



Mississippi NURSE AIDE

written (or oral) examination
& skills evaluation

Candidate Handbook

July 2018

QUICK REFERENCE

MISSISSIPPI STATE DEPARTMENT OF HEALTH

Bureau of Health Facilities
Licensure and Certification

P.O. Box 1700
Jackson, MS 39215
143B LeFleur's Square
Jackson, MS 39211
(601) 364-1100
Fax (601) 364-5052

Hours of Operation
8:00 a.m. – 5:00 p.m.
(Central Time Zone)

Call the Mississippi State Department of Health to:

- Obtain information on official regulations and guidelines for nurse aides
- Obtain approval to test if you are an out-of-state or foreign RN or LPN
- Obtain Training Program and Employer codes
- List of MS Approved Training Programs

CREDENTIALIA

3 Bala Plaza West
Suite 400A
Bala Cynwyd, PA 19004
(877) 437-9587

support@getcredentia.com

Hours of Operation Mon. – Fri. 8:30 a.m. – 6:00 p.m.
(Eastern Time Zone)

Call Credentia to:

- Obtain a Candidate Handbook
- Obtain or complete an Examination Application
- Schedule an examination
- Cancel an examination
- Arrange special examination requests and services
- Change your current address or name prior to testing (at least 11 days in advance)

PEARSON VUE®

Mississippi NNAAP®

PO Box 13785
Philadelphia, PA 19101-3785
(888) 204-6213

Hours of Operation
Monday through Friday
8:00 a.m. – 5:00 p.m.
(Eastern Time Zone)

Call Pearson VUE to:

- Obtain information regarding your Score Report
- Change your current address or name after testing
- Request a duplicate Score Report or Nurse Aide Certificate
- Obtain a Nurse Aide Registry Renewal Form
- Obtain information regarding re-certification
- Obtain a Reciprocity Application
- Check the current listing on the Mississippi Nurse Aide Registry

Go to www.pearsonvue.com to:

- Check your status on the Mississippi Nurse Aide Registry
- Download a Candidate Handbook
- Download an Application for Examination (New Nurse Aide)
- Download a Nurse Aide Registry Renewal Form
- Download an Application for Reciprocity
- Download the Regional Test Site Schedule
- Download the Nurse Aide Practice Written Examination

TABLE OF CONTENTS

QUICK REFERENCE.....	inside front cover
INTRODUCTION.....	1
National Nurse Aide Assessment Program	1
Exam Overview	2
ELIGIBILITY.....	2
Eligibility Routes	2-4
APPLICATION AND SCHEDULING.....	5
Filling Out an Application	5
Exam Fees.....	6
Exam Scheduling.....	7
Authorization to Test Notice	7
Testing Locations.....	7
Accommodations	7-8
CANCELLATION AND RESCHEDULING	8
Refunds	8
Absence Policy	9
Weather Emergencies.....	9
EXAM DAY.....	10
Checking In.....	10
What to Bring	10
Proper Identification.....	10
Security.....	11
Testing Policies	11
Lateness	11
Electronic Devices	11
Personal Belongings/Study Aids	11
Eating/Drinking/Smoking.....	12
Misconduct/Disruptive Behavior.....	12
Guests/Visitors.....	12
THE WRITTEN (OR ORAL) EXAM.....	12
Written Exam	12
Oral Exam	13
WRITTEN (OR ORAL) EXAM CONTENT OUTLINE	14
SAMPLE QUESTIONS.....	15
SELF-ASSESSMENT READING TEST	16-19

THE SKILLS EVALUATION	20
What to Expect	20
Setting	20
Who Will Act as a Client?.....	20
Candidate Volunteer Requirements	20
Candidate Dress Requirements.....	20
The Tasks	21
Recording a Measurement	22
Sample Recording Sheet for Measurement Skills	23
Tips for the Skills Evaluation.....	24
SKILLS LISTING	25-39
SCORE REPORTING.....	40
Exam Results	40
Written (or Oral)	40
Skills Evaluation	40
Failing.....	40
How to Read a Failing Score Report	41
Sample of a Failing Score Report.....	42
Passing.....	42
Duplicate Score Report.....	42
GRIEVANCE PROCESS.....	43
THE REGISTRY	44
Online Registry Search.....	44
Change of Address or Name.....	44
Certification by Reciprocity	44
Re-certification.....	45
Renewal Notification.....	45
Re-certification Process	46
MISSISSIPPI NURSE AIDE CERTIFICATION FREQUENTLY ASKED QUESTIONS.....	48-59

APPENDIX

- Appendix A:** Request for Duplicate Score Report, Handscored, or Duplicate Certificate
- Appendix B:** Change of Address or Name Form

INTRODUCTION

This handbook is designed for candidates seeking nurse aide certification in Mississippi. It describes the process of applying for and taking the National Nurse Aide Assessment Program (NNAAP®) Examination. All nurse aide candidates and certified nurse aides are responsible for knowing its contents.

The Mississippi State Department of Health, Bureau of Health Facilities Licensure and Certification, has contracted with Pearson VUE, a nationally recognized leading provider of assessment services to regulatory agencies and national associations, to administer, score, and report the results of the NNAAP Examination for the Mississippi Nurse Aide Registry. Credentia will be working with Pearson VUE to schedule and administer the examination to qualified individuals.

NATIONAL NURSE AIDE ASSESSMENT PROGRAM (NNAAP®)

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

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

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

EXAM OVERVIEW

The two parts of examination process, the Written (or Oral) Examination and the Skills Evaluation, will be administered on the same day. You must pass both parts in order to be certified and listed on the Mississippi Nurse Aide Registry.

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

An Oral Examination may be taken in place of the Written Examination if you have difficulty reading English. The Oral Examination consists of sixty (60) multiple-choice questions and ten (10) reading comprehension questions. **If you want to take the Oral Examination, you must request it when you submit your Examination Application.**

At the Skills Evaluation you will be asked to perform five (5) randomly selected nurse aide skills. You will be given thirty (30) minutes to complete the five (5) skills. You will be rated on these skills by a Nurse Aide Evaluator. A complete listing of the skills is shown on pages 25 to 40.

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

ELIGIBILITY

ELIGIBILITY ROUTES

You are eligible to apply to take the NNAAP Examination for certification as a nurse aide in Mississippi if you qualify under one of the following eligibility routes:

NURSE AIDE CANDIDATE TRAINED IN MS – NON-FACILITY-BASED AND PROPRIETARY SCHOOLS AND COLLEGES

An individual who has completed a Mississippi state-approved nurse aide training program and has never been certified as a nurse aide. A completed examination application, fees, and a copy of the training program certificate of completion, or an original letter from the training program stating that training has been completed, must be submitted to Credentia. **If an original letter is sent with the Examination Application as proof of training, this original letter must be written on the training program's letterhead and must include: (1) the nurse aide candidate's name; (2) the nurse aide's date of**

training program completion; and (3) the signature of the instructor, director, or administrator of the training program. You have twenty-four (24) months from the completion date of the training program to take and pass both parts of the NNAAP Examination.

NURSE AIDE CANDIDATE TRAINED IN MS – FACILITY-BASED (NURSING HOME)

An individual who has successfully completed a Mississippi state-approved facility-based nurse aide training program and has never been certified as a nurse aide. **If an original letter is sent with the Examination Application as proof of training, this original letter must be written on the training program's letterhead and must include: (1) the nurse aide candidate's name; (2) the nurse aide's date of training program completion; and (3) the signature of the instructor, director, or administrator of the training program. NOTE: You MUST take and pass both parts of the NNAAP Examination and be certified within four (4) months (120 days) from your hire date.**

STUDENT NURSE

Candidate must have successfully completed the fundamentals/basic nursing skills of a state-approved LPN or RN program within the past twenty-four months. Please contact MS State Department of Health to determine if the program is approved. **Note:** If approved and the student is eligible to test, the application must be signed by the instructor and submitted with a training completion certificate.

GRADUATE NURSE

An individual who has completed a Mississippi-approved RN or LPN program within the past twenty-four months. Graduate must submit examination application, fees, and a copy of an LPN or RN training completion certificate diploma or certificate to be eligible to take the NNAAP Examination.

OUT-OF-STATE OR FOREIGN LPN OR RN

An individual who has completed an LPN or RN program outside the state of Mississippi. You must obtain an application that is signed by the Mississippi State Department of Health, Bureau of Health Facilities Licensure and Certification. The signed application and fees must be submitted to Credentia.

(Eligibility routes continue next page)

RECIPROCITY CANDIDATE

Reciprocity is a process by which a certified nurse aide from another state may qualify for certification in the state of Mississippi by virtue of his or her status in that other state. You are eligible for reciprocity if you have been entered on a nurse aide registry in a state other than Mississippi in accordance with the training and competency evaluation requirements of OBRA '87, as amended, and if you are currently listed on that state's nurse aide registry as active and in good standing (see *Certification by Reciprocity Application* for details).

LAPSED NURSE AIDE

An individual whose certification is lapsed on the Mississippi Nurse Aide Registry and who must re-test in order to become active on the Registry. If you fail either part of the NNAAP Examination on the **first** try, you will be required to complete a Mississippi-approved nurse aide training program **before** being allowed to re-test as a new nurse aide.

PETITION FOR REMOVAL OF FINDING OF NEGLIGENCE

An individual whose nurse aide certification has been revoked due to **one** finding of Neglect and whose certification has been revoked for a *minimum* of one year (12 months). Individual must have no additional findings of neglect during that time, and must submit a **completed** petition to become active on the MS Nurse Aide Registry. **This includes challenging the NNAAP Examination.** If the individual fails either part of the examination, the Petition for Removal of Neglect will not be reviewed, and consideration of the removal of the finding of Neglect from the MS NAR will be denied. The individual will be permitted a second opportunity to challenge the exam as a part of the petition to have this finding removed after the finding has remained on the MS NAR one year (12 months) from the date of unsuccessful exam results. If the individual fails to successfully complete the examination the second time, there will be no additional opportunities to challenge the examination. No appeal will be permitted. Please provide the MS nurse aide certificate number and the date your certification was revoked, or the application will not be processed. **NOTE:** If you select this Eligibility Route, your application information will be forwarded to the MS State Department of Health for review and approval before a testing date is scheduled. The individual may be asked to provide additional information for review, which could cause delay in testing.

APPLICATION AND SCHEDULING

FILLING OUT AN APPLICATION

You may get an examination application from your nursing facility employer, your nurse aide training program. You may also print one from the Pearson VUE website (www.pearsonvue.com).

- You are responsible for completing the appropriate sections of the examination application. You may ask someone from your nurse aide training program or facility employer for assistance in completing the application.
- If you need help or have any questions about the application, please contact a Credentia Customer Service Representative at (877) 437-9587.
- Mail your completed application, fees, and copy of your training program certificate of completion (if applicable) **together in one envelope to:**

Credentia, MS NNAAP
3 Bala Plaza West,
Suite 400A
Bala Cynwyd, PA 19004

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

EXAM FEES

The fees listed below have been established for the National Nurse Aide Assessment Program in Mississippi.

EXAM		COST
Written Examination & Skills Evaluation	<i>both exams</i>	\$101
Oral Examination & Skills Evaluation	<i>both exams</i>	\$101
Written Examination ONLY	<i>exam re-take</i>	\$32
Skills Evaluation ONLY	<i>exam re-take</i>	\$69
Oral Examination ONLY	<i>exam re-take</i>	\$32
Re-certification		\$26
Reciprocity (<i>from another state</i>)		\$26

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

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

Under federal and Mississippi state laws, candidates employed as nurse aides in nursing homes that participate in Medicaid/Medicare programs are prohibited from paying their examination fees. Employers must pay the initial examination fee and any re-test fee for those candidates in their employ as nurse aides. Candidates not employed as nurse aides are permitted to pay their own examination fee.

EXAM SCHEDULING

Once Credentia receives your application, required documents, and fee, they will schedule you for testing. Credentia will mail your Authorization to Test Notice letter to you at the address listed on your application within forty-eight (48) hours.

AUTHORIZATION TO TEST NOTICE

Your Authorization to Test Notice letter has important information about the examination. If you do not receive your notice within ten (10) business days, call Credentia. Credentia is not responsible for lost, misdirected, or delayed mail.

TESTING LOCATIONS

The nurse aide examination (both parts) will be given at a Regional Test Site. Please visit www.pearsonvue.com or call (888) 204-6213 to determine the schedule of the test site most convenient to you. When accessing Pearson VUE's website, click on the second tab labeled "Test Taker Services" (next to the "Home" tab), and select "Mississippi Nurse Aides" from the drop down menu. Then, select "Regional Test Sites and Test Schedules."

ACCOMMODATIONS

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

Test accommodations may include things such as:

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

Test accommodations are individualized and considered on a case-by-case basis. All candidates who are requesting accommodations because of a disability must provide appropriate documentation of their condition and how

Continues next page

it is expected to affect their ability to take the test under standard conditions. This may include:

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

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

CANCELLATION AND RESCHEDULING

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

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

REFUNDS

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

ABSENCE POLICY

Since unexpected situations occur, Credentia will consider excusing an absence from a scheduled examination.

Acceptable reasons for re-scheduling are as follows:

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

Requests for excused absences must be made in writing and received *within ten (10) business days* following the scheduled examination. This request must include verification of your absence from an appropriate source. For example, if you had jury duty, you must supply a copy of your court notice. The decision of Credentia to approve or deny the excused absence is final.

WEATHER EMERGENCIES

The examination will be delayed or cancelled only in emergencies. If severe weather or a natural disaster makes the test site inaccessible or unsafe, the examination will be cancelled. If the examination has been cancelled, you will be re-scheduled for the next available examination date at that site.

EXAM DAY

CHECKING IN

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

WHAT TO BRING

You **MUST** have the following items with you when you take the examination:

- Two (2) forms of proper identification
- Three (3) No. 2 pencils (sharpened)
- Eraser
- Know your Social Security number
- Watch with a second hand
- Self-addressed stamped envelope (if you want your score report mailed)

No other materials will be allowed.

PROPER IDENTIFICATION

You are required to bring two (2) forms of **current (not expired)**, signature-bearing identification to the test site (one of which must be a photo identification). Photocopies of identification will **NOT** be accepted. Examples of proper identification include:

- Driver's license
- Signature-bearing Social Security card
- Clinic card
- Credit card
- Library card
- State-issued identification card
- Passport
- Alien registration card

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

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

SECURITY AND CHEATING

If you give help to or receive help from anyone during the examination, the examination will be stopped. The incident will be reported to the Mississippi State Department of Health, Bureau of Health Facilities and Certification for review, and your examination will not be scored (see *Testing Policies*).

All examination questions, each form of the examination, and all other examination materials are copyrighted by, the property of, or licensed to Pearson VUE. Consequently, any distribution of the examination content or materials through any form of reproduction, or through oral or written communication, is strictly prohibited and punishable by law. ***Anyone who removes or tries to remove examination materials or information from the test site will be prosecuted. Candidates who violate security regulations will not have their examinations processed or scored.***

TESTING POLICIES

The following policies are observed at each test center.

LATENESS

Plan to arrive thirty (30) minutes before the examination starts. If you are late for your scheduled examination, or do not bring the required two forms of identification (see *What to Bring*), you will **NOT** be allowed to test and your examination fee will **NOT** be returned. However, if you are late for the written or oral examination but arrive on time for the Skills Evaluation, you **will** be allowed to take the Skills portion of the examination.

ELECTRONIC DEVICES

Cellular phones, beepers, or any other electronic devices are not permitted to be used and must be turned off during testing.

PERSONAL BELONGINGS/STUDY AIDS

You are not permitted to take personal belongings such as briefcases, large bags, study materials, extra books, or papers into the examination room. No interpreters or translators may be used during the written and/or clinical skills examination. Any such materials brought into the examination room will be collected and returned to you when you have completed the examination. Pearson VUE is not responsible for lost or misplaced items.

EATING/DRINKING/SMOKING

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

MISCONDUCT/DISRUPTIVE BEHAVIOR

If you cause a disturbance of any kind or engage in any kind of misconduct, you will be dismissed from the examination and reported to your state licensing agency. Decisions regarding disciplinary measures are the responsibility of this agency.

GUESTS/VISITORS

No guests, visitors, pets, or children are allowed at the Regional Test Sites. **NOTE:** This includes Program Instructors.

THE WRITTEN (OR ORAL) EXAM

WRITTEN EXAM

The Nurse Aide Evaluator will hand out materials and give instructions for taking the Written Examination. The Written Examination has sixty (60) multiple-choice questions. You will have two (2) hours to complete the Written Examination. You will be told when fifteen (15) minutes are left to finish. Fill in only one (1) box on the answer sheet for each question. Markings in the test booklet will **NOT** be accepted as answers. Your answers must appear on the separate answer sheet. See *Sample Questions* for examples of the kinds of questions found on the Written Examination.

ORAL EXAM

If you have difficulty reading English, you may prefer to take the Oral Examination. Just request it when you complete your Examination Application. The Oral Examination is provided on an MP3 player. The player and earphones are provided at the test site. You listen to the recording and follow along in a test booklet as the questions are read aloud on the recording. The Oral Examination consists of two (2) parts, and you must pass both parts in order to pass the Oral Examination.

The first part of the Oral Examination has sixty (60) multiple-choice questions. Each of the sixty (60) multiple-choice questions is read twice. As each question is read, you are asked to choose the correct answer and mark it on your answer sheet.

The second part of the Oral Examination has ten (10) multiple-choice questions that test whether you know common words used in long-term care facilities. Each word is read three (3) times. You are asked to match the word you hear on tape to the written word in the test booklet. As you find the match, you mark your answer on the answer sheet.

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

2016 WRITTEN (OR ORAL) EXAM CONTENT OUTLINE

The revised content outline is based on the findings from the *2014 Job Analysis and Knowledge, Skill, and Ability Study of Nurse Aides* published by the National Council of State Boards of Nursing (NCSBN) in 2015. The examination content outline will be effective January 2016.

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

	% of the exam	# of questions in the exam
I. Physical Care Skills		
A. Activities of Daily Living.....	14%	9
1. Hygiene		
2. Dressing and Grooming		
3. Nutrition and Hydration		
4. Elimination		
5. Rest/Sleep/Comfort		
B. Basic Nursing Skills.....	39%	23
1. Infection Control		
2. Safety/Emergency		
3. Therapeutic/Technical Procedures		
4. Data Collection and Reporting		
C. Restorative Skills.....	8%	5
1. Prevention		
2. Self Care/Independence		
II. Psychosocial Care Skills		
A. Emotional and Mental Health Needs	11%	6
B. Spiritual and Cultural Needs	2%	2
III. Role of the Nurse Aide		
A. Communication.....	8%	4
B. Client Rights	7%	4
C. Legal and Ethical Behavior.....	3%	2
D. Member of the Health Care Team	8%	5

SAMPLE QUESTIONS

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

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

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

SELF-ASSESSMENT READING TEST

PART 1: VOCABULARY

- Circle the best answer to each question.
 - When you have finished, check your answers using the answer key on page 18.
 - Count up the number of correct answers.
 - If your score is less than 17, you may have difficulty reading the Written Examination and should consider taking the Oral Examination.
- You go to a doctor when you _____.**
 - feel sleepy
 - need socks
 - feel sick
 - need money
 - need clothes
 - A person who flies an airplane is its _____.**
 - pilot
 - steward
 - mother
 - surgeon
 - director
 - You use a _____ to write.**
 - bow
 - calculator
 - pencil
 - carpenter
 - needle
 - To EXIT a room means to _____ it.**
 - enter
 - leave
 - forget
 - read
 - interrupt
 - A wedding is a joyous _____.**
 - focus
 - vehicle
 - balloon
 - occasion
 - civilization
 - To REQUIRE something means to _____ it.**
 - need
 - have
 - forget
 - understand
 - hear

go to next page

SELF-ASSESSMENT READING TEST

PART 2: COMPREHENSION

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

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

15. Fish live in _____.

- (A) cups
- (B) houses
- (C) air
- (D) water
- (E) fountains

16. Fish use their _____ to swim.

- (A) tails
- (B) heads
- (C) gills
- (D) lungs
- (E) floats

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

17. Maria has had experience as a _____.

- (A) guide
- (B) farmer
- (C) driver
- (D) nurse
- (E) teacher

18. She would like to work in _____.

- (A) an office
- (B) a library
- (C) a garden
- (D) a hospital
- (E) a supermarket

19. As a child Maria lived _____.

- (A) in the city
- (B) in an apartment
- (C) on a farm
- (D) in a large house
- (E) on the beach

go to next page

go to next page

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

20. Carolyn works in a _____.

- (A) hospital
- (B) doctor's office
- (C) garage
- (D) school
- (E) library

21. One of the things Carolyn enjoys is _____.

- (A) working in an office
- (B) helping people
- (C) reading books
- (D) working late hours
- (E) driving a car

22. With her salary she can pay her bills and _____.

- (A) buy furniture
- (B) give to charity
- (C) save money
- (D) buy new clothes
- (E) pay for college

*This completes the
Self-Assessment Reading Test.*

Answers

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

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

THE SKILLS EVALUATION

WHAT TO EXPECT

SETTING

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

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

See pages 25-39 for the complete skills listing.

WHO WILL ACT AS A CLIENT?

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

CANDIDATE VOLUNTEER REQUIREMENTS

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

CANDIDATE DRESS REQUIREMENTS

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

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

For infection control purposes, you should not come to the

test site with open areas/sores on the skin. Candidates with any open areas or sores on their skin should reschedule their skills test to a later date after their skin fully heals.

THE TASKS

The NNAAP Skills List contains all of the skills that you may be asked to demonstrate during the Skills Evaluation. Each skill represents a task that you will be asked to perform in your job and has been broken down into a series of steps. *See pages 25-39 for the complete skills listing.*

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

Before your Skills Evaluation begins, the Nurse Aide Evaluator will give you an instruction card that will list the five (5) skills selected for you to perform. Hand-washing will always be one of the skills to be performed. The remaining four (4) skills are randomly chosen from the complete set of skills listings on pages 25 to 40 of this handbook. You are strongly encouraged to perform the skills in the order they are listed on the instruction card.

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

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

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

You will be asked to decontaminate your hands (with hand sanitizer) before proceeding from skills performed on a live client to skills that are not. This is for infection control purposes and will not affect the results of your evaluation.

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

You must successfully complete five (5) out of the five (5) skills in the skill form to pass the Skills Evaluation. You will have thirty (30) minutes to demonstrate all five (5) skills.

RECORDING A MEASUREMENT

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

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

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

RECORDING SHEET FOR MEASUREMENT SKILLS

Date _____

Test Site ID _____

Candidate Name _____

Candidate ID _____

Evaluator Name _____

Evaluator ID _____

SAMPLE

SKILL TESTED

One box next to the skill being tested must be marked.

- Blood Pressure
- Radial Pulse
- Respirations
- Urine Output
- Weight (must document the unit of measurement, lb or kg)

CANDIDATE RESULTS	EVALUATOR RESULTS

TIPS FOR THE SKILLS EVALUATION

- You will be expected to perform the skills as you would in a nursing home setting. When water is required, you must use running water. All candidates will be required to perform the *Hand Hygiene* skill. The evaluator will inform you after you have washed your hands for the first time that you should just tell him or her when you would wash your hands during your performance of the rest of the skills, rather than actually washing them for each skill. For all steps other than hand-washing, you must actually perform the skill in order to receive credit. You may not simply tell the evaluator what you would do for simulating a step. For example, you may not simply tell the evaluator that you would wash the client. You must actually demonstrate washing the client. You may not simply tell the evaluator that you would feed the client. You must actually demonstrate feeding the client.
- After you have introduced yourself to the client for the first time, it is not necessary for you to introduce yourself each time you begin a new skill.
- To receive full credit for a measurement skill, you must accurately make the required measurement and then write that measurement on the *Recording Sheet for Measurement Skills*. The evaluator will provide the Recording Sheet to you at the test site. A sample of the Recording Sheet is shown on page 22 of this handbook. You are encouraged to become familiar with the Recording Sheet before your scheduled test date.
- You must know how to operate both a standing and a non-digital bathroom scale and must know how to set both types of scales to zero.
- You **may not bring** any of your own equipment to the test site (i.e. transfer/gait belt).
- It is important for you to place the call signal within the client's reach whenever you leave the client.
- Where the word "**client**" appears, it refers to the person receiving care.

SKILLS LISTING

The 23 skills that follow are arranged in alphabetical order, except for the *Hand Hygiene (Hand Washing)* skill. Hand Hygiene is listed first as a reminder of the importance of performing this skill before all other skills. The numbered lines below each skill are the steps needed to perform that skill. Critical Element Steps are in bold type.

SKILL 1 — HAND HYGIENE (HAND WASHING)

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

SKILL 2 — APPLIES ONE KNEE-HIGH ELASTIC STOCKING

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

Skill continues

- 6 Pulls top of stocking over foot, heel, and leg
- 7 Moves foot and leg gently and naturally, avoiding force and over-extension of limb and joints
- 8 **Finishes procedure with no twists or wrinkles and heel of stocking, if present, is over heel and opening in toe area (if present) is either over or under toe area; if using a mannequin, candidate may state stocking needs to be wrinkle-free**
- 9 Signaling device is within reach and bed is in low position
- 10 After completing skill, wash hands

SKILL 3 — ASSISTS TO AMBULATE USING TRANSFER BELT

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

SKILL 4 — ASSISTS WITH USE OF BEDPAN

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

SKILL 5 — CLEANS UPPER OR LOWER DENTURE

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

Skill continues

- 9 Rinses toothbrush and places in designated toothbrush basin/container
- 10 Maintains clean technique with placement of toothbrush and denture
- 11 Sink liner is removed and disposed of appropriately and/or sink is drained
- 12 Removes and disposes of gloves (without contaminating self) into waste container and washes hands

SKILL 6 — COUNTS AND RECORDS RADIAL PULSE

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

SKILL 7 — COUNTS AND RECORDS RESPIRATIONS

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

SKILL 8 — DONNING AND REMOVING PPE (GOWN AND GLOVES)

- 1 Picks up gown and unfolds
- 2 Facing the back opening of the gown places arms through each sleeve
- 3 Fastens the neck opening
- 4 Secures gown at waist making sure that back of clothing is covered by gown (as much as possible)
- 5 Puts on gloves

Skill continues

- 6 Cuffs of gloves overlap cuffs of gown
- 7 **Before removing gown, with one gloved hand, grasps the other glove at the palm, remove glove**
- 8 **Slips fingers from ungloved hand underneath cuff of remaining glove at wrist, and removes glove turning it inside out as it is removed**
- 9 Disposes of gloves into designated waste container without contaminating self
- 10 After removing gloves, unfastens gown at waist and neck
- 11 After removing gloves, removes gown without touching outside of gown
- 12 While removing gown, holds gown away from body without touching the floor, turns gown inward and keeps it inside out
- 13 Disposes of gown in designated container without contaminating self
- 14 After completing skill, washes hands

SKILL 9 — DRESSES CLIENT WITH AFFECTED (WEAK) RIGHT ARM

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Asks which shirt he/she would like to wear and dresses him/her in shirt of choice
- 4 Avoids overexposure of client by ensuring client's chest is covered
- 5 Removes gown from the left (unaffected) side first, then removes gown from the right (affected/weak) side
- 6 Before dressing client, disposes of gown into soiled linen container
- 7 **Assists to put the right (affected/weak) arm through the right sleeve of the shirt before placing garment on left (unaffected) arm**
- 8 While putting on shirt, moves body gently and naturally, avoiding force and over-extension of limbs and joints
- 9 Finishes with clothing in place
- 10 Signaling device is within reach and bed is in low position
- 11 After completing skill, washes hands

SKILL 10 — FEEDS CLIENT WHO CANNOT FEED SELF

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

SKILL 11 — GIVES MODIFIED BED BATH (FACE AND ONE ARM, HAND AND UNDERARM)

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Removes gown and places directly in soiled linen container while ensuring client's chest and lower body is covered
- 4 Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water
- 5 Puts on clean gloves before washing client.
- 6 **Beginning with eyes, washes eyes with wet washcloth (no soap), using a different area of the washcloth for each stroke, washing inner aspect to outer aspect then proceeds to wash face**

Skill continues

- 7 Dries face with dry cloth towel/washcloth
- 8 Exposes one arm and places cloth towel underneath arm
- 9 Applies soap to wet washcloth
- 10 Washes fingers (including fingernails), hand, arm, and underarm keeping rest of body covered
- 11 Rinses and dries fingers, hand, arm, and underarm
- 12 Moves body gently and naturally, avoiding force and over-extension of limbs and joints
- 13 Puts clean gown on client
- 14 Empties, rinses, and dries basin
- 15 Places basin in designated dirty supply area
- 16 Disposes of linen into soiled linen container
- 17 Avoids contact between candidate clothing and used linens
- 18 Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 19 Signaling device is within reach and bed is in low position

SKILL 12* — MEASURES AND RECORDS ELECTRONIC BLOOD PRESSURE

***STATE SPECIFIC (EVALUATOR: DO NOT SUBSTITUTE THIS SKILL FOR SKILL 23 'MANUAL BLOOD PRESSURE')**

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Places client in a comfortable lying or sitting position
- 4 Places arm in position at level of heart with palm up and upper arm exposed
- 5 Selects appropriate cuff size
- 6 Wraps cuff around upper arm, ensuring it is snug and sensor/arrow is over the brachial artery site
- 7 Places blood pressure cuff snugly on upper arm and sensor/arrow is over the brachial artery site
- 8 Turns on the machine and ensures device is functioning. If the machine has different settings for infants, children, and adults, selects the appropriate setting
- 9 Pushes start button. If cuff inflates to more than 200 mm Hg then stops machine and uses cuff on client's other arm

Skill continues

- 10 Waits until the blood pressure reading appears on the screen and then inflates the cuff to deflate the cuff and releases the cuff
- 11 Signaling device is within reach and bed is in low position
- 12 Before recording, washes hands
- 13 After obtaining reading using BP cuff, records both systolic and diastolic pressures exactly as displayed on the digital screen

SKILL 13 — MEASURES AND RECORDS URINARY OUTPUT

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

SKILL 14 — MEASURES AND RECORDS WEIGHT OF AMBULATORY CLIENT

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

SKILL 15 — PERFORMS MODIFIED PASSIVE RANGE OF MOTION (PROM) FOR ONE KNEE AND ONE ANKLE

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

SKILL 16 — PERFORMS MODIFIED PASSIVE RANGE OF MOTION (PROM) FOR ONE SHOULDER

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Instructs client to inform candidate if pain experienced during exercise
- 4 While supporting arm at the elbow and at the wrist, raises client's straightened arm from side position upward toward head to ear level and returns arm down to side of body (flexion/extension) (AT LEAST 3 TIMES unless pain is verbalized). Moves joint gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.

Skill continues

- 5 While supporting arm at the elbow and at the wrist, moves client's straightened arm away from the side of body to shoulder level and returns to side of body (abduction/adduction) (AT LEAST 3 TIMES unless pain is verbalized). Moves joint gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.
- 6 Signaling device is within reach and bed is in low position
- 7 After completing skill, washes hands

SKILL 17 — POSITIONS ON SIDE

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

SKILL 18 — PROVIDES CATHETER CARE FOR FEMALE

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water
- 4 Puts on clean gloves before washing
- 5 Places linen protector under perineal area including buttocks before washing

Skill continues

- 6 Exposes area surrounding catheter (only exposing client between hip and knee)
- 7 Applies soap to wet washcloth
- 8 **While holding catheter at meatus without tugging, cleans at least four inches of catheter from meatus, moving in only one direction, away from meatus, using a clean area of the washcloth for each stroke**
- 9 **While holding catheter at meatus without tugging, using a clean washcloth, rinses at least four inches of catheter from meatus, moving only in one direction, away from meatus, using a clean area of the washcloth for each stroke**
- 10 While holding catheter at meatus without tugging, dries at least four inches of catheter moving away from meatus using a dry cloth towel/washcloth
- 11 Empties, rinses, and dries basin
- 12 Places basin in designated dirty supply area
- 13 Disposes of used linen into soiled linen container and disposes of linen protector appropriately
- 14 Avoids contact between candidate clothing and used linen
- 15 Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 16 Signaling device is within reach and bed is in low position

SKILL 19 — PROVIDES FOOT CARE ON ONE FOOT

- 1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- 2 Privacy is provided with a curtain, screen, or door
- 3 Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water
- 4 Basin is in a comfortable position for client and on protective barrier
- 5 Puts on clean gloves before washing foot
- 6 Client's bare foot is placed into the water
- 7 Applies soap to wet washcloth
- 8 Lifts foot from water and washes foot (including between the toes)

Skill continues

- 9 Foot is rinsed (including between the toes)
- 10 Dries foot (including between the toes) with dry cloth towel/washcloth
- 11 Applies lotion to top and bottom of foot (excluding between the toes) removing excess with a towel/washcloth
- 12 Supports foot and ankle during procedure
- 13 Empties, rinses, and dries basin
- 14 Places basin in designated dirty supply area
- 15 Disposes of used linen into soiled linen container
- 16 Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- 17 Signaling device is within reach

SKILL 20 — PROVIDES MOUTH CARE

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

SKILL 21 — PROVIDES PERINEAL CARE (PERI-CARE) FOR FEMALE

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

SKILL 22 — TRANSFERS FROM BED TO WHEELCHAIR USING TRANSFER BELT

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

SKILL 23* — MEASURES AND RECORDS MANUAL BLOOD PRESSURE

***STATE SPECIFIC (EVALUATOR: DO NOT SUBSTITUTE THIS SKILL FOR SKILL 12 'ELECTRONIC BLOOD PRESSURE')**

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

SCORE REPORTING

EXAM RESULTS

If you have questions about your Score Report, or the content of the examination, call Pearson VUE at (888) 204-6213. **Results will not be given over the telephone.**

EFFECTIVE JULY 1, 2018, SCORE REPORTS WILL NO LONGER BE GIVEN OUT AT THE TEST SITE.

If you would like a score report mailed to you, please bring a self-addressed stamped envelope on the day of testing.

After all testing is completed, the nurse aide Evaluator (NAE) will fax all answer sheets for scoring. When score reports are received, the NAE will place the results in the self-addressed stamped envelope provided by each candidate. After leaving the test site the NAE will put all self-addressed stamped envelopes in the USPS mailbox for local delivery.

If a candidate did not provide a self-addressed stamped envelope or there were issues with the fax machine, all information will be forwarded to Pearson VUE. Score reports will be mailed 5-7 business days after the package is received at Pearson VUE.

If you have questions about your score report, or the content of the examination, call Pearson VUE at (888) 204-6213. Results will not be given over the telephone.

FAILING

If you fail the Written (or Oral) Examination or the Skills Evaluation, your Score Report will provide you with information on re-taking either or both parts. A new examination fee is required each time you re-take any part of the NNAAP Examination.

For more information concerning re-take fees, refer to the *Exam Fees* section in this handbook.

State and federal regulations allow you three (3) attempts to pass both parts of the NNAAP Examination. If you should fail either part three (3) times, you will be required to successfully complete a state-approved training program and re-take both parts. You must take and pass both the Written (or Oral) Examination and the Skills Evaluation within a twenty-four (24) month period from the completion date of your training program in order to be placed on the Mississippi Nurse Aide Registry.

HOW TO READ A FAILING SCORE REPORT

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

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

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

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

Mississippi NNAAP Examination Results	
Exam: Skills	Result: Fail
Skills Performance:	
Hand Hygiene 1, 5, 10	Unsatisfactory
Assists with Use of Bedpan	Satisfactory
Measures and Records Blood Pressure	Satisfactory
Puts One Knee-High Elastic Stocking on Client	Satisfactory
Provides Mouth Care	Satisfactory

A sample of a Failing Score Report

PASSING

Once you have passed both the Written (or Oral) Examination and the Skills Evaluation, your name will be placed on the Mississippi Nurse Aide Registry. Approximately ten (10) business days from the day on which you successfully complete both parts of the NNAAP® Examination, Pearson VUE will mail you your Nurse Aide Certificate and Wallet Identification Card. If you have not received your Nurse Aide Certificate and Wallet Identification Card from Pearson VUE thirty (30) days after the examination, contact Pearson VUE at (888) 204-6213. **Please note that your Nurse Aide Certificate is valid for twenty-four (24) months from the date it was issued.**

DUPLICATE SCORE REPORT

If you lose your Nurse Aide Certificate or Score Report, complete the *Request for Duplicate Score Report* and mail it to Pearson VUE (see *Appendix A*). Duplicate score reports can be issued for examinations within 90 days of testing.

NURSE AIDE TESTING GRIEVANCE PROCESS

All grievances must be in writing. The candidate must provide as much detail as possible in the grievance form. The grievance must be submitted within 30 days of the candidate's exam date. After receipt of the grievance form, the complaint will be investigated.

Once the investigation is complete, Pearson VUE will send written correspondence back to the candidate informing him/her of the outcome of the investigation. If the grievance is substantiated, the candidate will be allowed to retest at no additional cost.

You can access the grievance form at <http://www.pearsonvue.com/al/nurseaides>. Please ensure you complete all information in the form. You will receive a response within 30 days of receipt.

THE REGISTRY

ONLINE REGISTRY SEARCH

You can check your status and your address on file with the Mississippi Nurse Aide Registry by using the Internet. Go to www.pearsonvue.com and click on "Registry Services." Enter your last name and first name, Social Security number, or certification number to search for your Nurse Aide Registry record. This is a quick and easy way to check your status and address on file with the Mississippi Nurse Aide Registry. There is no charge for this service.

CHANGE OF ADDRESS OR NAME

The Mississippi Nurse Aide Registry MUST be kept informed of your current name and address. If your name or address changes at any time after you apply to test, you must send written notification of this change to Pearson VUE. You may notify Pearson VUE using the *Change of Address or Name Form* in the back of this handbook, or by sending a letter to Pearson VUE (at the address on the inside front cover) indicating your current name, address, telephone number, certification number, and Social Security number.

If you change your name, you **MUST** provide written documentation of the change along with the *Change of Address or Name Form*. This documentation may be a copy of a marriage license, divorce decree, or other official document.

There is no charge for changing your name or address on the Registry. When you renew your certification, your new name and/or address will appear on the new Wallet Identification Card issued to you.

CERTIFICATION BY RECIPROCITY

Reciprocity is a process by which a certified nurse aide from another state may qualify for certification in the state of Mississippi by virtue of his or her status in that other state.

You are eligible for reciprocity if you have been entered on a nurse aide registry in a state other than Mississippi in accordance with the training and competency evaluation requirements of OBRA '87, as amended, and if you are currently listed on that state's registry as active and in good standing.

Nurse aides from out of state who are eligible for reciprocity should complete a Reciprocity Application. You must mail the completed application, a copy of a W2 Form or paystub if you were placed on the state's registry over twenty-four (24) months ago, and a \$26 fee payable to "Pearson VUE" in the form of a company check, money order, or certified check to:

Mississippi Nurse Aide Registry
Pearson VUE
PO Box 822749
Philadelphia, PA 19182-2475

The length of the reciprocity process depends on the time it takes your state to provide Pearson VUE with documents verifying your status as a nurse aide. Pearson VUE will process your request as soon as it receives the necessary registry verification from the state in which you are certified (along with the application, W2 Form or paystub, and fee from you). The entire process takes a *minimum* of thirty (30) days. You will then receive your Nurse Aide Certificate and Wallet Identification Card and be placed on the Mississippi Nurse Aide Registry, or you will receive a denial letter indicating that additional information is required to complete the reciprocity process.

If you are denied reciprocity in Mississippi, you must take and pass the NNAAP® Examination in order to be added to the Mississippi Nurse Aide Registry. If you fail either the Written (or Oral) Examination or the Skills Evaluation on the **first** try, you will be required to complete a Mississippi-approved nurse aide training program before being allowed to re-test under Eligibility Route E1 as a new nurse aide.

If you have been denied reciprocity because you have negative findings on the registry of another state, you are not eligible to take the NNAAP® Examination for certification in Mississippi.

RE-CERTIFICATION

RENEWAL NOTIFICATION

The original Nurse Aide Certificate from the Mississippi State Department of Health, Bureau of Health Facilities Licensure and Certification, is valid for twenty-four (24) months from the date of issue. Approximately sixty (60) days before the expiration of your Nurse Aide Certificate, Pearson VUE will send a reminder notice (known as

renewal notification) to the mailing address listed on the Registry. You may also print a Registry Renewal Form from the Pearson VUE web site (www.pearsonvue.com).

It is essential for you to update your mailing address with Pearson VUE by calling (888) 204-6213 if you have a change of address. This will ensure that you receive your renewal notification in a timely manner. To be eligible for re-certification, you must have worked as a nurse aide performing nurse aide services for monetary compensation for at least eight (8) hours in a nursing home or other health care setting during the previous twenty-four (24) month certification period.

RE-CERTIFICATION PROCESS

Under federal and Mississippi state laws, candidates employed as nurse aides in nursing homes that participate in Medicaid/Medicare programs are prohibited from paying for their own re-certification.

When you receive your renewal notification from Pearson VUE, contact your current employer (which must be a nursing home, hospital, hospice, home health agency or ICF/MR facility). Your employer is required to complete the employer section of the Re-certification Form. If you are working for an employment agency, and are placed in a long-term care facility, you must have the facility fill out the employer section of the Re-certification Form. **An employment agency cannot fill out the employer section of the Re-certification Form.** Employment as a private-duty aide, doctor's office aide, laboratory aide, personal care home assisted living aide, or personal care home residential living aide does not qualify for re-certification.

If you are not employed as a nurse aide at the time of re-certification, your *last* nurse aide employer must complete the employer section of the Re-certification Form, attesting to your employment within the last twenty-four (24) months. Nurse aides who are not employed in a Medicaid/Medicare nursing home at the time of re-certification are permitted to pay the re-certification fee of \$26. The fee may be paid by certified check or money order and made payable to "Pearson VUE." Personal checks are not accepted.

Upon re-certification, you will receive a new Wallet Identification Card indicating the new certification period. Make sure that your address and name are current on the Registry. If your address and name are not correct

Pearson VUE will NOT be able to notify you when your certification is about to expire. You must remember to notify the Registry *whenever* your address or name changes (include official documentation for any name change).

Nurse aides whose certification is lapsed on the Mississippi Nurse Aide Registry are required to re-test. These nurse aides must pass both parts of the NNAAP® Examination in order to become active on the Registry. If you fail either the Written (or Oral) Examination or the Skills Evaluation on the first try, you will be required to complete a Mississippi state-approved nurse aide training program before being allowed to re-test under Eligibility Route E1 as a new nurse aide.

MS NURSE AIDE CERTIFICATION — FREQUENTLY ASKED QUESTIONS

QUESTION	ANSWER
1. How do I become a certified nurse aide in Mississippi?	<p>1. There are two (2) ways to become certified in Mississippi. You can take and pass the certification test or you can transfer your certification from another state (reciprocity).</p> <p>Testing: You must successfully complete a state-approved nurse aide training program and pass both the written and skills portions of the certification test. A list of state-approved nurse aide training programs may be obtained upon request from the state regulatory agency responsible for certifying nurse aides in Mississippi which is the Mississippi State Department of Health, Bureau of Health Facilities, Licensure and Certification. For more information about the test, print and read the candidate handbook. Testing applications are available from Pearson VUE's website at www.pearsonvue.com, or by calling 1-888-204-6213.</p> <p>Reciprocity: If you have been entered on a nurse aide registry in a state other than Mississippi in accordance with the training and competency evaluation requirements of OBRA '87, as amended, and if you are currently listed on that state's registry as active and in good standing, you can request reciprocity. Applications for reciprocity are available from Pearson VUE's website at www.pearsonvue.com, or by calling 1-888-204-6213.</p>

MS NURSE AIDE CERTIFICATION — FREQUENTLY ASKED QUESTIONS

QUESTION	ANSWER
2. Can I be tested at a testing site in Mississippi if I successfully complete a Nurse Aide Training program approved in another State?	2. No. Only those students that successfully complete a State Approved Nurse Aide Training Program in Mississippi are eligible to be tested in Mississippi. However, you may take the test in the State where you were trained and once you become certified, you may then apply for reciprocity in Mississippi.
3. How can I find test information?	3. All information about Mississippi's testing program is available in the Mississippi Nurse Aide Candidate Handbook. You can find and download this handbook by calling 1-800-204-6213 or from Pearson VUE's website at www.pearsonvue.com .
4. Can I be hired by a long-term care facility if I am not already certified?	4. It is State Policy that a long-term care facility participating in Medicaid/Medicare must not hire an individual as a nurse aide unless that individual is already certified and/or is enrolled in a nurse aide training program being conducted by the nursing home.
5. Is there a time limit within which I must pass my exam after I complete my training?	5. You have twenty-four (24) months from the completion date of the training program to take and pass both parts of the NNAAP Examination. However, if you are employed by a long-term care facility participating in Medicaid/Medicare, you must be certified within four (4) months of being hired.

MS NURSE AIDE CERTIFICATION — FREQUENTLY ASKED QUESTIONS	
QUESTION	ANSWER
6. How do I arrange special accommodations for my disability?	6. Pearson VUE certifies that it complies with the provisions of the American Disabilities Act (42 USC, Section 12101, et. seq.). If you have a disability, you may ask for special arrangements for testing when you apply. All requests must be received in advance by Credentia. Be sure to explain the specific type of help you need and enclose proof of the need (diagnosed disability) from your health care provider. Nurse Aide Evaluators administering the Skills Evaluation will be prepared to meet the needs of nurse aide candidates who have disabling conditions.
7. My native language is not English. Are special accommodations available to me?	7. No. Both examinations are available in English only. An Oral Examination may be taken in place of the Written Examination if you have difficulty reading English. No interpreters or translators may be used during the written and/or clinical skills examination.

MS NURSE AIDE CERTIFICATION — FREQUENTLY ASKED QUESTIONS	
QUESTION	ANSWER
8. How can I cancel or reschedule my examination?	8. If you are unable to attend your scheduled examination, you MUST call Credentia at least (5) business days before the examination date to re-schedule. Saturday and Sunday and national holidays are not business days. If you do not call Credentia at least five (5) business days in advance of your examination date to re-schedule, and you do not show up for your scheduled examination, your fee will NOT be refunded and cannot be transferred to a new examination date. You may NOT give your examination reservation to another person. If you notify Credentia in time there is no penalty and your fee may be transferred to your new examination date. If your employer paid your examination fee, you should tell them about missing the examination. Let them know how you have handled re-scheduling and when you plan to re-test.
9. At what time should I report to the Test Center?	9. Plan to arrive thirty (30) minutes before the examination starts. If you are late for your scheduled examination, or do not bring proper identification, you will NOT be allowed to test and your examination fee will NOT be refunded.

MS NURSE AIDE CERTIFICATION — FREQUENTLY ASKED QUESTIONS	
QUESTION	ANSWER
10. Where are test center directions located?	10. Once Credentia receives your examination application, required documents, and fee, they will schedule you for testing at the site selected on your application. Credentia will mail you an Authorization to Test Notice to the address listed on your application. The Authorization to Test Notice has important information about the examination to include specific directions to the testing site.
11. What should I bring with me to the Test Center?	11. You must present two (2) forms of identification, one of which must be a photo identification. The name on the Candidate Roster MUST match the name on your identification. If it doesn't, you must furnish proof to the Evaluator that your name has changed (i.e., marriage license, divorce decree, etc.).
12. I missed my examination. Can I get my fee waived when I reschedule?	12. The rules regarding excused absences can be found in the Candidate Handbook. In some cases, such as illness, a car accident, weather-related problems, or other circumstances, you may be eligible for an Excused Absence. The decision of Credentia regarding an excused absence will be final.
13. I took my examination and passed one part but not the other. Do I have to retake both parts of the examination?	13. No. You may retake only the part that you failed. A new examination fee is required each time you re-take any part of the NNAAP Examination. Refer to the Candidate Handbook for instructions on what you must submit to Credentia to re-take either or both parts of the examination.

**MS NURSE AIDE CERTIFICATION —
FREQUENTLY ASKED QUESTIONS**

QUESTION	ANSWER
14. How can I correct my name and address?	14. If your name or address changes at any time after you apply to test, you must send written notification of the change to Pearson VUE. You may notify Pearson VUE using the Change of Address or Name Form” in the back of the Candidate Handbook. If you change your name, you MUST provide written documentation of the change along with the Change of Address or Name Form.
15. When is the next date for the nurse aide certification test?	15. Regional test site testing dates can be found on Pearson VUE’s website at www.pearsonvue.com , or you may call 1-800-579-3321.
16. How do I obtain a state-approved training program code or employer code?	16. The state approved training program will put the code on your application and also sign the application. If you are employed by a long-term care facility that participates in medicaid/medicare, your employer will also place the employer code on the application.

**MS NURSE AIDE CERTIFICATION —
FREQUENTLY ASKED QUESTIONS**

QUESTION	ANSWER
17. I have adverse findings against me on the Nurse Aide Registry and my nurse aide certification has been revoked. How do I become certified again?	17. You cannot become certified again if adverse findings have been placed against you on the Mississippi Nurse Aide Registry and/or your certification has been revoked. This applies for any state, not just Mississippi. To be eligible for certification, renewal and/or reciprocity, you must not be listed on any other state’s nurse aide abuse registry and/or have had your nurse aide certification revoked in any state. You are no longer eligible to work for a Medicaid/Medicare certified nursing home in the United States. If you have a question about specific information on a finding against you, call the Mississippi State Department of Health, Bureau of Health Facilities, Licensure and Certification. A nurse aide may petition to have a finding of neglect removed from his/her name if: employment and personal history does not reflect a pattern of neglect and/or neglect was a single occurrence. This determination may not begin until one year has passed. <i>For additional information on how to proceed with petition procedures please visit the Pearson Vue website.</i>

**MS NURSE AIDE CERTIFICATION —
FREQUENTLY ASKED QUESTIONS**

QUESTION	ANSWER
18. How do I keep my certification current?	18. To be eligible for re-certification, you must have worked as a nurse aide performing nurse aide services for monetary compensation for at least eight (8) hours in a nursing home or other health care setting (i.e., hospital, hospice, home health agency, or ICF/MR facility) during the previous twenty-four (24) month certification period. Approximately sixty (60) days before the expiration of your Nurse Aide Certification, Pearson VUE will send you a renewal notice to the mailing address listed on the Registry. You may also print a Registry Renewal Form from Pearson VUE’s website at www.pearsonvue.com . An employment agency cannot fill out the employer section of the Re-certification Form. Employment as a private-duty aide, doctor’s office aide, laboratory aide, personal care home assisted living aide, or personal care home residential living aide does not qualify for re-certification. If you are not employed as a nurse aide at the time of re-certification, your last nurse aide employer must complete the employer section, attesting to your employment within the last twenty-four (24) months. If you are employed by a Medicaid/Medicare nursing home at the time of re-certification, the nursing home is responsible for paying the renewal fee.

MS NURSE AIDE CERTIFICATION — FREQUENTLY ASKED QUESTIONS	
QUESTION	ANSWER
19. My certification expired. What do I need to do to become certified again?	19. All other nurse aides whose certification has expired are required to re-test as a lapsed/expired nurse aide. You will have one opportunity to pass both parts of the examination in order to become active on the Registry. If you fail either the Written (or Oral) Examination OR the Skills Evaluation on the first try, you will be required to complete a Mississippi-approved nurse aide training program before being allowed to re-test as a new nurse aide.
20. I attended a nurse aide training program and/or worked as a nurse aide prior to 1987. Can I apply for "Deemed Status" and/or "Waiver Status" to become a Certified Nurse Aide on the Mississippi Nurse Aide Registry?	20. No. The deadline for applying for "Deemed Status" was October 1, 1990. Applications for Deemed status are no longer being accepted. The deadline for States to waive (grandfather in) requirements for individuals who had served as a nurse aide at one or more facilities of the same employer in the State for at least 24 consecutive months was December 19, 1989. Any nurse aide who has not already received deemed status or had requirements waived by the State must complete an approved training program and pass a written and clinical skills examination.

MS NURSE AIDE CERTIFICATION — FREQUENTLY ASKED QUESTIONS	
QUESTION	ANSWER
21. If my nurse aide certificate expires while I am deployed and/or assigned overseas serving in the United States military, what do I do when I return home to get my nurse aide certification renewed?	21. Individuals may apply for renewal of nurse aide certification sixty (60) days before expiration. Any person in the armed services of the United States holding a valid nurse aide certificate and is out-of-state due to military service at the time his/her nurse aide certification expires may renew at any time within 120 days after being honorably discharged from such military service or upon returning to the State, without payment of any delinquent fees, retraining and/or re-examination. You will be required to submit a copy of your military ID (front and back) and a copy of your military orders along with a completed renewal application, and a cashier's check or money order for the current renewal fee. However, this does not allow individuals to work as a certified nurse aide with an expired certification in a long term care facility that participates in the Medicaid/Medicare programs.
22. If I successfully complete an online computer based Nurse Aide Training Program, can I take the nurse aide competency examination at a testing site in Mississippi?	22. No. Mississippi does not accept online computer-based Nurse Aide Training Programs.

MS NURSE AIDE CERTIFICATION — FREQUENTLY ASKED QUESTIONS	
QUESTION	ANSWER
23. How can I get a current listing of the State Approved Nurse Aide Training Programs in Mississippi?	23. You should contact the Mississippi State Department of Health (MSDH) and request a current listing of the Mississippi State Approved Nurse Aide Training Programs. See "Quick Reference" section in front of this handbook for MSDH contact information.
24. How long after my date of expiration to renew my certification?	24. Once the expiration date is met, you must challenge the exam successfully in order to become recertified. There is no grace period.
25. My certification has expired/lapsed. I no longer have my completion certificate. What documentation must I send with the registration by examination application?	25. You can register for the examination by filling in your certification/roster number in the appropriate location on the application.

**MS NURSE AIDE CERTIFICATION —
FREQUENTLY ASKED QUESTIONS**

QUESTION	ANSWER
<p>26. What happens to my Petition for Removal of Findings of Neglect if I fail either part of the NNAAP competency exam?</p>	<p>26. Failure to successfully complete the NA competency evaluation will be considered denial of the petition. Following a denial of the initial petition to MSDH/HFLC for removal of a finding of neglect, the nurse aide may petition for a second consideration for removal twelve (12) months from the date of the Notice of Denial (or, from the date the unsuccessful testing results were received) of the initial petition. The procedure stated within this policy must be followed with a second petition. The decision following the second petition is FINAL and cannot be appealed.</p>
<p>27. Where do I obtain an application to Petition for Removal of a Finding of Neglect?</p>	<p>27. All applications (including, renewal, reciprocity, registration for examination, etc) can be obtained by contacting Pearson VUE, the MS State Department of Health, or by printing the application from www.pearsonvue.com (MS Nurse Aides).</p>

**APPENDIX
A**

**Mississippi
Nursing Assistant**

REQUEST FOR DUPLICATE SCORE REPORT

DIRECTIONS: You may use this form to ask Pearson VUE to send a duplicate copy of your Score Report. Please print or type all information on the reverse side of this form, or your request will be returned. Check the service requested:

- Skills Evaluation Written/Oral Examination

SEND TO: Mississippi Nurse Aide – Reports
Pearson VUE
 PO Box 822749
 Philadelphia, PA 19182-2749

PLEASE COMPLETE BOTH SIDES OF THIS FORM

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

Name _____
 Street _____
 City _____ State _____ Zip _____
 Tel. (_____) _____ Pearson VUE Identification Number or Social Security Number _____

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

Name _____
 Street _____
 City _____ State _____ Zip _____
 Tel. (_____) _____

I hereby authorize Pearson VUE to send to me at the address above a duplicate copy of my Score Report or.

Your Signature _____ Date _____

PLEASE COMPLETE BOTH SIDES OF THIS FORM

DIRECTIONS: Use this form to inform the Registry of your change of address or name. Please print or type all information on the reverse side of this form. Be sure to provide all information, or your request cannot be processed.

For name changes you must also provide written documentation of your name change. See back of this form for details.

SEND TO: Mississippi Nurse Aide Registry
Pearson VUE
PO Box 13785
Philadelphia, PA 19101-3785

PLEASE COMPLETE OTHER SIDE OF THIS FORM

PRINT YOUR NEW NAME AND ADDRESS BELOW.

Name _____
Street _____
City _____ State _____ Zip _____
Tel. (_____) _____

PLEASE PRINT YOUR OLD NAME AND ADDRESS BELOW.

Name _____
Street _____
City _____ State _____ Zip _____
Social Security Number _____ Nurse Aide Certification Number _____

YOUR SIGNATURE _____ Date _____

NOTE: A copy of an official document (marriage certificate or other court order) verifying your name change must accompany this request if you are notifying the Mississippi Nurse Aide Registry of a change in name.