
Infection Control Procedures	24-48
1. Transmission of Disease	
2. Basic chemicals used for infection control	
3. General principles of infection control	
4. Personal protective equipment	
Body Mechanics	8-16
1. Learn the proper methods for safe movement of furniture and equipment	
2. Safety measures to avoid accidents	
Central Supply	8-16
1. Storeroom usage and access	
2. "Right to Know Law"	
3. Checkout procedures for supplies and equipment	
4. Mixing of chemicals	
5. Material Safety Data Sheets	
6. Stocking of supplies	
7. Minor repairs of equipment	
Housekeeping Carts, Janitor's Closet and Supply Closet	8-16
1. Organization of the closet	
2. Labeled and capped containers	
3. Cleaning procedures for the closet	
4. Stocking of closets	
5. Security of the carts and closets	

Vacuums		
1.	Knowledge of varied types of vacuums	8-16
2.	Removal of soil in form of sand/grit	
3.	High traffic areas	
4.	Care of equipment	
5.	Minor repair	
6.	Safety rules for operation	
General Carpet Care and Maintenance		40-80
1.	Spot and stain removal	
2.	Chemicals	
3.	Products	
4.	Supplies	
5.	Equipment	
6.	Carpet Cleaning	
7.	Buffer and bonnet method	
8.	Equipment	
9.	Carpet cleaning procedure	
10.	Hot water extraction method	
11.	Blood removal	
12.	Gum removal	
13.	Hazardous chemicals; carpet clean-up procedure	
Buffing, waxing and stripping		40-80
1.	Related chemicals	
2.	Various types of buffers	
3.	Rules in operating buffers	
4.	Care of equipment	
5.	Safety precautions for using the buffer	
Basic Housekeeping Skills		80-160
1.	Floor care-vinyl, quarry tile, terrazzo	
2.	Carpet care-identification of fibers	
3.	Bath-fiberglass, porcelain	
4.	Walls-painted, textured	
5.	Ceiling-painted, textured	
6.	Windows-draperies, shades, glass, blinds	
7.	Fixtures	
8.	Furniture	
9.	Kitchen	
10.	Office	
Cleaning Procedures		40-80
1.	Skilled Nursing Facility	
2.	Bed-Washing	
3.	Patient check-out procedures	
4.	Restrooms	
5.	Medical equipment	
6.	Linen disposal	
7.	Needle disposal	
8.	Special procedures	

9.	Soiled and clean utility room	
10.	Patient rooms	
Assisted and Independent Living		40-80
1.	Apartment cleaning	
2.	Public rooms	
3.	Restrooms	
Infectious Waste Removal/Disposal		16-32
1.	Regulatory information	
2.	General procedures	
3.	Infectious waste	
4.	Spills	
5.	Blood borne pathogens	
Safety Procedures		40-80
1.	Hazardous Communication Standard Act	
2.	“The Right to Know Compliance”	
3.	OSHA	
4.	Accident-prone injuries	
5.	Disaster/drill preparation	
6.	Equipment operations	
7.	Reporting safety problems	
8.	Security aspects of safety	
9.	Electrical safety	
10.	Elevator safety	
Time Management		8-16
Communication Skills		8-16
1.	Written	
2.	Verbal	
3.	Non-Verbal	
4.	Relating to co-workers and supervisors	
Specialized Areas of Service		40-80
1.	Health Care	
2.	Dining Room	
3.	Residential	
Laundry		60-120
1.	Fabric types and care	
2.	Use of the washer	
3.	Use of the dryer	
4.	Ironing	
5.	Chemicals	
Pest Control		4-8
1.	Identification	
2.	Trash and laundry	

Dress Code		2-4
1.	Proper clothing and shoes	
2.	Personal hygiene	
3.	Professionalism	
Safety		12-24
1.	Fire procedures	
2.	Accident prevention	
3.	Chemical usage-proper dilution and treatment of injury	
4.	Injury on the job	
	Total Hours	510-1020

**RELATED INSTRUCTION OUTLINE
ENVIRONMENTAL SERVICES
O*NET-SOC CODE: 31-1011.00
RAIS CODE: 1086AA**

	APPROXIMATE HOURS
1. The apprentice will be able to use the related theoretical instruction to keep the apartments, public areas and clothing clean.	5
2. The apprentice will understand the regulations governing the delivery of housekeeping and laundry services.	5
3. The apprentice will know how to read and use the information on the MSDS.	5
4. The apprentice will understand how universal precautions relate to laundry and housekeeping.	12.5
5. The apprentices will be able to develop a schedule that will accomplish the delivery of housekeeping and laundry services to the elders living in the assisted living.	12.5
Total Hours	40

**WORK PROCESSES SCHEDULE
DINING SERVICES
O*NET-SOC CODE: 31-1011.00
RAIS CODE: 1086AA**

Description: Prepares and cooks family-style meals for crews or residents and employees of institutions: Cooks foodstuffs in quantities according to menu and number of persons to be served. Washes dishes, bakes breads and pastry. Cut meat, plans menu, taking advantage of foods in season and local availability. May serve meals, order supplies and keep records and accounts. May direct activities of one or more workers who assist in preparing and serving meals. Certification in ServSafe is received following a three-hour course completion.

	APPROXIMATE HOURS
<p>a. Vegetable Preparation (cooked)</p> <ul style="list-style-type: none"> i. Procedure from storage ii. Measure quantity iii. Prepare for cooking 	40-80
<p>b. Meat Preparation (for cooking)</p> <ul style="list-style-type: none"> i. Bread ii. Tenderize iii. Season iv. Marinate 	40-80
<p>c. Cooking (meats and vegetables)</p> <ul style="list-style-type: none"> i. Adjust temperature ii. Boil iii. Fry iv. Bake 	58-116
<p>d. Make soups, gravies, sauces</p> <ul style="list-style-type: none"> i. Measure ii. Mix iii. Season iv. Blend v. Meats <ul style="list-style-type: none"> 1. Selection and cutting roasts, steaks and chops 2. Preparation of boiled, fried, roasted and broiled meats vi. Fowls <ul style="list-style-type: none"> 1. Cleaning fowl preparatory to cooking vii. Preparation of different kinds of servings, roasting, broiling, frying or fricassees vegetables <ul style="list-style-type: none"> 1. Use of generally used vegetables 2. Cleaning and peeling vegetables 3. Different ways of preparation (sliced, diced, etc.) 	20-40

- e. Cooking Foods Preparatory to Serving** 75-150
- i. Soups
 - 1. Combining proper items for soups
 - 2. Time control for cooking
 - 3. Preparation and use of seasoning
 - ii. Meats
 - 1. Cooking various roast and control of the required length of time cooking each kind of roast
 - 2. Cooking meats by boiling and practice in the different procedures for salt and fresh meats
 - 3. Broiling meats and time control required for rare, medium and well-done meats
 - 4. Frying meats for short orders, dinners and sandwiches
 - 5. Preparation and use of seasoning
 - iii. Fowl
 - 1. Preparation of different fowl orders for roasting, broiling, frying, and fricassee
 - 2. Preparation of various kinds of dressings
 - 3. Preparation and use of seasoning
 - iv. Vegetables
 - 1. Control of timing for cooking different vegetables
 - 2. Preparation and cooking potatoes in different styles such as pan fried, French-fried, boiled, baked and scalloped
 - 3. Creaming vegetables
 - 4. Seasoning
- f. Preparation of Salads, Dressings and Sauces** 20-40
- i. Use of items used in preparation of salads, dressings and sauces
 - ii. Use of the different kinds of dressings such as olive oil, mayonnaise, French dressing, Russian dressing and Roquefort dressing
 - iii. Preparation and use of standard sauces and combination of sauces
- g. Pastry** 100-200
- i. Preparation and baking of bread and rolls
 - ii. Preparation and baking of cakes and cookies
 - iii. Preparation and caking of pies
 - iv. Preparation and baking of French pastries
 - v. Preparation and baking of Danish pastries
- h. Purchasing Supplies and Planning Menu** 45-90
- i. Purchasing supplies with close check on local market
 - ii. Conditions
 - iii. Attractive placement of foods on menu
 - iv. Practice in receiving food orders from waiters in systematic order

i. Appetizers and Relishes	10-20
i. Preparation and use of appetizers and relishes	
ii. Use of various suitable combinations	
j. Preparation of Beverages	10-20
i. Coffee	
ii. Tea	
iii. Iced Drinks	
iv. Other Drinks	
k. Food Storage	28-56
i. Storing of food for deep freeze and refrigeration	
ii. Checking food in storage for prevention of waste	
l. Refrigeration	10-20
i. Use of the different types of refrigerators and different compartments	
ii. Temperature control	
iii. Cleaning and defrosting refrigerators	
m. Banquet Department	50-100
i. Estimating, preparing and cooking for a banquet	
ii. Garnishment of each plate	
iii. Serving food that is hot at time of serving	
n. Inspection for Requirements of Law in Food Business	15-30
o. ServSafe Certification	3-6
i. Food Safety hazards	
ii. How to provide safe food Ensuring proper personal Hygiene	
iii. Keeping foods safe from purchasing and receiving through preparation and service	
iv. Maintaining sanitary facilities and equipment	
p. Specialty Dining In-service Learning	16-32
i. Why increased learning of dining room service?	
1. A goal for Dining Services is to refine service to residents	
2. Residents have commented on service delivered by service staff	
3. Your co-workers have indicated a desire to learn more about upgrading service to residents	
ii. How will this be accomplished?	
1. In-service education	
2. Practicum	
3. Supervision and evaluation	
iii. What is to be covered by this in-service?	
1. Table Setting	
a. China	

- b. Flatware
- c. Glassware
- d. Linens
- 2. Ambiance of the dining room
 - a. Focal point not only for dining but also for socializing
 - b. Balance of quality food and gracious dining
- 3. Demeanor of wait staff
 - a. Actions show your feelings and mental state
 - b. Good, positive feelings of wait staff contributions to tone of meal service
- 4. Kitchen Standards
 - a. Sanitary practices
 - b. Uniforms
 - c. Report to work on time
 - d. Follow cleaning schedule
 - e. Serve hot food hot and cold food cold
 - f. Meals will be ready on time
 - g. Clean as you go
 - h. Put items in their proper place
 - i. Acknowledge guests

Total Hours

540 – 1080

**RELATED INSTRUCTION OUTLINE
DINING SERVICES
O*NET-SOC CODE: 31-1011.00
RAIS CODE: 1086AA**

	APPROXIMATE HOURS
1. Demonstrate how to correctly prepare and cook foods to prevent food borne-illness.	10
2. Demonstrate understanding of State Regulations in regard to Adult Health Care Facilities.	5
3. Demonstrate complete understanding of company policy by verbalizing knowledge.	5
4. Demonstrate how to develop and implement a complete meal menu.	10
5. Demonstrate how to track food supply inventory and safely store food items.	10
Total Hours	40

ADVANCED HEALTH SUPPORT SPECIALIST

Description: In order for an Apprentice to become an Advanced Health Support Specialist they must complete the following:

Many Adult Care Facilities have a growing need for Home Health Aides and Activity Directors. To meet the needs of these Adult Care Facilities, Home Health Aide and Activity Director has been added to address these areas of concern. A facility may choose one or both of these certifications to allow the Health Support Specialist to grow and meet the needs of the facility.

**WORK PROCESSES SCHEDULE
HOME HEALTH AIDE
O*NET-SOC CODE: 31-1011.00
RAIS CODE: 1086AA**

Description: Prerequisite Certified Nurse Aide: Home Health Aide apprentices give personal care to clients as specified and supervised by a Licensed or Registered Nurse. They help maintain stability in the home by carrying out routine home management tasks and assisting the client and/or family to resume these functions.

		APPROXIMATE HOURS
1.	The apprentice will develop a plan of care to provide care in the client's home.	20 - 40
2.	The apprentice will be able to identify factors that lead to client and family stress.	15 - 30
3.	The apprentice will demonstrate appropriate responses to client and family stress.	20 - 40
4.	The apprentice will be able to discuss different characteristics of mental health.	15 - 30
5.	The apprentice will be able to understand and identify the role of the home health aide in situations where there is mental illness.	15 - 30
6.	The apprentice will be able to recognize and define developmental disability, and explain the role of the home health aide when working with a client with a developmental disability.	15 - 30
7.	The apprentice will be able to describe family abuse and understand the responsibility of the home health aide and know whom to report to and how to document correctly.	15 - 30
8.	The apprentice will maintain a clean, safe, healthy environment.	10 - 20
9.	The apprentice will describe how to adapt personal care activities to meet the client's needs in the home.	10 - 20
10.	The apprentice will assist the client with medication by understanding their defined role.	20 - 40
11.	The apprentice will understand how to store medications safely.	10 - 20
12.	The apprentice will understand and document observations regarding the client's medications.	10 - 20
13.	The apprentice will discuss the correct way to dispose of old medications.	10-20
14.	The apprentice will understand the responsibility of the Home Health Aide in assisting the client with Oxygen Therapy.	15 - 30
15.	The apprentice will describe guidelines for care of a client with prosthesis.	15 - 30
16.	The apprentice will identify correct use of a vaporizer or humidifier.	15 - 30
17.	The apprentice will identify ways to help in emergency situations.	20 - 40
Total Hours		250-500

**RELATED INSTRUCTION OUTLINE
HOME HEALTH AIDE
O*NET-SOC CODE: 31-1011.00
RAIS CODE: 1086AA**

		APPROXIMATE HOURS
1.	Orientation to Home Care	2
2.	Working with people	10
3.	Home Management	5
4.	Adapting personal care activities in the client's home	3
5.	Emergency care	10
Total Hours		30

**WORK PROCESSES SCHEDULE
ACTIVITY DIRECTOR
O*NET-SOC CODE: 31-1011.00
RAIS CODE: 1086AA**

Description: Activity Directors are recognized as vital contributors to quality of care and providing good quality of life to the individuals they serve. A complete program enhances the physical, mental, social, emotional, and spiritual needs of elders by providing a home like environment. This program is designed to develop the programming, documentation, and professional skills necessary to lead such a program.

		APPROXIMATE HOURS
1.	The apprentice will be able to list different settings in which activity directors work.	20-40
2.	The apprentice will be able to become aware of Theories on Aging, disorders, sensory losses and individual that are served.	25-50
3.	The apprentice will be able to describe the day to day activities of an activity director, what it means to be a professional, and professional organizations available.	20-40
4.	The apprentice will be able to evaluate the environment in which activity directors work.	20-50
5.	The apprentice will be able to establish leisure and recreational goals through programming for all levels of functioning.	20-40
6.	The apprentice will be able to become aware of the new culture change taking over long term traditional environments to a more home like environment providing opportunities for companionship.	25-50
7.	The apprentice will be able to establish programming levels of activities for 8 different levels of functioning.	20-40
8.	The apprentice will be able to become aware of all documentation required by state and federal regulations, new approaches, forms, assessment procedures and treatment planning.	20-50
9.	The apprentice will be able to become introduced to monitoring tools, Quality Assurance and Management techniques to evaluate programs.	20-40
10.	The apprentice will be able to establish facility councils and volunteer programs.	20-50
11.	The apprentice will become aware of residents rights, behavior management, policies, procedures, regulations and survey process.	20-50
Total Hours		250-500

**RELATED INSTRUCTION OUTLINE
ACTIVITY DIRECTOR
O*NET-SOC CODE: 31-1011.00
RAIS CODE: 1086AA**

	APPROXIMATE HOURS
1. Orientation to Activity Director program	2
2. Theories of aging	6
3. Activities for all levels of functioning	2
4. Becoming a companion	5
5. Monitoring tools	5
6. Documentation, State and Federal regulations	5
7. Resident rights, regulations and survey process	5
Total Hours	30