American Red Cross

The Department of Disabilities, Aging, and Independent Living

Suzanne Leavitt, Assistant Division Director
280 State Drive-HC 2 South
Waterbury, Vermont 05671-2060
(802) 241-0346
surveyandcertification@vermont.gov

RFP Response CNA Competency Evaluation/Nurse Aide Testing Evaluation

Submitted by Robyn Blaschak
Senior Manager-Competency Evaluation Program
American Red Cross Nurse Assistant Testing
215-806-0575
robyn.blaschak@redcross.org

March 30, 2018

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Letter of Submittal

The American Red Cross Competency Evaluation Program is pleased to offer this proposal to the Vermont Department of Disabilities, Aging & Independent Living (DAIL) to be the exclusive testing body to perform certified nurse aide testing in Vermont. Through an organization of local chapters, the American Red Cross aims to empower people to assume greater responsibility for the health and safety of their families and neighbors. The American Red Cross Mission prevents and alleviates human suffering in the face of emergencies by mobilizing the power of volunteers and the generosity of donors. Our employees are expected to adhere to the Principles of the International Red Cross Movement: humanity, impartiality, neutrality, independence, voluntary service, unity, and universality and in addition the American Red Cross Values of being compassionate, collaborative, creative, credible and committed. As a not-for-profit service agency, it sponsors a broad range of health care programs and services aimed to improve community health standards and practices.

Over the past twenty-seven years the ARC has built positive relationships with the state governing agencies, facilities and training programs in the community. The ARC takes pride in the relationship that has evolved over the years. In all our programs, the ARC's goal is to provide cost-efficient, high quality standardized testing that is responsive to the needs of facilities and training programs. In these programs, it has established a record of excellence in standardized test administration, nurse aide registry management and customer service that focus on providing quality service and make conscious efforts to continually improve the services delivered.

Organization Location & Mailing Address:

American Red Cross Competency Evaluation Program
85 Lowell Street
Peabody, Massachusetts 01960-5413
Phone-800-962-4337/781-979-4010 Fax-781-979-4014

The American National Red Cross headquarters is located at:

American National Red Cross
431 18th Street NW
Washington, DC 20006
Website: https://www.redcross.org/take-a-class/cna-testing

Project Team Leaders-Robyn Blaschak-Senior Manager & Kristen Oleson-Program Manager

The following are the materials and attachments included for the submission:

RFP Response
Team Member Resumes
Reference Letters
Sample Reports
Sample Examination Information & Study Guide (California, will be changed for Vermont)
Vermont Contract with Red Cross Office of General Counsel Comments
Scanned Original Signature of Authorized Party

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Qualifications

The American National Red Cross has an impressive history of delivery systems related to competency testing.

- Current delivery system since 1992 for the Competency Evaluation Program of the American Red Cross on behalf of the California Department of Public Health.
  Relative Data for 2016:

Annual Candidates Tested	12,656
Pass Rates Written 92.32% Skills 69.00%	

- Current delivery system since 1991 for competency testing, reciprocity and registry renewals on behalf of the Massachusetts Department of Public Health.
  Relative Data for 2016:

Annual Written Tests	7,125
Annual Skills Tests	8,383
Duplicate Certificates Issued	882
Renewals Processed	24,716
Special Accommodations	13
Licenses Issued in MLO	5,534
Reciprocities	1,094
Pass Rates	Written 90% Skills 69%

- Current delivery system since 2001 for the Competency Evaluation Program of the American Red Cross on behalf of New Hampshire Board of Nursing.
  Relative Data for 2016:

Annual Candidates Tested	447
Pass Rate	72.82% (knowledge and skills combined %)

- From 2008 thru 2016, the American Red Cross facilitated administration of the Pearson VUE examination in Maryland, Pennsylvania, Wyoming, Wisconsin, Vermont and Washington DC.
  In these states, ARC was the sole testing vendor. Pearson VUE, the holder of the contracts in those states changed their business model as of January 1, 2017 and no longer utilized third party organizations to conduct testing.
  Relative Data for 2016:

Annual Candidates Tested Maryland	3,182
Annual Candidates Tested Pennsylvania	7,786
Annual Candidates Tested Wisconsin	9,286
Annual Candidates Tested Wyoming	1,204
Annual Candidates Tested Vermont	1,180
Annual Candidates Tested Washington DC	1,054
Pass Rates	Written 93.1% Skills 70.5%

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Work Plan

The American Red Cross Competency Evaluation Program is proposing to be the sole administrator of Competency Test/Evaluation in the state of Vermont for approximately 800 nurse aides, meeting all federal requirements, providing management of exams and registration of candidates. After analyzing several methods of delivery, ARC believes it has established an objective and comprehensive program. In this process, testing candidates can register to take the written and clinical exam two (2) ways:

Phone registration 1-800-RedCross (800-733-2767) Testing candidates call and our team of call center agents who assist them in registering. They are available during the hours of:

Monday - Friday 7:30am – 10:00pm EST
Saturday 7:30am – 8:00pm EST

Online registration via Red Cross website: www.redcross.org Candidates pay with a credit card and able to choose a date and location of their choice to take the exam. This allows for candidates to be tested in one of the regional testing locations across the state or on-site at their approved facility or approved training program location. This business model ensures the highest level of customer support available to candidates within 48 hours of inquiry. Test dates will be no more than 30 calendar days from completed application/registration. ARC will design an application that is easy to read and complete and offer customer support for technical assistance. All pre-examination materials are located on the Red Cross website for download. ARC has procedures and protocols in place for test security and confidentiality. Candidates receive confirmation of test date at least ten (10) working days prior to the exam.

ARC maintains an employee, field based staff of RN nurse evaluators who have been trained to administer standardized written and clinical tests in a fair and objective manner under secure conditions, helping to assure the validity of the test scores. These test administrators are monitored, evaluated, and given continual training to assure fairness to candidates and the validity of results to ensure inter rater reliability. This performance measure will give a score on how much homogeneity, or consensus, there is in the scorings given by our nurse evaluators and testing in a non-intimidating manner. This clinical team is managed locally and supported by an In-State Nurse Coordinator within the state. Scheduled quarterly in-person meetings between ARC & DAIL and having open communication, addressing questions or concerns as they happen are key to running a successful program. ARC provides different methods of administering oral/special accommodations if applicable.

Red Cross does not currently offer online access to monthly operational reports. With our current vendors, we send the reports via email. We will work with our IT department to make online access available.

Operational Reports (samples provided)

Cumulative Report –sent to the state every 10 days
Batch Validation-sent to the state daily after each group entry
Student Certification Report-sent to the state once a week
Summary Report-sent to the state upon request

Third Time Failure-sent to the state once a week

Facility Profile-sent to testing programs and schools monthly

*If there are metrics you would like to measure and are not included in the report examples attached, ARC will work with DAIL to produce performance based reports to meet their needs and expectations.

The In-State Nurse Coordinator will distribute quarterly newsletters to all training programs to provide education and updated information. In-person quarterly meetings or conference calls with DAIL to address any questions or concerns are essential to a quality program. ARC will conduct a series of informational meetings around the state to introduce ARC as the new testing provider and to uniform facilities and training programs of ARC testing processes and procedures for candidate registration. ARC also provides information of the written and clinical examination so the programs and schools understand the testing expectations. This will benefit all parties involved so the candidates have the best possible testing experience to achieve success. ARC will coordinate in-person and webinar based informational sessions according to the geographic locations within Vermont.

The American Red Cross has a chapter location in Burlington Vermont, which will be utilized as a regional testing site. In addition, ARC will work with approved training programs and schools across the state to conduct regional and in-facility testing. ARC tests a minimum of 6 candidates and a maximum of 12 candidates per test day. With the combination of the 2 testing models of regional and in-facility, this will ensure the adequate coverage for testing in all areas of the state and testing frequency to ensure candidate success. ARC will make contact and provide the requirements needed to be a testing location. (Host Location Guidelines and Materials List). The In-State Nurse Coordinator can perform testing site approvals within a week of request. ARC manages retests, if a candidate fails part of their exam, they can schedule to retest the part they failed and pay the appropriate retesting fee. We provide customer support through the call center and the administrative staff located in the Peabody Massachusetts office.

In proving scoring of exams, ARC believes its primary role is to help the DAIL fulfill its mission of protecting the public and those who receive care from practitioners lacking the necessary knowledge or skill to perform competently. Since test scores are the primary indicators of competence, ARC believes it is imperative that test scores represent valid indicators of competence. The validity of the test revolves around 2 general areas, test development process and standard of performance. The legal defensibility of a certification tests depends largely on the specific steps that the developer takes in developing the test. Those steps are well defined by professional standards and involve developing test specifications or a test blueprint from appropriate materials and job-related studies, including experts throughout the development process, and conducting appropriate psychometric analyses and studies prior to implementation of the test. In addition, the test development process must be continual, as new forms must be introduced to keep the tests secure. To be fair to both candidates and the public, the standard of performance (passing scores) should represent the best judgment of the DAIL and stakeholders as to minimum competence in Vermont. Succeeding on the test should require no

more or less knowledge or skill than is required to perform the job adequately. ARC regularly performs examination validity field testing and will pull tests if they have been compromised.

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Sections/objectives	Weightings
1. Basic nursing and personal care skills	30.00%
(T1.1. U/A) Apply procedural concepts to obtain heights, weights and vital signs	5.00%
(T1.2. U/A) Apply procedural concepts for personal care skills related to bathing, skin care oral/mouth care, dressing, and grooming specific to resident needs	7.00%
(T1.3. U/A) Apply procedural concepts for personal care skills related to elimination specific to resident needs	6.00%
(T1.4. U/A) Apply procedural concepts for personal care skills related to nutrition through feeding and hydration techniques specific to resident needs	6.00%
(T1.5. U/A) Apply procedural concepts to promote residents' comfort and rest, including when death is imminent	6.00%
2. Restorative services and mobility	18.00%
(T2.1. U/A) Given a scenario, choose the action that is in compliance with the care plan of a resident.	6.00%
(T2.2. U/A) Apply resident transfer, positioning and turning techniques specific to resident needs	6.00%
(T2.3. U/A) Apply procedural concepts to promote resident mobility	6.00%
3. Care of cognitively and sensory impaired	16.00%
(T3.1. U/A) Apply protocols to maintain physical safety of a cognitively impaired resident	6.00%
(T3.2. U/A) Apply communication techniques effectively with cognitively impaired residents	5.00%
(T3.3. U/A) Apply techniques to effectively communicate with hearing and visually impaired residents	5.00%
4. Indirect skills	18.00%
(T4.1. R) Identify legal and ethical parameters relevant to the CNA/NA	5.00%
(T4.3. U/A) Apply knowledge of residents' rights and support family involvement	5.00%
(T4.4. U/A) Apply documentation and reporting skills	5.00%
(T4.5. R) Identify admission and discharge procedures	3.00%
5. General safety considerations	18.00%
(T5.1. U/A) Apply infection control measures	7.00%
(T5.2. U/A) Apply procedural concepts to respond to emergencies	4.00%
(T5.3. U/A) Apply procedural concepts to prevent errors and injuries through a safe work environment	7.00%
TOTAL	100.00%

ARC has determined 35 (71.4%) as the cut score for the examination.

Pilot Sample Pass Rates for Various Cut Scores			
Cut Score (out of 50)		Pass Rate	
25		95.9%	
26		94.1%	
27		93.7%	
28		91.1%	
29		90.7%	
30		87.7%	
31		85.5%	
32		84.8%	
	33	80.3%	Hofstee: Expected Pass Rate
Angoff: Recommended Range	34	75.5%	
	35	71.4%	
	36	67.3%	
	37	63.9%	
	38	57.2%	
	39	49.1%	
Hofstee: Expected Cut	40	45.0%	
41		36.8%	
42		29.7%	
43		23.4%	
44		17.5%	
45		12.6%	

ARC will invoice the state monthly for testing only for those employed by or have an offer of employment from a CMS certified Skilled Nursing Facility.

Describe day of the testing from candidate's perspective

The three (3) items candidates bring to the exam are:

1. Completed testing application including all prerequisite documentation
2. Two IDs are required on the day of the exam. One must be a current and clear state/federal issued photo ID; and the only acceptable photo IDs are a valid/current driver's license, passport, U.S. military ID, a permanent resident card, or RMV ID (MA Learner's Permit not applicable). No other photo ID will be accepted unless you are a minor/under 18 (see listed "exception" in the Nurse Aide Candidate Guide). No photocopies of photo IDs will be accepted.
3. The second form of ID may include your social security card, admission notice, car registration, utility bill. All information on your Application will need to match your IDs. IMPORTANT: please carefully read your Nurse Aide Candidate Information Guide for ALL Testing Day requirements.

Candidates are recommended to wear uniform/scrubs (any color) and non-skid, supportive shoes. They should also bring a black or blue ink pen, non-perishable snacks, and water to last throughout the day. Candidates arrive 15 minutes prior to appointment time and should set aside the entire day 8 am to 5 pm for test completion. The length of day will vary, depending on the number of students scheduled to test. Candidates that are late for their scheduled examination or do not bring all their required documents will not be able to test and must reschedule and the examination fee will not be refunded. After candidate registration, a brief orientation will take place. The group then completes the written examination. Once all candidates are done, the clinical examinations take place. The testing candidate will receive a score report in the mail with their test results. If the student fails any part of the exam, they are required to schedule the appropriate part of the exam later. They also may file a grievance if they disagree with their testing outcome and submit to the Program Manager and Grievance Committee for review.

ARC will recruit, employ, train and supervise a cadre of RN nurses to administer its tests. To become a Nurse Evaluator, an individual must be a Registered Nurse for a minimum of 2 years with at least one-year of experience in long term care or care for the chronically ill and not employed as a Nurse Assistant Educator within the state. The goal of training will be consistent test administration practice, making it indifferent to the candidate who is administering the test. The In-State Coordinator will conduct all training sessions for nurse evaluators. The three-stage procedure will be used. In the first stage, each nurse will meet the trainer to review the overall system for CNA training and testing, program goals, lines of responsibility and authority, program materials and all aspects of test administration, including a general introduction to the candidate population, the duties of test administrators, and procedure for:

- arranging with test centers prior to an administration,
- receiving, storing, distributing test materials to candidates, and returning material to the ARC testing office;
- checking photo identifications at the test site;
- administering tests to candidates with special needs;
- using appropriate seating plans and assignments and monitoring the testing room to reduce the opportunity to obtain scores by questionable means;
- handling of suspected impersonations, cheating, misconduct, and other emergencies;
- reporting irregularities-disturbances, equipment failures, misconduct-so that after reviewing appropriate action can be taken,
- scoring procedures for the written test,
- scoring rubrics for the clinical tests, and
- scheduling and record keeping.

After this initial training session, the new nurse evaluator will accompany a trained nurse to a test administration. At this testing session, both the trained and new nurse will score each test independently and compare scores and skills marking. Differences will be discussed. The candidate will receive the score of the trained nurse.

The third stage of training will require the new nurse to conduct the testing, but under the supervision of an experienced nurse. Again, both nurses will score the tests and resolve any differences that might have occurred in scoring. Once a new nurse has successfully completed the third stage, he or she will be considered as having completed training.

Following the training, all test materials will be screened for accuracy to ensure the proctor has a clear understanding of the process. If there is any question, the test administrator is notified and content reviewed. This process continues until three test packets are submitted with 100% accuracy. Once the proctor has successfully completed with 100% accuracy, he or she will be considered as having completed training and be able to test on their own.

Each nurse will go through an annual evaluation cycle where another trained nurse observes him or her. Suggestions will be made and a report of the observation will be filed with the In-State Nurse Coordinator. In addition, the In-State Nurse Coordinator will meet twice a year with Nurse Evaluators. One of the responsibilities of the In-State Nurse Coordinator is to monitor the test sites regularly. Red Cross does not utilize sub-contractors.

During the Clinical Skills Test, candidates will demonstrate four (4) skills learned from their training program. They will be evaluated based on the demonstration of each skill performed, including how to follow the Six Principles of Care.

1. Dignity
2. Infection Control
3. Safety
4. Communication
5. Independence
6. Privacy

List of Twenty-Five Tested Skills (will be edited to meet Vermont & Federal Guidelines)

1. Hand washing (at a real sink, using soap and water)
2. Put on and Remove Gown and Gloves
3. Position the Resident in a Fowler's Position
4. Position the Resident in a Side-Lying (Lateral) Position
5. Transfer the Resident from Bed to Chair Using a Gait Belt
6. Make an Occupied Bed
7. Brush the Resident's Dentures
8. Mouth Care for an Unconscious Resident
9. Give the Resident a Partial Bed Bath (Upper Body)-Face-Neck-Chest-Abdomen-Arms-Hands
10. Give the Resident a Partial Bed Bath (Lower Body)-Hips-Legs-Feet

11. Give the Resident a Back Rub/Massage
12. Give the Resident Perineal Care (Female Resident)
13. Shave the Resident
14. Clean and Trim the Resident's Fingernails
15. Dress the Resident with a Paralyzed Resident
16. Serve the Meal Tray and Feed the Paralyzed Resident
17. Measure and Record the Height of a Resident Using an Upright Scale
18. Measure and Record the Weight of a Resident Using an Upright Scale
19. Assist the Resident with the Bedpan
20. Count and Record the Resident's Radial Pulse
21. Count and Record the Resident's Respirations
22. Take and Record the Resident's Blood Pressure
23. Perform Passive Range of Motion (Upper Body)-Shoulders-Elbows-Wrists-Fingers
24. Perform Passive Range of Motion (Lower Body)-Hips-Knees-Ankles-Toes
25. Assist the Resident in Walking Using a Gait Belt

PROPOSAL STEPS AND IMPLEMENTATION TIMELINE

The proposal can be implemented within 4 months after acceptance.

Date	Task
May 1 2018	Acceptance of Proposal
May/June/July 2018	Set up new regional testing sites
May 2018	Start recruitment and hiring process for In-State Nurse Coordinator & Nurse Evaluators in Vermont
May 2018	Contact all training programs and schools of new testing organization, start dialogue of upcoming workshops. Ask training programs if they would like to be a testing facility. Send requirements for upcoming site evaluations.
May 2018	In-Person Meeting with ARC Senior and Program Managers and DAIL for introductions, additional information and plan of action discussion
June 2018	Work with DAIL to ensure all new forms are compliant with federal regulations and meet all state requirements
June 2018	Hire and train In-State Nurse Coordinator
June/July 2018	Work with DAIL teams on comprehensive data collection and performance based reports
June/July/August 2018	Hire and train newly hired Nurse Evaluators
June/July 2018	Conduct site evaluations for regional and in-facility testing locations
July/August 2018	In-person and webinar based workshops for training programs and schools
July/August 2018	Start scheduling upcoming test dates-website will be live for test dates after August 1.
September 1, 2018	Go Live Date

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** timeline will change throughout the implementation process. Additional steps and date changes are normal during a project and ARC will notify DAIL as changes occur.*

Price Quotation/Proposed Reimbursement

Written and Skills	$130.00
Written Test Only	35.00
Clinical Test Only	95.00
Oral Test Only	35.00
No Show/Rescheduling Fees:	
Knowledge and Clinical Skills Tests	40.00
Knowledge Test (Same Price for Written/Oral)	20.00
Skills Only	20.00

**The contents and attachments are proprietary and highly confidential in nature. Please handle the documents appropriately to ensure the security and integrity of the American Red Cross Competency Evaluation Program*

American Red Cross

Competency Evaluation Program
Nurse Assistant Testing
431 18th Street NW
Washington DC 20006
www.redcross.org

March 30, 2018

Scanned original signature of the individual who is authorized to submit the proposal on behalf of the American Red Cross Competency Evaluation Program

Robyn Blaschak
Senior Manager

United Way

OFFICE OF PROFESSIONAL LICENSURE AND CERTIFICATION
STATE OF NEW HAMPSHIRE
DIVISION OF HEALTH PROFESSIONS
121 South Fruit Street, Suite 102
Concord, N.H. 03301-2412

PETER DANLES
Executive Director

Sheri Walsh
Division Director

Board of Nursing 603-271-2323
Nursing Assistant 603-271-6282

Fax: 603-271-6605

February 16, 2018

Robyn Blaschak

Senior Manager/ Competency Evaluation Program

American Red Cross Nurse Assistant Testing

431 18th Street NW

Washington, DC 20006

Dear Ms. Blaschak,

The letter is written to attest that the American Red Cross has been an administrator of the competency evaluation exam for nurse aides in New Hampshire since 2001. The American Red Cross has done due diligence with updating the board on updates to the exam through scheduled meetings with the board staff. The American Red Cross is in good standing with the New Hampshire Board of Nursing.

For the Board,

Denise M. Nies MSN, RN, BC

Board Administrator

The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Division of Health Care Facility Licensure and Certification
99 Chauncy Street, Boston, MA 02111

CHARLES D. BAKER
Governor

KARYN E. POLITO
Lieutenant Governor

MARYLOU SUDDERS
Secretary

MONICA BHAREL, MD, MPH
Commissioner

Tel: 617-753-8000
www.mass.gov/dph

March 7, 2018

Melissa Pardee, Nurse Aide Registry Coordinator
Division of Health Care Facility Licensure and Certification
Massachusetts Department of Public Health
99 Chauncy Street, 11th Floor
Boston, MA 02111

RE: American Red Cross Letter of Reference

To Whom It May Concern:

The American Red Cross has been an administrator of the competency evaluation exam for nurse aides in Massachusetts for 22 years. The Red Cross is responsive to questions and concerns from both the Massachusetts Department of Public Health (the Department), as well as its constituents.

In 2017, the Department issued a request for responses for the Massachusetts Nurse Aide Competency Evaluation/Registration Renewal and Tracking Program. At the conclusion of the review process, the Department selected to retain the Red Cross as its vendor for the aforementioned program.

If you have any questions, please contact me at (617) 753-8020.

Best Regards,

Melissa Pardee

[redacted]

PROFESSIONAL PROFILE

- A senior level director positioned to deliver leadership excellence, proven resource maximization methodology, innovative operational efficiency, and cost reductions for nonprofit and for profit organizations.
- Experienced across core business and operational development functions including finance and compliance meeting all relevant statutory and mandatory requirements, working within the framework of the company's core values and mission statement.
- Accomplished operations and performance management professional with solid operations, strategic-planning, business-expansion, and organizational design experience.
- Motivated achiever and proven bottom-line contributor with solid record of revenue recovery and cost reductions through process redesign, savvy contract negotiations, organizational reengineering, and human- resources management.
- Visionary leader and highly capable change-agent that consistently refines and revitalizes strategies and procedures, introduces innovation, design change, and facilitates solutions-driven team collaboration.
- Enthusiastic problem-solver with keen ability to rapidly assess diverse situational challenges, develop action plans, and lead team to meet or exceed targeted goals.
- Effective communicator and relationship-builder with superior detail orientation that gathers and imparts information effectively across all management, department, and discipline levels and engenders collaborative spirit, consistently resulting in extraordinary outcomes.

AREAS OF EXPERTISE

+ Financial Accounting/Analysis/Reporting
+ Full Cycle Budgeting & Forecasting
+ Regulatory Compliance Management
+ Operational & Leadership Excellence
+ Strategic Business Planning & Development
+ Human Resource Strategy & Objectives
+ Policy Development & Implementation
+ Talent Acquisition & Retention
+ Compensation & Benefits Administration
+ Problem Solving & Change Management

PROFESSIONAL EXPERIENCE

American Red Cross
Washington, District of Columbia
Senior Manager-Competency Evaluation Program-Nurse Assistant Testing January 2015 to Present

- Reports to Vice President/PHSS Customer Operations & Nurse Assistant Program Management. Develops and executes on objectives to achieve both program and revenue goals.
- Provides high-level management oversight of the various state testing programs' daily operations.
- Provides guidance and support to managers in the day to day management of operations.
- Builds financially sound, executable, data driven business strategies that will lead to revenue and program growth. Develops and manages an approved forecast and budget.
- Creates, updates and maintains data analysis and generates monthly financial reports.
- Human Resource Management. Designed and implemented comprehensive compensation analysis tools that drastically reduced time spent generating employee data needed for assessments and freed time to focus on strategic initiatives.
- Continues to master complexities of business operations and strategies to assess revenue preservation and provides sound advice on compensation strategies.
- Responsible for building partnerships with testing vendors and the various state regulatory agencies. Negotiates and secures contracts.
- Works extensively with contractors to set performance standards, monitor performance, suggest improvements and ensure compliance.
- Coordinates and implements the capacity management and deployment of state testing examinations for quality assurance and resource optimization.
- Work with real estate to plan and design proper testing space allocation.

American Red Cross
Philadelphia, Pennsylvania
Program Manager II-Pennsylvania Territory-Nurse Assistant Training (NAT) December 2013 to January 2015

- Management and evaluation of NAT program curriculum, instructors, administrative staff and student NAT training.
- Responsible for the expansion and delivery of multiple site NAT and/or other allied health programs in a defined geographic area, which may be multi-county or even state-wide.
- Responsible for building partnerships with fixed training sites for classroom and clinical sites, securing state licenses and program approval, recruitment and on-boarding and processing of qualified instructors to meet state and Red Cross requirements; and supervising paid and volunteer staff in the assigned area.
- Coordinates and implements the capacity management and deployment of the entire product line.
- Develop, implement & manage program strategies, goals and performance.
- Provides technical support in the preparation of grant proposals, government contracts and other support initiatives in the development and implementation of a quality NAT program.
- Develops and maintains positive external working relationships supporting the development and delivery of NAT program services to the community.

Accomplished Medical Billing & Management Services, L.L.C.
Toms River, New Jersey
Owner and Principal

April 2004 to December 2013

- Hired as an independent consultant for private, group or hospital based practices.
- Attend on site meetings with medical practitioners and facilities. Heads the proposal preparation, negotiates and secures contracts.
- Practice management and credentialing for new physicians or physicians who are starting independent practices.
- Work directly with the insurance company, healthcare provider, and patients to get claims processed and paid.
- Reviewing and appealing unpaid and denied claims.
- Handling collections on unpaid accounts.
- Responsible for full cycle accounting.

Country Manor Nursing & Rehabilitation Center
Toms River, New Jersey
Saint Barnabas Healthcare System
Human Resources Generalist

May 2006 to September 2006

- Responsible for recruitment, interviewing, screening and hiring of new employees.
- Filled positions for assigned departments using established processes and guidelines.
- Retained all confidential personnel information.
- Responsible for the Human Resources segment of orientation for new hires with compliance to company policy and basic office training policy.
- Maintained relationship with insurance carrier regarding workmen's compensation incidences.
- Reviewed all Salary/Change of Position forms for completeness and accuracy.
- Acted as a resource for employees regarding career development and general human resources policies and procedures.
- Collaborated with department managers on job design, job description preparation, and criteria based performance evaluations and compensation/benefit issues for existing and newly created positions.
- Conducted exit interviews. Coordinated mailing of Exit Questionnaires.
- Established and maintained effective working relationships with the assigned departments leadership and associates serving as a liaison between these primary customers and the Human Resources Department for all HR needs.
- Served as a consultant/mediator for management and staff of assigned departments on issues related to policy interpretation and application. Actively participated in finding resolution to actual or potential employee relations issues or concerns.

ADIMA ScripSolutions (subsidiary of MIM Corporation/ BIOSCRIP)
Livingston, New Jersey
ADIMA-A high tech, specialty pharmaceutical company specializing in home infusion therapy.
Director of Business Operations

December 2001 to April 2004

- Direct all aspects of Business Operations including Human Resources.
- Maintain accurate financial records. Control all associated operating costs according to the prevailing annual budget forecast.
- Full payroll function, biweekly for Livingston and Elmsford, weekly for per diem employees.
- Calculated commissions for sales representatives; provided analysis and budgets for President.
- Accounts payable and expense report management.
- Produced revenue reports for per diem staff and agency billing.
- Generated quarterly budget spreadsheets for President.
- Responsible for recruitment, interviewing, screening and hiring of new employees, including nursing and pharmacy staff.
- Retained all confidential personnel information. Enrolled and maintained records for all benefits including medical, dental, prescription, life, disability and 401K plans.
- Responsible for the orientation of all new hires with compliance to company policy and basic office training policy to ensure compliance with regulatory, governance and internal processes and procedures.
- Benefit administration, management of sick time, FMLA, LOA, vacation, time off scheduling and tracking. Coordination with departmental directors regarding disciplinary actions, promotions, performance reviews, terminations and accommodations. Conducted exit interviews, reported to upper management of employee issues.
- Implement new operation processes and procedures to increase margin, educe expense and improve operational functions and performance standards. Maintained company handbook.
- Work collaboratively with departmental leadership to improve employee relations and leadership development
- Responsible for office operations, equipment and facility maintenance. Maintained all documentation for security, Information Technology compliance, insurance and office administration. JCAHO certified facility, spearheaded recertification project in 2003.
- Performed monthly Company Site Environmental Assessment Inspection to maintain compliance.
- Supervised and mentored the administrative support staff. (10 direct reports)

EDUCATION

William Paterson University
Accounting-Business Law

[redacted]

PROFILE

I am a hard-working, energetic, responsible individual interested in becoming part of a team that will allow me to apply my skills in a meaningful way. I will bring efficiency, accuracy, attention to detail, eagerness to learn and a positive attitude to the team. I will also bring my computer experience, which ranges from Microsoft programs to various accounting and database tracking programs and my wide range of human resource management and supervisor experience which has involved both paid staff and volunteers in long and short term situations.

EXPERIENCE

January 2018-Present — American Red Cross State Testing Office — Peabody, MA

Program Manager

- Oversee, plan and manage the day to day operations of the Nurse Assistant Testing Program and manage customer relationships with vendors and contracted states
- Provide high level management oversight of the various testing programs' daily operations
- Set performance standards, monitor performance and ensure program compliance
- Review monthly performance reporting for candidate scheduling, phone answering and other data as required
- Work in conjuction with senior leadership to develop and execute objectives to achieve both program and revenue goals

2010-2017 — American Red Cross State Testing Office — Peabody, MA

Program Coordinator

- Took over scheduling of Nurse Aide State testing for MA, maintaining and improving relationships with test sites, test administrators and candidates
- Reported to DPH on a weekly and quarterly basis as well as to other agencies as needed
- Cross trained in all areas of operation to be available to assist wherever needed in department
- Updated systems and procedures to accommodate changing software and reporting requirements and taught new systems to staff as needed

2005-2010 — American Red Cross of Massachusetts Bay — Haverhill, MA

Administrative Assistant

- Oversaw volunteers daily, as well as during large influxes due to disaster
- Updated system of tracking donations to accurately account for and acknowledge $913,000 raised in 6 month for hurricane relief
- Assisted all departments in updating procedures and documentation in Manual of Policies and Procedures
- Key participant in transition from independent chapter serving 25 cities and towns to becoming satellite office of larger Red Cross chapter serving nearly 150 cities and towns

Continued

2002-2005 Linens N Things Chelmsford, MA & Salem, NH

Merchandise Manager

- Took over existing departments and retrained staff. Also interviewed, hired and trained new staff
- Updated office procedures and executed new ones to implement goals and objectives set by corporate offices
- Participated in new store opening which involved training entire new staff and establishing systems storewide
- Helped lead by example to improve customer service store wide

1998-2002 Michaels Arts & Crafts Burlington, MA

Office Manager/ Assistant Manager

- Oversaw interviewing, hiring and training of associates
- Wrote work schedules, ordered merchandise and stocked supplies within allotted budget
- Responsible for ensuring that internal audit standards were upheld at all times
- Responsible for cash and charge reconciliations and bank deposits daily

VOLUNTEER EXPERIENCE

2009-Present MSPCA at Nevins Farm Methuen, MA

- Mentor new large animal volunteers to ensure that the animals receive the best care possible while keeping the animals, staff, volunteers and visitors safe
- Help with various fundraisers and special events including Benefit Beach and Trail Rides, Wine Tasting Art Shows and Holiday Feast for the Horses
- Provide care for all animals in the shelter in the form of food, shelter and water. Also, when possible, provide assistance with handling and grooming the animals

EDUCATION

2011	BS in Business Administration, UMASS Lowell	Lowell, MA
2005	Certified Nurse Assistant Training	Ward Hill, MA
1995	Woburn Senior High School	Woburn, MA

INTERESTS

Horseback riding, hiking, knitting, crochet, beadwork, crafts, home renovation. Volunteer at area music festivals.

REFERENCES AVAILABLE UPON REQUEST

[redacted]

PROFESSIONAL SUMMARY

Dedicated Program Coordinator motivated to maintain customer satisfaction and contribute to company success.

CORE QUALIFICATIONS

- Excellent work ethic
- Energetic work attitude
- Adaptive team player
- Courteous demeanor
- Inventory control familiarity
- Telephone inquiries specialist

EXPERIENCE

09/2007 to Current

Program Coordinator
American Red Cross — Peabody, MA
Manage and maintain all Certified Nursing Assistant license renewals in the state of Massachusetts. Liaison to MDPH to generate certificates for processed renewals weekly. Generate and send reports and invoices to MDPH. Responsibl processing renewal billing invoice monthly. Process and return problem renewc timely manner. Handle customer inquiries and return phone calls in a timely mc Cross-trained to help with co-workers daily tasks. Support program operations c directed by my program manager.

07/1993 to Current

Bartender
Winthrop Elks — Winthrop, MA
Maintained full knowledge of bar and menu items and made recommendations Prepared mixed drinks; poured wine, beer and nonalcoholic beverages. I was responsible for scheduling bartenders for fill-ins and functions.

09/1990 to 12/1995

Administrative Assistant
Commonwealth of Mass — Boston, MA
Managed the receptionist area, including greeting visitors and responding to telephone and in-person requests for information. Managed the day-to-day calendar for the agency's Deputy Director. Responsible for checking in and out all agency motor vehicles.

06/1985 to 10/1990

Inventory Control Office Coordinator
Libby Owens Ford — Woburn, MA
Responsible for overseeing all customer service representatives taking orders for c glass distribution to auto glass retailers. I maintained all auto glass inventories.

09/1979 to 05/1985 **Billing Office Coordinator**
Safelite Auto Glass – Cambridge, MA
Responsible for billing all auto glass accounts. Over saw all customer service activity. Interviewed, hired and trained new quality customer service representatives.

EDUCATION

1979 **High School Diploma:** Business
Winthrop High School – Winthrop, MA, USA

REFERENCES UPON REQUEST

Objective
Administrative position where I demonstrate my dedication to excellence with an emphasis on building positive client relationships.

Work Experience

2012-present
American Red Cross Testing Office, 85 Lowell St, Peabody, MA 01960
Administrative Coordinator
- Provides administrative support to the Testing Office which conducts the Nursing Assistant State Exam and renews licenses under a contract with the Massachusetts Department of Public Health.
- Fields questions via phone, email or in person from approximately 60-100 clients per day.
- Processes approximately 100 score reports per week.
- Sorts and distributes daily incoming mail.

2012
CC&R Health Care Solutions, 80 Nahant Avenue, Winthrop, MA 02152
Consultant
- Assigned to the American Red Cross Nurse Assistant State Testing Office.
- Responded to and resolved approximately 100 client telephone inquires per day.
- Handled administrative tasks as required.

2005-2009
Smartcoms, Inc, 150 Market Street, Lynn, MA 01901
Client Relationship Manager
- Managed the sales, technical support and client billing areas for this wireless communications rental company.
- Assisted clients via telephone and email throughout the rental process.
- Prepared client billing and reviewed it with them as required.
- Prospected and developed new relationships.

1993-2005
The Parker Company, Inc, 152 Lynnway, Lynn, MA 01902
Executive Vice-President
- Co-Founded the travel company that specializes in vacation rentals in Italy.
- Developed the business from a start up to a multimillion-dollar international organization through dedication to excellence and sales, operations and problem solving skills.
- Facilitated successful travel experiences for over 100,000 clients.
- Built a team of up to 40 staff and managers in the US and in Italy.
- Coordinated a project to market our product in the United Kingdom which involved living and working there for 1.5 years.
- Wrote technical aspects and edited the company's annual catalog and website.

1987-1992
John Hancock Financial Services, Inc, Boston, MA
Financial Services Representative, Series 7 license

1980-1987
Bank of New England, Boston, MA
Operations and Shareholder Service Supervisor, Mutual Funds Dept.

Education University of Massachusetts/Boston, Boston MA
Bachelor of Arts/Sociology

Languages Pursuing proficiency in French and Italian.
References Furnished upon request.

[redacted]

Education: **Salem State College, Salem, MA**
Bachelor of Science in Biology
Concentration: Medical Technology

Coursework: Immunology, Quantitative Analysis, Cell biology, Organic Chemistry, Genetics, biochemistry

Certifications: CPR, Certified Nursing Assistant, First Aid

Computer skills: IBM: Microsoft Word, Excel, PowerPoint, Lab Solutions
Techniques:
Gas Chromatography — Gel Electrophoresis
Mass Spectrometry — UV-Vis
HPLC

Languages: Fluent in French and Creole

Experience: American Red Cross Testing Office — Peabody, MA
Administrative Coordinator — 2013- present

- Provide external communication and client support to maintain ultimate client satisfaction. Project a positive, professional image of the organization through in person and phone interactions.
- Address customer complaints and forward information to Program Manager if complaint unresolved.
- Sort and distribute daily incoming mail. Process daily and weekly mass mailings and follow up on returned and undeliverable envelopes.
- Review for accuracy and register completed candidate applications. Process various methods of payment while following the American Red Cross payment policies (RDC). Provide follow up on deficient applications and declined payments.
- Schedule applicants into regional and in-facility testing sites including cancelations and retakes.
- Assemble and ship all exam materials to Nurse Evaluator including testing supplies.
- Process reciprocities, duplicate certificate requests, testing scores, score reports and pass/fail reports.
- Other duties as assigned.

Human Service Options, Inc. Weymouth, MA
Program Instructor 2006 - 2012

- Assist residents in accessing community resources and in acquiring better daily living skills by promoting self independence
- Administer and monitor daily medication
- Provide conflict resolution and supervise daily activities

Carlton Willard Village Bedford, MA
Nursing Assistant 1999 – 2006

- Maintained patient's vital records
- Supervised in daily activities
- Specialized in patients with Alzheimer's

TAC Staffing Agency Malden, MA
Office Assistant 1997 – 1999

- Answered Phones
- Provided customer service
- Filed, arranged and assembled documents

Reference: **Available upon request**

Over 20 years of Customer Service Experience

Professional Experience

American Red Cross Testing Office
Administrative Coordinator November 2014- present

- Data Entry
- Process Renewals/Reciprocities/Duplicates Certificate
- Provide Customer Service Through Phone and in person if require
- Schedule Test
- Other duties assigned

Adecco Temp Agency/ ARC April 2014-Nov 2014

- Data Entry

April 2011- May 2012 Sales associate
Glitterati/Retail Store

- Customer service/sales associate

March 2009 - Feb 2010 Secretary
H&T Tax multi-service

- Customer service
- Quick books/Filing
- Payroll
- Translation
- Immigration

Oct 2004- Feb 2008 Retail
Victoria's Secret Peabody

Education

Winthrop High School- Winthrop, MA 1977-1981

Fisher College- Boston, MA 1981-1983

- Associate's Degree in Legal Secretary

Experience

American Red Cross- Peabody, MA 2006- Present

- Administrative Coordinator
- Provides external communication and client support to maintain ultimate client satisfaction. Projects a positive, professional image of the organization through in-person and phone interactions.
- Sorts and distributes daily incoming mail. Processes daily or weekly mass mailings and follows up on returned/undeliverable envelopes.
- Reviews for accuracy and registers completed candidate applications. Processes various methods of payment while following the American Red Cross payment policies (RDC). Provides follow up on deficient applications or declined payments. Generates admission and deficiency letters daily. Sends testing confirmation emails on a daily basis.
- Addresses customer complaints and forwards information to Program Manager if compliant could be resolved.
- Schedules applicants into regional or in- facility testing sites including cancellations and retakes. Responsibilities include scheduling testing for individuals requesting special accommodations.
- Assembles and ships all exam materials to Nurse Evaluator including testing supplies.

First Trade Bank- South Boston, MA 1990-2001

- Mortgage Loan Processor and Closer/Receptionist.
- Schedule Loan closings.
- Prepare, update and maintain department operating manual.
- Refer potential loan customers to in-house originator and provide assistance to originator as needed.
- Calculate closing figures for attorneys.
- Prepare and submit a monthly record of all closed loans at the end of each month for the previous month's closings. Prepare monthly, quarterly and annual reports for the loan officer.
- Enter loan requests accurately. Ensure accurate mortgage disclosures are sent within three business days. Order soft credit reports the same day as application is received. Send out loan verifications and order appraisal and flood zone certification as soon as requested. Resubmit loan package to underwriter on the same day as the appraisal is delivered to the bank.

Trimount Bituminous Company- Everett, MA 1996- 1998

- Data Entry Processor and Receptionist.
- Perform General clerical duties including typing, filing, answer phone, take messages, greet customers and mail out any correspondence that customer needed.

Peabody & Arnold- Boston, MA 1988-1990

- Word Processor/Typist.
- Assisted the word processing department in the overflow of documents that need to be completed from the attorneys and secretaries, including typing, editing and copying. Fixed and maintained printers and copiers throughout the firm.

[redacted]

Experience

09/2016 – PRESENT

Operations Manager / Recovery Centers of America

Danvers, Ma

- Assist the Operations Director with developing and implementing systems that improve operations while also assisting with planning, organizing and operating the facility.
- Work closely with the Director to ensure that services and operations are in compliance with all Federal and State certifications or licensing requirements. Ensuring that all HIPAA laws and patient confidentiality is adhered to while enforcing that proper guidelines and procedures required by Federal and State Law are followed by staff.
- Responsible for staff recruitment and retention, job descriptions and responsibilities, staff training, performance goals, accountabilities and evaluations. Responsible for creating and deactivating staff badges, reviewing footage when necessary and created the reception flow process for admissions and visitation.
- Ensure that all activities operate consistently and ethically within the mission and values of the company.
- Create schedules, manage the Operations team (reception, drivers, security), review patient complaints, address concerns and determine if disciplinary actions are necessary when policies are not adhered to.

06/2012– 07/2016

Executive Assistant / We Fix PCZ

Brockton, Ma

- Provided support for C-level executives while maintaining outlook and other business-related calendars or e-mail accounts for both the CEO and Vice President.
- Responsible for conducting monthly inventories, ordering and replenishing office supplies. Assisted technicians, coordinated meetings, reservations and appointments.
- Performed general clerical duties such as filing, faxing, copying and answering phones. Also ensured exceptional customer service and protected confidential information.
- Trained clerical staff on office equipment, policies and procedures, arranged for set up on new computers and logging of new employees in databases.

09/2012 – 05/2013

Intern / Salem Police Department

Salem, Ma

- Assisted the Captain of the Criminal Investigation Unit and his secretary with various daily assignments. Accompanied Detectives to court proceedings.

- Supported detectives within the division with random assignments such as writing basic reports, witnessed how fingerprint analysis programs and DNA recognition software are used by detectives to help solve crimes.
- Wrote reports based on my observations of hearings and interviews conducted by detectives at the police station.

09/2011 – 05/2012

Financial Aid Clerk/ North Shore Community College

Lynn, Ma

- Provided information and advice to students seeking financial aid, grants or applying for loans. Explained forms or other types of required documentation. Also issued and explained verification forms or supportive documents.
- Set up and maintained individual records on students receiving financial aid and any other type of assistance.
- Helped students fill out financial aid applications, provided applications for outside scholarships and corresponded with students to obtain paperwork.
- Other responsibilities included assisting faculty or staff with various daily assignments and performing general clerical duties.

09/2010– 05/2011

Customer Service Representative / Social Security Administration

Lynn, Ma

- Assisted management with establishing entitlement of benefits provided through Social Security Programs.
- Conducted face to face interviews and performed telephone screenings to gather information for individuals applying for social security benefits. I performed general clerical duties such as filing, faxing, copying, answering phones and scheduling appointments.
- Assisted with obtaining, clarifying, and verifying information used to analyze claims and make decisions regarding entitlement of benefits.

Education

MAY 2017

Bachelor of Science / Salem State University

Salem, Ma

- Major: Criminal Justice
- GPA: 3.8
- Alpha Phi Sigma Member since 2012

REFERENCES ARE AVAILABLE UPON REQUEST

[redacted]

PROFESSIONAL EXPERIENCE

Independent Consultant **01/11 – Present**

- Provide database software system development for business needs and processes.
- Develop internet website solutions.
- Maintain database systems for the American Red Cross Testing Office.

American Red Cross, Cambridge, MA **11/97 – 09/10**

Business Systems Analyst

- Developed Nurse Aides and Medication Administration Certification scheduling and reporting database systems.
- Performed requirements gathering, functional, and technical specifications.
- Prepared Business Process Models and prepared functional specifications.
- Developed and implemented software testing procedures.
- Developed and maintained SQL programs and reporting which was provided for departmental managers.
- Solutions-oriented IT Specialist with notable success coordinating a broad range of corporate IT initiatives while participating in planning and implementation of technical solutions in direct support of business objectives.
- Leadership abilities; able to coordinate and direct all phases of project-based efforts while managing, motivating, and leading project teams.
- Hands-on experience leading all stages of system development efforts, including requirements acquisition and documentation, design, development, testing, and support.

Operations Manager

- Managed operations of 10 staff members in a fast paced Red Cross Testing Office for CNA and Medication Administration Program Certifications.
- Developed computer system and interactive web site to track and maintain MA State Registry information of candidates.
- Prepared bids for State RFP's for contracted CNA and Medication Administration Program testing contracts.
- Prepared and monitored yearly multi-million dollar budget based on contractual agreements with the State Department of Human Services and the Department of Mental Health and Retardation.
- Provide overall IT support for network and applications.
- Administer acquisition, installation, maintenance and use of computers.
- Maintain appropriate security on network systems..
- Evaluate new applications and technologies.

Technical Support Specialist

- Supported and maintained Microsoft Server and 12 workstations.
- Developed and maintained custom Microsoft Access database system to schedule, maintain and report on CNA and Medication Administration Program testing candidates.
- Performed customized statistical queries utilizing MS Access and Microsoft SQL for management analysis.
- Developed routines for import and export of data from and to various applications including web sites.
- Troubleshot hardware and software issues.

PUTNAM INVESTMENTS, Boston, MA **03/87 – 10/97**

Project Manager

- Managed software development team.
- Supported departmental workstations and developed custom database programs using dBase and FoxPro.
- Developed voice response system for client interaction to retrieve Shareholder balances and activity.

Programmer Analyst

- Developed data collection system from various sources for import into system for fixed income security analysis.
- Member of development team to develop data warehouse for intranet access containing Fixed Income security data for use and analysis by Traders.
- Took part in JAD sessions, user meetings to gather requirements and develop specifications.

FIDELITY INVESTMENTS, BOSTON, MA

Team Leader **03/83 – 2/87**

- Supervised processing shift in large MVS mainframe environment to ensure timely and accurate processing
- Variety of experience in technology including large scale mainframe operations, PC's, database programming, system development.

EDUCATION:

- Bachelor of Science Degree in Business Administration – American International College – Springfield, MA
- Software Engineering Certificate – Northeastern University – Boston, MA

References available upon request

EXAM INFORMATION AND STUDY GUIDE

Since 1992, the Competency Evaluation Program,(CEP) of the American Red Cross (ARC) in California has tested over 375,000 candidates for skill competency. Candidates are qualified to become a Certified Nurse Assistant (CNA), after receiving a criminal record clearance from the Department of Justice (DOJ), completing training requirements approved by the California Department of Public Health (CDPH), and passing both parts (Skills Test and Written Test) of the Competency Evaluation Examination.

During the Skills Test, candidates will demonstrate four (4) skills learned from their training program. They will be evaluated based on the demonstration of each skill performed, including how to follow the Six Principles of Care. The Written Test consists of 60 multiple-choice questions with a two-hour time limit. YOU WILL RECEIVE SAME DAY TEST RESULTS.

YOU WILL WANT TO KNOW...

ABOUT ACCOMMODATIONS	page 2
THREE (3) ITEMS TO BRING TO THE EXAM / WHAT NOT TO BRING TO THE EXAM	page 3
ABOUT ADDITIONAL EXAM DAY INFORMATION / ABOUT PROFESSIONAL CONDUCT	page 4
ABOUT GUESTS / VISITORS	page 4
ABOUT PASSING BOTH PARTS OF THE EXAM	page 5
ABOUT NOT PASSING ONE OR BOTH PARTS OF THE EXAM	page 5
ABOUT PAYMENT POLICY / FEES / PHONE NUMBER / SCHEDULING / CANCELLATIONS	page 5
HOW TO VERIFY YOUR CNA CERTIFICATE ONLINE	page 5
ABOUT THE SIX PRINCIPLES OF CARE	page 6
WHAT ARE OPENING AND CLOSING PROCEDURES?	page 7
WHAT YOU NEED TO REMEMBER DURING THE SKILLS TEST	page 7
ABOUT COMMUNICATION WITH THE RESIDENT	page 8
HOW TO MAKE CORRECTIONS DURING THE SKILLS TEST	page 9
HOW TO PERFORM THE TWENTY-FIVE (25) SKILLS / ABOUT TESTING STATIONS A-B-C	pages 10-25

(Rev 12/2017)

ACCOMMODATIONS

The American Red Cross complies with the provisions of the Americans with Disabilities Act (ADA), providing reasonable and appropriate accommodations to individuals with documented disabilities.

If you have a documented disability that requires accommodations, you must:

1. **Obtain documentation from a Medical Authority or Specialist, including the following:**
    - Description of the disability as it falls under the Americans with Disabilities Act
    - Accommodations you were afforded during training
    - Accommodations you are requesting from the American Red Cross
    - Medical Authority or Specialist: Printed Name, Title, Professional License Number, and Signature
2. **Email documentation to:**
    - Mark Prill, Competency Evaluation Program Manager at mark.prill@redcross.org

The American Red Cross Competency Evaluation Program will consider all requests on a case by case basis. Once all documentation has been received, it can take up to 2 weeks for a final decision. You will **not** be tested without prior approval.

THREE (3) ITEMS TO BRING TO THE EXAM

Item No. 1—State Application (Form CDPH 283B)
This document must include correct information. The form must be signed and dated in ink (red, blue, or green) by a Registered Nurse, who is authorized to verify that the student has completed an approved CNA training program. The signature must include the title (, RN).

OR

Item No. 1—State Approval Letter (Form CDPH 932)
This document must include correct information, be signed and dated by an ATCS Representative, have the CDPH 99 stamp, and be embossed with a State Seal.

All names that appear on Form CDPH 283B or Form CDPH 932, must be present on:
(Valid Picture ID) **and** (Social Security Card or Individual Taxpayer Identification Number Card / Letter)

Item No. 2—Valid Picture ID (Bring one of the following):
State Driver's License
State Identification Card
High School ID Card (ages 16-18)
U.S. Military ID Card
Passport or Passport Card
Permanent Resident Visa /Alien Registration Card

Item No. 3 - Social Security Card or Individual Taxpayer Identification Number Card / Letter:
Laminated Social Security Cards or Individual Taxpayer Identification Number Cards are **not** acceptable.

All required IDs and documents presented at the test site must be current, originals (no copies), legible, and unaltered.

The only exception:
A copied 283B form must be completely re-signed and re-dated in ink (red, blue, or green) by the student ("applicant") and the Registered Nurse, who is authorized to verify that the student has completed an approved CNA training program. The signature must include the title (, RN).

WHAT NOT TO BRING TO THE EXAM

Candidates are **not** permitted to take personal belongings such as briefcases, large bags, study materials, books, or papers into the examination room. American Red Cross is **not** responsible for lost/misplaced items.

Study materials are not allowed at the exam site, including this document titled "Exam Information and Study Guide".

ADDITIONAL EXAM DAY INFORMATION

Recommended: Wear uniform/scrubs (any color) and non-skid, supportive shoes.
Bring a black or blue ink pen, non-perishable snacks, and water to last throughout the day.

Study materials are not allowed at the exam site.

Arrive 30 minutes prior to your appointment time. Set aside the entire day (8:00 am to 5:00 pm).
The length of the day will vary, depending on the number of students scheduled to test.

If you are **late** for your scheduled examination or do not bring all your required documents, you will **not** be allowed to test and must reschedule. There are no refunds.

The California Department of Public Health (CDPH) allows you three (3) testing opportunities.
If you leave without completing a test, you forfeit that testing opportunity.

American Red Cross is **not** responsible for lost/misplaced items.

ABOUT PROFESSIONAL CONDUCT

The following actions are **grounds for dismissal** during **registration, testing** or **waiting periods**.
The incident will be reported to the California Department of Public Health and your examination will be scored as an automatic failure.

- Use of cell phones and electronic devices (Except for **approved** word-to-word translators: Written Test)
- Use of study materials
- Giving help to or receiving help from anyone
- Cheating, verbal hints, coaching, pointing, suggestive body or facial gestures
- Causing a disturbance or engaging in any kind of *misconduct

  *Misconduct: Behaving in an improper or unprofessional manner

GUESTS / VISITORS

Guests, visitors, pets, or children are **not** permitted at the test site.

PASSING BOTH PARTS OF THE EXAM

There are two (2) parts to the Competency Exam; a Skills Test and a Written Test.

- When you pass the Skills Test, you will be given an **ARC Skills Completion Card** by the RN/Skill Evaluator.
- When you pass the Written Test, you will be given an **ARC Written Completion Card** by the Proctor.
- When you have passed both parts of the **ARC Exam**, you will be issued an **ARC Completion Certificate**.
- Successful completion of both parts of the exam and DOJ fingerprint clearance is required to be a CNA.
- The California Department of Public Health (CDPH) will mail your State *Certificate within six (6) weeks.

HOW TO VERIFY YOUR CNA CERTIFICATE ONLINE

- Verify your CNA Certification online at cvl.cdph.ca.gov (*This is a Certificate, not a License).

NOT PASSING ONE OR BOTH PARTS OF THE EXAM

If you are unsuccessful with either part of the exam, you will need to schedule a re-test:

- You are allowed three (3) attempts to pass both parts of the exam during the two (2) years that your CDPH 283B is valid or before the "must successfully pass the evaluation by" date on the CDPH 932.
- Your CDPH 283B is valid for two (2) years after the date that you **completed** your training program. The CDPH 932 has a "must successfully pass the evaluation by" date printed on it.
- You only pay for the part of the exam that you need to retake:
  $65.00 (Skills Test); $40.00 (Written Test) or $55.00 (Oral Test)
- For all testers that have one (1) **ARC Skills Completion Card** or one (1) **ARC Written Completion Card**:
  you will not be allowed to test without presenting your **ARC Completion Card**.
- For all testers that have previously tested with **NNAAP**:
  you will not be allowed to test without presenting all NNAAP **Exam Results Letters**.
- If you have not passed both parts of the exam, after your **3rd attempt**, the examiner will retain your Form CDPH 283B or Form CDPH 932 and your ARC Skills Completion Card or ARC Written Completion Card, if you have one of these cards. You must then be re-trained.

PAYMENT POLICY / FEES / PHONE NUMBER / SCHEDULING / RESCHEDULING / CANCELLATIONS

- **Call 800-RedCross or 800-733-2767** to **schedule, re-schedule,** or **cancel** an exam date.
- **Fees to schedule a test or re-test**: $65.00 (Skills Test); $40.00 (Written Test) or $55.00 (Oral Test)
- **Fees to reschedule or cancel**: $30.00
- Exam fees not used within **90 days** from receipt of payment will result in forfeiture of entire exam fee.
- After payment is processed a confirmation and receipt will be sent to you via e-mail.

THE SIX PRINCIPLES OF CARE

Each skill demonstration **MUST** include **ALL** *Six Principles of Care*. Memorizing the first six (6) letters in the word "Discipline" may be helpful to remember these principles.

1. D **Dignity**
2. I **Infection Control**
3. S **Safety**
4. C **Communication**
5. I **Independence**
6. P **Privacy**

Dignity

- Use respectful interaction with the resident at all times
- Maintain face-to-face contact whenever possible (speak directly to resident)
- Address the resident by his/her last name: (LEE, Mary H.) = "Mrs. Lee"

Infection Control

- Wash and/or sanitize hands before and after skill demonstration (repeat as needed)
- Wear gloves and PPE when necessary; use table barriers, trash & linen bags
- Carry linen/supplies away from uniform; keep linen off of floor

PPE - personal protective equipment

Safety

- Validate/check ID-band; greet resident using the actual name on the band
- Use correct body mechanics; lock brakes; use side-rails if necessary, ↑↓Bed
- Place call-light; provide comfort (be gentle, check alignment at FOB, use pillows)
- Be observant regarding supplies – use correctly

FOB - foot of bed

Communication

- Introduce yourself with your name and your correct title
- Use good interpersonal skills (conversation, interaction, give clear directions)
- Explain the procedure (using non-medical terms); report and record

Independence

- Ask permission to perform the skill (using non-medical terms)
- Encourage resident to make choices
- Encourage resident to manage as much of care as possible

Privacy

- Knock on door before entering
- Pull the curtain; shut the door
- Drape the resident when necessary; do not over/unnecessarily expose resident's body

"OPENING PROCEDURE"

Beginning the skill demonstration:

1. Wash /Sanitize hands
2. Knock; pause for a response; enter the room
3. Greet the resident (example: "Good morning")
4. Introduce yourself with name/title (example: "I'm Paul, your nurse assistant")
5. Ask for permission to check the ID band (read name on band)
6. Respectfully greet the resident by name (example: "Nice to meet you, Mr. Lim")
7. Explain procedure and ask permission to perform skill.
8. Gather supplies (you must really gather all supplies you will need)
9. Provide privacy

"CLOSING PROCEDURE"

Ending the skill demonstration:

1. Re-verify that your resident is positioned comfortably and is correctly aligned
2. Place resident's bed in lowest position
3. Raise side rail or rails (if necessary)
4. Place and secure the call light within reach of the resident's hands
5. Place over-bed table within reach (i.e. holds phone, tissues, water, if applicable)
6. Open privacy curtains
7. Wash / Sanitize hands
8. Say "goodbye" and Exit room
9. Report and record

REMEMBER TO DO "DURING the SKILLS TEST"

1. Maintain a confident and professional manner. Speak up. Be natural. Breathe.
2. DO NOT RECITE "skill steps" to the RN/Skill Evaluator.
3. DEMONSTRATE the skill as you would do it in the work situation.
4. You WILL DEMONSTRATE the skill in order for the RN to EVALUATE your performance.
5. Use good interpersonal skills (conversation, interaction, give clear directions and explanations).
6. Interact with the resident in a PROFESSIONAL manner.
7. When speaking to the resident, maintain face-to-face contact when possible.
8. Remember to USE good body mechanics while performing your skill.
9. Demonstrate safety (YOUR safety, RESIDENT'S safety, EQUIPMENT safety).
10. Be safe and gentle when moving the resident's body (do not cause pain/injury).
11. Check alignment (stand at FOB to look at resident's body from "head-to-toe").
12. Check for comfort (adjust pillows; check head, shoulders, bony areas, joints).
13. Demonstrate good infection control measures (throughout skill performance).
14. You must include ALL *Six Principles of Care* during each skill demonstration.

FOB - foot of bed

COMMUNICATION WITH THE RESIDENT DURING OPENING PROCEDURE

Opening Procedure:

1. Wash your hands before entering room; Simulate a "Knock" on the Door—while saying *"knock, knock"*
2. Introduce yourself and identify resident by checking the ID band— *"Good morning, my name is Sean McKnight and I'll be your Student Nurse Assistant today...may I check your ID band, please? (Check the band; read/say resident's name aloud). "Thank You... I see that your name is Mrs. Jane Wilson... it's very nice to meet you, Mrs. Wilson."*
3. Explain procedure/ask for permission to perform skill— *"Mrs. Wilson, the Nurse has asked me to take your blood pressure at this time. Is that alright with you?" ... (Resident's response is "Yes") ... "Thank You, Mrs. Wilson."*
4. Gather supplies— *"Mrs. Wilson, I'll go wash my hands again and gather the supplies I'll need...here's your call light (Place it within reach of resident's hand) ...I'll be back in just a moment."*
   - Collect all supplies needed, carrying them away from your uniform.
   - Place a barrier (example: a blue chux) on over-bed table and neatly arrange your supplies.
   - Forgot some supplies? Ensure resident's safety; wash hands; tell resident where you are going.
5. Provide privacy—Simulate closing the curtain and the door while saying *"I'll close the door and the curtain for your privacy now."*

COMMUNICATION WITH THE RESIDENT DURING CLOSING PROCEDURE

Closing Procedure:

1. Position resident comfortably in correct body alignment— *"Would you like to get back into bed?" Stand at foot of bed and say "I'm just checking to be sure you are comfortably aligned in bed." Or ask the resident, "Would you like to remain seated on your bed?"*
2. Raise side rails— *"I'll raise your side rails now, for your safety" (Tell/warn resident ahead of time). Or say to the resident "If there is an order for side rails, I will raise/lower your rails..."*
3. Return bed to lowest position— *"I'll be lowering your bed now, for your safety" (Tell/warn resident ahead of time).*
4. Place call light within reach— *"Here's your call-light Mrs. Wilson, I'm clipping it right here, next to your hand. Can you test it now by pressing the red button? Great...that's exactly how it works."*
5. Open privacy curtains— *"I'm about to leave now, Mrs. Wilson...would you prefer your curtains open or closed at this time?"*
6. Say goodbye— *"Let me double check to make sure your phone, water, TV control and tissues are within easy reach. Did you need anything else before I go? OK, Goodbye Mrs. Wilson...if you need anything, just press the call button."*
7. Wash your hands, after completing your procedure, just before you walk out of the door to leave resident's room; next, you will report and record—you can say to the resident: *"I'll report your blood pressure to the Nurse and record it in your chart."*

HOW TO MAKE CORRECTIONS DURING THE SKILL EXAM

Skill corrections that ARE allowed:

1. You can **verbally correct** any of the Six Principles of Care, **however, some verbal corrections will also require a re-demonstration.** The RN/Skill Evaluator will tell you if a re-demonstration is necessary. **You have 10 minutes to complete each skill.** If a correction is made and time allows, the RN/Skill Evaluator will ask you to re-demonstrate by saying *"Please show me how you would do that"*. You will then receive credit for your corrected demonstration.
2. When you are done with your "Closing Procedure", the RN/Skill Evaluator will say, *"Looking at the Six Principles of Care, which are posted on the wall, is there anything that you would like to add, change, or correct about your skill demonstration?"*
3. This is the time that you will briefly pause to think about the skill that you just **demonstrated.** Carefully look at each of the Six Principles of Care. Thoughtfully review each Principle to be sure that you **demonstrated** all Six Principles of Care during your skill.
4. Review **aloud** what you did (or should have done) for each of the Six Principles of Care. **Speak up,** to be sure you receive credit for all corrections made at each Skill Testing Station. **Tell the RN/Skill Evaluator** if you have corrections while you are still being evaluated at that Station.

Examples of how to review each principle

- *"for **Dignity,** I **would have** called her by her last name..."*
- *"for **Infection Control, I should have** washed my hands before and after the skill..."*
- *"for **Safety, I didn't** check the ID band ..."*
- *"for **Communication,** I introduced myself, but I **didn't** explain what I was going to do..."*
- *"for **Independence, I could have** encouraged my resident to hold the mirror/ hold the basin..."*
- *"for **Privacy, I should have** knocked on the door and I **should have** closed the curtain*

Skill corrections that are NOT allowed:

1. You may **not** simply "read" the principles aloud. You will **not** get credit for saying *"I would do more Dignity, I would do more Infection Control, Safety, Communication, Independence, and I forgot to do Privacy too!"* **See examples (above) for what to say when corrections are made.**
2. You may **not** correct your **entire** skill demonstration "**verbally**".
3. You must re-demonstrate certain verbal corrections; You will **not** get credit for simply **saying**:

- *"I should have put the gait belt on a little tighter. It was too loose..."*
- *"I would have raised the head of the bed a little higher..."*
- *"I really should have wiped from front to back. Not back to front..."*

HOW TO PERFORM THE TWENTY-FIVE (25) SKILLS

These guidelines are not intended to replace your teacher's instructions, textbook, or your school's curriculum.
You will demonstrate four (4) skills - Handwashing and one (1) skill at Testing Stations A, B, and C.

ENTIRE LIST OF TWENTY-FIVE (25) SKILLS

You will randomly choose one (1) Skill Card when arriving at each of the three (3) Testing Stations.

1: Handwashing (at a real sink, using soap and water)
2: Put on and Remove Gown and Gloves
3: Position the Resident in a Fowler's Position
4: Position the Resident in a Side-Lying (Lateral) Position
5: Transfer the Resident from Bed to Chair Using a Gait Belt
6: Make an Occupied Bed
7: Brush the Resident's Dentures
8: Mouth Care for an Unconscious Resident
9: Give the Resident a Partial Bed Bath (Upper Body) - Face-Neck-Chest-Abdomen-Arms-Hands
10: Give the Resident a Partial Bed Bath (Lower Body) - Hips-Legs-Feet
11: Give the Resident a Back Rub/Massage
12: Give the Resident Perineal Care (Female Resident)
13: Shave the Resident
14: Clean and Trim the Resident's Fingernails
15: Dress the Resident with a Paralyzed/Contracted Arm
16: Serve the Meal Tray and Feed the Paralyzed Resident
17: Measure and Record the Height of a Resident Using an Upright Scale
18: Measure and Record the Weight of a Resident Using an Upright Scale
19: Assist the Resident with the Bedpan
20: Count and Record the Resident's Radial Pulse
21: Count and Record the Resident's Respirations
22: Take and Record the Resident's Blood Pressure
23: Perform Passive Range of Motion (Upper Body) - Shoulders-Elbows-Wrists-Fingers
24: Perform Passive Range of Motion (Lower Body) - Hips-Knees-Ankles-Toes
25: Assist the Resident in Walking Using a Gait Belt

Skill Testing Station – "Handwashing"
(Skill #) 1 - Each student will demonstrate Handwashing (at a real sink, using soap and water).

Skill Testing Station A – "Personal Care"
(Skill #) 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, and 19

Skill Testing Station B – "Vital Signs, Measurements, or Isolation"
(Skill #) 2, 17, 18, 20, 21, and 22

Skill Testing Station C – "Positioning, Transferring, Restorative Care, or Bedmaking"
(Skill #) 3, 4, 5, 6, 23, 24, and 25

Skill #1: Handwashing (at a real sink, using soap and water)

1. Remove watch, or push it up on your forearm, roll up sleeves.
2. Turn on water adjust temperature.
3. Wet hands and wrists. Apply soap.
4. Keep hands lower than elbows. Rub hands together to make a bubbly lather.
5. Re-wet hands/wrists and re-apply soap as needed.
6. Wash hands, fingers, and wrists for about 15 seconds (**not** under the water).
7. Rinse hands and wrists (avoid splashing), keep hands lower than elbows.
8. Let hands drip; reach for paper towels.
9. Dry hands and wrists thoroughly (from fingertips to wrist). Discard towels.
10. Use a new clean paper towel to turn off the faucet.
11. Discard paper towel.

Skill #2: Put on and Remove Gown and Gloves

1. Wash hands.
2. Choose appropriately sized gown and gloves.
3. Examine gown and gloves for any damage.
4. Put on the gown (with opening in the back).
5. Overlap gown to fully cover uniform in the back.
6. Tie gown (securely) at the neck then the waist.
7. Put on gloves.
8. Pull gloves up (over) the gown cuff. (OK to make thumb-hole in gown cuff)
9. Knock; enter, and proceed with "opening procedure".
10. Perform some form of patient care.
11. Perform "closing procedure".
12. Remove **PPE** (at the appropriate time and place), without contaminating yourself.
13. Dispose of **PPE** properly (in the appropriate container and location).
14. Wash hands; exit room.
15. Report and record.

PPE - personal protective equipment

Skill #3: Position the Resident in a Fowler's Position

1. Perform "opening procedure"
2. Verbally acknowledge resident's complaint of "having difficulty breathing".
3. Adjust **HOB** to appropriate level as quickly as possible.
4. Re-check patient's breathing.
5. Perform comfort measures (pillows, raising **FOB** to prevent sliding, etc).
6. Perform "closing procedure"
7. Report and record (resident's complaint, what you did to help, and the results of your actions).

HOB - head of bed
FOB - foot of bed

Skill #4: Position the Resident in a Side-Lying (Lateral) Position

1. Perform "opening procedure"
2. Use good body mechanics: raise level of bed, bend knees, spread feet apart.
3. Safely move the supine resident to the side (edge) of bed in 3-segments.
4. Cross resident's arms over chest or prepare correct arm in "stop-sign" position.
5. Cross ankles or bend the knee of the upper (top) leg.
6. Be sure side rail is up on the side resident is turned toward.
7. Place one hand on shoulder, the other on hip, and "log-roll" the resident.
8. Support resident's back by tucking a pillow, folded lengthwise, behind back.
9. Support resident's top arm with a pillow in front of chest; use hand roll if needed.
10. Place resident's top leg slightly forward, with knee bent; support top leg with a pillow.
11. Be sure that the top leg/foot does not rest on (or rub) the lower leg/foot.
12. Stand at **FOB** to see if resident's body is properly aligned.
13. Resident should not be lying on his/her arm or shoulder.
14. Adjust pillow to cradle/support resident's head/face comfortably.
15. Perform "closing procedure".

FOB - foot of bed

Skill #5: Transfer the Resident from Bed to Chair Using a Gait (Safety) Belt

1. Perform "opening procedure"
2. Place chair or wheelchair near the bed.
3. Remove/fold back wheelchair footrest and lock bed/wheelchair brakes (if used).
4. Raise **HOB** fully to assist resident to a sitting position.
5. Lower side rail nearest to chair.
6. To Dangle: place one arm behind resident's back and the other arm under the thighs.
7. Encourage resident to assist in turning to a sitting position, placing feet flat on the floor.
8. Assist resident with robe and non-skid shoes (may do prior to dangle).
9. Stand in front of resident to apply gait belt snugly around resident's waist, with room between resident's body and belt to grasp belt (with two hands) at each side of waist.
10. Place your knee, (furthest from wheelchair), between resident's knees.
11. Use a secure, underhand (palms-up) grasp to hold belt at each side of resident's waist.
12. May instruct resident to assist (to stand) by having resident pressing hands on mattress.
13. On the count of "three", assist resident to stand up, maintaining palms-up grasp on belt.
14. If belt loosens **upon standing**, assist resident to sit on the bed for all belt adjustments.
15. Turn, taking steps along with the resident, until resident is right in front of chair.
16. Lower resident into chair, then release your 2-handed grasp and remove gait belt. Remove belt carefully, lifting it away from resident's body (to avoid injury from friction).
17. Position wheelchair footrest and provide a lap blanket.
18. Perform "closing procedure".

HOB - head of bed

Skill #6: Make an Occupied Bed

1. Perform "opening procedure"
2. Remove and fold any reusable linen (blanket/spread) and place over a clean chair.
3. Raise side rail, roll resident away from you, towards opposite side.
4. Only rail down is on the side where you'll be working.
5. For resident's comfort, leave pillow under head and top sheet in place.
6. Wear gloves while handling soiled linens, then discard gloves and wash hands.
7. Loosen and roll all dirty bottom linens toward resident and tuck against back.
8. Secure ½ of clean (fitted) bottom sheet on the bare mattress, with minimal wrinkles.
9. Roll other ½ of clean (fitted) bottom sheet towards resident, tucking it under old sheets.
10. Flatten the rolled sheets and help the resident roll over the linen, towards you.
11. Raise the side rail; go to the opposite side; lower the side rail.
12. Remove dirty linens; place in linen bag (on FOB or on chair with barrier).
13. Pull clean bottom linens towards you and secure onto mattress with minimal wrinkles.
14. Center resident on back and comfortably aligned; raise both side rails.
15. Cover resident with clean top sheet. Resident can hold it as you remove the old one.
16. Place blanket/spread over top sheet and miter together at FOB; make a toe pleat.
17. Neatly fold hem of top sheet down over the blanket/spread.
18. Wear gloves (as necessary) to dispose of linens. Remove gloves and wash hands.
19. Perform "closing procedure".

FOB - foot of bed

Skill #7: Brush the Resident's Dentures

1. Perform "opening procedure"
2. Apply gloves. (Remove gloves, sanitize hands, and re-glove as needed)
3. Take dirty dentures (already in denture cup) and supplies to sink area.
4. Line bottom of sink with a washcloth or small towel. Turn on water without splash.
5. Place dirty dentures in emesis basin. Clean denture cup and fill will cool water.
6. Apply toothpaste (or denture cleanser) to toothbrush (or denture brush).
7. Brush all areas of dentures (on both sides of each plate) within sink area.
8. Handle dentures carefully by holding/brushing one plate at a time.
9. Rinse dentures under cool, running water.
10. Place dentures back in denture cup that is (filled with clean, cool water.)
11. Offer mouthwash solution/sponge-tipped swabs, emesis basin for oral hygiene.
12. Clean and store equipment. Dispose of linens and trash appropriately.
13. Remove gloves and wash hands.
14. Perform "closing procedure".

Skill #8: Mouth Care for the Unconscious Resident

1. Perform "opening procedure"
2. Apply gloves. (Remove gloves, sanitize hands, and re-glove as needed)
3. Gently position resident's head towards you. (Entire body may be turned to side)
4. Place a towel or waterproof barrier under head and over chest.
5. Place emesis basin under the chin, at side of resident's face, if resident is fully lateral.
6. Open packages of sponge-tipped swabs and/or lemon glycerin swabs.
7. Prepare a small cup of mouthwash/water solution to dip sponge-tipped swabs.
8. Gently open mouth and separate teeth with a padded tongue blade.
9. Clean entire mouth (roof, tongue, cheeks, teeth, gums, lips) --use sponge-tipped swabs for cleaning and glycerin swabs for stimulating moisture and refreshing.
10. Place used swabs directly into trash bag.
11. Dry resident's face. Remove basin, towels, and waterproof barriers.
12. Apply lip lubricant.
13. Clean and store equipment. Dispose of linens and trash appropriately.
14. Remove gloves and wash hands.
15. Perform "closing procedure".

Skill #9: Give the Resident a Partial Bed-Bath (Upper Body): Face-Neck-Chest-Abdomen-Arms- Hands

1. Perform "opening procedure"
2. Apply gloves. (Remove gloves, sanitize hands, and re-glove as needed)
3. Drape resident for warmth and privacy with a bath blanket.
4. Keep linens dry by placing a towel/waterproof barrier under limbs while washing.
5. Gently wash (with soap), rinse and pat-dry entire upper body, starting with face*.
6. Only uncover one area at a time to ensure warmth, dignity, and privacy.
7. Leave resident draped and comfortable when bath is completed.
8. Clean and store equipment. Dispose of linens and trash appropriately.
9. Remove gloves and wash hands.
10. Perform "closing procedure".

* may omit soap for face (as desired by resident)

Skill #10: Give the Resident a Partial Bed-Bath (Lower Body): Hips-Legs-Feet

1. Perform "opening procedure"
2. Apply gloves. (Remove gloves, sanitize hands, and re-glove as needed)
3. Drape resident for warmth and privacy with a bath blanket.
4. Keep linens dry by placing a towel/waterproof barrier under limbs while washing.
5. Gently wash (with soap), rinse and pat-dry entire lower body, starting with hips.
6. Only uncover one area at a time to ensure warmth, dignity, and privacy.
7. Leave resident draped and comfortable when bath is completed.
8. Clean and store equipment. Dispose of linens and trash appropriately.
9. Remove gloves and wash hands.
10. Perform "closing procedure".

Skill #11: Give the Resident a Back Rub (Massage)

1. Perform "opening procedure"
2. Apply gloves (if necessary).
3. Place resident in a comfortable side-lying position with side rail up.
4. Keep resident draped for warmth and privacy with a bath blanket.
5. Place towel on bed (behind back) to protect linens.
6. Only uncover back/partial buttocks area to ensure warmth, dignity, and privacy.
7. Squeeze lotion into palms and rub hands together to "warm" lotion.
8. Starting at the coccyx, gently rub resident's back in large, long, circular motions.
9. Work your way up to the shoulders, massage them and continue back down to coccyx.
10. Continue back rub using circular and/or long strokes for 3-5 minutes.
11. Assist resident into position of choice.
12. Cover resident with sheet (bed linens) and remove bath blanket.
13. Clean and store equipment. Dispose of linens and trash appropriately.
14. Remove gloves (if worn) and wash hands.
15. Perform "closing procedure".

Skill #12: Give the Resident Perineal Care (Female Resident)

1. Perform "opening procedure"
2. Apply gloves. (Remove gloves, sanitize hands, and re-glove as needed)
3. Gently assist resident into a supine position with knees bent and legs apart.
4. Place a linen protector under resident's buttocks.
5. Keep resident warm and completely draped with a bath blanket.
6. Only uncover perineal area/buttocks area to ensure warmth, dignity, and privacy.
7. Wash (using soap/peri-wash), rinse, and pat dry genital area from front to back (while resident is in supine position).
8. Wash (using soap/peri-wash), rinse, and pat dry rectal area from front to back (resident is in a side-lying position with side-rail up).
9. Use a different part of the washcloth/mitt for each wipe/stroke.
10. Remove gloves, wash, re-glove to assist resident into position of choice.
11. Cover resident with sheet (bed linens) and remove bath blanket.
12. Wear gloves to clean and store equipment. Dispose of linens and trash appropriately.
13. Remove gloves and wash hands.
14. Perform "closing procedure".

Skill #13: Shave the Resident

1. Perform "opening procedure"
2. Place barrier for supplies to maintain clean set-up.
3. Place clothing protector to resident's chest area prior to shave.
4. Assess skin for abrasions, moles, and/or direction of hair growth.
5. Check razor for rust, chips, or breaks.
6. Soften beard with warm, moist cloth before applying shaving cream.
7. Apply shaving cream to resident's face.
8. Apply gloves before shaving. (Remove gloves, sanitize hands, and re-glove as needed)
9. Hold skin taut to prevent nicks.
10. Shave face using downward strokes, in direction of hair growth.
11. Rinse razor often during procedure to remove hair/excess shaving cream.
12. Wipe/rinse resident's face of remaining lather after the shave.
13. Dry resident's face.
14. Offer resident a mirror.
15. Offer resident choice of aftershave or shaving lotion.
16. Remove towel from resident, clean equipment and return to proper area.
17. Dispose of razor in sharps container.
18. Dispose of linens and trash appropriately.
19. Remove gloves and wash hands.
20. Perform "closing procedure".

Skill #14: Clean and Trim the Resident's Fingernails

1. Perform "opening procedure"
2. Apply gloves. (Remove gloves, sanitize hands, and re-glove as needed)
3. Soak resident's hands/fingernails in a basin of warm water. Use soap to clean them.
4. Place towel under resident's hands for comfort and hygiene.
5. Push back cuticles gently with a washcloth and/or orange stick padded with cotton.
6. Use orange stick to clean under dirty fingernails.
7. Change water and rinse resident's hands.
8. Dry resident's hands thoroughly.
9. Use clippers to trim fingernails straight across.
10. Use nail file/emery board to smooth rough and sharp edges.
11. Offer lotion and gently massage resident's hands.
12. Dispose of linens and trash appropriately.
13. Return clippers to facility designated dirty area (or to resident's personal grooming kit).
14. Remove gloves and wash hands.
15. Perform "closing procedure".

Skill #15: Dress the Resident with a Paralyzed and Contracted Arm

1. Perform "opening procedure"
2. Allow resident choice of clothing/gown.
3. Pull the curtain and/or shut the door to maintain resident's privacy.
4. Keep resident covered with a bath blanket until fully dressed.
5. Dress the resident's paralyzed (weak) arm first, with the entire arm completely through the sleeve before dressing the other arm.
6. Move resident's arms gently and naturally without force.
7. Encourage resident to assist with non-paralyzed arm as able.
8. Dispose of linens and trash appropriately.
9. Perform "closing procedure".

Skill #16: Serve the Meal Tray and Feed the Paralyzed Resident

1. Perform "opening procedure"
2. Validate/check for the correct resident by reading name printed on ID band.
3. Offer resident a washcloth for hands before meal.
4. Clean over bed table before serving the meal.
5. Select correct meal tray from meal cart by checking the diet card located on tray.
6. Compare dietary card with resident's name; check for correct diet; be alert for allergies.
7. Verify that the food items on tray match diet (lift the plate cover "lid" to see the food).
8. Drape resident with a towel/clothing protector prior to feeding.
9. Open containers, cut meat, offer condiments, remove items NOT allowed, etc.
10. Check temperature of hot liquids/food items.
11. Allow the resident time to chew food; feed resident slowly, without rushing.
12. Offer liquids between swallows as needed.
13. Offer the resident choices during meal; encourage use of unaffected hand.
14. Offer the resident a washcloth for hands after meal.
15. Clean over-bed table after meal.
16. Dispose of linens and trash appropriately.
17. Remove tray and note % of meal eaten and cc's or ml's of fluids taken.
18. Perform "closing procedure".

#17: Measure and Record the Height of a Resident Using an Upright Scale

1. Perform "opening procedure"
2. Place chair at side of scale.
3. Gather paper towel (to place on scale platform).
4. Assist resident to put on non-skid shoes.
5. Drape resident with a robe.
6. Keep one hand behind/near resident while walking to the scale.
7. Place paper towel on scale platform.
8. Assist the resident to sit in the chair to remove shoes.
9. Assist the resident to step on the scale from the side, facing away from scale.
10. Raise height bar safely.
11. Lower height bar until it touches top of resident's head and is level with resident's head.
12. Read resident's height at correct location.
13. Record resident's height, using words, abbreviations, or symbols:
    FEET (feet, ft, or ') INCHES (inches, in, or ") CENTIMETERS (centimeters or cm)
14. Assist resident to step safely off of the scale.
15. Assist resident to sit in the chair and to put non-skid shoes back on.
16. Remove paper towel from scale platform and discard (gloves may be worn).
17. Assist resident back to room, keeping one hand behind/near resident while walking.
18. Perform "closing procedure".

* Note: Some testing sites have scales with **multiple** measurement functions.
Be familiar with **multiple ways** to record height:
feet/inches [ft/in] or inches [in] or centimeters [cm]

Skill #18: Measure and Record the Weight of a Resident Using an Upright Scale

1. Perform "opening procedure"
2. Place chair at the side of the scale.
3. Gather paper towel (to place on scale platform).
4. Assist resident to put on non-skid shoes.
5. Drape resident with a robe.
6. Keep one hand behind/near resident while walking to the scale.
7. Place paper towel on the scale platform.
8. Assist the resident to sit in the chair to remove shoes/robe.
9. "Zero" (balance) scale prior to the resident standing on the scale platform.
10. Assist the resident to stand on the scale platform.
11. Measure the resident's weight correctly by sliding weights to appropriate areas until scale indicator balances. (Begin with "large weight" clicked in place)
12. Adjust smaller weight indicator to balance.
13. Read scale and record the resident's weight in pounds (lb.) or kilograms (kg).
14. Assist the resident to step safely off the scale.
15. Assist resident to sit in the chair and to put non-skid shoes/robe back on.
16. Remove paper towel from scale platform and discard (gloves may be worn).
17. Assist resident back to room, keeping one hand behind/near resident while walking.
18. Perform "closing procedure".

*Note: Some testing sites have scales with **dual** measurement functions.
Be familiar with **both ways** to record weight:
pounds [lb] or kilograms [kg]

Skill #19: Assist the Resident with a Bedpan (Standard or Fracture)

1. Perform "opening procedure"
2. Apply gloves. (Remove gloves, sanitize hands, and re-glove as needed)
3. Assist resident to lift hips, slide linen protector and bedpan under buttocks.
4. Place the resident on the bedpan correctly with resident's buttocks well-centered over the opening of the bedpan. (Note the direction of the bedpan)
5. Drape the resident with a bath blanket/sheet while on the bedpan.
6. Remove gloves and sanitize hands.
7. Raise HOB for resident's comfort during bowel movement.
8. Leave call light within resident's reach, before leaving room--to allow privacy.
9. Return to room when resident signals or after no more than 5 minutes.
10. Lower HOB for resident's comfort during bedpan removal.
11. Wash hands and reapply gloves.
12. Turn resident to the side and remove the bedpan. Cover it and properly place it out of the way (on FOB or on chair with barrier).
13. While resident is on the side, wipe the resident from front to back.
14. Place soiled toilet paper into a prepared (cuffed) plastic trash bag.
15. Assist resident to lift hips; remove linen protector and discard it in the trash bag.
16. Discard gloves, sanitize hands, then raise side rail.
17. Reapply gloves -- take bedpan to the bathroom.
18. Observe any abnormalities in bowel movement (for reporting and recording).
19. Empty bedpan into toilet.
20. Clean and rinse bedpan and store in proper area.
21. Dispose of linens and trash appropriately.
22. Remove gloves and wash hands.
23. Perform "closing procedure".

HOB - head of bed
FOB - foot of bed

Skill #20: Count and Record the Resident's Radial Pulse

1. Perform "opening procedure"
2. Place resident's hand in comfortable resting position prior to counting pulse.
3. Place your fingertips correctly on the radial artery (thumb side of wrist).
4. Count the resident's radial pulse using a second-hand watch for one (1) minute.
5. Record the resident's radial pulse within (plus or minus) 5 beats of Evaluator's result.
6. Perform "closing procedure".

Skill #21: Count and Record the Resident's Respirations

1. Perform "opening procedure"
2. Avoid telling resident that respirations are being counted; you can say you are "taking vital signs" while pretending to take resident's pulse).
3. Count resident's respirations using a second-hand watch for one (1) minute.
4. Record resident's respirations within (plus or minus) 2 breaths of the Evaluator's recording.
5. Perform "closing procedure".

Skill #22: Take and Record the Resident's Blood Pressure

1. Perform "opening procedure"
2. Place resident's arm, with the palm up, in a comfortable resting position.
3. Clean the stethoscope's diaphragm/bell and earpieces with alcohol before use.
4. Feel for the resident's brachial artery on the inner aspect of the resident's arm.
5. Wrap the blood pressure cuff snugly around the resident's arm, approximately 1-2 inches above the antecubital area.
6. Correctly place the stethoscope earpieces in your ears.
7. Safely and correctly place the diaphragm of the stethoscope over the brachial artery.
8. Inflate the cuff.
9. Let the air out smoothly, at a safe rate (2-4 mm Hg per second), and listen for the first sound (the systolic reading).
10. Continue steady deflation as you listen for the last sound-- becomes quiet/almost silent (the diastolic reading).
11. Remember the readings to be able to record them.
12. Quickly let all air out of the cuff (completely deflate).
13. Record the blood pressure reading correctly within (plus or minus) 8mm Hg of the Evaluator's recording (systolic and/or diastolic).
14. Remove the blood pressure cuff from resident's arm.
15. Perform "closing procedure"

Skill #23: Perform Passive Range of Motion (Upper Body): Shoulders-Elbows-Wrists-Fingers

1. Perform "opening procedure"
2. Adjust bed to a safe and comfortable working height.
3. Lower side rail on the side you will be working on.
4. Ask resident to inform you if any pain or discomfort is experienced during the exercises.
5. Safely and gently exercise the resident's shoulder, elbow, wrist, and fingers, supporting and moving each joint gently and naturally (without force to limbs or joints).
6. Exercise each joint in as many patterns as are appropriate and safe for the joint.
   Examples of Patterns: Flexion, Extension, Abduction, Adduction, and Rotation
7. Each pattern must be demonstrated at least 3 times for each joint.
8. Ask frequently during the exercises if the resident is having any pain.
9. Repeat exercises on the other arm.
10. Perform "closing procedure"

Skill #24: Perform Passive Range of Motion (Lower Body): Hips-Knees-Ankles-Toes

1. Perform "opening procedure"
2. Adjust bed to a safe and comfortable working height.
3. Lower side rail on the side you will be working on.
4. Ask resident to inform you if any pain or discomfort is experienced during the exercises.
5. Safely and gently exercise the resident's hip, knee, ankle, and toes, supporting and moving each joint gently and naturally (without force to limbs or joints).
6. Exercise each joint in as many patterns as are appropriate and safe for the joint.
   Examples of Patterns: Flexion, Extension, Abduction, Adduction, and Rotation
7. Each pattern must be demonstrated at least 3 times for each joint.
8. Ask frequently during the exercises if the resident is having any pain.
9. Repeat exercises on the other leg.
10. Perform "closing procedure"

Skill #25: Assist the Resident in Walking Using a Gait (Safety) Belt

1. Perform "opening procedure"
2. Apply resident's non-skid shoes and robe.
3. Stand in front of resident to apply gait belt snugly around resident's waist, with room between resident's body and belt to grasp belt, with hands at each side of waist.
4. Ask resident if he/she is dizzy before assisting resident to stand.
5. Use a secure, underhand (palms-upward) grasp to hold belt at each side of resident's waist.
6. May instruct resident to assist (to stand) by pressing hands on mattress.
7. On the count of "three", assist resident to a standing position, maintaining palms-up grasp on each side of belt.
8. If belt loosens upon standing, assist resident to sit on the bed for all belt adjustments.
9. Maintain an upward grasp (one hand grasping belt is OK) while walking the resident.
10. Remain slightly behind and to the side of the resident while walking.
11. Ask resident if he/she is dizzy, tired, in pain, or short of breath while walking.
12. Return resident back to the room.
13. Hold belt (with two hands) at each side of the resident's waist, with an upward grasp, when seating the resident on the bed.
14. Remove belt carefully, lifting it away from resident's body (to avoid injury from friction).
15. Perform "closing procedure"

American Red Cross - Los Angeles Chapter
Compentency Evaluation Program

Test Date History from 1/1/2017 to 9/22/2017

SS#	Last Name	First Name	I.	Sex	DOB	Sponsor	Skills Test Test Date	Skills Test Result	Written Test Test Date	Written Test Result
[redacted]	[redacted]			F	[redacted]	S0037	1/21/2017	P	1/21/2017	P
				F	[redacted]	S1197	1/15/2017	F	1/15/2017	P
				F	[redacted]	S1197	2/5/2017	P	2/5/2017	
				M	[redacted]	S0655	7/9/2017	F	7/9/2017	
				F	[redacted]	S0944	6/26/2017	F	6/26/2017	P

October 3, 2017

AMERICAN RED CROSS – Los Angeles Chapter
CEP BATCH VALIDATION

TEST DATE/SITE 2017-09-16 - DYCORA TRANS HLTH/FRESNO

SSN	LAST NAME, FIRST NAME M.	RESULTS	BIRTHDAY	SEX	PHONE	ADDRESS	SPONSOR #
[redacted]	[redacted]	P -	[redacted]	F	[redacted]	[redacted]	S1523
		P -	[redacted]	F	[redacted]		S1523

0064

STUDENT CERTIFICATION REPORT

AMERICAN RED CROSS – Los Angeles Chapter
Nurse Assistant Competency Testing Program
The following have been certified as of September 29, 2017

NAME	SSN	TEST LOCATION	TEST DATE	SPONSOR #
[redacted]	[redacted]	ARC SACRAMENTO	9/17/2017	S1636
		CHCC	9/22/2017	S0647
		ARC SAN JOSE	9/22/2017	S1193

American Red Cross - Los Angeles Chapter
Compentency Evaluation Program
DHS Sponsor Summary Report

Test Date from 1/1/2010 to 12/31/2010

		Total Tests	SKILLS Tested	SKILLS Passed	SKILLS % Passed	WRITTEN Tested	WRITTEN Passed	WRITTEN % Passed
S1047	MARTINEZ ADULT EDUCATION	MARTINEZ	CA	94553-				
		51	27	23	85.19% Passed	24	24	100.00% Passed
S0842	MAXINE WATERS EMPLOYMENT	LOS ANGELES	CA	90059-				
		344	175	144	82.29% Passed	169	154	91.12% Passed
F1485	MEADOWOOD NURSING CENTER	CLEARLAKE	CA	95422-				
		28	14	14	100.00% Passed	14	14	100.00% Passed
S1050	MEDICAL CAREER COLLEGE DAY PROGRAM	FREMONT	CA	94538-				
		152	78	72	92.31% Passed	74	63	85.14% Passed
S1051	MEDICAL CAREER COLLEGE EVENING PROGRA	FREMONT	CA	94538-				
		141	68	66	97.06% Passed	73	61	83.56% Passed
S0446	MISSION COLLEGE	SANTA CLARA	CA	95054-				
		2	1	1	100.00% Passed	1	1	100.00% Passed
S0463	MISSION VALLEY ROP - JAMES LOGAN HS____	UNION CITY	CA	94587-				
		46	23	21	91.30% Passed	23	23	100.00% Passed
S0767	MISSION VALLEY ROP (4) HOUR ADULT	FREMONT	CA	94538-				
		12	6	5	83.33% Passed	6	6	100.00% Passed
S0043	MISSION VALLEY ROP/(2) HOUR	FREMONT	CA	94538-				
		59	29	29	100.00% Passed	30	29	96.67% Passed
S0214	MERCED COLLEGE	MERCED	CA	95340-				
		173	84	76	90.48% Passed	89	79	88.76% Passed
S0998	INTERNATIONAL CAREER COLLEGE_____	LOS ANGELES	CA	90010-				
		1	1	1	100.00% Passed	0	0	0.00% Passed
S0044	MODESTO CITY SCHOOLS R.O.P./ADULT	MODESTO	CA	95351-				
		250	125	118	94.40% Passed	125	117	93.60% Passed
S0126	MERCED COLLEGE-LOS BANOS CAMPUS	LOS BANOS	CA	93635-				
		91	47	30	63.83% Passed	44	36	81.82% Passed
S0699	MODESTO JR COLLEGE WEST CAMPUS_____	MODESTO	CA	95350-				
		166	85	83	97.65% Passed	81	79	97.53% Passed
S1142	MONSBEY COLLEGE	WATSONVILLE	CA	95076-				
		113	56	52	92.86% Passed	57	55	96.49% Passed
S1150	MONSBEY COLLEGE	WATSONVILLE	CA	95076-				
		1	1	1	100.00% Passed	0	0	0.00% Passed

October 20, 2015
Page 1

AMERICAN RED CROSS – Los Angeles Chapter

TEST DATE: 09/30/2015 - 10/09/2015

STUDENT	SSN	BIRTHDAY	SPONSOR #	SKILLS	WRITTEN	LAST TEST DATE
[redacted]	[redacted]	[redacted]	S0388			10/9/2015
			S1142			10/6/2015
			DHS99			10/8/2015

0067

American Red Cross - Los Angeles Chapter
Compentency Evaluation Program
FACILITY PROFILE REPORT

Test Dates from 1/1/2009 to 12/31/2009

ID #	Sponsor
S0829	AMERICAN RED CROSS

2715 EAST AVE. P PALMDALE CA 93550-

Total Test Given	Total Skills Test	Total Skills Pass	Total Skills Fail	Total Written Test	Total Written Pass	Total Written Fail
263	129	123	6	134	119	15

TOTAL SKILLS TESTS FAILED BY SKILL NUMBER

01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20
0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40
0	1	2	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

TOTAL WRITTEN TEST FAILED (BY KNOWLEDGE AREA)

WITS-K1			WITS-K2			WITS-K3			P/P-K1			P/P-K2			P/P-K3			CASS-K1			CASS-K2			CASS-K3		
G	F	P	G	F	P	G	F	P	G	F	P	G	F	P	G	F	P	G	F	P	G	F	P	G	F	P
0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0

Attachment 1

CUSTOMARY PROVISIONS FOR CONTRACTS AND GRANTS

VERMONT

STANDARD CONTRACT FOR SERVICES

1. *Parties.* This is a contract for services between the State of Vermont, (hereinafter called "State"), and _____; with a principal place of business in , (hereinafter called "Contractor"). Contractor's form of business organization is . It is Contractor's responsibility to contact the Vermont Department of Taxes to determine if, by law, Contractor is required to have a Vermont Department of Taxes Business Account Number.

2. *Subject Matter.* The subject matter of this contract is services generally on the subject of _____. Detailed services to be provided by Contractor are described in Attachment A.

3. *Maximum Amount.* In consideration of the services to be performed by Contractor, the State agrees to pay Contractor, in accordance with the payment provisions specified in Attachment B, a sum not to exceed $_____.00.

4. *Contract Term.* The period of Contractor's performance shall begin on _____ 20 and end on — — ----** 20__

5. *Prior Approvals.* This Contract shall not be binding unless and until all requisite prior approvals have been obtained in accordance with current State law, bulletins, and interpretations.

6. *Amendment.* No changes, modifications, or amendments in the terms and conditions of this contract shall be effective unless reduced to writing, numbered and signed by the duly authorized representative of the State and Contractor.

7. *Termination for Convenience.* This contract may be terminated by the State at any time by giving written notice at least thirty (30) days in advance. In such event, Contractor shall be paid under the terms of this contract for all services provided to and accepted by the State prior to the effective date of termination.

8. *Attachments.* This contract consists of ___ pages including the following attachments which are incorporated herein:

Attachment A - Statement of Work

Attachment B - Payment Provisions

Attachment C – "Standard State Provisions for Contracts and Grants" a preprinted form (revision date 12115/2017)

Attachment D - Other Provisions (if any)

Additional attachments may be lettered as necessary

9. *Order of Precedence.* Any ambiguity, conflict or inconsistency between the documents comprising this contract shall be resolved according to the following order of precedence:

(1) Standard Contract
(2) Attachment D (if applicable)
(3) Attachment C (Standard State Provisions for Contracts and Grants)
(4) Attachment A
(5) Attachment B
List other attachments, if any, in order of precedence

WE THE UNDERSIGNED PARTIES AGREE TO BE BOUND BY THIS CONTRACT

By the State of Vermont:

Signature:_____

Name:_____

Title:_____

By the Contractor:

Signature:_____

Name:_____

Title:_____

Contractor's Address:

Contractor Incorporated
Contractor Court
Suite C
Vendorville, VT 05000

ATTACHMENT A- STATEMENT OF WORK

The Contractor shall:.

Attachment A of the Standard State Contract should be used to detail the work to be peiformed or products to be delivered by the contractor. This description of the work may also be referred to as the Statement of Work, Specifications of Work, or Subject Matter.

ATTACHMENT B- PAYMENT PROVISIONS

The maximum dollar amount payable under this contract is not intended as any form of a guaranteed amount. The Contractor will be paid for products or services actually delivered or performed, as specified in Attachment A, up to the maximum allowable amount specified on page 1 of this contract.

1. Prior to commencement of work and release of any payments, Contractor shall submit to the State:
   a. a certificate of insurance consistent with the requirements set forth in Attachment C, Section 8 (Insurance), and with any additional requirements for insurance as may be set forth elsewhere in this contract; and
   b. a current IRS Form W-9 (signed within the last six months).
2. Payment terms are **Net 30** days from the date the State receives an error-free invoice with all necessary and complete supporting documentation.
3. Contractor shall submit detailed invoices itemizing all work performed during the invoice period, including the dates of service, rates of pay, hours of work performed, and any other information and/or documentation appropriate and sufficient to substantiate the amount invoiced for payment by the State. All invoices must include the Contract# for this contract.
4. Contractor shall submit invoices to the State in accordance with the schedule set forth in this Attachment B. Unless a more particular schedule is provided herein, invoices shall be submitted not more frequently than monthly.
5. Invoices shall be submitted to the State at the following address:_____
6. The payment schedule for delivered products, or rates for services performed, and any additional reimbursements, are as follows: _____

Payment terms necessary to the contract, such as the schedule and/or rates of pay will be added.

ATTACHMENT C: STANDARD STATE PROVISIONS
FOR CONTRACTS AND GRANTS
REVISED DECEMBER 15, 2017

1. Definitions: For purposes of this Attachment, "Party" shall mean the Contractor, Grantee or Subrecipient, with whom the State of Vermont is executing this Agreement and consistent with the form of the Agreement. "Agreement" shall mean the specific contract or grant to which this form is attached.

2. Entire Agreement: This Agreement, whether in the form of a contract, State-funded grant, or Federally-funded grant, represents the entire agreement between the parties on the subject matter. All prior agreements, representations, statements, negotiations, and understandings shall have no effect.

3. Governing Law, Jurisdiction and Venue; No Waiver of Jury Trial: This Agreement will be governed by the laws of the State of Vermont. Any action or proceeding brought by either the State or the Party in connection with this Agreement shall be brought and enforced in the Superior Court of the State of Vermont, Civil Division, Washington Unit. The Party irrevocably submits to the jurisdiction of this court for any action or proceeding regarding this Agreement. The Party agrees that it must first exhaust any applicable administrative remedies with respect to any cause of action that it may have against the State with regard to its performance under this Agreement. Party agrees that the State shall not be required to submit to binding arbitration or waive its right to a jury trial.

4. Sovereign Immunity: The State reserves all immunities, defenses, rights or actions arising out of the State's sovereign status or under the Eleventh Amendment to the United States Constitution. No waiver of the State's immunities, defenses, rights or actions shall be implied or otherwise deemed to exist by reason of the State's entry into this Agreement.

5. No Employee Benefits For Party: The Party understands that the State will not provide any individual retirement benefits, group life insurance, group health and dental insurance, vacation or sick leave, workers compensation or other benefits or services available to State employees, nor will the State withhold any state or Federal taxes except as required under applicable tax laws, which shall be determined in advance of execution of the Agreement. The Party understands that all tax returns required by the Internal Revenue Code and the State of Vermont, including but not limited to income, withholding, sales and use, and rooms and meals, must be filed by the Party, and information as to Agreement income will be provided by the State of Vermont to the Internal Revenue Service and the Vermont Department of Taxes.

6. Independence: The Party will act in an independent capacity and not as officers or employees of the State.

7. Defense and Indemnity: The Party shall defend the State and its officers and employees against all third party claims or suits arising in whole or in part from any act or omission of the Party or of any agent of the Party in connection with the performance of this Agreement. The State shall notify the Party in the event of any such claim or suit, and the Party shall immediately retain counsel and otherwise provide a complete defense against the entire claim or suit. The State retains the right to participate at its own expense in the defense of any claim. The State shall have the right to approve all proposed settlements of such claims or suits.

After a final judgment or settlement, the Party may request recoupment of specific defense costs and may file suit in Washington Superior Court requesting recoupment. The Party shall be entitled to recoup costs only upon a showing that such costs were entirely unrelated to the defense of any claim arising from an act or omission of the Party in connection with the performance of this Agreement.

The Party shall indemnify the State and its officers and employees if the State, its officers or employees become legally obligated to pay any damages or losses arising from any act or omission of the Party or an agent of the Party in connection with the performance of this Agreement.

Notwithstanding any contrary language anywhere, in no event shall the terms of this Agreement or any document furnished by the Party in connection with its performance under this Agreement obligate the State to (1) defend or indemnify the Party or any third party, or (2) otherwise be liable for the expenses or reimbursement, including attorneys' fees, collection costs or other costs of the Party or any third party.

YERMONT

8. Insurance: Before commencing work on this Agreement the Party must provide certificates of insurance to show that the following minimum coverages are in effect. It is the responsibility of the Party to maintain current certificates of insurance on file with the State through the term of this Agreement. No warranty is made that the coverages and limits listed herein are adequate to cover and protect the interests of the Party for the Party's operations. These are solely minimums that have been established to protect the interests of the State.

Workers Compensation: With respect to all operations performed, the Party shall carry workers' compensation insurance in accordance with the laws of the State of Vermont. Vermont will accept an out-of-state employer's workers' compensation coverage while operating in Vermont provided that the insurance carrier is licensed to write insurance in Vermont and an amendatory endorsement is added to the policy adding Vermont for coverage purposes. Otherwise, the party shall secure a Vermont workers' compensation policy, if necessary to comply with Vermont law.

Commercial General Liability and Property Damage: With respect to all operations performed under this Agreement, the Party shall carry commercial general liability insurance having all major divisions of coverage including, but not limited to:

Bodily Injury and Property Damage
Premises - Operations
Products and Completed Operations
Personal Injury Liability
Contractual Liability

The policy shall be on an occurrence form and limits shall not be less than:

$1,000,000 Each Occurrence
$2,000,000 General Aggregate
$1,000,000 Products/Completed Operations Aggregate
$1,000,000 Personal & Advertising Injury

Automotive Liability: The Party shall carry automotive liability insurance covering all motor vehicles, including coverage for Red Cross owned, hired and non-owned vehicles coverage, used in connection with the Agreement. Limits of coverage shall not be less than $51,000,000 combined single limit. If performance of this Agreement involves construction, or the transport of persons or hazardous materials, limits of coverage shall not be less than $1,000,000 combined single limit.

Additional Insured. The Commercial General Liability and Property Damage coverages required for performance of this Agreement shall include the State of Vermont and its agencies, departments, officers and employees as Additional Insureds. If performance of this Agreement involves construction, or the transport of persons or hazardous materials, then the required Automotive Liability coverage shall include the State of Vermont and its agencies, departments, officers and employees as Additional Insureds. Coverage shall be primary and non-contributory with any other insurance and self-insurance.

Notice of Cancellation or Change. There shall be no cancellation, change, potential exhaustion of aggregate limits or non-renewal of insurance coverage(s) without thirty (30) days written prior written notice to the State. The Party agrees to give a thirty (30) day notice to the State if any of the insurance coverages and/or limits are reduced, whether by cancellation, non-renewal, endorsement, or otherwise, to levels that no longer meet the insurance requirements in this Agreement.

9. Reliance by the State on Representations: All payments by the State under this Agreement will be made in reliance upon the accuracy of all representations made by the Party in accordance with this Agreement, including but not limited to bills, invoices, progress reports and other proofs of work.

10. False Claims Act: The Party acknowledges that it is subject to the Vermont False Claims Act as set forth in 32 V.S.A. § 630 *et seq.* If the Party violates the Vermont False Claims Act it shall be liable to the State for civil penalties, treble damages and the costs of the investigation and prosecution of such violation, including attorney's fees, except as the same may be reduced by a court of competent jurisdiction. The Party's liability to the State under the False Claims Act shall not be limited notwithstanding any agreement of the State to

Commented [HSL1]: The changes are made to reflect Red Cross insurance program in place.

Commented [HSL2]: Red Cross insurance is in place for the benefit of Red Cross.

Commented [HSL3]: Commercial General Liability insurance is the policy which includes 3rd party liability and property damage coverages.

Commented [HSL4]: Red Cross CGL policy is on a claims-made form, and this cannot be changed or Red Cross would technically be in breach.

Commented [HSL5]: Not applicable.

otherwise limit Party's liability.

11. Whistleblower Protections: The Party shall not discriminate or retaliate against one of its employees or agents for disclosing information concerning a violation of law, fraud, waste, abuse of authority or acts threatening health or safety, including but not limited to allegations concerning the False Claims Act. Further,

the Party shall not require such employees or agents to forego monetary awards as a result of such disclosures, nor should they be required to report misconduct to the Party or its agents prior to reporting to any governmental entity and/or the public.

12. Location of State Data: No State data received, obtained, or generated by the Party in connection with performance under this Agreement shall be processed, transmitted, stored, or transferred by any means outside the continental United States, except with the express written permission of the State.

13. Records Available for Audit: The Party shall maintain all records pertaining to performance under this agreement. "Records" means any written or recorded information, regardless of physical form or characteristics, which is produced or acquired by the Party in the performance of this agreement. Records produced or acquired in a machine readable electronic format shall be maintained in that format. The records described shall be made available at reasonable times during the period of the Agreement and for three years thereafter or for any period required by law for inspection by any authorized representatives of the State or Federal Government. If any litigation, claim, or audit is started before the expiration of the three-year period, the records shall be retained until all litigation, claims or audit findings involving the records have been resolved.

14. Fair Employment Practices and Americans with Disabilities Act: Party agrees to comply with the requirement of 21 V.S.A. Chapter 5, Subchapter 6, relating to fair employment practices, to the full extent applicable. Party shall also ensure, to the full extent required by the Americans with Disabilities Act of 1990, as amended, that qualified individuals with disabilities receive equitable access to the services, programs, and activities provided by the Party under this Agreement.

15. Set Off: The State may set off any sums which the Party owes the State against any sums due the Party under this Agreement; provided, however, that any set off of amounts due the State of Vermont as taxes shall be in accordance with the procedures more specifically provided hereinafter.

16. Taxes Due to the State:

A. Party understands and acknowledges responsibility, if applicable, for compliance with State tax laws, including income tax withholding for employees performing services within the State, payment of use tax on property used within the State, corporate and/or personal income tax on income earned within the State.

B. Party certifies under the pains and penalties ofpeijury that, as of the date this Agreement is signed, the Party is in good standing with respect to, or in full compliance with, a plan to pay any and all taxes due the State of Vermont.

C. Party understands that final payment under this Agreement may be withheld if the Commissioner of Taxes determines that the Party is not in good standing with respect to or in full compliance with a plan to pay any and all taxes due to the State of Vermont.

D. Party also understands the State may set off taxes (and related penalties, interest and fees) due to the State of Vermont, but only if the Party has failed to make an appeal within the time allowed by law, or an appeal has been taken and finally determined and the Party has no further legal recourse to contest the amounts due.

17. Taxation of Purchases: All State purchases must be invoiced tax free. An exemption certificate will be furnished upon request with respect to otherwise taxable items.

18. Child Support: (Only applicable if the Party is a natural person, not a corporation or partnership.) Party states that, as of the date this Agreement is signed, he/she:

A. is not under any obligation to pay child support; or

B. is under such an obligation and is in good standing with respect to that obligation; or

C. has agreed to a payment plan with the Vermont Office of Child Support Services and is in full compliance with that plan.

Party makes this statement with regard to support owed to any and all children residing in Vetmont. In addition, if the Party is a resident of Vermont, Party makes this statement with regard to support owed to any and all children residing in any other state or territory of the United States.

19. Sub-Agreements: Party shall not assign, subcontract or subgrant the perfotmance of this Agreement or any portion thereofto any other Party without the prior written approval of the State. Party shall be responsible and liable to the State for all acts or omissions of subcontractors and any other person perfotming work under this Agreement pursuant to an agreement with Party or any subcontractor.

In the case this Agreement is a contract with a total cost in excess of $250,000, the Party shall provide to the State a list of all proposed subcontractors and subcontractors' subcontractors, together with the identity of those subcontractors' workers compensation insurance providers, and additional required or requested information, as applicable, in accordance with Section 32 of The Vermont Recovery and Reinvestment Act of 2009 (Act No. 54).

Party shall include the following provisions of this Attachment C in all subcontracts for work performed solely for the State of Vermont and subcontracts for work performed in the State of Vermont: Section 10 ("False Claims Act"); Section 11 ("Whistleblower Protections"); Section 12 ("Location of State Data"); Section 14 ("Fair Employment Practices and Americans with Disabilities Act"); Section 16 ("Taxes Due the State"); Section 18 ("Child Support"); Section 20 ("No Gifts or Gratuities"); Section 22 ("Certification Regarding Debatment"); Section 30 ("State Facilities"); and Section 32.A ("Certification Regarding Use of State Funds").

20. No Gifts or Gratuities: Party shall not give title or possession of anything of substantial value (including property, currency, travel and/or education programs) to any officer or employee of the State during the term of this Agreement.

21. Copies: Party shall use reasonable best efforts to ensure that all written reports prepared under this Agreement are printed using both sides of the paper.

22. Certification Regarding Debarment: Party certifies under pains and penalties of perjury that, as of the date that this Agreement is signed, neither Party nor Party's principals (officers, directors, owners, or partners) are presently debarred, suspended, proposed for debarment, declared ineligible or excluded from participation in Federal programs, or programs supported in whole or in part by Federal funds.

Party further certifies under pains and penalties of perjury that, as of the date that this Agreement is signed, Party is not presently debarred, suspended, nor named on the State's debarment list at: http://bgs.vermont.gov/purchasing/debarment

23. Conflict of Interest: Party shall fully disclose, in writing, any conflicts of interest or potential conflicts of interest.

24. Confidentiality: Party acknowledges and agrees that this Agreement and any and all information obtained by the State from the Party in connection with this Agreement are subject to the State of Vermont Access to Public Records Act, 1 V.S.A. § 315 et seq.

25. Force Majeure: Neither the State nor the Party shall be liable to the other for any failure or delay of performance of any obligations under this Agreement to the extent such failure or delay shall have been wholly or principally caused by acts or events beyond its reasonable control rendering performance illegal or impossible (excluding strikes or lock-outs) ("Force Majeure"). Where Force Majeure is asserted, the nonperforming party must prove that it made all reasonable efforts to remove, eliminate or minimize such cause of delay or damages, diligently pursued performance of its obligations under this Agreement, substantially fulfilled all non-excused obligations, and timely notified the other party of the likelihood or actual occurrence of an event described in this paragraph.

26. Marketing: Party shall not refer to the State in any publicity materials, information pamphlets, press releases, research reports, advertising, sales promotions, trade shows, or marketing materials or similar communications to third parties except with the prior written consent of the State.

27. Termination:

A. Non-Appropriation: If this Agreement extends into more than one fiscal year of the State (July 1 to June 30), and if appropriations are insufficient to support this Agreement, the State may cancel at the end of the fiscal year, or otherwise upon the expiration of existing appropriation authority. In the case that this Agreement is a Grant that is funded in whole or in part by Federal funds, and in the event Federal funds become unavailable or reduced, the State may suspend or cancel this Grant immediately, and the State shall have no obligation to pay Subrecipient from State revenues.

B. Termination for Cause: Either party may terminate this Agreement if a party materially breaches its obligations under this Agreement, and such breach is not cured within thirty (30) days after delivery of the non-breaching party's notice or such longer time as the non-breaching party may specify in the notice.

C. Termination Assistance: Upon nearing the end of the final term or termination of this Agreement, without respect to cause, the Party shall take all reasonable and prudent measures to facilitate any transition required by the State. All State property, tangible and intangible, shall be returned to the State upon demand at no additional cost to the State in a format acceptable to the State.

28. Continuity of Performance: In the event of a dispute between the Party and the State, each party will continue to perform its obligations under this Agreement during the resolution of the dispute until this Agreement is terminated in accordance with its terms.

29. No Implied Waiver of Remedies: Either party's delay or failure to exercise any right, power or remedy under this Agreement shall not impair any such right, power or remedy, or be construed as a waiver of any such right, power or remedy. All waivers must be in writing.

30. State Facilities: If the State makes space available to the Party in any State facility during the term of this Agreement for purposes of the Party's performance under this Agreement, the Party shall only use the space in accordance with all policies and procedures governing access to and use of State facilities which shall be made available upon request. State facilities will be made available to Party on an "AS IS, WHERE IS" basis, with no warranties whatsoever.

31. Requirements Pertaining Only to Federal Grants and Subrecipient Agreements: If this Agreement is a grant that is funded in whole or in part by Federal funds:

A. Requirement to Have a Single Audit: The Subrecipient will complete the Subrecipient Annual Report annually within 45 days after its fiscal year end, informing the State of Vermont whether or not a Single Audit is required for the prior fiscal year. If a Single Audit is required, the Subrecipient will submit a copy of the audit report to the granting Party within 9 months. If a single audit is not required, only the Subrecipient Annual Report is required.

For fiscal years ending before December 25, 2015, a Single Audit is required if the subrecipient expends $500,000 or more in Federal assistance during its fiscal year and must be conducted in accordance with OMB Circular A-133. For fiscal years ending on or after December 25, 2015, a Single Audit is required if the subrecipient expends $750,000 or more in Federal assistance during its fiscal year and must be conducted in accordance with 2 CPR Chapter I, Chapter II, Part 200, Subpart F. The Subrecipient Annual Report is required to be submitted within 45 days, whether or not a Single Audit is required.

B. Internal Controls: In accordance with 2 CPR Part II, §200.303, the Party must establish and maintain effective internal control over the Federal award to provide reasonable assurance that the Party is managing the Federal

award in compliance with Federal statutes, regulations, and the terms and conditions of the award. These internal controls should be in compliance with guidance in "Standards for Internal Control in the Federal Government" issued by the Comptroller General of the United States and the "Internal Control Integrated Framework", issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).

C. Mandatory Disclosures: In accordance with 2 CFR Part II, §200.113, Party must disclose, in a timely manner, in writing to the State, all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award. Failure to make required disclosures may result in the imposition of sanctions which may include disallowance of costs incurred, withholding of payments, termination of the Agreement, suspension/debarment, etc.

32. Requirements Pertaining Only to State-Funded Grants:

A. Certification Regarding Use of State Funds: If Party is an employer and this Agreement is a State-funded grant in excess of $1,001, Party certifies that none of these State funds will be used to interfere with or restrain the exercise of Party's employee's rights with respect to unionization.

B. Good Standing Certification (Act 154 of 2016): If this Agreement is a State-funded grant, Party hereby represents: (i) that it has signed and provided to the State the form prescribed by the Secretary of Administration for purposes of certifying that it is in good standing (as provided in Section 13(a)(2) of Act 154) with the Agency of Natural Resources and the Agency of Agriculture, Food and Markets, or otherwise explaining the circumstances surrounding the inability to so certifY, and (ii) that it will comply with the requirements stated therein.

(End of Standard Provisions)

Attachment E Business
Associate Agreement

This Business Associate Agreement ("Agreement") is entered into by and between the State of Vermont Agency of Human Services, operating by and through its _____ [Insert Name of AHS Department, Office or Division] ("Covered Entity") and (Insert Name of Contractor/Grantee] ("Business Associate") as of _____ ("Effective Date"). This Agreement supplements and is made a part of the contract/grant to which it is attached.

Covered Entity and Business Associate enter into this Agreement to comply with standards promulgated under the Health Insurance Portabi lity and Accountability Act of 1996 ("HIPAA"), including the Standards for the Privacy of Individually Identifiable Health Information, at 45 CFR Parts 160 and 164 ("Privacy Rule"), and the Security Standards, at 45 CFR Parts 160 and 164 ("Security Rule"), as amended by Subtitle D of the Health Information Technology for Economic and Clinical Health Act (HJTECH), and any associated federal rules and regulations.

The parties agree as follows:

1. Definitions. All capitalized terms used but not otherwise defined in this Agreement have the meanings set forth in 45 CFR Parts 160 and 164 as amended by HITECH and associated federal rules and regulations.

"Agent" means those person(s) who are agents(s) of the Business Associate, in accordance with the Federal common law of agency, as referenced in 45 CFR § 160.402(c).

"Breach" means the acquisition, access, use or disclosure of protected health information (PHI) which compromises the security or privacy of the PHI, except as excluded in the definition of Breach in 45 CFR § 164.402.

"Business Associate shall have the meaning given in 45 CFR § 160.103.

"Individual" includes a person who qualifies as a personal representative m accordance with 45 CFR § 164.502(g).

"Protected Health Information" or PHI shall have the meaning given in 45 CFR § 160.103, limited to the information created or received by Business Associate from or on behalf of Agency.

"Security Incident" means any known successful or unsuccessful attempt by an authorized or unauthorized individual to inappropriately use, disclose, modifY, access, or destroy any information or interference with system operations in an information system.

"Services" includes all work performed by the Business Associate for or on behalf of Covered Entity that requires the use and/or disclosure of protected health information to perform a business associate function described in 45 CFR § 160.103 under the definition of Business Associate.

"Subcontractor" means a person or organization to whom a Business Associate delegates a function, activity or service, other than in the capacity of a member of the workforce of the Business Associate. For purposes of this Agreement, the term Subcontractor includes Subgrantees.

2. Identification and Disclosure of Privacy and Security Offices. Business Associate and Subcontractors shall provide, within ten (10) days of the execution of this agreement, written notice to the Covered Entity's contract/grant manager the names and contact information of both the IDPAA Privacy Officer and HIPAA Security Officer. This information must be updated any
time either of these contacts changes.

3. Permitted and Required Uses/Disclosures of PHI.

3.1 Except as limited in this Agreement, Business Associate may use or disclose PHI to perform Services, as specified in the underlying grant or contract with Covered Entity. The uses and disclosures of Business Associate are limited to the minimum necessary, to complete the tasks or to provide the services associated with the terms of the underlying agreement. Business Associate shall not use or disclose PHI in any manner that would constitute a violation of the Privacy Rule if used or disclosed by Covered Entity in that manner. Business Associate may not use or disclose PHI other than as permitted or required by this Agreement or as Required by Law.

3.2 Business Associate may make PHI available to its employees who need access to perform Services provided that Business Associate makes such employees aware of the use and disclosure restrictions in this Agreement and binds them to comply with such restrictions. Business Associate may only disclose PHI for the purposes authorized by this Agreement: (a) to its agents and Subcontractors in accordance with Sections 9 and 18 or, (b) as otherwise permitted by Section 3.

3.3 Business Associate shall be directly liable under HIPAA for impermissible uses and disclosures of the PHI it handles on behalf of Covered Entity, and for impermissible uses and disclosures, by Business Associate's Subcontractor(s), of the PHI that Business Associate handles on behalf of Covered Entity and that it passes on to Subcontractors.

4. Business Activities. Business Associate may use PHI received in its capacity as a Business Associate to Covered Entity if necessary for Business Associate's proper management and administration or to carry out its legal responsibilities. Business Associate may disclose PHI received in its capacity as Business Associate to Covered Entity for Business Associate's proper management and administration or to carry out its legal responsibilities if a disclosure is Required by Law or if Business Associate obtains reasonable written assurances via a written agreement from the person to whom the information is to be disclosed that the PHI shall remain confidential and be used or further disclosed only as Required by Law or for the purpose for which it was disclosed to the person, and the Agreement requires the person or entity to notify Business Associate, within two (2) business days (who in turn will notify Covered Entity within two (2) business days after receiving notice of a Breach as specified in Section 6.1), in writing of any Breach of Unsecured PHI of which it is aware. Uses and disclosures of PHI for the purposes identified in Section 3 must be ofthe minimum amount of PHI necessary to accomplish such purposes.

5. Safeguards. Business Associate, its Agent(s) and Subcontractor(s) shall implement and use appropriate safeguards to prevent the use or disclosure of PHI other than as provided for by this Agreement. With respect

to any PHI that is maintained in or transmitted by electronic media, Business Associate or its Subcontractor(s) shall comply with 45 CFR sections 164.308 (administrative safeguards), 164.310 (physical safeguards), 164.312 (technical safeguards) and 164.316 (policies and procedures and documentation requirements). Business Associate or its Agent(s) and Subcontractor(s) shall identify in writing upon request from Covered Entity all of the safeguards that it uses to prevent impermissible uses or disclosures of PHI.

6. Documenting and Reporting Breaches.

6.1 Business Associate shall report to Covered Entity any Breach of Unsecured PHI, including Breaches reported to it by a Subcontractor, as soon as it (or any of its employees or agents) becomes aware of any such Breach, and in no case later than two (2) business days after it (or any of its employees or agents) becomes aware of the Breach, except when a law enforcement official determines that a notification would impede a criminal investigation or cause damage to national security.

6.2 Business Associate shall provide Covered Entity with the names of the individuals whose Unsecured PHI has been, or is reasonably believed to have been, the subject of the Breach and any other available information that is required to be given to the affected individuals, as set forth in 45 CFR § 164.404(c), and, if requested by Covered Entity, information necessary for Covered Entity to investigate the impermissible use or disclosure. Business Associate shall continue to provide to Covered Entity information concerning the Breach as it becomes available to it. Business Associate shall require its Subcontractor(s) to agree to these same terms and conditions.

6.3 When Business Associate determines that an impermissible acquisition, use or disclosure of PHI by a member of its workforce is not a Breach, as that term is defined in 45 CFR § 164.402, and therefore does not necessitate notice to the impacted individual(s), it shall document its assessment of risk, conducted as set forth in 45 CFR § 402(2). When requested by Covered Entity, Business Associate shall make its risk assessments available to Covered Entity. It shall also provide Covered Entity with 1) the name of the person(s) making the assessment, 2) a brief summary of the facts, and 3) a brief statement of the reasons supporting the determination of low probability that the PHI had been compromised. When a breach is the responsibility of a member of its Subcontractor's workforce, Business Associate shall either 1) conduct its own risk assessment and draft a summary of the event and assessment or 2) require its Subcontractor to conduct the assessment and draft a summary of the event. In either case, Business Associate shall make these assessments and reports available to Covered Entity.

6.4 Business Associate shall require, by contract, a Subcontractor to report to Business Associate and Covered Entity any Breach of which the Subcontractor becomes aware, no later than two (2) business days after becomes aware of the Breach.

7. Mitigation and Corrective Action. Business Associate shall mitigate, to the extent practicable, any harmful effect that is known to it of an impermissible use or disclosure of PHI, even if the impermissible use or disclosure does not constitute a Breach. Business Associate shall draft and carry out a plan of corrective action to address any incident of impermissible use or disclosure of PHI. If requested by Covered Entity, Business Associate shall make its mitigation and corrective action plans available to Covered Entity. Business Associate shall require a Subcontractor to agree to these same terms and conditions.

8. Providing Notice of Breaches.

8.1 If Covered Entity determines that an impermissible acquisition, access, use or disclosure of PHI for which one of Business Associate's employees or agents was responsible constitutes a Breach as defined in 45 CFR § 164.402, and if requested by Covered Entity, Business Associate shall provide notice to the individual(s) whose **PHI** has been the subject of the Breach. When requested to provide notice, Business Associate shall consult with Covered Entity about the timeliness, content and method of notice, and shall receive Covered Entity's approval concerning these elements. The cost of notice and related remedies shall be borne by Business Associate.

8.2 If Covered Entity or Business Associate determines that an impermissible acquisition, access, use or disclosure of PHI by a Subcontractor of Business Associate constitutes a Breach as defined in 45 CFR § 164.402, and if requested by Covered Entity or Business Associate, Subcontractor shall provide notice to the individual(s) whose PHI has been the subject of the Breach. When Covered Entity requests that Business Associate or its Subcontractor provide notice, Business Associate shall either **1)** consult with Covered Entity about the specifics of the notice as set forth in section 8.1, above, or 2) require, by contract, its Subcontractor to consult with Covered Entity about the specifics of the notice as set forth in section 8.1

8.3 The notice to affected individuals shall be provided as soon as reasonably possible and in no case later than 60 calendar days after Business Associate reported the Breach to Covered Entity.

8.4 The notice to affected individuals shall be written in plain language and shall include, to the extent possible, 1) a brief description of what happened, 2) a description of the types of Unsecured PHI that were involved in the Breach, 3) any steps individuals can take to protect themselves from potential harm resulting from the Breach, 4) a brief description of what the Business Associate is doing to investigate the Breach, to mitigate harm to individuals and to protect against further Breaches, and 5) contact procedures for individuals to ask questions or obtain additional information, as set forth in 45 CFR § 164.404(c).

8.5 Business Associate shall notify individuals of Breaches as specified in 45 CFR § 164.404(d) (methods of individual notice). In addition, when a Breach involves more than 500 residents of Vermont, Business Associate shall, if requested by Covered Entity, notify prominent media outlets serving Vermont, following the requirements set forth in 45 CFR § 164.406.

9. **Agreements with Subcontractors.** Business Associate shall enter into a Business Associate Agreement with any Subcontractor to whom it provides PHI received from Covered Entity or created or received by Business Associate on behalf of Covered Entity in which the Subcontractor agrees to the same restrictions and conditions that apply through this Agreement to Business Associate with respect to such PHI. Business Associate must enter into this Business Associate Agreement before any use by or disclosure of PHI to such agent. The written agreement must identify Covered Entity as a direct and intended third party beneficiary with the right to enforce any breach of the agreement concerning the use or disclosure of PHI. Business Associate shall provide a copy of the Business Associate Agreement it enters into with a subcontractor to Covered Entity upon request. Business associate may not make any disclosure of PHI to any Subcontractor without prior written consent of Covered Entity.

10. Access to PID. Business Associate shall provide access to PHI in a Designated Record Set to Covered Entity or as directed by Covered Entity to an Individual to meet the requirements under 45 CFR § 164.524. Business Associate shall provide such access in the time and manner reasonably designated by Covered Entity.

Within three (3) business days, Business Associate shall forward to Covered Entity for handling any request for access to PHI that Business Associate directly receives from an Individual.

11. A_____mendment of PHI. Business Associate shall make any amendments to PHI in a Designated Record Set that Covered Entity directs or agrees to pursuant to 45 CFR § 164.526, whether at the request of Covered Entity or an Individual. Business Associate shall make such amendments in the time and manner reasonably designated by Covered Entity. Within three (3) business days, Business Associate shall forward to Covered Entity for handling any request for amendment to PHI that Business Associate directly receives from an Individual.

12. Accounting of Disclosures. Business Associate shall document disclosures of PHI and all information related to such disclosures as would be required for Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 CFR § 164.528. Business Associate shall provide such information to Covered Entity or as directed by Covered Entity to an Individual, to permit Covered Entity to respond to an accounting request. Business Associate shall provide such information in the time and manner reasonably designated by Covered Entity. Within three (3) business days, Business Associate shall forward to Covered Entity for handling any accounting request that Business Associate directly receives from an Individual.

13. Books and Records. Subject to the attorney-client and other applicable legal privileges, Business Associate shall make its internal practices, books, and records (including policies and procedures and PHI) relating to the use and disclosure of PHI received from Covered Entity or created or received by Business Associate on behalf of Covered Entity available to the Secretary of HHS in the time and manner designated by the Secretary. Business Associate shall make the same information available to Covered Entity, upon Covered Entity's request, in the time and manner reasonably designated by Covered Entity so that Covered Entity may determine whether Business Associate is in compliance with this Agreement.

14. Termination.

14.1 This Agreement commences on the Effective Date and shall remain in effect until terminated by Covered Entity or until all of the PHI provided by Covered Entity to Business Associate or created or received by Business Associate on behalf of Covered Entity is destroyed or returned to Covered Entity subject to Section 19.8.

14.2 If Business Associate breaches any material term of this Agreement, Covered Entity may either: (a) provide an opportunity for Business Associate to cure the breach and Covered Entity may terminate the contract or grant without liability or penalty if Business Associate does not cure the breach within the time specified by Covered Entity; or (b) immediately terminate the contract or grant without liability or penalty if Covered Entity believes that cure is not reasonably possible; or (c) if neither termination nor cure are feasible, Covered Entity shall report the breach to the Secretary. Covered Entity has the right to seek to cure any breach by Business Associate and this right, regardless of whether Covered Entity cures such breach, does not lessen any right or remedy available to Covered Entity at law, in equity, or under the contract or grant, nor does it lessen Business Associate's responsibility for such breach or its duty to cure such breach.

15. Return/Destruction of Pill.

15.1 Business Associate in connection with the expiration or termination of the contract or grant shall return or destroy, at the discretion of the Covered Entity, all PHI received from Covered Entity or created or received by Business Associate on behalf of Covered Entity pursuant to this contract or grant that Business Associate still maintains in any form or medium (including electronic) within thirty (30) days after such expiration or termination. Business Associate shall not retain any copies of the PHI. Business Associate shall certify in writing for Covered Entity (1) when all PHI has been returned or destroyed and (2) that Business Associate does not continue to maintain any PHI. Business Associate is to provide this certification during this thirty (30) day period.

15.2 Business Associate shall provide to Covered Entity notification of any conditions that Business Associate believes make the return or destruction of PHI infeasible. If Covered Entity agrees that return or destruction is infeasible, Business Associate shall extend the protections of this Agreement to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible for so long as Business Associate maintains such PHI. This shall also apply to all Agents and Subcontractors ofBusiness Associate.

16. Penalties. Business Associate understands that: (a) there may be civil or criminal penalties for misuse or misappropriation of PHI and (b) violations of this Agreement may result in notification by Covered Entity to law enforcement officials and regulatory, accreditation, and licensure organizations.

17. Training. Business Associate understands that it is its obligation to comply with the law and shall provide appropriate training and education to ensure compliance with this Agreement. If requested by Covered Entity, Business Associate shall participate in AHS training regarding the use, confidentiality, and security of PHI, however, participation in such training shall not supplant nor relieve Business Associate of its obligations under this Agreement to independently assure compliance with the law and this Agreement.

18. Security Rule Obligations. The following provisions of this section apply to the extent that Business Associate creates, receives, maintains or transmits Electronic PHI on behalf of Covered Entity.

18.1 Business Associate shall implement and use administrative, physical, and technical safeguards in compliance with 45 CFR sections 164.308, 164.310, and 164.312 with respect to the Electronic PHI that it creates, receives, maintains or transmits on behalf of Covered Entity. Business Associate shall identify in writing upon request from Covered Entity all of the safeguards that it uses to protect such Electronic PHI.

18.2 Business Associate shall ensure that any Agent and Subcontractor to whom it provides Electronic PHI agrees in a written agreement to implement and use administrative, physical, and technical safeguards that reasonably and appropriately protect the Confidentiality, Integrity and Availability of the Electronic PHI. Business Associate must enter into this written agreement before any use or disclosure of Electronic PHI by such Agent or Subcontractor. The written agreement must identify Covered Entity as a direct and intended third party beneficiary with the right to enforce any breach of the agreement concerning the use or disclosure of Electronic PHI. Business Associate shall provide a copy of the written agreement to Covered Entity upon request. Business Associate may not make any disclosure of Electronic PHI to any Agent or Subcontractor without the prior written consent of Covered Entity.

18.3 Business Associate shall report in writing to Covered Entity any Security Incident pertaining to such Electronic PHI (whether involving Business Associate or an Agent or Subcontractor). Business Associate shall provide this written report as soon as it becomes aware of any such Security Incident, and in no case later than two (2) business days after it becomes aware of the incident. Business Associate shall provide Covered Entity with the information necessary for Covered Entity to investigate any such Security Incident.

18.4 Business Associate shall comply with any reasonable policies and procedures Covered Entity implements to obtain compliance under the Security Rule.

19. Miscellaneous.

19.1 In the event of any conflict or inconsistency between the terms of this Agreement and the terms of the contract/grant, the terms of this Agreement shall govern with respect to its subject matter. Otherwise, the terms of the contract/grant continue in effect.

19.2 Business Associate shall cooperate with Covered Entity to amend this Agreement from time to time as *is* necessary for Covered Entity to comply with the Privacy Rule, the Security Rule, or any other standards promulgated under HIPAA.

19.3 Any ambiguity in this Agreement shall be resolved to permit Covered Entity to comply with the Privacy Rule, Security Rule, or any other standards promulgated under HIPAA.

19.4 In addition to applicable Vermont law, the parties shall rely on applicable federal law (e.g., HIPAA, the Privacy Rule and Security Rule, and the HIPAA omnibus final rule) in construing the meaning and effect of this Agreement.

19.5 As between Business Associate and Covered Entity, Covered Entity owns all PHI provided by Covered Entity to Business Associate or created or received by Business Associate on behalf of Covered Entity.

19.6 Business Associate shall abide by the terms and conditions of this Agreement with respect to all PHI it receives from Covered Entity or creates or receives on behalf of Covered Entity even if some of that information relates to specific services for which Business Associate may not be a "Business Associate" of Covered Entity under the Privacy Rule.

19.7 Business Associate is prohibited from directly or indirectly receiving any remuneration in exchange for an individual's PHI. Business Associate will refrain from marketing activities that would violate HIPAA, including specifically Section 13406 of the HITECH Act. Reports or data containing the PHI may not be sold without Agency's or the affected individual's written consent.

19.8 The provisions of this Agreement that by their terms encompass continuing rights or responsibilities shall survive the expiration or termination of this Agreement. For example: (a) the provisions of this Agreement shall continue to apply if Covered Entity determines that it would be infeasible for Business Associate to return or destroy PHI as provided in Section 14.2 and (b) the obligation of Business Associate to provide an accounting of disclosures as set forth in Section 12

survives the expiration or termination of this Agreement with respect to accounting requests, if any, made after such expiration or termination.

Rev: 7/7/17

ATTACHMENT F
AGENCY OF HUMAN SERVICES' CUSTOMARY CONTRACT/GRANT PROVISIONS

1. Definitions: For purposes of this Attachment F, the term "Agreement" shall mean the form of the contract or grant, with all of its parts, into which this Attachment F is incorporated. The meaning of the term "Party" when used in this Attachment F shall mean any named party to this Agreement *other than* the State of Vermont, the Agency of Human Services (AHS) and any of the departments, boards, offices and business units named in this Agreement. As such, the term "Party" shall mean, when used in this Attachment F, the Contractor or Grantee with whom the State of Vermont is executing this Agreement. If Party, when permitted to do so under this Agreement, seeks by way of any subcontract, sub-grant or other form of provider agreement to employ any other person or entity to perform any ofthe obligations of Party under this Agreement, Party shall be obligated to ensure that all terms ofthis Attachment Fare followed. As such, the term "Party" as used herein shall also be construed as applicable to, and describing the obligations of, any subcontractor, sub-recipient or sub-grantee of this Agreement. Any such use or construction of the term "Party" shall not, however, give any subcontractor, sub-recipient or sub-grantee any substantive right in this Agreement without an express written agreement to that effect by the State of Vermont.

2. Agency of **Human** Services: The Agency of Human Services is responsible for overseeing all contracts and grants entered by any of its departments, boards, offices and business units, however denominated. The Agency of Human Services, through the business office of the Office of the Secretary, and through its Field Services Directors, will share with any named AHS-associated party to this Agreement oversight, monitoring and enforcement responsibilities. Party agrees to cooperate with both the named AHS-associated party to this contract and with the Agency of Human Services itself with respect to the resolution of any issues relating to the performance and interpretation of this Agreement, payment matters and legal compliance.

3. Medicaid Program Parties *(applicable to any Party providing services and supports paid for under Vermont's Medicaid program and Vermont's Global Commitment to Health Waiver):*

Inspection and Retention of Records: In addition to any other requirement under this Agreement or at law, Party must fulfill all state and federal legal requirements, and will comply with all requests appropriate to enable the Agency of Human Services, the U.S. Department of Health and Human Services (along with its Inspector General and the Centers for Medicare and Medicaid Services), the Comptroller General, the Government Accounting Office, or any of their designees: (i) to evaluate through inspection or other means the quality, appropriateness, and timeliness of services performed under this Agreement; and (ii) to inspect and audit any records, financial data, contracts, computer or other electronic systems of Party relating to the performance of services under Vermont's Medicaid program and Vermont's Global Commitment to Health Waiver. Party will retain for ten years all documents required to be retained pursuant to 42 CFR 438.3(u).

Subcontracting for Medicaid Services: Notwithstanding any permitted subcontracting of services to be performed under this Agreement, Party shall remain responsible for ensuring that this Agreement is fully performed according to its terms, that subcontractor remains in compliance with the terms hereof, and that subcontractor complies with all state and federal laws and regulations relating to the Medicaid program in Vermont. Subcontracts, and any service provider agreements entered into by Party in connection with the performance of this Agreement, must clearly specify in writing the responsibilities of the subcontractor or other service provider and Party must retain the authority to revoke its subcontract or service provider agreement or to impose other sanctions if the performance of the subcontractor or service provider is

inadequate or if its performance deviates from any requirement of this Agreement. Party shall make available on request all contracts, subcontracts and service provider agreements between the Party, subcontractors and other service providers to the Agency of Human Services and any of its departments as well as to the Center for Medicare and Medicaid Services.

Medicaid Notification of Termination Requirements: Party shall follow the Department of Vermont Health Access Managed-Care-Organization enrollee-notification requirements, to include the requirement that Party provide timely notice of any termination of its practice.

Encounter Data: Party shall provide encounter data to the Agency of Human Services and/or its departments and ensure further that the data and services provided can be linked to and supported by enrollee eligibility files maintained by the State.

Federal Medicaid System Security Requirements Compliance: Party shall provide a security plan, risk assessment, and security controls review document within three months of the start date of this Agreement (and update it annually thereafter) in order to support audit compliance with 45 CFR 95.621 subpart F, *ADP System Security Requirements and Review Process.*

4. Workplace Violence Prevention and Crisis Response *(applicable to any Party and any subcontractors and sub-grantees whose employees or other service providers deliver social or mental health services directly to individual recipients of such services):*

Party shall establish a written workplace violence prevention and crisis response policy meeting the requirements of Act 109 (2016), 33 VSA §8201(b), for the benefit of employees delivering direct social or mental health services. Party shall, in preparing its policy, consult with the guidelines promulgated by the U.S. Occupational Safety and Health Administration for *Preventing Workplace Violence for Healthcare and Social Services Workers,* as those guidelines may from time to time be amended.

Party, through its violence protection and crisis response committee, shall evaluate the efficacy of its policy, and update the policy as appropriate, at least annually. The policy and any written evaluations thereof shall be provided to employees delivering direct social or mental health services.

Party will ensure that any subcontractor and sub-grantee who hires employees (or contracts with service providers) who deliver social or mental health services directly to individual recipients of such services, complies with all requirements of this Section.

5. Non-Discrimination:

Party shall not discriminate, and will prohibit its employees, agents, subcontractors, sub-grantees and other service providers from discrimination, on the basis of age under the Age Discrimination Act of 1975, on the basis of handicap under section 504 of the Rehabilitation Act of 1973, on the basis of sex under Title IX of the Education Amendments of 1972, and on the basis of race, color or national origin under Title VI of the Civil Rights Act of 1964. Party shall not refuse, withhold from or deny to any person the benefit of services, facilities, goods, privileges, advantages, or benefits of public accommodation on the basis of disability, race, creed, color, national origin, marital status, sex, sexual orientation or gender identity as provided by Title 9 V.S.A. Chapter 139.

No person shall on the grounds of religion or on the grounds of sex (including, on the grounds that a woman is pregnant), be excluded from participation in, be denied the benefits of, or be subjected to discrimination, to include sexual harassment, under any program or activity supported by State of Vermont and/or federal funds.

Party further shall comply with the non-discrimination requirements of Title VI of the Civil Rights Act of 1964, 42 USC Section 2000d, et seq., and with the federal guidelines promulgated pursuant to Executive Order 13166 of 2000, requiring that contractors and subcontractors receiving federal funds assure that persons with limited English proficiency can meaningfully access services. To the extent Party provides assistance to individuals with limited English proficiency through the use of oral or written translation or interpretive services, such individuals cannot be required to pay for such services.

6. Employees and Independent Contractors:

Party agrees that it shall comply with the laws of the State of Vermont with respect to the appropriate classification of its workers and service providers as "employees" and "independent contractors" for all purposes, to include for purposes related to unemployment compensation insurance and workers compensation coverage, and proper payment and reporting of wages. Party agrees to ensure that all of its subcontractors or sub-grantees also remain in legal compliance as to the appropriate classification of "workers" and "independent contractors" relating to unemployment compensation insurance and workers compensation coverage, and proper payment and reporting of wages. Party will on request provide to the Agency of Human Services information pertaining to the classification of its employees to include the basis for the classification. Failure to comply with these obligations may result in termination of this Agreement.

7. Data Protection and Privacy:

Protected Health Information: Party shall maintain the privacy and security of all individually identifiable health information acquired by or provided to it as a part of the performance of this Agreement. Party shall follow federal and state law relating to privacy and security of individually identifiable health information as applicable, including the Health Insurance Portability and Accountability Act (HIPAA) and its federal regulations.

Substance Abuse Treatment Information: Substance abuse treatment information shall be maintained in compliance with 42 C.F.R. Part 2 if the Party or subcontractor(s) are Part 2 covered programs, or if substance abuse treatment information is received from a Part 2 covered program by the Party or subcontractor(s).

Protection of Personal Information: Party agrees to comply with all applicable state and federal statutes to assure protection and security of personal information, or of any personally identifiable information (PII), including the Security Breach Notice Act, 9 V.S.A. § 2435, the Social Security Number Protection Act, 9 V.S.A. § 2440, the Document Safe Destruction Act, 9 V.S.A. § 2445 and 45 CFR 155.260. As used here, PII shall include any information, in any medium, including electronic, which can be used to distinguish or trace an individual's identity, such as his/her name, social security number, biometric records, etc., either alone or when combined with any other personal or identifiable information that is linked or linkable to a specific person, such as date and place or birth, mother's maiden name, etc.

Other Confidential Consumer Information: Party agrees to comply with the requirements of AHS Rule No. 08-048 concerning access to and uses of personal information relating to any beneficiary or recipient of goods, services or other forms of support. Party further agrees to comply with any applicable Vermont State

Statute and other regulations respecting the right to individual privacy. Party shall ensure that all of its employees, subcontractors and other service providers performing services under this agreement understand and preserve the sensitive, confidential and non-public nature of information to which they may have access.

Data Breaches: Party shall report to AHS, though its Chief Information Officer (CIO), any impermissible use or disclosure that compromises the security, confidentiality or privacy of any form of protected personal information identified above within 24 hours of the discovery of the breach. Party shall in addition comply with any other data breach notification requirements required under federal or state law.

8. Abuse and Neglect of Children and Vulnerable Adults:

Abuse Re2istry: Party agrees not to employ any individual, to use any volunteer or other service provider, or to otherwise provide reimbursement to any individual who in the performance of services connected with this agreement provides care, custody, treatment, transportation, or supervision to children or to vulnerable adults ifthere has been a substantiation of abuse or neglect or exploitation involving that individual. Party is responsible for confirming as to each individual having such contact with children or vulnerable adults the non-existence of a substantiated allegation of abuse, neglect or exploitation by verifying that fact though (a) as to vulnerable adults, the Adult Abuse Registry maintained by the Department of Disabilities, Aging and Independent Living and (b) as to children, the Central Child Protection Registry (unless the Party holds a valid child care license or registration from the Division of Child Development, Department for Children and Families). See 33 V.S.A. §4919(a)(3) and 33 V.S.A. §6911(c)(3).

Reporting of Abuse, Neglect, or Exploitation: Consistent with provisions of 33 V.S.A. §4913(a) and §6903, Party and any of its agents or employees who, in the performance of services connected with this agreement, (a) is a caregiver or has any other contact with clients and (b) has reasonable cause to believe that a child or vulnerable adult has been abused or neglected as defined in Chapter 49 or abused, neglected, or exploited as defined in Chapter 69 of Title 33 V.S.A. shall: as to children, make a report containing the information required by 33 V.S.A. §4914 to the Commissioner of the Department for Children and Families within 24 hours; or, as to a vulnerable adult, make a report containing the information required by 33 V.S.A. §6904 to the Division of Licensing and Protection at the Department of Disabilities, Aging, and Independent Living within 48 hours. Party will ensure that its agents or employees receive training on the reporting of abuse or neglect to children and abuse, neglect or exploitation of vulnerable adults.

9. Information Technology Systems:

Computing and Communication: Party shall select, in consultation with the Agency of Human Services' Information Technology unit, one of the approved methods for secure access to the State's systems and data, if required. Approved methods are based on the type of work performed by the Party as part of this agreement. Options include, but are not limited to:

1. Party's provision of certified computing equipment, peripherals and mobile devices, on a separate Party's network with separate internet access. The Agency of Human Services' accounts may or may not be provided.

2. State supplied and managed equipment and accounts to access state applications and data, including State issued active directory accounts and application specific accounts, which

follow the National Institutes of Standards and Technology (NIST) security and the Health Insurance Portability & Accountability Act (HIPAA) standards.

Intellectual Property/Work Product Ownership: All data, technical information, materials first gathered, originated, developed, prepared, or obtained as a condition of this agreement and used in the performance of this agreement -- including, but not limited to all reports, surveys, plans, charts, literature, brochures, mailings, recordings (video or audio), pictures, drawings, analyses, graphic representations, software computer programs and accompanying documentation and printouts, notes and memoranda, written procedures and documents, which are prepared for or obtained specifically for this agreement, or are a result of the services required under this grant -- shall be considered "work for hire" and remain the property of the State of Vermont, regardless of the state of completion unless otherwise specified in this agreement. Such items shall be delivered to the State of Vermont upon 30-days notice by the State. With respect to software computer programs and / or source codes first developed for the State, all the work shall be considered "work for hire," i.e., the State, not the Party (or subcontractor or sub-grantee), shall have full and complete ownership of all software computer programs, documentation and/or source codes developed.

Party shall not sell or copyright a work product or item produced under this agreement without explicit permission from the State of Vermont.

If Party is operating a system or application on behalf of the State of Vermont, Party shall not make information entered into the system or application available for uses by any other party than the State of Vermont, without prior authorization by the State. Nothing herein shall entitle the State to pre-existing Party's materials.

Party acknowledges and agrees that should this agreement be in support of the State's implementation of the Patient Protection and Affordable Care Act of 2010, Party is subject to the certain property rights provisions of the Code of Federal Regulations and a Grant from the Department of Health and Human Services, Centers for Medicare & Medicaid Services. Such agreement will be subject to, and incorporates here by reference, 45 CFR 74.36, 45 CFR 92.34 and 45 CFR 95.617 governing rights to intangible property.

Security and Data Transfers: Party shall comply with all applicable State and Agency of Human Services' policies and standards, especially those related to privacy and security. The State will advise the Party of any new policies, procedures, or protocols developed during the term of this agreement as they are issued and will work with the Party to implement any required.

Party will ensure the physical and data security associated with computer equipment, including desktops, notebooks, and other portable devices, used in connection with this Agreement. Party will also assure that any media or mechanism used to store or transfer data to or from the State includes industry standard security mechanisms such as continually up-to-date malware protection and encryption. Party will make every reasonable effort to ensure media or data files transferred to the State are virus and spyware free. At the conclusion of this agreement and after successful delivery of the data to the State, Party shall securely delete data (including archival backups) from Party's equipment that contains individually identifiable records, in accordance with standards adopted by the Agency of Human Services.

Party, in the event of a data breach, shall comply with the terms of Section 6 above.

10. Other Provisions:

Environmental Tobacco Smoke: Public Law 103-227 (also known as the Pro-Children Act of 1994) and Vermont's Act 135 (2014) (An act relating to smoking in lodging establishments, hospitals, and child care facilities, and on State lands) restrict the use of tobacco products in certain settings. Party shall ensure that no person is permitted: (i) to use tobacco products or tobacco substitutes as defined in 7 V.S.A. § 1001 on the premises, both indoor and outdoor, of any licensed child care center or afterschool program at any time; (ii) to use tobacco products or tobacco substitutes on the premises, both indoor and in any outdoor area designated for child care, health or day care services, kindergarten, pre-kindergarten, elementary, or secondary education or library services; and (iii) to use tobacco products or tobacco substitutes on the premises of a licensed or registered family child care home while children are present and in care. Party will refrain from promoting the use of tobacco products for all clients and from making tobacco products available to minors.

Failure to comply with the provisions of the federal law may result in the imposition of a civil monetary penalty of up to $1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity. The federal Pro-Children Act of 1994, however, does not apply to portions of facilities used for inpatient drug or alcohol treatment; service providers whose sole source of applicable federal funds is Medicare or Medicaid; or facilities where Women, Infants, & Children (WJC) coupons are redeemed.

2-1-1 Database: If Party provides health or human services within Vermont, or if Party provides such services near the Vermont border readily accessible to residents of Vermont, Party shall adhere to the "Inclusion/Exclusion" policy of Vermont's United Way/Vermont 211 (Vermont 211), and will provide to Vermont 211 relevant descriptive information regarding its agency, programs and/or contact information as well as accurate and up to date information to its database as requested. The "Inclusion/Exclusion" policy can be found at www.vermont211.org.

Voter Registration: When designated by the Secretary of State, Party agrees to become a voter registration agency as defmed by 17 V.S.A. §2103 (41), and to comply with the requirements of state and federal law pertaining to such agencies.

Drug Free Workplace Act: Party will assure a drug-free workplace in accordance with 45 CFR Part 76.

Lobbying: No federal funds under this agreement may be used to influence or attempt to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, continuation, renewal, amendments other than federal appropriated funds.

AHS ATL F 12.31.16

Division of Licensing and Protection
HC 2 South, 280 State Drive
Waterbury VT 05671-2060
http://www.dail.vermont.gov
Survey and Certification Voice/TTY (802) 241-0480
Survey and Certification Fax (802) 241-0343
Survey and Certification Reporting Line (888) 700-5330
To Report Adult Abuse: (800) 564-1612

April 30, 2018

Robyn Blaschak, Senior Manager-Competency Evaluation/Nurse Aide Testing Evaluation
American Red Cross
Robyn.blaschak@redcross.org

Dear Ms. Blaschak,

Congratulations! American Red Cross has been selected as the vendor to administer Vermont's Nurse Aide Competency Evaluation Program (NACEP), for the contract period beginning September 1, 2018. We look forward to developing a relationship with the American Red Cross. Please let me know who will be the preferred point person for completing this contract.

Sincerely,

Suzanne Leavitt, RN MS
State Survey Agency Director, Vermont

STATE OF VERMONT CONTRACT SUMMARY AND CERTIFICATION - - - - - - - - - - - Form AA-14 (12/15/2017)

Note: All sections must be completed. Incomplete forms will be returned to the originating department.

I. CONTRACT INFORMATION:

Agency/Department: AHS/DAIL/Division of Licensing and Protection **Contract #:** 36728 **Amendment #:**

Vendor Name: American Red Cross Competency Evaluation Program VISION Vendor No: 167525

Vendor Address: 85 Lowell St. Peabody, MA 01960-5413

Starting Date: 9/1/2018 **Ending Date:** 8/31/2020 **Amendment Date:**

Summary of agreement or amendment: Nurse Aide Testing Evaluation

II. FINANCIAL & ACCOUNTING INFORMATION

Maximum Payable: $95,000.00 Prior Maximum: $ Prior Contract # (If Renewal):

Current Amendment: $ Cumulative amendments: $ % Cumulative Change: 0.00

Business Unit(s): 3460; ; - [notes:] **VISION Account(s): 507600; 43350**

Estimated Funding Split:	50 % GF	% SF	% EF	% Other (name)
	% TF	% GC	50 % FF	

III. PROCUREMENT & PERFORMANCE INFORMATION (section A & B)

A. The agency has taken reasonable steps to control the price of the contract and to allow qualified organizations to compete for the work authorized by this contract. The agency has done this through:

☒ Standard Bid/RFP ☐ Simplified ☐ Sole Source ☐ Qualification Based Selection ☐ Statutory

B. Contract includes **performance measures/guarantees** to ensure the quality and/or results of the service? ☒ Yes ☐ No

IV. TYPE OF AGREEMENT (select all that apply)

☐ Personal Service ☐ Construction ☐ Arch/Eng. ☐ Marketing ☐ Info. Tech. ☐ Prof. Service

☒ Non-Personal Service

☐ Commodity ☐ Retiree/Former SOV EE ☐ Financial Trans ☐ Zero-Dollar ☐ Privatization ☒ Other

V. SUITABILITY FOR CONTRACT FOR SERVICE

☒ Yes ☐ No ☐ n/a Does this contract meet the determination of an Independent Contractor? If "NO", the contractor must be set up and paid on payroll through the VTHR system.

VI. CONTRACTING PLAN APPLICABLE

Is any element of this contract subject to a pre-approved Agency/Dept. Contracting Waiver Plan? ☐ Yes ☒ No

VII. CONFLICT OF INTEREST

By signing below, I (Agency/Dept. Head) certify that no person able to control or influence award of this contract had a pecuniary interest in its award or performance, either personally or through a member of his or her household, family, or business.

☐ Yes ☒ No Is there an "appearance" of a conflict of interest so that a reasonable person may conclude that this party was selected for improper reasons: (If yes, explain)

VIII. PRIOR APPROVALS REQUIRED OR REQUESTED

☒ Yes ☐ No Agreement must be Certified by the Attorney General under 3 V.S.A. § 342 (sign line #4 below)

☒ Yes ☐ No Attorney General review As To Form is required or requested:_____ (AAG initial)

☐ Yes ☒ No Agreement must be approved by the Secretary of ADS/CIO

☐ Yes ☒ No Agreement must be approved by the CMO: for Marketing services over $25,000

☐ Yes ☒ No Agreement must be approved by Comm. Human Resources: for Privatization, Retirees, Former Employees, & if a Contract fails the IRS test.

☐ Yes ☒ No Agreement must be approved by the Secretary of Administration

IX. AGENCY/DEPARTMENT HEAD CERTIFICATION; APPROVAL

I have made reasonable inquiry as to the accuracy of the above information (sign in order):

e-Signed by Diane Nealy on 2018-08-30 15:01:04 GMT

1-Date	1-Agency/Department Head	2-Date	2-Agency Secretary (if required)
	e-Signed by Monica Hutt on 2018-08-28 20:06:40 GMT		

3a-Date	3a-CIO	3b-Date	3b-CMO	3c-Date	3c-Commissioner DHR

4-Date	4-Attorney General	5-Date	5-Secretary of Administration
	e-Signed by Jared Bianchi on 2018-08-29 15:18:47 GMT		

STANDARD CONTRACT FOR SERVICES

1. ***Parties.*** This is a contract for services between the State of Vermont, Department of Disabilities, Aging, and Independent Living, hereinafter called "State"), and The American Red Cross Competency Evaluation Program, with a principal place of business in 85 Lowell Street, Peabody, MA 01960-5413 (hereinafter called "Contractor"). Contractor's form of business organization is a Domestic Non-profit Corporation. It is Contractor's responsibility to contact the Vermont Department of Taxes to determine if, by law, Contractor is required to have a Vermont Department of Taxes Business Account Number.

2. ***Subject Matter.*** The subject matter of this contract is services generally on the subject of administration of a nurse assistant competency testing/evaluation program to approximately 800 nursing assistants per year and reporting the test results to the State. Detailed services to be provided by Contractor are described in Attachment A.

3. ***Maximum Amount***. In consideration of the services to be performed by Contractor, the State agrees to pay Contractor, in accordance with the payment provisions specified in Attachment B, a sum not to exceed $95,000.00.

4. ***Contract Term.*** The period of Contractor's performance shall begin on September 1, 2018 and end on August 31, 2020. There is the option to renew the Contract for two (2) additional one (1) year periods thereafter.

5. ***Prior Approvals.*** This Contract shall not be binding unless and until all requisite prior approvals have been obtained in accordance with current State law, bulletins, and interpretations.

6. ***Amendment.*** No changes, modifications, or amendments in the terms and conditions of this contract shall be effective unless reduced to writing, numbered and signed by the duly authorized representative of the State and Contractor.

7. ***Termination for Convenience.*** This contract may be terminated by the State at any time by giving written notice at least thirty (30) calendar days in advance. In such event, Contractor shall be paid under the terms of this contract for all services provided to and accepted by the State prior to the effective date of termination.

8. ***Attachments***. This contract consists of 37 pages including the following attachments which are incorporated herein:

Attachment A - Statement of Work

Attachment B - Payment Provisions

Attachment C – "Standard State Provisions for Contracts and Grants" a preprinted form (revision date 12/15/2017)

Attachment D - Other Provisions

Attachment E – Business Associate Agreement (Not Used)

Attachment F – Agency of Human Services Customary Contract/Grant Provisions

9. ***Order of Precedence***. Any ambiguity, conflict or inconsistency between the documents comprising this contract shall be resolved according to the following order of precedence:

(1) Standard Contract

(2) Attachment D (if applicable)

(3) Attachment C (Standard State Provisions for Contracts and Grants)

(4) Attachment A

(5) Attachment B

(6) Attachment E – Business Associate Agreement (Not Used)

(7) Attachment F – Agency of Human Services Customary Contract/Grant Provisions

WE THE UNDERSIGNED PARTIES AGREE TO BE BOUND BY THIS CONTRACT

By the State of Vermont:

Date: _____

Signature: e-Signed by Monica Hutt on 2018-08-30 16:39:04 GMT

Name: Monica Caserta Hutt, Commissioner

Dept. of Disabilities, Aging and Independent Living

By the Contractor:

Date: _____

Signature: e-Signed by Robyn Blascak on 2018-08-30 16:32:41 GMT

Name: _____

Title: Senior Manager - Competency Evaluation Program

ATTACHMENT A – STATEMENT OF WORK

The Contractor shall: Conduct a nurse assistant competency testing/evaluation program meeting federal requirements, including both written and clinical components, to be implemented on September 1, 2018.

Nursing assistant Competency Evaluation Program, (CEP) examination measures nurse aide-related knowledge, skills, and abilities. The CEP Examination is made up of both a written examination and a skills Evaluation.

1. Contractual Objectives

A. **Test Development**

The Department has statutory responsibility to assure the competency of certified nurse aides within the State of Vermont, and a primary means of fulfilling this responsibility is through the certification process. The Department uses certification examinations to determine if prospective candidates possess the minimum knowledge, skills and abilities to competently provide services to the public.

B. Administration

The Contractor will provide the CEP certification examination program that is administered in a professional, secure, and efficient manner. Candidates will be able to schedule examinations within 30 calendar days of the submission date of a completed exam application.

The examinations will be given in a convenient and comfortable environment and no more than a two (2) hour drive from the training program location.

1. The CEP Examination is composed of a written examination and a skills Evaluation.
2. Contractor will utilize only Registered Nurses as Nurse Aide Evaluators (NAEs) (test evaluators).
3. Contractor will utilize only Registered Nurses to train NAEs (test evaluators)
4. Contractor will provide pre-examination materials, including at a minimum, sample test questions for each candidate and materials for the nurse assistants explaining the testing process.
5. Contractor will provide protection and security of all testing materials including a variety of alternative examination forms.
6. Contractor will provide applicants with a confirmation of test date at least ten (10) business days prior to the exam.
7. Candidates must pass both portions of the examination to become certified. If a candidate fails one part, the candidate can re-schedule an examination to re-take only the portion that they failed.
8. Candidates are permitted (3) attempts to take the exam within two (2) years of completing their state approved training program. If the candidate does not pass both

exams within the two (2) year period, the candidate will be required to successfully re-train at a state-approved training program prior to taking the exam again.

9. Contractor will administer, score and report examination results to the student.
10. Candidates will be provided their examination results before they leave the testing location.
11. Contractor will provide, within ten (10) business days, detailed result to the training program and candidate following each test event that indicate areas in which the candidate was deficient.
12. Contractor will provide testing in a manner that is non-intimidating to and respectful of the candidates, taking into consideration that many candidates will have minimal education and may never have taken this type of test before.
13. Contractor will provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality.
14. Contractor shall provide a test dispute process that addresses disputes promptly and professionally.
15. Provide customer support and an In-state Nurse Coordinator. Customers include testing candidates, training program staff, Board of Nursing staff and Department of Disabilities, Aging and Independent Living staff.
16. Contractor will provide a live representative to resolve any problems on each exam day.
17. A Registered Nurse will visit test sites prior to approving a test site and annually thereafter to audit and ensure adequacy of the testing facility.
18. Contractor shall prohibit nurse aide evaluators who teach in a nurse aide training program from serving as NAEs for current or former students.
19. Contractor shall provide a plan that explains how records will be turned over to DAIL upon termination of the contract.
20. Contractor shall allow a designated state official to observe written or skills exams at random with appropriate notice to the Contractor.
21. Contractor shall establish and maintain quality assurance standards at test centers to assure consistency among raters and adequate quality of equipment.
22. Contractor will provide different methods of administering the competency testing/evaluation programs including:
    i. Oral administration of written exams;
    ii. Exams for candidates who require ADA accommodations

C. Reporting

1. The test results will be reported by the Contractor to the Vermont Board of Nursing via the following reports in a digital/electronic format via email attachment.
2. Provide pass rates by date, exam type, and exam site (quarterly and annually), scored and separated by training program name.

3. Number of exams administered and results (quarterly and annually), accompanied by comparison data from National data sources where available.
4. Pass rates by exam type and by first-time exams, repeat exams, and total overall success rates.
5. Pass rates by exam type and by first-time exams, repeat exams and total overall success rates by training program that compares pass rates to the State pass rate.
6. Provide annual Nurse Aide Evaluator performance audit reports.
7. Identify content and or skills missed by test candidates to the candidate and training program, immediately and no less than monthly, following each test session. Results shall be sent as soon as possible after the test to the candidate and the training program.
8. Provide all training programs and the Vermont Board of Nursing with a quarterly newsletter that includes an analysis of test performance, tips, tools and/or helpful information based on Vermont test performance.

2. Processes and Procedures

A. Authorization Process. Contractor will work with the state to ensure an application review process for determining candidate eligibility is in place, including a process to ensure timely receipt of the Board of Nursing authorization to test letter.

B. ADA Procedures

The Vermont Board of Nursing will review and approve an applicant's request for special consideration under the Americans with Disabilities Act (ADA) and will notify the Contractor of candidates who are authorized for accommodations. If authorized by the Board of Nursing, the Contractor will provide additional examination time, a reader, a special room based, or other accommodations as needed on the candidate's written request and documentation.

C. Reservation Processes and Procedures

Approved candidates will be directed to acquire and submit an exam application using any of the following options:

1. Online registration via American Red Cross website www.redcross.org.
2. Phone registration 1-800-773-2767 M – F 7:30 AM to 10:00 PM EST and
   Saturday 7:30 AM – 8:00 PM EST.

Candidates will have ability to request to test at any Regional test center location within the state of Vermont or onsite at their approved facility or approved training program location.

1. State - approved training programs may apply to American Red Cross for an "in-facility" examination date that is mutually agreed upon and provided a minimum of six (6) candidates will be scheduled to test. This will be provided by American

Red Cross at no extra charge to the State.

2. The In-state coordinator shall approve testing site approvals within a week, or five (5) business days, of the request.

The Contractor will schedule testing at the test center locations to ensure that sufficient seating capacity is available and that candidates are able to schedule within a reasonable time of requested test date.

Candidates are permitted to cancel/change an examination date up to five (5) business days prior to a scheduled examination date.

D. Exam Administration Processes and Procedures

To achieve DAIL's stated objectives, American Red Cross will administer the CEP examination.

Upon arrival at the test center, candidates will be required to present two forms of signature-bearing identification; one must be a government-issued photo-bearing identification. The second form of ID may include social security card, admission notice, car registration or utility bill. Failure to provide the required identification will preclude administration of the exam. Candidates will also be required to sign the test center roster.

Once the examination is complete, the test center personnel will issue each candidate a score report. If a candidate fails the examination, the candidate's score, in addition to a diagnostic evaluation of their examination, will be printed on the score report, along with instructions on how to reschedule and obtain more information about the examination.

E. Retake Restrictions

Candidates are permitted three (3) attempts to pass both portions of the exam, within two (2) years after their training completion date**.** If the candidate does not pass the examination within the number of retake opportunities, the candidate will be required to re-train at a state approved training program prior to taking the exam again.

Contractor will manage re-testing and describe the costs for the second and third attempts.

3. Project Implementation Timelines

Begin taking reservations: August 1, 2018

Begin testing: September 1, 2018

4. Assumptions

Contractor or its subcontractor shall provide management of Vermont test sites by providing the following services:

a. The Contractor shall locate and contract with sites (i.e., nursing homes, community colleges, nursing assistant training programs, etc.) in the state of Vermont, to rent suitable space to facilitate administration of the CEP examination. Such sites will be identified as Regional Test Sites (RTS) and will be available to candidates across

the state to select.

b. The Contractor shall execute a Facility Use Agreement with each approved RTS prior to the administration of a CEP examination. CEP examinations may not be scheduled at an RTS location for which there is not a currently executed Facility Use Agreement.

c. The Contractor shall require that potential RTS sites must have and maintain in good working order all equipment required for the CEP Skills evaluation. Sites must also provide classroom style space suitable for administration of the written examination.

d. The Contractor will physically inspect all RTS test sites annually to: (1) ensure each location continues to meet the RTS requirements, and (2) review the adequacy of test sites to ensure continued suitability of the location to serve as an American Red Cross RTS test site. Inspections shall to be documented. RTS test site deficiencies will be clearly identified with a specific plan of corrective action clearly specified, including a completion/re-inspection date.

e. The Contractor shall arrange for each contracted RTS test site to provide test dates for the next calendar year.

f. The Contractor shall pay each contracted RTS test site, a monthly rental fee as specified by the test site contract.

g. The Contractor shall secure an RTS in each geographic location mutually agreed to by DAIL and American Red Cross and is available to test on a schedule mutually agreeable to Contractor and DAIL through the term of the contract period.

h. The Contractor will allow state-approved nurse aide training programs to request in-facility test dates wherein only candidates associated with the facility or approved by the facility will be tested, provided the facility has all of the equipment and space to necessary to accommodate administration of the nurse aide exam. Contractor will assign an evaluator to administer each approved in-facility exam date.

- Contractor shall provide management of Vermont evaluators by providing the following services:

a. The Contractor shall select, contract with, and train registered nurses, with at least two years of experience and one-year of employment experience caring for the elderly or chronically ill of any age to serve as evaluators and in sufficient numbers to facilitate the regional test site examination schedule.

b. The Contractor's In-state coordinator will conduct all training sessions for nurse evaluators.

c. The Contractor will assure that each nurse will go through an annual evaluation cycle and the In-state coordinator will meet twice a year with nurse evaluators. All audits and recommendations will be documented and available for review upon request.

d. The Contractor or its subcontractor will audit, at a minimum of once every 12 months, an actual administration of each evaluator to ensure continued compliance with American Red Cross's published test administration protocol. Evaluator audits will be documented. Evaluator deficiencies are to be clearly identified with a

specific plan of corrective action clearly specified, including a completion/re-audit date.

5. Evaluation of services provided by Contractor. The Contractor is expected to meet the following Performance Measures:

1. The Contractor shall provide the Instructors with updates, information, and guidance for Nurse Aide Training Instructors and program administrators on a quarterly basis, preferably in the form of a quarterly newsletter. The Quarterly Newsletter shall benchmark performance, include a review of most common areas of concern, provide tips/tricks and updates, and shall support instruction of Nurse Aide candidates.

2. The Contractor shall write test questions using a Nurse Aide Job Analysis as the basis for new questions and revisions.

3. The Contractor shall provide ongoing monitoring of test sites and test observers at least on an annual basis.

4. The Contractor shall provide a test dispute process that addresses disputes promptly and professionally.

5. The Contractor shall provide a candidate testing application that is easy to read, understand, and complete.

6. The Contractor will provide customer support that is immediately available during all testing events for technical assistance.

7. The Contractor will provide customer support that is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry.

8. The Contractor will ensure objectivity and interrater reliability during and for the testing process.

9. The Contractor will provide skill performance steps that are clear, objective and evidence based.

10. The Contractor will provide all candidates with a test date that is no more than 30 calendar days from the completed application being received and that is within a 2 hour drive from the training program.

11. The Contractor shall participate in ongoing communications with the Vermont Board of Nursing and DAIL regarding the implementation of this contract and to promptly address any concerns.

12. The Contractor will customize skill and clinical testing details, including customization of skills when requested by the State.

ATTACHMENT B – PAYMENT PROVISIONS

The maximum dollar amount payable under this contract is not intended as any form of a guaranteed amount. The Contractor will be paid for products or services actually delivered or performed, as specified in Attachment A, up to the maximum allowable amount specified on page 1 of this contract.

1. Prior to commencement of work and release of any payments, Contractor shall submit to the State:
    a. a certificate of insurance consistent with the requirements set forth in Attachment C, Section 8 (Insurance), and with any additional requirements for insurance as may be set forth elsewhere in this contract; and
    b. a current IRS Form W-9 (signed within the last six months).
2. Payment terms are **Net 30** days from the date the State receives an error-free invoice with all necessary and complete supporting documentation.
3. Contractor shall submit detailed invoices itemizing all work performed during the invoice period, including the dates of service, rates of pay, hours of work performed, and any other information and/or documentation appropriate and sufficient to substantiate the amount invoiced for payment by the State. All invoices must include the Contract # (36728) for this contract.
4. Contractor shall submit invoices to the State in accordance with the schedule set forth in this Attachment B. Unless a more particular schedule is provided herein, invoices shall be submitted not more frequently than monthly.
5. The Contractor shall have a mechanism in place to bill the State directly for those candidates who are currently employed or who have an offer of employment by a Nursing Facility participating in Medicare or Medicaid at the time of the test, and who have completed the scheduling process to take the exam(s), either as first time candidates or a re-taker. The Contractor will adjust or offset future bills with reductions for any scheduled tests that were not completed due to excused absences, need to reschedule due to candidate or observer illness/accident, or cancellation of testing for any other acceptable reason. No adjustments are needed to future bills due to “no shows”.
6. The Contractor shall collect the test fees from the candidate prior to administering the test for those candidates who are not employed by a nursing facility at the time of the test, nor have an offer of employment. The State shall not reimburse the Contractor for these tests.
7. The payment schedule for delivered products, or rates for services performed, and any additional reimbursements, are as follows: For those candidates who are employed by a

CMS certified nursing facility or have an offer of employment at the time of test registration:

Exam	Fee
Written and skills:	$130.00/per exam
Written/oral test only:	$35.00/per exam
Clinical/skills test only:	95.00/per exam

8. The State does not pay for no-shows, but the contractor may bill the candidate. The State does not pay for re-scheduling fees in addition to test rate.
9. The contractor will submit, along with the invoice, a list of candidates who tested and dates of test. Candidates who were considered "no-shows" shall not be included on this list.
10. Invoices shall be submitted to the State at the following address: Suzanne.leavitt@Vermont.gov.
11. In the event the Contractor fall short of the targeted contractual obligations listed in Attachment A, the Contractor will be notified by the State Survey Agency requiring a plan of correction be submitted to the State within thirty (30) days, detailing how the Contractor plans to address and improve the results of these obligations.

ATTACHMENT C: STANDARD STATE PROVISIONS FOR CONTRACTS AND GRANTS
REVISED DECEMBER 15, 2017

1. Definitions: For purposes of this Attachment, "Party" shall mean the Contractor, Grantee or Subrecipient, with whom the State of Vermont is executing this Agreement and consistent with the form of the Agreement. "Agreement" shall mean the specific contract or grant to which this form is attached.

2. Entire Agreement: This Agreement, whether in the form of a contract, State-funded grant, or Federally-funded grant, represents the entire agreement between the parties on the subject matter. All prior agreements, representations, statements, negotiations, and understandings shall have no effect.

3. Governing Law, Jurisdiction and Venue; No Waiver of Jury Trial: This Agreement will be governed by the laws of the State of Vermont. Any action or proceeding brought by either the State or the Party in connection with this Agreement shall be brought and enforced in the Superior Court of the State of Vermont, Civil Division, Washington Unit. The Party irrevocably submits to the jurisdiction of this court for any action or proceeding regarding this Agreement. The Party agrees that it must first exhaust any applicable administrative remedies with respect to any cause of action that it may have against the State with regard to its performance under this Agreement. Party agrees that the State shall not be required to submit to binding arbitration or waive its right to a jury trial.

4. Sovereign Immunity: The State reserves all immunities, defenses, rights or actions arising out of the State's sovereign status or under the Eleventh Amendment to the United States Constitution. No waiver of the State's immunities, defenses, rights or actions shall be implied or otherwise deemed to exist by reason of the State's entry into this Agreement.

5. No Employee Benefits For Party: The Party understands that the State will not provide any individual retirement benefits, group life insurance, group health and dental insurance, vacation or sick leave, workers compensation or other benefits or services available to State employees, nor will the State withhold any state or Federal taxes except as required under applicable tax laws, which shall be determined in advance of execution of the Agreement. The Party understands that all tax returns required by the Internal Revenue Code and the State of Vermont, including but not limited to income, withholding, sales and use, and rooms and meals, must be filed by the Party, and information as to Agreement income will be provided by the State of Vermont to the Internal Revenue Service and the Vermont Department of Taxes.

6. Independence: The Party will act in an independent capacity and not as officers or employees of the State.

7. Defense and Indemnity: The Party shall defend the State and its officers and employees against all third party claims or suits arising in whole or in part from any act or omission of the Party or of any agent of the Party in connection with the performance of this Agreement. The State shall notify the Party in the event of any such claim or suit, and the Party shall immediately retain counsel and otherwise provide a complete defense against the entire claim or suit. The State retains the right to participate at its own expense in the defense of any claim. The State shall have the right to approve all proposed settlements of such claims or suits.

After a final judgment or settlement, the Party may request recoupment of specific defense costs and may file suit in Washington Superior Court requesting recoupment. The Party shall be entitled to recoup costs only upon a showing that such costs were entirely unrelated to the defense of any claim arising from an act or omission of the Party in connection with the performance of this Agreement.

The Party shall indemnify the State and its officers and employees if the State, its officers or employees become legally obligated to pay any damages or losses arising from any act or omission of the Party or an agent of the Party in connection with the performance of this Agreement.

Notwithstanding any contrary language anywhere, in no event shall the terms of this Agreement or any document furnished by the Party in connection with its performance under this Agreement obligate the State to (1) defend or indemnify the Party or any third party, or (2) otherwise be liable for the expenses or reimbursement, including attorneys' fees, collection costs or other costs of the Party or any third party.

8. Insurance: Before commencing work on this Agreement the Party must provide certificates of insurance to show that the following minimum coverages are in effect. It is the responsibility of the Party to maintain current certificates of insurance on file with the State through the term of this Agreement. No warranty is made that the coverages and limits listed herein are adequate to cover and protect the interests of the Party for the Party's operations. These are solely minimums that have been established to protect the interests of the State.

Workers Compensation: With respect to all operations performed, the Party shall carry workers' compensation insurance in accordance with the laws of the State of Vermont. Vermont will accept an out-of-state employer's workers' compensation coverage while operating in Vermont provided that the insurance carrier is licensed to write insurance in Vermont and an amendatory endorsement is added to the policy adding Vermont for coverage purposes. Otherwise, the party shall secure a Vermont workers' compensation policy, if necessary to comply with Vermont law.

General Liability and Property Damage: With respect to all operations performed under this Agreement, the Party shall carry general liability insurance having all major divisions of coverage including, but not limited to:

Premises - Operations

Products and Completed Operations

Personal Injury Liability

Contractual Liability

The policy shall be on an occurrence form and limits shall not be less than:

$1,000,000 Each Occurrence

$2,000,000 General Aggregate

$1,000,000 Products/Completed Operations Aggregate

$1,000,000 Personal & Advertising Injury

Automotive Liability: The Party shall carry automotive liability insurance covering all motor vehicles, including hired and non-owned coverage, used in connection with the Agreement. Limits of coverage shall not be less than $500,000 combined single limit. If performance of this Agreement involves construction, or the transport of persons or hazardous materials, limits of coverage shall not be less than $1,000,000 combined single limit.

Additional Insured. The General Liability and Property Damage coverages required for performance of this Agreement shall include the State of Vermont and its agencies, departments, officers and employees as Additional Insureds. If performance of this Agreement involves construction, or the transport of persons or hazardous materials, then the required Automotive Liability coverage shall include the State of Vermont and its agencies, departments, officers and employees as Additional Insureds. Coverage shall be primary and non-contributory with any other insurance and self-insurance.

Notice of Cancellation or Change. There shall be no cancellation, change, potential exhaustion of aggregate limits or non-renewal of insurance coverage(s) without thirty (30) days written prior written notice to the State.

9. Reliance by the State on Representations: All payments by the State under this Agreement will be made in reliance upon the accuracy of all representations made by the Party in accordance with this Agreement, including but not limited to bills, invoices, progress reports and other proofs of work.

10. False Claims Act: The Party acknowledges that it is subject to the Vermont False Claims Act as set forth in 32 V.S.A. § 630 *et seq*. If the Party violates the Vermont False Claims Act it shall be liable to the State for civil penalties, treble damages and the costs of the investigation and prosecution of such violation, including attorney's fees, except as the same may be reduced by a court of competent jurisdiction. The Party's liability to the State under the False Claims Act shall not be limited notwithstanding any agreement of the State to otherwise limit Party's liability.

11. Whistleblower Protections: The Party shall not discriminate or retaliate against one of its employees or agents for disclosing information concerning a violation of law, fraud, waste, abuse of authority or acts threatening health or safety, including but not limited to allegations concerning the False Claims Act. Further, the Party shall not require such employees or agents to forego monetary awards as a result of such disclosures, nor should they be required to report misconduct to the Party or its agents prior to reporting to any governmental entity and/or the public.

12. Location of State Data: No State data received, obtained, or generated by the Party in connection with performance under this Agreement shall be processed, transmitted, stored, or transferred by any means outside the continental United States, except with the express written permission of the State.

13. Records Available for Audit: The Party shall maintain all records pertaining to performance under this agreement. "Records" means any written or recorded information, regardless of physical form or characteristics, which is produced or acquired by the Party in the performance of this agreement. Records produced or acquired in a machine readable electronic format shall be maintained in that format. The records described shall be made available at reasonable times during the period of the Agreement and for three years thereafter or for any period required by law for inspection by any authorized representatives of the State or Federal Government. If any litigation, claim, or audit is started before the expiration of the three-year period, the records shall be retained until all litigation, claims or audit findings involving the records have been resolved.

14. Fair Employment Practices and Americans with Disabilities Act: Party agrees to comply with the requirement of 21 V.S.A. Chapter 5, Subchapter 6, relating to fair employment practices, to the full extent applicable. Party shall also ensure, to the full extent required by the Americans with Disabilities Act of 1990, as amended, that qualified individuals with disabilities receive equitable access to the services, programs, and activities provided by the Party under this Agreement.

15. Set Off: The State may set off any sums which the Party owes the State against any sums due the Party under this Agreement; provided, however, that any set off of amounts due the State of Vermont as taxes shall be in accordance with the procedures more specifically provided hereinafter.

16. Taxes Due to the State:

- **A.** Party understands and acknowledges responsibility, if applicable, for compliance with State tax laws, including income tax withholding for employees performing services within the State, payment of use tax on property used within the State, corporate and/or personal income tax on income earned within the State.
- **B.** Party certifies under the pains and penalties of perjury that, as of the date this Agreement is signed, the Party is in good standing with respect to, or in full compliance with, a plan to pay any and all taxes due the State of Vermont.

C. Party understands that final payment under this Agreement may be withheld if the Commissioner of Taxes determines that the Party is not in good standing with respect to or in full compliance with a plan to pay any and all taxes due to the State of Vermont.

D. Party also understands the State may set off taxes (and related penalties, interest and fees) due to the State of Vermont, but only if the Party has failed to make an appeal within the time allowed by law, or an appeal has been taken and finally determined and the Party has no further legal recourse to contest the amounts due.

17. Taxation of Purchases: All State purchases must be invoiced tax free. An exemption certificate will be furnished upon request with respect to otherwise taxable items.

18. Child Support: (Only applicable if the Party is a natural person, not a corporation or partnership.) Party states that, as of the date this Agreement is signed, he/she:

A. is not under any obligation to pay child support; or

B. is under such an obligation and is in good standing with respect to that obligation; or

C. has agreed to a payment plan with the Vermont Office of Child Support Services and is in full compliance with that plan.

Party makes this statement with regard to support owed to any and all children residing in Vermont. In addition, if the Party is a resident of Vermont, Party makes this statement with regard to support owed to any and all children residing in any other state or territory of the United States.

19. Sub-Agreements: Party shall not assign, subcontract or subgrant the performance of this Agreement or any portion thereof to any other Party without the prior written approval of the State. Party shall be responsible and liable to the State for all acts or omissions of subcontractors and any other person performing work under this Agreement pursuant to an agreement with Party or any subcontractor.

In the case this Agreement is a contract with a total cost in excess of $250,000, the Party shall provide to the State a list of all proposed subcontractors and subcontractors' subcontractors, together with the identity of those subcontractors' workers compensation insurance providers, and additional required or requested information, as applicable, in accordance with Section 32 of The Vermont Recovery and Reinvestment Act of 2009 (Act No. 54).

Party shall include the following provisions of this Attachment C in all subcontracts for work performed solely for the State of Vermont and subcontracts for work performed in the State of Vermont: Section 10 ("False Claims Act"); Section 11 ("Whistleblower Protections"); Section 12 ("Location of State Data"); Section 14 ("Fair Employment Practices and Americans with Disabilities Act"); Section 16 ("Taxes Due the State"); Section 18 ("Child Support"); Section 20 ("No Gifts or Gratuities"); Section 22 ("Certification Regarding Debarment"); Section 30 ("State Facilities"); and Section 32.A ("Certification Regarding Use of State Funds").

20. No Gifts or Gratuities: Party shall not give title or possession of anything of substantial value (including property, currency, travel and/or education programs) to any officer or employee of the State during the term of this Agreement.

21. Copies: Party shall use reasonable best efforts to ensure that all written reports prepared under this Agreement are printed using both sides of the paper.

22. Certification Regarding Debarment: Party certifies under pains and penalties of perjury that, as of the date that this Agreement is signed, neither Party nor Party's principals (officers, directors, owners, or partners) are presently debarred, suspended, proposed for debarment, declared ineligible or excluded from participation in Federal programs, or programs supported in whole or in part by Federal funds.

Party further certifies under pains and penalties of perjury that, as of the date that this Agreement is signed, Party is not presently debarred, suspended, nor named on the State's debarment list at: http://bgs.vermont.gov/purchasing/debarment

23. Conflict of Interest: Party shall fully disclose, in writing, any conflicts of interest or potential conflicts of interest.

24. Confidentiality: Party acknowledges and agrees that this Agreement and any and all information obtained by the State from the Party in connection with this Agreement are subject to the State of Vermont Access to Public Records Act, 1 V.S.A. § 315 et seq.

25. Force Majeure: Neither the State nor the Party shall be liable to the other for any failure or delay of performance of any obligations under this Agreement to the extent such failure or delay shall have been wholly or principally caused by acts or events beyond its reasonable control rendering performance illegal or impossible (excluding strikes or lock-outs) ("Force Majeure"). Where Force Majeure is asserted, the nonperforming party must prove that it made all reasonable efforts to remove, eliminate or minimize such cause of delay or damages, diligently pursued performance of its obligations under this Agreement, substantially fulfilled all non-excused obligations, and timely notified the other party of the likelihood or actual occurrence of an event described in this paragraph.

26. Marketing: Party shall not refer to the State in any publicity materials, information pamphlets, press releases, research reports, advertising, sales promotions, trade shows, or marketing materials or similar communications to third parties except with the prior written consent of the State.

27. Termination:

A. Non-Appropriation: If this Agreement extends into more than one fiscal year of the State (July 1 to June 30), and if appropriations are insufficient to support this Agreement, the State may cancel at the end of the fiscal year, or otherwise upon the expiration of existing appropriation authority. In the case that this Agreement is a Grant that is funded in whole or in part by Federal funds, and in the event Federal funds become unavailable or reduced, the State may suspend or cancel this Grant immediately, and the State shall have no obligation to pay Subrecipient from State revenues.

B. Termination for Cause: Either party may terminate this Agreement if a party materially breaches its obligations under this Agreement, and such breach is not cured within thirty (30) days after delivery of the non-breaching party's notice or such longer time as the non-breaching party may specify in the notice.

C. Termination Assistance: Upon nearing the end of the final term or termination of this Agreement, without respect to cause, the Party shall take all reasonable and prudent measures to facilitate any transition required by the State. All State property, tangible and intangible, shall be returned to the State upon demand at no additional cost to the State in a format acceptable to the State.

28. Continuity of Performance: In the event of a dispute between the Party and the State, each party will continue to perform its obligations under this Agreement during the resolution of the dispute until this Agreement is terminated in accordance with its terms.

29. No Implied Waiver of Remedies: Either party's delay or failure to exercise any right, power or remedy under this Agreement shall not impair any such right, power or remedy, or be construed as a waiver of any such right, power or remedy. All waivers must be in writing.

30. State Facilities: If the State makes space available to the Party in any State facility during the term of this Agreement for purposes of the Party's performance under this Agreement, the Party shall only use the space in accordance with all policies and procedures governing access to and use of State facilities which shall be made available upon request. State facilities will be made available to Party on an "AS IS, WHERE IS" basis, with no warranties whatsoever.

31. Requirements Pertaining Only to Federal Grants and Subrecipient Agreements: If this Agreement is a grant that is funded in whole or in part by Federal funds:

A. Requirement to Have a Single Audit: The Subrecipient will complete the Subrecipient Annual Report annually within 45 days after its fiscal year end, informing the State of Vermont whether or not a Single Audit is required for the prior fiscal year. If a Single Audit is required, the Subrecipient will submit a copy of the audit report to the granting Party within 9 months. If a single audit is not required, only the Subrecipient Annual Report is required.

For fiscal years ending before December 25, 2015, a Single Audit is required if the subrecipient expends $500,000 or more in Federal assistance during its fiscal year and must be conducted in accordance with OMB Circular A-133. For fiscal years ending on or after December 25, 2015, a Single Audit is required if the subrecipient expends $750,000 or more in Federal assistance during its fiscal year and must be conducted in accordance with 2 CFR Chapter I, Chapter II, Part 200, Subpart F. The Subrecipient Annual Report is required to be submitted within 45 days, whether or not a Single Audit is required.

B. Internal Controls: In accordance with 2 CFR Part II, §200.303, the Party must establish and maintain effective internal control over the Federal award to provide reasonable assurance that the Party is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the award. These internal controls should be in compliance with guidance in "Standards for Internal Control in the Federal Government" issued by the Comptroller General of the United States and the "Internal Control Integrated Framework", issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).

C. Mandatory Disclosures: In accordance with 2 CFR Part II, §200.113, Party must disclose, in a timely manner, in writing to the State, all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award. Failure to make required disclosures may result in the imposition of sanctions which may include disallowance of costs incurred, withholding of payments, termination of the Agreement, suspension/debarment, etc.

32. Requirements Pertaining Only to State-Funded Grants:

A. Certification Regarding Use of State Funds: If Party is an employer and this Agreement is a State-funded grant in excess of $1,001, Party certifies that none of these State funds will be used to interfere with or restrain the exercise of Party's employee's rights with respect to unionization.

B. Good Standing Certification (Act 154 of 2016): If this Agreement is a State-funded grant, Party hereby represents: (i) that it has signed and provided to the State the form prescribed by the Secretary of Administration for purposes of certifying that it is in good standing (as provided in Section 13(a)(2) of Act 154) with the Agency of Natural Resources and the Agency of Agriculture, Food and Markets, or otherwise explaining the circumstances surrounding the inability to so certify, and (ii) that it will comply with the requirements stated therein.

(End of Standard Provisions)

ATTACHMENT D

MODIFICATION OF REQUIREMENTS IN ATTACHMENT C

1. The following requirements contained in Attachment C, Paragraph 8 are hereby Amended:

- Under the sub-heading General Liability and Property Damage: The first sentence is amended to read "The policy shall be written on a claims made basis".
- Under the sub-heading Automotive Liability: The paragraph is deleted and shall read "The Party shall carry automotive liability insurance covering all motor vehicles, including hired and non-owned coverage, and owned (if the automobiles are owned by the Party) used in connection with the Agreement. Limits of coverage shall not be less than $1,000,000 combined single limit".
- Under the sub-heading Notice of Cancellation or change: The paragraph is amended to read "The Party agrees to give a thirty (day) written notice to the State if any of the insurance coverages and/or limits are to be reduced, whether by cancellation, non-renewal, endorsement, or otherwise, to levels that no longer meet the insurance requirements in this Agreement.

e-Signed by Jared Bianchi
on 2018-08-29 15:18:47 GMT

AHS – revised 10/7/2016

Attachment F
AGENCY OF HUMAN SERVICES' CUSTOMARY CONTRACT/GRANT PROVISIONS

1. **Definitions:** For purposes of this Attachment F, the term "Agreement" shall mean the form of the contract or grant, with all of its parts, into which this Attachment F is incorporated. The meaning of the term "Party" when used in this Attachment F shall mean any named party to this Agreement *other than* the State of Vermont, the Agency of Human Services (AHS) and any of the departments, boards, offices and business units named in this Agreement. As such, the term "Party" shall mean, when used in this Attachment F, the Contractor or Grantee with whom the State of Vermont is executing this Agreement. If Party, when permitted to do so under this Agreement, seeks by way of any subcontract, sub-grant or other form of provider agreement to employ any other person or entity to perform any of the obligations of Party under this Agreement, Party shall be obligated to ensure that all terms of this Attachment F are followed. As such, the term "Party" as used herein shall also be construed as applicable to, and describing the obligations of, any subcontractor, sub-recipient or sub-grantee of this Agreement. Any such use or construction of the term "Party" shall not, however, give any subcontractor, sub-recipient or sub-grantee any substantive right in this Agreement without an express written agreement to that effect by the State of Vermont.

2. **Agency of Human Services**: The Agency of Human Services is responsible for overseeing all contracts and grants entered by any of its departments, boards, offices and business units, however denominated. The Agency of Human Services, through the business office of the Office of the Secretary, and through its Field Services Directors, will share with any named AHS-associated party to this Agreement oversight, monitoring and enforcement responsibilities. Party agrees to cooperate with both the named AHS-associated party to this contract and with the Agency of Human Services itself with respect to the resolution of any issues relating to the performance and interpretation of this Agreement, payment matters and legal compliance.

3. **Medicaid Program Parties** (*applicable to any Party providing services and supports paid for under Vermont's Medicaid program and Vermont's Global Commitment to Health Waiver*):

   Inspection and Retention of Records: In addition to any other requirement under this Agreement or at law, Party must fulfill all state and federal legal requirements, and will comply with all requests appropriate to enable the Agency of Human Services, the U.S. Department of Health and Human Services (along with its Inspector General and the Centers for Medicare and Medicaid Services), the Comptroller General, the Government Accounting Office, or any of their designees: (i) to evaluate through inspection or other means the quality, appropriateness, and timeliness of services performed under this Agreement; and (ii) to inspect and audit any records, financial data, contracts, computer or other electronic systems of Party relating to the performance of services under Vermont's Medicaid program and Vermont's Global Commitment to Health Waiver. Party will retain for ten years all documents required to be retained pursuant to 42 CFR 438.3(u).

   Subcontracting for Medicaid Services: Notwithstanding any permitted subcontracting of services to be performed under this Agreement, Party shall remain responsible for ensuring

that this Agreement is fully performed according to its terms, that subcontractor remains in compliance with the terms hereof, and that subcontractor complies with all state and federal laws and regulations relating to the Medicaid program in Vermont. Subcontracts, and any service provider agreements entered into by Party in connection with the performance of this Agreement, must clearly specify in writing the responsibilities of the subcontractor or other service provider and Party must retain the authority to revoke its subcontract or service provider agreement or to impose other sanctions if the performance of the subcontractor or service provider is inadequate or if its performance deviates from any requirement of this Agreement. Party shall make available on request all contracts, subcontracts and service provider agreements between the Party, subcontractors and other service providers to the Agency of Human Services and any of its departments as well as to the Center for Medicare and Medicaid Services.

Medicaid Notification of Termination Requirements: Party shall follow the Department of Vermont Health Access Managed-Care-Organization enrollee-notification requirements, to include the requirement that Party provide timely notice of any termination of its practice.

Encounter Data: Party shall provide encounter data to the Agency of Human Services and/or its departments and ensure further that the data and services provided can be linked to and supported by enrollee eligibility files maintained by the State.

Federal Medicaid System Security Requirements Compliance: Party shall provide a security plan, risk assessment, and security controls review document within three months of the start date of this Agreement (and update it annually thereafter) in order to support audit compliance with 45 CFR 95.621 subpart F, *ADP System Security Requirements and Review Process*.

4. **Workplace Violence Prevention and Crisis Response** (*applicable to any Party and any subcontractors and sub-grantees whose employees or other service providers deliver social or mental health services directly to individual recipients of such services*):

Party shall establish a written workplace violence prevention and crisis response policy meeting the requirements of Act 109 (2016), 33 VSA §8201(b), for the benefit of employees delivering direct social or mental health services. Party shall, in preparing its policy, consult with the guidelines promulgated by the U.S. Occupational Safety and Health Administration for *Preventing Workplace Violence for Healthcare and Social Services Workers*, as those guidelines may from time to time be amended.

Party, through its violence protection and crisis response committee, shall evaluate the efficacy of its policy, and update the policy as appropriate, at least annually. The policy and any written evaluations thereof shall be provided to employees delivering direct social or mental health services.

Party will ensure that any subcontractor and sub-grantee who hires employees (or contracts with service providers) who deliver social or mental health services directly to individual recipients of such services, complies with all requirements of this Section.

5. **Non-Discrimination**:

Party shall not discriminate, and will prohibit its employees, agents, subcontractors, sub-grantees and other service providers from discrimination, on the basis of age under the Age Discrimination Act of 1975, on the basis of handicap under section 504 of the Rehabilitation Act of 1973, on the basis of sex under Title IX of the Education Amendments of 1972, and on the basis of race, color or national origin under Title VI of the Civil Rights Act of 1964. Party shall not refuse, withhold from or deny to any person the benefit of services, facilities, goods, privileges, advantages, or benefits of public accommodation on the basis of disability, race, creed, color, national origin, marital status, sex, sexual orientation or gender identity as provided by Title 9 V.S.A. Chapter 139.

No person shall on the grounds of religion or on the grounds of sex (including, on the grounds that a woman is pregnant), be excluded from participation in, be denied the benefits of, or be subjected to discrimination, to include sexual harassment, under any program or activity supported by State of Vermont and/or federal funds.

Party further shall comply with the non-discrimination requirements of Title VI of the Civil Rights Act of 1964, 42 USC Section 2000d, et seq., and with the federal guidelines promulgated pursuant to Executive Order 13166 of 2000, requiring that contractors and subcontractors receiving federal funds assure that persons with limited English proficiency can meaningfully access services. To the extent Party provides assistance to individuals with limited English proficiency through the use of oral or written translation or interpretive services, such individuals cannot be required to pay for such services.

6. **Employees and Independent Contractors**:

Party agrees that it shall comply with the laws of the State of Vermont with respect to the appropriate classification of its workers and service providers as "employees" and "independent contractors" for all purposes, to include for purposes related to unemployment compensation insurance and workers compensation coverage, and proper payment and reporting of wages. Party agrees to ensure that all of its subcontractors or sub-grantees also remain in legal compliance as to the appropriate classification of "workers" and "independent contractors" relating to unemployment compensation insurance and workers compensation coverage, and proper payment and reporting of wages. Party will on request provide to the Agency of Human Services information pertaining to the classification of its employees to include the basis for the classification. Failure to comply with these obligations may result in termination of this Agreement.

7. **Data Protection and Privacy:**

Protected Health Information: Party shall maintain the privacy and security of all individually identifiable health information acquired by or provided to it as a part of the performance of this Agreement. Party shall follow federal and state law relating to privacy and security of individually identifiable health information as applicable, including the Health Insurance Portability and Accountability Act (HIPAA) and its federal regulations.

Substance Abuse Treatment Information: Substance abuse treatment information shall be maintained in compliance with 42 C.F.R. Part 2 if the Party or subcontractor(s) are Part 2 covered programs, or if substance abuse treatment information is received from a Part 2 covered program by the Party or subcontractor(s).

Protection of Personal Information: Party agrees to comply with all applicable state and federal statutes to assure protection and security of personal information, or of any personally identifiable information (PII), including the Security Breach Notice Act, 9 V.S.A. § 2435, the Social Security Number Protection Act, 9 V.S.A. § 2440, the Document Safe Destruction Act, 9 V.S.A. § 2445 and 45 CFR 155.260. As used here, PII shall include any information, in any medium, including electronic, which can be used to distinguish or trace an individual's identity, such as his/her name, social security number, biometric records, etc., either alone or when combined with any other personal or identifiable information that is linked or linkable to a specific person, such as date and place or birth, mother's maiden name, etc.

Other Confidential Consumer Information: Party agrees to comply with the requirements of AHS Rule No. 08-048 concerning access to and uses of personal information relating to any beneficiary or recipient of goods, services or other forms of support. Party further agrees to comply with any applicable Vermont State Statute and other regulations respecting the right to individual privacy. Party shall ensure that all of its employees, subcontractors and other service providers performing services under this agreement understand and preserve the sensitive, confidential and non-public nature of information to which they may have access.

Data Breaches: Party shall report to AHS, though its Chief Information Officer (CIO), any impermissible use or disclosure that compromises the security, confidentiality or privacy of any form of protected personal information identified above within 24 hours of the discovery of the breach. Party shall in addition comply with any other data breach notification requirements required under federal or state law.

8. **Abuse and Neglect of Children and Vulnerable Adults:**

Abuse Registry. Party agrees not to employ any individual, to use any volunteer or other service provider, or to otherwise provide reimbursement to any individual who in the performance of services connected with this agreement provides care, custody, treatment, transportation, or supervision to children or to vulnerable adults if there has been a substantiation of abuse or neglect or exploitation involving that individual. Party is responsible for confirming as to each individual having such contact with children or vulnerable adults the non-existence of a substantiated allegation of abuse, neglect or exploitation by verifying that fact though (a) as to vulnerable adults, the Adult Abuse Registry maintained by the Department of Disabilities, Aging and Independent Living and (b) as to children, the Central Child Protection Registry (unless the Party holds a valid child care license or registration from the Division of Child Development, Department for Children and Families). See 33 V.S.A. §4919(a)(3) and 33 V.S.A. §6911(c)(3).

Reporting of Abuse, Neglect, or Exploitation. Consistent with provisions of 33 V.S.A. §4913(a) and §6903, Party and any of its agents or employees who, in the performance of services connected with this agreement, (a) is a caregiver or has any other contact with clients and (b) has reasonable cause to believe that a child or vulnerable adult has been abused or

neglected as defined in Chapter 49 or abused, neglected, or exploited as defined in Chapter 69 of Title 33 V.S.A. shall: as to children, make a report containing the information required by 33 V.S.A. §4914 to the Commissioner of the Department for Children and Families within 24 hours; or, as to a vulnerable adult, make a report containing the information required by 33 V.S.A. §6904 to the Division of Licensing and Protection at the Department of Disabilities, Aging, and Independent Living within 48 hours. Party will ensure that its agents or employees receive training on the reporting of abuse or neglect to children and abuse, neglect or exploitation of vulnerable adults.

9. **Information Technology Systems**:

Computing and Communication: Party shall select, in consultation with the Agency of Human Services' Information Technology unit, one of the approved methods for secure access to the State's systems and data, if required. Approved methods are based on the type of work performed by the Party as part of this agreement. Options include, but are not limited to:

1. Party's provision of certified computing equipment, peripherals and mobile devices, on a separate Party's network with separate internet access. The Agency of Human Services' accounts may or may not be provided.

2. State supplied and managed equipment and accounts to access state applications and data, including State issued active directory accounts and application specific accounts, which follow the National Institutes of Standards and Technology (NIST) security and the Health Insurance Portability & Accountability Act (HIPAA) standards.

***Intellectual Property/Work Product Ownership*:** All data, technical information, materials first gathered, originated, developed, prepared, or obtained as a condition of this agreement and used in the performance of this agreement -- including, but not limited to all reports, surveys, plans, charts, literature, brochures, mailings, recordings (video or audio**)**, pictures, drawings, analyses, graphic representations, software computer programs and accompanying documentation and printouts, notes and memoranda, written procedures and documents, which are prepared for or obtained specifically for this agreement, or are a result of the services required under this grant -- shall be considered "work for hire" and remain the property of the State of Vermont, regardless of the state of completion unless otherwise specified in this agreement. Such items shall be delivered to the State of Vermont upon 30-days notice by the State. With respect to software computer programs and / or source codes first developed for the State, all the work shall be considered "work for hire," i.e., the State, not the Party (or subcontractor or sub-grantee), shall have full and complete ownership of all software computer programs, documentation and/or source codes developed.

Party shall not sell or copyright a work product or item produced under this agreement without explicit permission from the State of Vermont.

If Party is operating a system or application on behalf of the State of Vermont, Party shall not make information entered into the system or application available for uses by any other party

than the State of Vermont, without prior authorization by the State. Nothing herein shall entitle the State to pre-existing Party's materials.

Party acknowledges and agrees that should this agreement be in support of the State's implementation of the Patient Protection and Affordable Care Act of 2010, Party is subject to the certain property rights provisions of the Code of Federal Regulations and a Grant from the Department of Health and Human Services, Centers for Medicare & Medicaid Services. Such agreement will be subject to, and incorporates here by reference, 45 CFR 74.36, 45 CFR 92.34 and 45 CFR 95.617 governing rights to intangible property.

Security and Data Transfers: Party shall comply with all applicable State and Agency of Human Services' policies and standards, especially those related to privacy and security. The State will advise the Party of any new policies, procedures, or protocols developed during the term of this agreement as they are issued and will work with the Party to implement any required.

Party will ensure the physical and data security associated with computer equipment, including desktops, notebooks, and other portable devices, used in connection with this Agreement. Party will also assure that any media or mechanism used to store or transfer data to or from the State includes industry standard security mechanisms such as continually up-to-date malware protection and encryption. Party will make every reasonable effort to ensure media or data files transferred to the State are virus and spyware free. At the conclusion of this agreement and after successful delivery of the data to the State, Party shall securely delete data (including archival backups) from Party's equipment that contains individually identifiable records, in accordance with standards adopted by the Agency of Human Services.

Party, in the event of a data breach, shall comply with the terms of Section 7 above.

10. **Other Provisions**:

Environmental Tobacco Smoke. Public Law 103-227 (also known as the Pro-Children Act of 1994) and Vermont's Act 135 (2014) (An act relating to smoking in lodging establishments, hospitals, and child care facilities, and on State lands) restrict the use of tobacco products in certain settings. Party shall ensure that no person is permitted: (i) to use tobacco products or tobacco substitutes as defined in 7 V.S.A. § 1001 on the premises, both indoor and outdoor, of any licensed child care center or afterschool program at any time; (ii) to use tobacco products or tobacco substitutes on the premises, both indoor and in any outdoor area designated for child care, health or day care services, kindergarten, pre-kindergarten, elementary, or secondary education or library services; and (iii) to use tobacco products or tobacco substitutes on the premises of a licensed or registered family child care home while children are present and in care. Party will refrain from promoting the use of tobacco products for all clients and from making tobacco products available to minors.

Failure to comply with the provisions of the federal law may result in the imposition of a civil monetary penalty of up to $1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity. The federal Pro-Children Act of 1994, however,

does not apply to portions of facilities used for inpatient drug or alcohol treatment; service providers whose sole source of applicable federal funds is Medicare or Medicaid; or facilities where Women, Infants, & Children (WIC) coupons are redeemed.

2-1-1 Database: If Party provides health or human services within Vermont, or if Party provides such services near the Vermont border readily accessible to residents of Vermont, Party shall adhere to the "Inclusion/Exclusion" policy of Vermont's United Way/Vermont 211 (Vermont 211), and will provide to Vermont 211 relevant descriptive information regarding its agency, programs and/or contact information as well as accurate and up to date information to its database as requested. The "Inclusion/Exclusion" policy can be found at www.vermont211.org.

Voter Registration: When designated by the Secretary of State, Party agrees to become a voter registration agency as defined by 17 V.S.A. §2103 (41), and to comply with the requirements of state and federal law pertaining to such agencies.

Drug Free Workplace Act: Party will assure a drug-free workplace in accordance with 45 CFR Part 76.

Lobbying: No federal funds under this agreement may be used to influence or attempt to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, continuation, renewal, amendments other than federal appropriated funds.

AHS ATT. F 5/16/2018

State of Vermont Agency of Human Services

HIPAA Business Associate Agreement Worksheet and AAG Review Form

	[redacted]	
	[redacted]	
	[redacted]	

[redacted]

[redacted]

[redacted] **Associate Agreement Review Form**

[redacted]

[redacted] [redacted]

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

_____

_____

_____

_____

3. Send via email this completed form back to the preparer who sent it to you.

Definitions

HIPAA: Health Insurance Portability and Accountability Act of 1996

Protected Health Information (PHI): Any information, whether oral or recorded and whether transmitted or maintained in any form or medium, that:

(1) Is created or received by AHS or its contractors/grantees;

(2) Relates to the **past, present, or future** physical or mental health or condition of an individual; the provision of health care to an individual; or the **past, present, or future** payment for the provision of health care to an individual;

AND

(3) Identifies the individual, or with respect to which there is a reasonable basis to believe the information can be used to identify the individual.

Protected Health Information includes demographic information collected from an individual.

Disclosure: The release, transfer, provision of access to, or divulging of information held by AHS or its contractors/grantees to outside of AHS or its contractors/grantees.

Treatment: The provision, coordination, or management of health care and related services by one or more health care providers, including the coordination or management of health care by a health care provider with a third party; consultation between health care providers relating to a patient; or the referral of a patient for health care from one health care provider to another.

Business Associate Agreement: A written agreement that AHS obtains from a contractor/grantee in which the contractor/grantee agrees that it will appropriately safeguard Protected Health Information that it receives from AHS (or a third party at the direction of AHS) or creates for AHS and use it only for authorized purposes.

A Business Associate Agreement is not needed for disclosures to a health care provider for treatment purposes.

Business Associate: Generally a person or entity who:

On behalf of AHS, performs or assists in the performance of functions or activities involving the use or disclosure of individually identifiable health information (e.g. claims processing or administration, data analysis, processing or administration, utilization review, quality assurance, billing, benefit management, practice management and re-pricing).

To or for AHS, provides legal, actuarial, accounting, consulting, data aggregation, management, administrative, accreditation, or financial services, where the service involves the disclosure of Protected Health Information from AHS (or a third party at the direction of AHS) to the business associate.

Pearson VUE

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Bala Cynwyd, PA 19004
(610) 617-9300

www.pearsonvue.com

Vermont Agency of Human Services, Department of Disabilities, Aging, and Independent Living (DAIL)

Request for Proposal: Nurse Aide Testing Evaluations

March 30, 2018, 4:30 p.m.

This proposal will remain valid for **90 days** from the due date.

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i. Letter of Submittal

Donald R. Wagner
Senior Vice President,
Business Development

PEARSON VUE
5601 Green Valley Drive
Bloomington, Minnesota 55437

Tel: (952) 681-3780
Email: don.wagner@pearson.com

March 30, 2018

Suzanne Leavitt, RN MS, Assistant Director
Division of Licensing and Protection / DAIL
HC 2 South 280 State Drive, Waterbury, Vermont 05671-2060
Phone: (802) 241-0346; Email: SurveyandCertification@vermont.gov

RE: Request for Proposals, Nurse Aide Testing Evaluation

Dear Ms. Leavitt:

Pearson VUE, a business of NCS Pearson, Inc., is pleased to provide the State of Vermont Department of Disabilities, Aging, and Independent Living (DAIL) with our response to your Request for Proposals for Nurse Aide Testing Evaluation.

Included in this proposal are:

- Our responses to the RFP requirements
- Proof of Insurance
- NNAAP® Standard Setting Reports
- Appendices highlighting our experience

As your current nursing assistant testing provider, Pearson VUE and our nursing assistant testing partners have worked diligently with DAIL to increase Vermont nursing assistant candidate satisfaction with the examination program. We also provide a core team of reliable Nursing Assistant Evaluators (NAEs) for the program.

Pearson VUE has earned the distinction of being the nation's leading nursing assistant testing provider and looks forward to detailing the ongoing benefits of our nursing assistant certification solution to DAIL in our proposal. We are confident Pearson VUE remains the most qualified provider for DAIL's nursing assistant program.

Our response is based on our understanding of your required scope of work supported by our long-term, proven commitment to service, quality, and value for our 25 nursing assistant testing clients; our six-year record of quality service to DAIL; and our thorough knowledge of your program's business rules.

Our nursing assistant testing evaluation solution is exclusively backed by our proven, long-term partnership with the National Council of State Boards of Nursing (NCSBN®), the professional nursing industry's regulatory leader. NCSBN® furnishes the National Nurse Aide Assessment Program® (NNAAP®), the premier national nursing assistant assessment, as the nursing assistant certification testing instrument for Pearson VUE client programs. In partnership with NCSBN®, we bring an outstanding record of success in developing and administering the NNAAP® written and skills examinations.

Our entire organization welcomes the opportunity to continue our successful business relationship with DAIL. If you need further information or clarification of our proposal, please contact either of the following individuals, who serve as Pearson VUE's principal points of contact for our bid:

Jennifer Cerciello
Manager, Proposals
Phone: (610) 617-5045
Fax: (610) 617-9301
Email: jennifer.cerciello@pearson.com

Thomas Magallanes
Executive Director, Business Development
Phone: (610) 617-5198
Fax: (610) 617-9301
Email: thomas.magallanes@pearson.com

Sincerely,

Donald R. Wagner

Senior Vice President, Business Development

ii. Qualifications

Describe the qualifications and relevant expertise of the bidder and include resumes of the individual(s) who will complete core tasks, including subcontractors, if any. Include a description of similar projects and prior work products. Include at least three relevant letters of reference, representing individuals who are able and willing to describe the bidder's competence and performance. Also, include a written statement confirming that the bidder possesses, or will obtain, the required insurance required by the State as outlined in the State's standard terms for contracts and grants, identified as Attachment C in Attachment 1 to this RFP.

As the industry leader in nursing assistant competency testing since 1990, Pearson VUE administers nursing assistant testing programs in 25 jurisdictions, a remarkable achievement when you consider that nursing assistant testing contracts are awarded state-by-state over varying lengths of time. Longevity and performance in providing clients with a full continuum of healthcare testing services are key factors to consider when determining who should administer Vermont's nursing assistant testing program.

In addition to being the national leader in nursing assistant competency evaluation, we have been a respected continuous testing contractor to the State of Vermont for several years, managing the nursing assistant program for DAIL since 2012 and administering the Medication Assistant Endorsement certification exam on behalf of the Vermont Board of Nursing since 2015.

Further, Pearson VUE is a respected national provider of over 100 healthcare licensing and certification programs, providing testing in Vermont for such organizations as the National Council of State Boards of Nursing® (NCSBN®), the National Association of Boards of Pharmacy (NABP), and the National Registry of Emergency Medical Technicians® (NREMT). Most recently, the Association of American Medical Colleges (AAMC) awarded a contract to Pearson VUE to transition delivery of the Medical College Admission Test (MCAT).

Excellent Record of Performance with DAIL

Pearson VUE is very proud to have served as **DAIL's nursing assistant testing evaluation vendor since 2012**. We have developed an excellent record of reliable performance with your personnel, structure, and overall operations, establishing a trustworthy and proven partnership. Although we bring to this proposal the experience of working with your program for the last six years, we will continue to collaborate to provide a stable project team and a personalized client- and candidate-centric focus to your program.

Pearson VUE is uniquely qualified to administer DAIL's nursing assistant testing evaluation program. Over the duration of our current contract, Pearson VUE's highly reliable technology, proven long-term care industry partnerships, nationally recognized nursing assistant competency test evaluation instrument, and flexibility to adapt to specific client needs has enabled us to meet DAIL's eligibility, test evaluation, and reporting requirements. Further, DAIL's nursing assistant test evaluation program has continued to leverage our same-day administration of the written and skills exam components; our on-site, same-day candidate notification of written and skills exam results; oral administration of the written examination via MP3 player; and special accommodation administrations of the written examination with respect to candidate requests under the *Americans with Disabilities Act of 1990* (ADA).

Nationally Recognized Evaluation Instruments

For the Vermont nursing assistant program, we propose to continue administering the National Nurse Aide Assessment Program® (NNAAP®), the premier national nursing assistant assessment, to meet the state's nursing assistant certification testing requirements. Pearson VUE has an exclusive agreement with NCSBN® to administer the NNAAP®. NCSBN® members represent the boards of nursing in the 50 states, the District of Columbia, and four United States territories (Guam, Virgin Islands, American Samoa, and the Northern Mariana Islands); additionally NCLEX® RN licensure examinations are administered throughout Canada.

The NNAAP® comprises written knowledge and skills examinations that are fully compliant with the *Omnibus Budget Reconciliation Act of 1990* (OBRA) regulations as well as professional standards and federal guidelines for the development of valid, reliable, and legally defensible job-related examinations. Adopted in 25 regulatory jurisdictions, the NNAAP® is the most widely used nursing assistant competency evaluation program in the United States. Standard-setting meetings for the NNAAP® skills evaluation are conducted to reflect changes in nursing assistant practice. **We are proud to note that a representative from Vermont participated in the most recent skills examination standard setting meeting.**

The program has a broad base of support, including the National Council of State Boards of Nursing® (NCSBN®), long-term care industry experts, and our nursing assistant testing clients. Pearson VUE has an unparalleled record of success in administering nursing assistant examinations extending back to 1990. In 2016 alone, Pearson VUE administered over 293,000 nursing assistant examinations.

If awarded the contract, Pearson VUE will continue to follow Vermont guidelines in determining nursing assistant competency for enrollment onto the State of Vermont nursing assistant registry (NAR). We propose to continue using our advanced technology, expert staff, and expedited processes for qualified nursing assistant candidates in Vermont to become registered for employment in long-term care facilities throughout Vermont.

Pearson VUE Staff Qualifications

Pearson VUE's personnel are highly respected, qualified individuals whose combined expertise in the testing industry enables the delivery of exceptional service to both our clients and their candidates. Pearson VUE personnel provide our clients with a wealth of experience unsurpassed in the testing and licensure industry. Pearson VUE has an established, internal expert group of nursing assistant certification testing and nursing assistant registry management professionals. Many of Pearson VUE's key nursing assistant personnel have been with Pearson VUE for a decade or longer, comprising an extremely stable, experienced group. These individuals work with our nursing assistant testing partners, NCSBN®, Credentia, and Express Evaluations, to provide a Vermont nursing assistant team with significant industry experience and leadership. Resumes of the key Pearson VUE, NCSBN, Credentia, and Express Evaluations team members are included in **Appendix A**.

Nursing Assistant Testing Industry Experience

Pearson VUE is the leading provider of nursing assistant testing in the United States, servicing nursing assistant competency evaluation programs in 25 states/territories, including the District of Columbia, Guam, Northern Mariana Islands, American Samoa, and the Virgin Islands. We understand the special requirements of nursing assistant testing better than any other vendor. Our nurse aide client list can be found in **Appendix B.**

Nursing Assistant Business Partners/Subcontractors

Below, Pearson VUE has identified the business partners and subcontractors included in our proposal, detailing their respective functions and responsibilities. If awarded the contract, our team will continue to manage the Vermont nursing assistant program without interruption.

National Council of State Boards of Nursing (NCSBN®)

The National Council of State Boards of Nursing® (NCSBN®) is a not-for-profit organization whose purpose is to provide an organization through which boards of nursing act and counsel together on matters of common interest and concern affecting the public health, safety, and welfare, including the development of licensing examinations in nursing. NCSBN® is incorporated in Pennsylvania as of 1978. NCSBN®'s membership comprises the boards of nursing in the 50 states, the District of Columbia, and four US territories.

Pearson VUE has an exclusive agreement with NCSBN® to administer the NNAAP®. NCSBN® has developed and maintained the National Council Licensure Examinations (NCLEX®) for registered nurses (RNs) since 1982 and licensed practical nurses (LPNs) since 1985. These premier, large-scale nurse licensure examinations have been administered via computerized adaptive testing (CAT) since 1994. Previously jointly owned by NCSBN® and Pearson VUE, the NNAAP® is a nationally administered certification examination program based on the activities performed by nursing assistants in long-term, acute, and home healthcare settings. NCSBN® has exclusive control over the establishment of the NNAAP® test plan and ownership of examination content.

Updated through periodic job analyses and critical content development meetings to keep pace with the rapidly evolving healthcare environment, the NNAAP® examinations test the current knowledge and skills necessary to measure the minimum entry-level competence required for safe practice of those seeking certification as nursing assistants.

Credentia

Credentia is a high-quality nursing assistant competency evaluation services organization that exclusively works with Pearson VUE under the standards of the National Nurse Aide Assessment Program (NNAAP®) to preserve the value of the nursing assistant credential and help enable better healthcare in our communities. Credentia's management team has over 15 years' experience in the nursing assistant testing market and is uniquely qualified to preserve the value of the nursing assistant credential that contributes to better healthcare in communities they serve.

Express Evaluations

Fax Innovations, dba Express Evaluations, is a privately held Illinois partnership. Primarily a fax services company, Express Evaluations holds US Patent 5231510 for fax form recognition. This patented capability and other related skills are the core technologies for receiving and processing pre-employment exams, professional certification exams, and custom surveys. The company has been doing business from the same location with the same management team since 1992. Express Evaluations processes thousands of exams each day, with results being returned within minutes.

Express Evaluations provides efficient and reliable support for the on-site fax scoring process used by Pearson VUE to provide candidates with same-day, official, on-site scoring of both the written and the skills components of the NNAAP® examination. Express Evaluations' fax technology and sound workflow process is successfully used by Pearson VUE to maintain the speed and reliability of nursing assistant test scoring.

References

In **Appendix B**, we have included client profiles and reference letters from the Colorado State Board of Nursing, North Carolina Department of Health and Human Services, and the Virginia Board of Nursing.

Proof of Insurance

Pearson VUE possesses the required insurance by the State as outlined in Attachment C in Attachment 1 to this RFP. Pearson VUE has provided a copy of its insurance certificate to show its compliance. This can be found in **Appendix C**.

iii. Work Plan

Describe the proposed approach for producing each required element, including a high-level description of the method used to produce the elements described in Section C. The narrative must include proposed timelines, strategies for providing services, estimated hours per activity along with each principal involved in completing the activity, and each activity referenced to the budget below.

As DAIL's current provider of nurse aide examinations, we would not need time for an implementation process. Therefore, there will be no transition risk or interruption of services if you elect to continue your partnership with Pearson VUE.

1. Administration of Competency Test/Evaluation

A. Conducting a nurse assistant competency testing/evaluation program meeting federal requirements, including both written and clinical components, to be implemented on September 1, 2018.

As a result of Pearson VUE's incumbency and our longstanding, exclusive partnership with NCSBN®, Pearson VUE would be ready to continue conducting and maintaining Vermont's nurse assistant competency testing/evaluation program meeting federal requirements, including both written and clinical components, without interruption, through the September 1, 2018, implementation deadline.

Should Pearson VUE be re-selected as DAIL's vendor, we propose to continue administering the National Nurse Aide Assessment Program® (NNAAP®), the premier national nursing assistant competency evaluation program, to meet Vermont's nursing assistant certification testing requirements.

The NNAAP®, under the guidance of NCSBN®, is composed of written knowledge and skills examinations that are fully compliant with the Omnibus Budget Reconciliation Act of 1987 (OBRA '87), OBRA '89, OBRA '90, and supplemental guidelines issued by the Health Care Financing Administration (HCFA). The knowledge tested on the NNAAP® examinations is universal across nursing assistant employment settings, whether the setting is in long-term care, home health, or acute care, and is not unique to one type of practitioner. More information about the NNAAP® is available on NCSBN®'s website at www.ncsbn.org/nnaap-and-mace.htm.

The NNAAP® program and Pearson VUE nursing assistant testing services comply with all requirements for nursing assistant competency evaluation (NACE) according to the federal regulations published in the Federal Register, Volume 56, Number 187, September 26, 1991, Part 483 - Requirements for States and Long Term Care Facilities, Subpart B - Requirements for Long Term Care Facilities and Subpart D - Requirements that must be met by States and State Agencies (42 C.F.R. Sections 483.1 et.seq. and 483.15 et.seq.).

Pearson VUE and NCSBN® content development staff have reviewed the course requirements listed in 42 CFR § 483.152(b) and have determined that the NNAAP® tasks, knowledge statements, and content outline corresponds without exception. If re-awarded the contract, we will assure DAIL that the NNAAP® examinations continue to meet this requirement. We have included a table showing the NNAAP® examination alignment with the federal guidelines in **Appendix D.**

B. Providing competency evaluation for approximately 800 nurse assistants during each contract year, affording each candidate three opportunities to take the test and be listed on the registry within four months of date of employment by a facility.

Pearson VUE will continue to provide competency evaluation for approximately 800 nursing assistants during each contract year, affording each candidate three opportunities to take the test and be listed on the registry within four months of date of employment by a facility. Pearson VUE will maintain three existing regional test sites in Berlin, Bennington, and Burlington for nursing assistant testing.

C. Providing different methods of administering the competency testing/evaluation programs, including: i. Oral administration of written exams; ii. Exams for candidates who require ADA accommodations

Under a pursuant contract, Pearson VUE will continue to administer the Vermont nursing assistant competency testing/evaluation program via both written examination and skills (clinical) evaluation components. Further, we will continue to offer both oral administration of written exams and exams for candidates who require ADA accommodations.

D. Providing all management of exams and registration of candidates, including arranging for testing sites and proctors, recruiting and training of clinical exam raters, and a system for notifying candidates for the exam at least ten (10) working days prior to the exam.

Pearson VUE will continue to provide for all management of exams and registration of candidates, including arranging for testing sites and proctors, recruiting and training of clinical exam raters, and a system for notifying candidates for the exam, at least 10 working days prior to the exam.

E. Providing for pre-examination materials, including at a minimum sample test questions for each candidate and materials for the nurse assistants explaining the testing process.

Pearson VUE will continue to provide nurse assistant candidates with pre-examination materials, including information about and support related to the DAIL program through a DAIL-specific page on our website and a candidate handbook. The handbook will contain sample test questions and information explaining the testing process. A NNAAP® Practice Exam is available as a PDF download for no cost on DAIL's pearsonvue.com web page and can be found in **Appendix E**. We have included a sample candidate handbook in **Appendix F**. Pearson VUE and Credentia will also be available to candidates via phone and email to provide inquiry support throughout the application and testing process.

F. Ensuring security and confidentiality of examination materials including a variety of alternative examination forms.

Pearson VUE and our testing partners will continue to provide for the security and confidentiality of all examination materials, including the provision of a variety of alternative examination forms. We uphold this responsibility with our dedication to the safety, security, confidentiality, and integrity of all of our information management processes. While some companies may address security apart from program operations, we design our security measures holistically, across our entire service offering. Confidential test content and candidate information is protected end-to-end through overlapping layers of physical, administrative, and technical security, including standards compliance, a security team, personnel and process controls, application and network security, extensive logging and auditing, and physically secured corporate facilities and data centers. Moreover, we pursue a wide range of certifications with highly respected third-party organizations to make sure our processes are current and comprehensive.

G. Providing testing in a manner that is non-intimidating to and respectful to the candidates, taking into consideration that many candidates will have minimal education and may never have taken a test of this type before.

To make certain that testing is conducted in a manner that is non-intimidating and respectful to the candidates, Pearson VUE and Credentia use an administration manual for Vermont clinical exam raters, which includes and specifies examination administration procedures, procedures for reporting incidents and irregularities, post-examination procedures, proctor instructions, candidate instructions, and emergency procedures.

Our administration of the NNAAP® examination via paper-and-pencil is non-intimidating and our clinical exam raters are themselves rated highly as being respectful to the candidates. Our testing approach takes into consideration that many candidates have minimal education and may never have taken a test of this type before.

The NNAAP® examinations are written in English below a sixth-grade reading level as established through NCSBN®'s item development guidelines and application of the Flesch-Kincaid Grade Level Readability formula.

H. Providing detailed results to the training program and candidate following each test event that indicate areas in which the candidate was deficient, to facilitate re-training and re-testing. The detailed results shall be provided within 10 business days.

Pearson VUE will continue providing detailed results to each facility and candidate that indicate areas in which the candidate was deficient, as a means to facilitate re-training and re-testing. Pearson VUE is

pleased to offer our clients same-day scoring of the written and skills exam. Pearson VUE will provide examination results to the candidate and submit electronic copies of the results to the DAIL. Usually, Pearson VUE can provide these results to DAIL within one business day of the administration of the skills and written examinations, **exceeding** the requirement to provide the results within 10 days.

I. Providing the Vermont Board of Nursing with online access to management reports on an ongoing basis. Reports must include: the number of candidates, the pass/fail rates statewide and by training program, second and third testing attempts and pass/fail rates for each, and test results broken out by skill and content area. Provide a sample report.

Pearson VUE will continue to provide the Vermont Board of Nursing with access to management reports on an ongoing (post-examination, monthly, and quarterly) basis to include the number of candidates, the pass/fail rate statewide and by facility, and the number of repeat testing attempts and pass/fail rates for each. DAIL's Pearson VUE-designated program manager, Mr. Aaron Peterson, will continue to communicate with the Vermont Board of Nursing to provide progress reports or address concerns, if applicable. Sample program reports have been included in **Appendix G**.

J. Providing all training programs and the Vermont Board of Nursing with a quarterly newsletter that includes an analysis of test performance, tips, tools and/or helpful information based on Vermont test performance.

Pearson VUE will continue to provide all training programs and the Vermont Board of Nursing with a quarterly newsletter that includes an analysis of test performance, tips, tools, and/or helpful information based on Vermont test performance. A sample newsletter can be seen in **Appendix H**.

K. Providing ongoing communication, including conducting an annual in-person meeting or presentations at conferences, phone conferences and ad-hoc reports to address concerns.

Pearson VUE will conduct an annual in-person meeting with the Vermont Board of Nursing and DAIL. The meeting will be facilitated by your Pearson VUE-designated program manager, Mr. Aaron Peterson, and Christopher Herbst, business development manager. The program manager will maintain a high level of contact with DAIL throughout the term of the contract, and will be available for phone conferences or to provide ad-hoc reports to address concerns.

L. Managing re-testing and describing the costs for second and third attempts.

Pearson VUE will retest all candidates who fail and meet DAIL's business rules for retakes. All information will be provided to failing candidates at the testing facility directly on the failing score report. Candidates who fail will only need to retake the exam(s) he or she failed. As previously stated, candidates who fail the written (or oral) examination or the skills evaluation will receive information about how to retake the examination. A new examination fee is required each time candidates retest. To retest, the candidate must submit the score report or a new application and fee to Credentia. When candidates submit the failing score report for retesting, he or she must choose a testing location, which can be noted on the score report.

As previously noted, all candidates are tracked through Pearson VUE's registration system where DAIL's business rules are documented and systematically enforced. If a candidate who has failed either portion of the examination attempts to schedule an examination three times, a deficiency letter is generated, and no reservation is permitted to be made.

We have included our costs for retakes in our price quotation section. Pearson VUE will provide candidates with the opportunity to retake the NNAAP® exam at no cost if a regularly scheduled test administration does not occur for a reason that is not the fault of the candidate.

M. Detailing alternative types of administration of the competency evaluation the contractor is prepared to offer. Bidders should describe a strategy for offering testing frequently enough to ensure candidates have the best possible opportunity to be successful. Specify all costs for testing procedures; including registration, test administration, repeat exams, etc.

Pearson VUE is pleased to continue offering DAIL and Vermont nursing assistant candidates alternative competency evaluation and examination administration types. For candidates with limited literacy skills, we will continue providing an option for oral administration of the written portion of the NNAAP® examination. The oral examination is recorded to MP3 player.

Pearson VUE will also continue to accommodate candidates with special needs confirmed by trained healthcare providers and approved by DAIL, by offering a reader, a marker, and/or extra time for completing the examination. We have also, for example, provided special equipment such as an amplified stethoscope for candidates with hearing issues.

Candidates who have religious beliefs that prevent taking an examination on a specific day, such as Saturday, may request an alternative test date. Pearson VUE will arrange for the candidate to test on an alternative day without charging an additional fee to the candidate.

We have detailed our administration procedures for both oral exam administration and administration of exams with ADA accommodations in **Appendix I**.

As required, Pearson VUE has provided our per examination fee, which includes all costs for testing procedures, registration, different methods of tests/evaluations, repeat exams, etc., within our Cost Proposal. An alternative lower-cost solution can also be found in the Cost Proposal.

N. The vendor shall provide a test dispute process that addresses disputes promptly and professionally.

Pearson VUE will continue to provide DAIL with a formal appeals process for nursing assistant candidates. We will respond within four to five business days to candidate inquiries, appeals, comments, and/or correspondence regarding the certification examinations. We will work with DAIL, as requested, to further define the process.

O. Providing customer support. Prefer a dedicated State representative if vendor provides testing services in other states. Customers include testing candidates, training program staff, Board of Nursing staff and Department of Disabilities Aging and Independent Living.

Aaron Peterson, program manager, will serve as the "State's dedicated representative." Pearson VUE will continue to be available to candidates via phone and Credentia will continue to be available via phone and email to provide inquiry support. The following Pearson VUE and Credentia contact information and hours will continue to be included in a prominent location on the first page of the candidate handbook:

Pearson VUE Vermont NNAAP® (877) 244-1694 Hours of Operation 8:00 a.m. – 5:00 p.m. Mon. - Fri. (Eastern Time Zone)	Credentia (877) 437-9587; support@getcredentia.com Hours of Operation Mon. – Fri. 8:30 a.m. – 6:00 p.m. (Eastern Time Zone)

2. Providing of and Scoring of Exams

A. Describe the exam(s) the bidder proposes to use.

Should Pearson VUE be re-selected as DAIL's vendor, we propose to continue administering the National Nurse Aide Assessment Program® (NNAAP®), the premier national nursing assistant competency evaluation program, to meet Vermont's nursing assistant certification testing requirements.

Pearson VUE takes the following exception with this RFP language:

Notwithstanding anything herein, no title to, or ownership of, Party's software, including but not limited to, the Party's Delivery System, or any part thereof, provided to State and/or otherwise used by either party in conjunction with the Services pursuant to this Agreement is transferred to State. Any changes or modifications to the Party's Delivery System suggested or required by State are hereby assigned by State to Party, and Party will own solely all rights, title, and interest, including copyrights, in such changes and modifications. Notwithstanding anything contained in this Agreement, the parties agree that Party will be the exclusive owner of existing test items provided or derived from its general or state item banks ("Root Items"). If State specific items are developed specifically for State, those items shall become the property of State, unless those items were created or derived from Root Items or jointly developed under the Agreement. For any items created or derived from Root Items or jointly developed under the Agreement, State shall have a non-exclusive and royalty-free license to use these items only in connection with the State's testing program during the term of this Contract. In the event of any dispute regarding ownership of any item, the State, at a minimum, shall grant Party a nonexclusive, perpetual, and royalty free license to use and sublicense any test item resulting from Agreement.

B. Submit a sample examination and samples of other exam related materials such as pre-examination study materials and list any costs individually;

For reference, Pearson VUE has included a sample examination in **Appendix E**. The sample examination is the NNAAP® practice written examination, designed to assist individuals in preparing for the actual NNAAP® written examination. The practice written examination enables candidates to familiarize themselves with the styles and types of questions that will appear on the actual examination. There are no candidate costs associated with accessing the practice written examination, and it will continue to be made available free-of-charge on the Vermont nursing assistant program's landing page on the Pearson VUE website. In addition, we have included a sample candidate handbook, which contains content that will be covered on the examinations and sample questions, in **Appendix F**.

C. Describe how alternative examination forms are developed and guarantee comparability but variations among exams;

As is currently provided, throughout the new contract, NCSBN® will be continually developing new items to add to the nurse aide written examination item pools. NCSBN® is committed to providing 12 paper-and-pencil test forms that are produced annually for the written knowledge test component of the national nurse aide examination. Each form will contain 60 scored and 10 pretest items for a total of 70 items per form. Pearson VUE utilizes six unique, non-overlapping test forms, each with its own set of 60 scored items, and creates two versions of each test form. Ten pretest items are then added to each test form. The end result is 12 forms per year utilizing 120 pretest items. Forms are constructed to have the same content blueprint and form level difficulty though the use of item response theory equating.

Each year there will be a selection of 34 skills exams. Each form contains five skills from a set of 22 skills pertinent to the range of authorized duties of entry-level nurse aides. The skills were identified through both the job analysis and a skills review panel conducted by NCSBN® to validate the appropriate skills for safe and effective practice for entry-level nurse aides. A representative from Vermont was part of this panel. The forms are constructed for equivalence by having all forms of an equal difficulty level and similar estimated length of time to perform the skills. The NCSBN® findings from the job analysis are in **Appendix J**.

D. Supply any information on examination validity, including field testing;

Pearson VUE is committed to continue providing DAIL with examinations that are valid, fair, and reliable. Validity of the NNAAP® examinations is achieved by closely linking content of the job with the content of the test. The content of the NNAAP® examinations is based upon information obtained from the national job task analysis performed by NCSBN® and is compliant and consistent with the federal requirements published in 42 CFR § 483 et seq. Items developed for the written and skills exams come directly from the results of the job task analysis. All written items and skill steps are reviewed and validated by both item review and skill review panels conducted by NCSBN®.

The validity of the pass/fail inferences made from the NNAAP® examinations is achieved by close adherence to the examination's test blueprint and test specifications, and a commitment to a process that delivers quality item writing and item review. The validity of the pass/fail decision is accomplished through the use of psychometrically sound standard-setting methods and input from nationally representative subject matter experts (SMEs). The use of a cross-section of practitioners and educators representing a range of professional perspectives as SMEs is a key to developing valid, job-related examinations. The standard settings can be found in **Appendix J**.

Pearson VUE utilizes six unique written forms, each with their own set of 10 field testing/pretest questions. We then take those six unique forms and insert a different set of 10 pretest questions. The end result is 12 forms per year utilizing 120 pretest items. These pretest items are then psychometrically analyzed to make certain they yield good measurement properties (Wright and Stone, Best Test Design. Chicago: MESA Press, 1979). All items that pass the statistical criteria and show good fit to the model are then scaled to the current NNAAP® scale and added to the pool of operational items.

E. Outline how the passing grade for exam is determined and how the State might adjust the passing grade;

In **Appendix J**, Pearson VUE has outlined how the passing grade for each NNAAP® exam component – the written examination and the skills evaluation – is determined. To identify the passing standard, a diverse group of SME nurses with varied professional expertise are empaneled for a standard-setting meeting. The meeting uses well-developed and validated methods for achieving a psychometrically sound passing standard that delineates the minimum level of knowledge and skills to practice in a safe and competent manner for entry-level nurse aides.

As the NNAAP® is a national exam used across a multitude of states, Pearson VUE and NCSBN® do not recommend that the established passing grades be adjusted, but we would be willing to discuss this.

F. Describe how costs for the competency test/evaluation will be billed to the State

Pearson VUE will only invoice the state for those applicants who are employed by or have an offer of employment from a CMS certified SNF (Skilled Nursing Facility), whether first-time or repeat candidates.

Outside of the above exception, it is important to note that Pearson VUE's administration of the Vermont nursing assistant test evaluation program will primarily continue to be managed as a "no cost" contract to the State of Vermont, DAIL, or the Board of Nursing. Pearson VUE will continue to collect a test administration fee directly from nursing assistant licensure candidates that will cover all Pearson VUE costs of administering the competency tests/evaluations in Vermont.

G. Describe the day of testing from the candidate's perspective.

Pearson VUE will continue to administer the written (or oral) examination first, followed by the skills evaluation. Both examination components will be administered by the same Nursing Assistant Evaluator (NAE) during the scheduled test session in the same test center location. We have described the process in more detail in **Appendix I**.

3. Performance Measures

A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management.

The key to maintaining valid and reliable testing begins in recruitment and training of the NAEs. Pearson VUE and Credentia will diligently screen the qualifications of NAEs, including affiliations that may represent potential conflicts of interest between the evaluators and candidates, and eliminate the potential conflicts, real or apparent.

We require a one-and-a-half-day workshop for the initial orientation training of new NAEs. The workshop will be conducted by Credentia. Credentia's training and monitoring of the NAEs assures DAIL of consistent administration standards throughout the State.

Pearson VUE employs a full-time nurse aide quality and audit manager who is responsible for continually monitoring all skills auditors. The nurse aide quality and audit manager mediates all reports. Pearson VUE uses a proven method for rating the consistency of individual NAEs, which is used to quantify the measurement error introduced by NAEs. Pearson VUE will continuously monitor all skill evaluators and collect data about each evaluator's accuracy in applying the scoring criteria properly. Such data, along with plans for remediation and correction, will be provided to DAIL for each evaluator on a quarterly basis, or more often at DAIL's request.

B. Skill performance steps must be clear, objective, and evidence-based.

Skill performance steps will be clear, objective, and evidence-based. Each task is scored pass/fail, thus enabling the rater to make to an objective decision regarding the competency of the candidate. All of Pearson VUE's task statements in the skills examination are phrased to maximize empirical decisions, allowing each candidate to have an equal chance of passing the exam by reducing rater subjectivity.

C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions.

Pearson VUE will develop written test questions using a Nurse Aide Job Analysis and NCSBN® research as the basis for new questions, skills, and revisions. Pearson VUE is the exclusive provider of the nurse assistant exam developed by NCSBN® (the NNAAP®).

D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality.

Pearson VUE will continue to provide ongoing monitoring of test sites to include: flow of candidates, environment, and usage of quality equipment.

Credentia will recruit, hire, and monitor all registered personnel who will be administering examinations. Pearson VUE will provide up-to-date training of all NAEs. Credentia will also perform an assessment of each potential Regional Test Site, following a standard equipment checklist, to make sure that each site is ideal for testing of the entire set of skills as required by 42 CFR § 483.154. Our testing procedures require that the NAE survey the testing area to verify that equipment and supplies are available before test administrations begin. Each test site for the skills examination will reflect the actual practice setting of nursing home care. If the federal mandates are amended, we will make sure all test sites adhere to any new criteria.

On an ongoing basis, each Regional Test Site will be audited and inspected at least once a year to verify the quality and capability of the site. Should any complaints be submitted by candidates, NAEs, training programs, or staff regarding a testing location, Credentia will promptly investigate the complaint. Any site proving to be inappropriate for testing will be notified of the changes required to continue to host testing. Failure to comply will result in testing being discontinued at that facility. Pearson VUE will immediately notify DAIL of any complaints or instances of a site not meeting the established criteria.

E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program.

DAIL candidates will be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a two-hour drive from the training program.

F. The candidate testing application is easy to read, understand, and complete.

Pearson VUE will continue to work with the Department to maintain a candidate testing application that is easy to read, understand, and complete. Your Pearson VUE-assigned program manager, Mr. Aaron Peterson, would be more than happy to review the existing application at contract award and make any adjustments that are required. We have included a copy of the current application within **Appendix K**.

G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period.

Pearson VUE will not change subcontractors without pre-notifying DAIL. If Pearson VUE must change subcontractors during the contract period, we will work with DAIL to provide the smoothest transition possible.

H. Customer support is immediately available during all testing events for technical assistance.

The Nurse Aide Evaluator Manual provides the information evaluators need to contact Pearson VUE for technical assistance during testing. Contact information for Credentia, Pearson VUE, and the Pearson VUE Fax Help desk is displayed inside the front cover of the manual. Evaluators can clearly see which contact to reach out to for assistance with the question they have. The evaluator helpdesk is available Monday through Saturday, and an emergency event cancellation line operates 24 hours a day, seven days a week.

I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry.

Customer support is available to candidates and training programs regarding questions and/or concerns within one business day of inquiry. Pearson VUE will continue to be available to candidates via phone and Credentia will continue to be available via phone and email to provide inquiry support throughout the application and testing process. Pearson VUE and Credentia contact information and hours will continue to be included in a prominent location on the first page of the candidate handbook.

iv. Price Quotation / Proposed Reimbursement

The proposal should specify costs per test for each of the following: (a) Written test, (b) Clinical Test, (c) Oral Test, (d) No Show

Pearson VUE is pleased to present a competitive cost proposal, which addresses the full range of DAIL's requirements as set forth in the RFP. Fees are based on operational expenses, including but not limited to such items as: candidate publication costs, capital expenditures, personnel, examination administration, scoring, and reporting, and development of software systems required for exam administration. The proposed pricing will remain valid for a period of 90 days from the due date of the proposal. The unit cost per examination covers all costs associated with the test development and administration services described in our proposal. Unless noted, there are no hidden or extra fees for other services, such as express registration, item maintenance, etc.

Line Item	Cost (USD)
Written NNAAP® Examination	$38
Oral NNAAP® Examination	$38
Skills NNAAP® Examination	$100
No show fee/charge	Quoted cost of respectively scheduled exam

As an alternative, Pearson VUE has also included a Cost Proposal for our ship and score service model. This offering differs from the full service model Pearson VUE currently provides for DAIL. If DAIL elects to implement the ship and score option, DAIL would be responsible for securing test sites, performing evaluator selection and training, processing applications, and providing registration and scheduling. Pearson VUE would provide test materials and reporting. Pearson VUE would further provide fax scoring via our scoring partner and provide results files to DAIL.

Line Item	Cost (USD)
Written NNAAP® Examination	$25
Oral NNAAP® Examination	$25
Skills NNAAP® Examination	$25
No show fee/charge	Quoted cost of respectively scheduled exam

Appendix

Appendix A – Key Personnel Resumes

Appendix B – Similar Work

Appendix C – Proof of Insurance

Appendix D – NNAAP® Federal Guidelines

Appendix E – Sample Practice Exam

Appendix F – Candidate Handbook

Appendix G – Program Reports

Appendix H – Newsletter

Appendix I – Testing Day

Appendix J – NNAAP® Standard Setting Reports (Confidential, Separate File)

Appendix K – Application Form

Pearson VUE

[redacted]

President, Pearson Assessments

Summary of Qualifications

Over the course of an impressive 38-year career, [redacted] has made significant contributions to Pearson and the entire testing industry. As the president of Pearson Assessments, he has overall leadership responsibility for the Pearson VUE, Pearson Clinical Assessment and Pearson School Assessment businesses. Through successful communication of a clear vision and a team-based collaborative approach, he has seen the business grow to become the global leader in computer-based assessments.

Prior to heading Pearson Assessments, [redacted] was managing director for Pearson VUE. Under his leadership, Pearson VUE today delivers millions of exams in a global network of thousands of test centers and through secure online technologies from nearly every corner of the world. In recognition of these achievements, [redacted] has received the prestigious Award for Professional Contributions and Service to Testing from the Association of Test Publishers (ATP).

Relevant Professional Experience

Pearson VUE – Bloomington, Minnesota

President, Pearson Assessments (2016–Present)

- Accountable for overall management of the Pearson VUE, School Assessments, and Clinical Assessments business lines.

Managing Director, Pearson VUE (2000–2016)

- Accountable for overall management of the computer-based testing business.
- Responsibilities included oversight of the three Pearson VUE test center networks, which include nearly 5,500 test centers in 180 countries and territories.

Personnel Decisions International – Minneapolis, Minnesota

Vice President, Business Development (1995–1999)

- Built the sales and distribution network for a large human resources consulting firm.
- Worldwide management of sales, marketing, and customer service, as well as the opening of new offices in seven countries.

Pearson VUE

[redacted] continued

National Computer Systems (NCS) – Bloomington, Minnesota

Vice President, Sales and Marketing (1979–1995)

- Served in various management positions during his 21-year tenure with NCS (now Pearson VUE) in the areas of finance, regional/national sales and marketing, and program management.

Education

BA, Finance and Economics, University of Alabama

Pearson VUE

[redacted]

Senior Vice President, Technology Strategy

Summary of Qualifications

With more than 43 years of experience in the computer and testing industries, [redacted] has a vast background in technology, management, sales, marketing, and finance. [redacted] is the co-founder of the original VUE business, which encompassed all aspects of innovative training services. He led technology development and strategic sales for VUE and helped grow the business to $4+ million, culminating in the sale of the business to National Computer Systems (NCS) in April 1997.

In recent years, [redacted] led the products and services team in addition to serving as Pearson VUE's strategic technology advisor. Under his leadership, Pearson VUE made significant improvements in management processes, implemented innovative technology, and completed two strategic acquisitions of technology companies. As senior vice president, technology strategy, [redacted] guides the long-term strategy for our technology platforms and drives other technology-related strategies, including security strategies. He will continue to participate in Pearson VUE's technical forums and will help the senior executive team to make sound technology-related investment decisions.

Relevant Professional Experience

Pearson VUE – Bloomington, Minnesota

Senior Vice President, Technology Strategy (2014–Present)

- Sets long-term strategy for technology platforms.
- Participates in technical forums including BI, Athena: Browser Edition, and Test Development Tools.
- Drives security strategy.

Chief Technologist and Senior Vice President, Products and Services (1994–2014)

- Led the technological evolution of Pearson VUE systems. Co-founded the original VUE business.

Pearson VUE

[redacted] continued

Drake Training and Technologies – Minneapolis, Minnesota

Executive Vice President, Marketing and Sales (1992–1994)

- Led the initiative to promote technology-based certification testing beyond national boundaries.
- Grew the computer industry programs from a single account to nearly 30 accounts worldwide, representing all leading companies in the industry.
- Played a significant role in developing and implementing business strategies across technology, marketing, sales, and finance.

Computing Technology Management – Minneapolis, Minnesota

Independent Consultant (1988–1992)

- Created a successful consulting practice focused on the integration of computing technology within a business.
- Delivered services to companies ranging from start-ups to Fortune 500 corporations.

Unisyn, Inc. – Boulder, Colorado

Vice President, Product Development (1987–1988)

- Developed a suite of integrated manufacturing and financial applications.
- Completed four product releases.
- Implemented a formalized design and development process.

Control Data Corporation – Minneapolis, Minnesota

Director, Development and Support (1976–1987)

- Defined product requirements with four major marketing units.
- Developed technical strategies to meet requirements.
- Developed products, and guaranteed product quality.
- Provided manufacturing, product delivery, and worldwide customer support.

Manager, Software Development, Peripheral Subsystems Division (1974–1976)

Consultant, Advanced Systems Division (1973–1974)

Education

MS, Mathematics with Computer Science, New York University

BA, Mathematics with distinctions, University of Minnesota (Institute of Technology)

Pearson VUE

[redacted]

Senior Vice President, Global Operations

Summary of Qualifications

[redacted] is responsible for all the operations that support Pearson VUE's business functionality. In addition to his position on the company's senior executive team, he provides daily and strategic leadership for Pearson VUE global operations, including the company-owned and -operated testing channel, security, customer service, technical support desk, network operations, information systems, quality control, data integrity, and fulfillment. [redacted] has proven himself to be an effective leader of multiple operational departments in his tenure. His 20 years of operational management experience and testing and assessment business experience offer a unique combination to our clients.

Relevant Professional Experience

Pearson VUE – Bloomington, Minnesota

Senior Vice President, Global Operations (2013–Present)

- Responsible for all operations supporting Pearson VUE global business functionality.
- Provides daily and strategic leadership for groups including the call center, technical support desk, network operations, information systems, quality control, data integrity, fulfillment, and testing service operations.

Vice President, Global Operations (2012–2013)

Vice President, Operations (2007–2012)

- Responsible for all operations supporting Pearson VUE's North American business functionality.

Director, Operations (2002–2007)

- Responsible for operations functions including the call center, technical support desk, network operations, quality control, data integrity, and fulfillment operations.

Operations Manager (1997–2002)

- Responsible for the leadership, supervision, and strategic direction of the call center, technical support desk, data integrity, and fulfillment operations.

Team Leader (1997)

- Led and supervised the call center.

Pearson VUE

[redacted], continued

Gelco Information Network – Eden Prairie, Minnesota

Senior Team Leader (1996–1997)

- Responsible for the leadership, supervision, and strategic direction of the technical support desk.

Team Leader (1996)

- Supervised account-specific technical support personnel.

George Konik Associates Inc. – Minneapolis, Minnesota

Support Desk Technician (1995–1996)

- Provided technical support for software and hardware.

Education

BS, Mass Communications with minor in Economics, St. Cloud University

Pearson VUE

[redacted]

Senior Vice President, Products and Services

Summary of Qualifications

[redacted] has 20 years of experience in the testing industry in a variety of product and technology roles. As senior vice president, products and services, [redacted] oversees the teams that manage our products and services, including software development, software quality assurance, product strategy and architecture, and program management. In his past role as vice president of technology for Pearson VUE, he managed software teams responsible for a full suite of services—including test development and data management—designed to provide a fair, equal, and comprehensive measurement of candidates' performance. [redacted] is an experienced leader, an accomplished software developer, and a consistent advocate for improvement and innovation. He has been with Pearson VUE since 1997.

Relevant Professional Experience

Pearson VUE – Bloomington, Minnesota

Senior Vice President, Products and Services (2014–Present)

- Leads the technological evolution of Pearson VUE systems.

Vice President, Technology (2011–2014)

- Led the technology group responsible for building the next generation of tools and systems required to grow Pearson VUE's existing customers, expand into international markets, and support growth along the assessment value chain through product development and company acquisition.

Director, Software Development (2007–2011)

- Quickly and effectively responded to and resolved team, workflow, and business issues on a daily basis.
- Managed the software development team responsible for producing high-quality products and services to meet internal and external customer expectations.

Software Group Manager (2005–2007)

- Led the team responsible for registration and scheduling applications.
- Improved release process by instituting weekly builds. Communicated and collaborated with all technology departments.

Pearson VUE

[redacted], continued

Software Development Manager (2000–2004)

- Led the group responsible for supporting the business development team through software development and research activities.
- Served as the primary driver of process improvement activities, including the software development lifecycle (SDLC) modeled after feature-driven development, Fagan inspections, PSP, design-by-contract, and automated unit testing.

Software Developer (1997–2000)

- Progressed through junior and senior development roles specializing in registration, scheduling, and financial systems.

Education

MS, Software Engineering, University of Minnesota

BA, Business Administration, Graceland College

Pearson VUE

[redacted]

Vice President, Information Technology

Summary of Qualifications

As vice president of information technology (IT) for Pearson VUE, [redacted] works with senior business leaders on the strategy, design, and implementation of systems to best satisfy business and client needs. He has leadership responsibility for the VUE Support Systems (VSS), results processing, and production support teams in the Americas, and is also responsible for hardware infrastructure, system performance, vendor relations, auditing, security, IT policies, and disaster recovery for Pearson VUE systems.

[redacted] is a seasoned IT veteran with 29 years of experience in computerized testing. He has experience in such areas as quality assurance, software development, and management information systems (MIS). He has been with Pearson since 1988.

Relevant Professional Experience

Pearson VUE – Bloomington, Minnesota

Vice President, Information Technology (2012–Present)

- Leads the VSS, results processing and production support teams in the Americas.
- Strategizes, designs, and implements systems that meet business and client needs.

Director, Information Technology (2007–2012)

- Responsible for all back-end systems supporting the business, including production, disaster recovery, development, test, and user acceptance environments.
- Served as primary support and technology owner for all company-owned and -operated test centers worldwide.
- Served as liaison for infrastructure between Pearson VUE and other Pearson businesses.

Application and Technical Support Manager (2004–2007)

- Responsible for back-end business systems that support the VUE Testing System (VTS), including hardware infrastructure, support personnel, and company-owned and -operated test centers worldwide.

Pearson VUE

[redacted] continued

Pearson Technology – Bloomington, Minnesota

Application Support Manager (2003–2004)

- Oversaw MIS resources for legacy applications for multiple Pearson businesses.
- Managed software development resources for test delivery systems.
- Created service level agreements (SLAs) for the business units, monitored workflow, and assigned tasks.

Pearson Shared Services – Bloomington, Minnesota

MIS Manager/Database Manager (2003)

- Managed the MIS department for multiple businesses along with software development resources for test delivery platforms.

Pearson Assessments – Bloomington, Minnesota

MIS Manager/Database Marketing Manager (1997–2003)

- Served as main point of contact for business system and users.
- Assigned and prioritized tasks, performance issues, and employee training.
- Met with department managers to discuss new projects, priorities, and budgeting.

Senior Database Programmer Analyst (1992–1997)

- Re-wrote business system to allow for a more customer-focused data relationship.
- Wrote Oracle forms and user exits in ProC to encode/decode installation codes and updated desktop systems.

Quality Assurance Analyst (1988–1992)

- Wrote test plans and tools, conducted code reviews and design walkthroughs, created and enforced coding standards, and performed testing.
- Wrote and used code coverage and analysis tools.

Education

BS, Mathematics, University of Minnesota Institute of Technology

Pearson VUE

[redacted]

Vice President, Program Management

Summary of Qualifications

[redacted] is a results-oriented professional with more than 18 years of success in all aspects of program management, including marketing, development, launch, and program transition. As the leader of program management, she makes certain that the service expectations of all clients are met or exceeded by her team of expert program managers. [redacted] has an added focus of bringing ongoing process improvement and quality assurance to the company's growing business.

[redacted] is also responsible for leadership of Pearson's "Partnership in Innovation" program, which involves evaluating, integrating, and managing vendors and their technologies to supplement Pearson VUE's system capabilities. Her in-depth understanding of clients' testing challenges—resulting from direct oversight of their programs—allows her to leverage technology partners who can both meet Pearson VUE's client needs and integrate well with our internal processes.

Relevant Professional Experience

Pearson VUE – Bloomington, Minnesota

Vice President, Program Management (2010–Present)

- Assesses organizational and personnel strengths to identify new opportunities for growth and development.
- Oversees the US program management team.

Director, Program Management (2007–2010)

- Made certain that service expectations of all professional services clients were met or exceeded and oversaw the professional services program management team.

Plato Learning – Bloomington, Minnesota

Advisory Product Manager (2005–2007)

- Led product development through sales efforts for a new line of math software designed for a new niche market.

Pearson VUE

[redacted], continued

Telex Communications – Burnsville, Minnesota

Director, Strategic Marketing, Education (2004–2005)

- Oversaw strategic direction initiatives for the company's education market, including product development and positioning, channel management, and growth opportunities.

Pearson Assessments – Bloomington, Minnesota

Director, Product Management and Test Development (2002–2004)

- Determined strategic direction through product development and management functions, managed strategic planning and implementation, and initiated collaborative projects with other divisions in the company.

Group Product Manager (1999–2001)

- Directed strategic operations for the $20 million clinical and career segment, including developing e-business strategies.

Marketing Manager (1996–1999)

- Led strategic positioning efforts that included branding, advertising, promotions, and sales training.

Xcel Energy – Minneapolis, Minnesota

Product Manager (1993–1996)

- Supervised a product line responsible for 36 percent of the division sales goal.
- Managed a $2.5 million budget within 5 percent of plan.
- Maintained total profit and loss responsibility for all product lines.
- Coordinated all marketing campaigns.

Education

MBA, Business, University of St. Thomas

BA, Business Administration and Marketing, University of Wisconsin

Pearson VUE

[redacted]

Vice President, Regulatory Business Development

Summary of Qualifications

As vice president of regulatory business development, [redacted] leads the team responsible for business development initiatives in the state assessment market. With nearly 30 years of experience in sales and leadership roles in the testing industry, he has a proven track record of achieving results and generating growth by developing high-functioning teams and implementing effective business strategies.

During his tenure with Pearson businesses, [redacted] has contributed to many successes, including revenue growth in the state assessment business by 240 percent in three years; development of a sales team in the K-12 assessment business; expansion of a proposal development organization to capture over 50 percent market share in the large-scale state assessment business; and creation of a new presence for Pearson through mindhub™. He has been with Pearson since 1988.

Relevant Professional Experience

Pearson VUE – Bloomington, Minnesota

Vice President, Regulatory Business Development (2012—Present)

- Leads the team responsible for all business development initiatives in the state assessment market.
- Responsible for the mindhub business unit.

Vice President, Business Development (2011—2012)

- Responsible for business development initiatives in the state assessment, professional certification, and information technology (IT) markets.

Pearson VUE

[redacted], continued

Pearson Assessments and Information – Bloomington, Minnesota

Senior Vice President, Sales and Marketing (2009–2010)

Senior Vice President, Business Development (2008–2009)

Vice President and General Manager (2005–2007)

Sales Leadership Position (2001–2004)

National Computer Systems (NCS) – Eden Prairie, Minnesota

Sales and Sales Leadership Positions (1988–2000)

Education

BA, Mathematics, Indiana University Bloomington

Continuing Education courses in Negotiation, Strategic Marketing, Employee Coaching and Development, Sales Training, and Sales and Marketing Management

Pearson VUE

[redacted]

Executive Director, Business Development

Summary of Qualifications

[redacted] is responsible for Pearson VUE business development initiatives in the state regulatory, professional association, and corporate markets. He provides strategic planning and management support, identifies new markets and business opportunities, and oversees the continued success of Pearson VUE's client relationships. [redacted] also anticipates key testing industry trends by actively participating in various state regulatory and national association testing organizations as well as market and client events. He has 25 years of experience in the regulatory, certification, and employment assessment testing markets with an extensive background in both computer- and paper-based testing and credential management services.

Relevant Professional Experience

Pearson VUE – Bala Cynwyd, Pennsylvania

Executive Director, Business Development (2004–Present)

- Manages key account business development and new business.
- Sees that Pearson VUE meets and exceeds all contractual obligations for existing accounts.
- Implements business development initiatives designed to grow client programs and establish new clients.

Senior Director, Certification Services (2002–2004)

National Director, Business Development, Employment Assessment Program (1998–2000)

Senior Program Director (1993–1997)

Manager, Candidate Care (1992–1993)

Convergys Corporation, Jacksonville, Florida

Director, Business Development, Employee Care (2000–2002)

Pearson VUE

[redacted], continued

Education

BA, Business Administration, Holy Family University

Certifications and Licensures

Computer Programming Certification, Computer Learning Center

Pearson VUE

[redacted]

Business Development Manager

Summary of Qualifications

In his role as a business development manager, [redacted] is responsible for acquiring new business as well as the overall relationship management for clients in his portfolio. He works with teams across various lines of business to provide the support his clients need to successfully manage and grow their programs. Prior to joining the business development team, [redacted] served as an analyst on the Pearson VUE global proposals team. In this capacity he coordinated request for proposal response efforts for current and prospective clients.

[redacted] understands the specific needs of state agencies along with their particular challenges. Through his five years of marketing experience across two companies, he has gained a deep understanding of the regulatory landscape affecting the state licensure market.

Relevant Professional Experience

Pearson VUE – Bala Cynwyd, Pennsylvania

Business Development Manager (2017–Present)

- Responsible for new business development activity.
- Retains current clients by working in conjunction with our program management team.

Proposal Analyst (2015–2017)

- Supported proposal development of regulatory bid responses and professional proposals for licensing, testing, and certification services.

Solix, Inc. – Parsippany, New Jersey

Manager, Marketing & Partnership Programs (2014–2015)

- Directed external and partnership activities and initiatives promoting new business development. Markets included utilities, broadband, telecommunications, and disaster recovery programs.
- Managed the development of marketing materials utilized in the customer acquisition and retention process.

Pearson VUE

[redacted] **continued**

Manager, Marketing Communications (2013-2014)

- Developed an extensive library of corporate marketing collateral to support new and existing business growth.
- Created and enhanced corporate website content.
- Developed campaign-specific digital marketing content.

Associate Manager, Market Research and Proposals (2012–2013)

- Supported the sales process by providing end-to-end project management, including the writing, editing, and production of proposals.
- Responsible for managing content repository used in proposal responses.

Education

Bachelor of Arts, English, Villanova University
Mini MBA Business Essential Certificate, Rutgers University

Pearson VUE

[redacted]

Director of Client Program Management, Regulatory Services

Summary of Qualifications

[redacted] leads the state regulatory program management team, a key client liaison group whose individual program managers serve as the client's primary contact with Pearson VUE. She oversees all regional office operations, including offices that serve client programs in Colorado, North Carolina, Arkansas, and Washington, DC. In her past position as a senior program manager at Pearson VUE, [redacted] established and maintained ongoing responsive partnerships with her clients, building a trusting, successful relationship between each client and Pearson VUE. Throughout the life of the contract, she served as the primary point of contact, communicating the client's needs to Pearson VUE's internal teams.

[redacted] has a strong history of working with state regulatory agencies, beginning with her 11-year tenure with the Colorado Department of Regulatory Agencies (DORA). She also has substantial expertise in managing licensing and continuing education programs through her positions at DORA and Wells Fargo Insurance.

Relevant Professional Experience

Pearson VUE – Aurora, Colorado

Director of Client Program Management, Regulatory Services (2014–Present)

- Leads the program management team for the regulatory services division.

Senior Client Program Manager (2013–2014)

- Developed long-standing client relationships and new business initiatives by meeting agreed-upon goals and objectives.
- Maintained positive and collaborative relationships with clients through consistent communication.

Colorado Division of Insurance, Denver, Colorado

Director of Compliance, Investigations & Licensing (2006–2013)

- Created and led various internal and external working groups and task forces, particularly working on national insurance issues with the National Association of Insurance Commissioners (NAIC).

Pearson VUE

[redacted], continued

Market Conduct Examiner/Lead Rate and Form Analyst (2002–2006)

- Reviewed insurance rates, rating plans and systems, actuarial and statistical justification of data, verification of policy forms, endorsements and advertising material to determine statutory compliance.

Wells Fargo Insurance, Greenwood Village, Colorado

Senior Agency Administrator (2000–2002)

- Managed the administrative workflow for the environmental insurance program and worked with management to grow the program into other states and territories.

State Farm Insurance, Tempe, Arizona

Personal Lines Underwriter (1998–1999)

- Underwrote homeowners and other personal lines coverages in an assigned territory in rural New Mexico.

Education

BS, Justice Studies, Arizona State University

AS, Insurance Services, Insurance Institute of America

Certificate in General Insurance, Insurance Institute of America

Pearson VUE

[redacted]

Program Manager

Summary of Qualifications

As program manager, [redacted] serves as the primary point of contact between regulatory clients and Pearson VUE. He maintains positive and collaborative relationships to maintain client satisfaction with delivered services. [redacted] develops and maintains complete, up-to-date documentation, including project plans, scope of work, and business rules. He also makes certain that various departments involved fulfill their commitments and maintains quality standards.

[redacted] has a history of account management and customer service experience. He has a background in leadership positions within Pearson VUE customer service teams. His teams were responsible for providing resolutions and moving candidates forward in their testing process.

Relevant Professional Experience

Pearson VUE – Bloomington, Minnesota

Client Program Manager, Regulatory Services (2017–Present)

- Manages regulatory testing and licensing programs for Pearson VUE clients.
- Build positive and collaborative relationships.
- Maintains working relationships with internal teams and external vendors.

Supervisor, Candidate Services (2014–2017)

- Managed daily operations of candidate support with a customer satisfaction goal of >90%.
- Led, trained, and monitored candidate support teams to maintain quality of services of >90%.
- Implemented quality monitoring for emails, incident resolution, and support calls.

Team Lead, Candidate Services (2012–2014)

- Created and maintained processes and documentation to assist in customer service consistency.
- Managed team workflow to meet client KPI's.

Jani-King of Minnesota - Brooklyn Center, Minnesota

Account Executive (2009–2011)

Pearson VUE

[redacted], continued

Custom Medical Solutions - Columbia, South Carolina

Account Executive (2004-2008)

Account Manager (1997-2004)

Education

BS, Business Administration, Metropolitan State University

Pearson VUE

[redacted]

Vice President, Global Publishing Services

Summary of Qualifications

[redacted]s a member of Pearson VUE's Global Leadership Team and an innovative leader with nearly 25 years of experience in the testing industry. As vice president of global publishing and client services for Pearson VUE, he leads Pearson VUE's global publishing services team as well as all test development activities supporting National Council of State Boards of Nursing.

In his previous role at Pacific Metrics Corporation, [redacted] provided operational and strategic support to a wide array of innovative product offerings designed for the K12 testing market. He has worked with content development, psychometrics, technology, scoring, and program management to lead cross-departmental problem solving, innovation, and quality efforts.

Relevant Professional Experience

Pearson VUE – Chicago, Illinois

Vice President, Global Publishing Services (2016–Present)

- Leads Pearson VUE's global publishing services team along with all test development activities supporting National Council of State Boards of Nursing.

Senior Director, Testing Services (2012–2016)

- Responsible for NCSBN® testing programs (NCLEX-RN, NCLEX-PN, NNAAP®, MACE®) as well as North American Publishing Services.

Director, Content Development, NCLEX® (2012–2016)

- Managed a large team of nurse content developers, editors, data support staff, and administrative staff to direct all test development activities for the NCLEX® testing program.
- Provided high-level support for the NNAAP® testing program
- Served as the single point of contact to NCSBN® on all test development issues.

Pacific Metrics Corporation – Monterey, California

Director, Publishing Systems (2005–2010)

- Led cross-departmental problem solving, innovation, automation, and quality assurance for test publishing systems.
- Established, documented, and instituted end-to-end best practices for online test publishing.

Pearson VUE

[redacted] continued

Director, Content Development (2002–2005)

- Directed the content and product divisions of the corporation from start-up.
- Conceptualized and developed multiple online testing solutions for district and state customers including Louisiana EAGLE.
- Created and managed business-to-business efforts with McGraw-Hill, Riverside Publishing Company, Harcourt Assessment, and Continental Press.

CTB/McGraw Hill – Monterey, California

Development Supervisor (2000–2002)

- Supervised the development of mathematics exams across multiple grade levels and states.

Content Editor (1998–2000)

- Supervised grade-level development of assessment and ancillary materials for mathematics.
- Facilitated training workshops in multiples states and overseas.

Item Writer (1997–1998)

- Authored mathematics and science items for use in state- and national-level assessments.

The Learning Center – Eugene, Oregon

Mathematics and Science Instructor (1995–1996)

- Provided individualized instruction for university students with learning disabilities.

University of Oregon – Eugene, Oregon

Graduate Teaching Fellow (1993–1996)

- Taught undergraduate courses in Pre-Calculus, Trigonometry, Statistics, Calculus, and Discrete Mathematics.

Education

MS, Mathematics, University of Oregon

BA, Mathematics, University of California-Berkley

Finance for Non-Financial Managers, University of Chicago Booth Graduate School of Business

Thorndyke Process for Breakthrough Business Growth, Advanced Training

Professional Affiliations

Delegate, Pearson Forum 2011 International Leadership Program

Certification Network Group, Chicago Chapter

Planning Committee, CCSSO National Conference on Student Assessment, 2006-2009

Process Facilitator, NAEP High School Mathematics Standard Setting, 2004

Pearson VUE

[redacted] continued

Presentations and Publications

[redacted] Best practices for writing test items. Journal of Nursing Regulation, 3(2), 35-39.

[redacted] How to address item bank deficits rapidly and effectively. Presented at the annual conference of the Institute for Credentialing Excellence, Palm Springs, Florida.

[redacted] Geometry Locked in a Car. Content Development Speakers Series.

[redacted] The Competing Demands of Quantity and Quality in State Testing: Producing More in the Era of Less. National Conference on Student Assessment, Los Angeles, California.

[redacted] What Kind of Test Is It? Blurring the Formative/Summative Boundary. CCSSO Large Scale Assessment Conference, Nashville, Tennessee.

[redacted] Speed Up or Slow Down—Quality Control Challenges in the Web Era. National Conference on Large Scale Assessment, San Antonio, Texas.

[redacted] Making Domain Descriptors Accessible to Standard Setting Panelists. National Council on Measurement in Education, Montreal, Quebec.

[redacted] Math for Surfers: Finding Math Resources on the Web. National Council of Teachers of Mathematics, Philadelphia, Pennsylvania.

[redacted] Preparing Students for CAHSEE: The Role of Middle Schools. California Educational Research Association, San Francisco, California.

[redacted] Interactive Learning Systems: Do Students Take the Hint? California Educational Research Association, San Francisco, California.

[redacted] Released Assessment Items: Trash or Treasure? National Council of Supervisors of Mathematics, Las Vegas, Nevada.

[redacted] Where Your Statewide Tests Really Come From. National Council of Teachers of Mathematics, Orlando, Florida

Pearson VUE

[redacted]

Lead Content Developer, NCLEX®, NNAAP®, and MACE®

Summary of Qualifications

As a registered nurse with 17 years of experience in the healthcare industry, [redacted] is Pearson VUE's lead content developer for the National Council Licensure Examination (NCLEX®), the National Nurse Aide Assessment Program (NNAAP®), and the Medication Aide Certification Exam (MACE®). He previously worked in a tertiary care setting delivering nursing care to pediatric patients with varied medical conditions.

In his role with Pearson VUE, [redacted] makes certain that project delivery objectives are achieved in accordance with established business goals and requirements. He edits, reviews, and classifies test items to provide for accuracy, clarity, and appropriateness. He performs content quality checks on test forms and content specifications by adhering to established quality control processes, providing for the accuracy of test content components, and maintaining test content elements. He also serves as the interface with NCBSN® content lead for the NNAAP® and MACE® examinations.

Relevant Professional Experience

Pearson VUE – Chicago, Illinois

Lead Content Developer, NCLEX®, NNAAP®, and MACE® (2008–Present)

- Edits, classifies, and reviews test items for accuracy, clarity, and appropriateness.
- Facilitates item writing workshops and review sessions.
- Plan, coordinate and communicate item development tasks and priorities.
- Makes certain that project delivery objectives are achieved in accordance with established business goals and requirements.
- Performs content quality checks of test forms. Serves as the interface with the NCSBN® content lead.

Children's Memorial Hospital – Chicago, Illinois

Registered Nurse, Cardiac/Telemetry/Post-Surgical Unit (2004–2008)

- Delivered nursing care to pediatric patients of all ages in a tertiary care setting with a wide variety of conditions.

San Jorge Children's Hospital – San Juan, Puerto Rico

Registered Nurse, Pediatric Intensive Care Unit (20XX–20XX)

[redacted] continued

- Delivered nursing care to pediatric patients of all ages in a tertiary care setting with a wide variety of conditions.

Education

Master of Science, Pediatric Clinical Nurse Specialist, University of Illinois at Chicago

Bachelor of Science, Nursing, University of Puerto Rico, Medical Science Campus, Magna Cum Laude

Pearson VUE

[redacted]

Manager, Psychometric Services

Summary of Qualifications

[redacted] manages a team of psychometricians who work on a variety of measurement and research activities with Pearson VUE licensure and certification clients. He oversees all operational psychometric activities and works with software developers and quality assurance analysts to maintain the high quality of Pearson VUE exams. [redacted] also represents Pearson VUE at professional meetings and conferences.

[redacted] has been part of Pearson's psychometric and research studies team since 2009. Before joining Pearson, he served as an instructor at multiple institutions of higher education.

Relevant Professional Experience

Pearson VUE – Bloomington, Minnesota

Manager, Psychometric Services (2015-Present)

- Manages a team of psychometricians and oversees all ongoing operational psychometric activities that maintain the quality of clients' assessment programs.

Pearson – Iowa City, Iowa

Senior Research Scientist, Psychometric and Research Services (2014-2015)

- Led, trained, and supervised others in research and psychometric activities using applied psychometric techniques for a fast-paced, high-volume testing program.
- Organized psychometricians, research associates, subject matter experts (SMEs), and client staff.
- Coordinated all aspects of test form design, construction, field test item preparation, and review.

Research Scientist, Psychometric and Research Services (2013)

- Planned, organized, and managed people and processes related to standard setting events.
- Supported Reading and Mathematics Computer Adaptive Test (CAT) pilot.

Associate Research Scientist, Psychometric and Research Services (2009-2011)

- Served as a standard setting facilitator. Conducted research and wrote reports for topics of interest to a state testing program.

Pearson VUE

[redacted] continued

Florida State University - Tallahassee, Florida

Instructor, Measurement and Statistics Program (2004–2009)

Statistical Consultant, Childhood Education, Reading and Disability Services Department (2004)

- Worked with the principal investigator on a directed research project for a U.S. Department of Education grant.

Instructor, Center for Intensive English Studies (2002–2004)

Multicultural/Multilingual Education (2002–2003)

Soongsil University - Seoul, Korea

Adjunct Faculty, Graduate School of International Commerce and Regional Economy (1999–2001)

Instructor, English Department (1999–2001)

Si Sa Language Institute - Seoul, Korea

English Instructor (1998–1999)

George Mason University - Fairfax, Virginia

Teaching Assistant, Sociology Department (1995)
Research Assistant, Sociology Department (1994)

Education

PhD, Measurement and Statistics, Florida State University
MA, Sociology, George Mason University
BA, Liberal Studies, West Chester University of Pennsylvania
AAS, Management, State University of New York, Delhi

Professional Affiliations

Member, National Council on Measurement in Education (NCME)

Member, The American Educational Research Association (AERA)

Publications and Presentations

Discussant for Graduate Poster Session 2011-2015 NCME Conference.

Chairperson for Applied: International Assessment Session 2015 NCME Conference

Moderator for Policy And Performance Assessments Session 2011 NCME Conference

Moderator for Licensure and Certification session 2010 NCME Conference

Pearson VUE

[redacted] **continued**

[redacted] *Item modification analysis of alternate assessments based on modified achievement standards.* Paper presented at the annual meeting of the National Council on Measurement in Education, Vancouver, BC.

[redacted] *An empirical evaluation of the technical adequacy of a statewide alternate assessment based on modified achievement standards.* Paper presented at the annual meeting of the National Council on Measurement in Education, New Orleans, LA.

[redacted] *A joint distribution model using item response and response time.* Paper presented at the annual meeting of the National Council on Measurement in Education, Denver, CO.

[redacted] *Modeling the joint distribution of response accuracy and response time.* Paper presented at the annual meeting of the American Educational Research Association, San Diego, CA.

[redacted] *Item parameter estimation for an item response model that incorporates response time.* Paper presented at the annual meeting of the Florida Educational Research Association, Orlando, FL.

[redacted] *A meta-analysis: what works in English as a second language instruction.* Paper presented at the annual meeting of the Florida Educational Research Association, Tampa, FL.

[redacted] *A Research synthesis of English as a second language and English as foreign language instructional techniques.* Paper presented at Colloquium in Measurement and Statistics, Florida State University.

Pearson VUE

[redacted]

Manager, Psychometric Services

Summary of Qualifications

[redacted] is a Nationally Certified School Psychologist (NCSP) with over a decade of experience on the clinical side of educational/psychological services and research and measurement services. He has presented at numerous national and international professional conferences along with publishing a number of professional research articles. He has worked on multiple assessment development projects from conception to implementation to maintenance. He developed Growth Norms for indexing student growth and has extensive experience with learning progressions and longitudinal modeling.

In his position at Pearson VUE, [redacted] leads the NCLEX psychometric team. Before joining Pearson VUE, he was the director, research and measurement services at Riverside Publishing.

Relevant Professional Experience

Pearson VUE – Chicago, Illinois

Manager, Psychometric Services (2013–Present)

- Leads the NCLEX psychometric team.

Houghton Mifflin Harcourt Publishing, Riverside Assessment Division – Rolling Meadows, Illinois

Director, Research and Measurement Services, Principal Research Scientist (2011–2013)

- Responsible for all research related to educational and clinical assessment products.
- Managed research, scoring, and reporting for large district custom assessment solutions.

Renaissance Learning – Madison, Wisconsin

Senior Measurement Statistician (2005–2011)

- Developed National Growth Norms for early literacy, reading, and mathematics.
- Developed and maintained computerized adaptive tests (CAT) for early literacy, mathematics, and reading in United States, Canada, and United Kingdom.

Pearson VUE

[redacted] continued

Center for Cultural Diversity and Minority Education – Madison, Wisconsin

Chief Research Scientist (2004–2013)

- Pro-bono Consulting and Board Member for this non-profit organization.

Minneapolis Public Schools

Psychology Intern/Psychometrician (2004–2005)

- Psychometric work with the Early Measurement Group.

Center for Applied Research and Educational Improvement, University of Minnesota – Minneapolis, Minnesota

Research Assistant/Statistician (2002–2004)

Department of Educational Psychology, University of Minnesota – Minneapolis, Minnesota

Research Assistant/Graduate Assistant/Data Analyst (2001–2002)

East Metro Integration School District 6067 – **St. Paul and Roseville, Minnesota**

School Psychologist/Special Services Facilitator (2000–2002)

Decatur City Schools – **Decatur, Georgia**

Psychology Intern (1999–2000)

Peachford Hospital – **Atlanta, Georgia**

Psychological Services/Needs Assessment Counselor (1998–2000)

Charter Behavioral Health Systems – **Dunwoody, Georgia**

Intake Counselor/Shift Supervisor (1996–1998)

Murphy Harpst-Vashti Treatment Center – Cedartown, Georgia

Residential Counselor/Shift Supervisor (1995–1996)

Paulding Group Home, Three Rivers Behavioral Center – Dallas, Georgia

Counselor/Behavioral Specialist (1994–1995)

State University of West Georgia – Carrollton, Georgia

Graduate Research Assistant (1993–1995)

Pearson VUE

[redacted] continued

Education

PhD, Educational Psychology; Sub-plan: School Psychology (APA & NASP accredited); Supporting Program Minor: Psychometric Methods & Applied Statistics, University of Minnesota

MMIS, Management Information Systems/Decision Sciences, Concentration: System Analysis and Design, Metropolitan State University

EdS, School Psychology, Georgia State University

MA, Psychology, Emphasis: Clinical/Counseling, State University of West Georgia

BA, Psychology, Minor: Sociology, State University of West Georgia

Professional Affiliations

- Professional Affiliations Volunteer, Research Board, Center for Cultural Diversity and Minority Education, 2005-Present
- Associate Committee Member, Council of Chief State School Officers (CCSSO), State
- Volunteer, Collaborative on Assessment and Student Standards (SCASS), Formative Assessment for Students and Teachers (FAST) Technology & Research Group, 2006-2008
- Volunteer, Metropolitan State University, Minneapolis & St. Paul, MN, 2002-2003
- Associate Editor, School Psychology Review, 2010 – Present
- Editorial Board, Assessment for Effective Intervention, 2010 – Present
- Editorial Board, Journal of School Psychology, 2008 – Present
- Editorial Board, School Psychology Quarterly, 2008 – Present
- Ad Hoc Reviewer, School Psychology Quarterly, 2006-2007, 2013
- Ad Hoc Reviewer, Journal of Research in Reading, 2009, 2010, 2011
- Ad Hoc Reviewer, European Journal of Psychology of Education, 2010 – 2013
- American Educational Research Association (AERA)
- American Statistical Association (ASA)
- Association for Computing Machinery (ACM)
- Association for Psychological Science (APS)
- International Association for Computerized Adaptive Testing (IACAT)
- Mathematical Association of America (MAA)
- National Association of School Psychologists (NASP)

Pearson VUE

[redacted] continued

- National Council on Measurement in Education (NCME)
- Society for the Scientific Study of Reading (SSSR)

Publications and Presentations

[redacted] An examination of the validity of Two Measures of Student Engagement. International Journal of School & Educational Psychology, xx, Accepted for Publication.

[redacted] Issues and methods in the measurement of student engagement: Advancing the construct through statistical modeling. In S. Christenson, A. Reschly, & C. Wylie (Eds.), The handbook of research on student engagement (pp. 783-803).

[redacted] Exploring innovative item types on computer-based testing. Paper accepted for presentation at the national conference of the American Educational Research Association, San Francisco, CA

[redacted] Using a nationally standardized achievement test to predict students at-risk. Paper presented at the national conference of the National Association of School Psychologists, Philadelphia, PA.

[redacted] Evaluating the assumptions of CBM of mathematics (CBM-M). Paper presented at the national conference of the American Education Research Association, Vancouver, British Columbia, Canada

[redacted] Evaluating CBM-OR growth norms for monitoring growth in RTI. Paper accepted for presentation at the national conference of the National Association of School Psychologists, Seattle, WA

[redacted] Exploring the use of a cognitive assessment for preventative screening. Paper accepted for presentation at the national conference of the National Association of School Psychologists, Seattle, WA.

[redacted] Investigation of reading development patterns for students in early grades using latent transition analysis. Paper accepted for presentation at the national conference of the American Educational Research Association, San Francisco, CA.

[redacted] Evaluating growth trajectories and measurement invariance for early developmental domains. Paper accepted for presentation at the national conference of the National Association of School Psychologists, Seattle, WA.

[redacted] Evaluating the assumptions of CBM of mathematics (CBM-M). Paper presented at the national conference of the American Education Research Association, Vancouver, British Columbia, Canada.

Pearson VUE

[redacted]

Manager, Publishing Services

Summary of Qualifications

[redacted] serves as the manager of publishing services for Pearson VUE. In this role, he monitors the exam development process with clients, including quality assurance, client reviews, and test publishing. He supervises a team of six test publishers so all deliverables are met on time and at the desired specifications. [redacted] has over a decade of leadership experience at education companies, including past positions at Prometric and Education Testing Service. [redacted] is a certified Six Sigma Green Belt.

Relevant Professional Experience

Pearson VUE – Bala Cynwyd, Pennsylvania

Manager, Publishing Services (2017-Present)

- Manages a team of test publishers and quality assurance analysts so all deliverables are met on time and at the desired specifications.

Supervisor, Test Publishing (2015–2017)

Education Testing Service – Ewing, New Jersey

Senior Project Coordinator (2008–2015)

- Responsible for the testing activities of over 1,200 test centers around the world and the testing experience of over 750,000 people annually.

Prometric – Lawrence, New Jersey

Lead Operations Specialist (2005–2008)

- Led a group of up to 11 employees responsible for the processing, scheduling, and recertification of approximately 70,000 nurse aides across five states every year.

Education

BA, Communications, focus on Marketing and Management, Rowan University

Certifications and Licensures

Six Sigma Green Belt Certification

Pearson VUE

[redacted]

Chief Information Security and Data Privacy Officer

Summary of Qualifications

As chief information security and data privacy officer, [redacted] is responsible for setting the global strategy and direction for Pearson VUE's security and data-protection initiatives, including testing channel, business operations, and system infrastructure with a focus on data access and data privacy. He oversees a global team that focuses on protecting intellectual and private data, managing global identity, providing a controlled testing environment, and delivering forensic services. [redacted] team also analyzes and drives continuous improvement in security and efficiency for current business policies, procedures, and processes. [redacted] has 20 years of experience in information systems and data management. He previously served as Pearson VUE's chief enterprise architect and was responsible for setting the vision and strategy for the enterprise systems architecture.

Relevant Professional Experience

Pearson VUE – Chicago, Illinois

Chief Information Security and Data Privacy Officer (2008–Present)

- Determines and carries out the global strategy and direction of security and data protection at Pearson VUE.

Chief Enterprise Architect (2006–2007)

- Set the vision and strategy for the enterprise systems architecture.
- Led the effort to reduce total corporate reports by implementing a next-generation data architecture framework.

Director, Software Development (2004–2006)

- Redesigned and implemented enterprise-wide data analysis and reporting services.

Innemation, Inc. – Chicago, Illinois

Technical Project Manager (2002–2004)

- Responsible for pre- and post-sales strategy, presentations, and hands-on technical project management of large-scale system implementations.

Pearson VUE

[redacted] continued

Minnesota Department of Education – Roseville, Minnesota

Technical Project Manager (2003)

- Oversaw technical projects for the No Child Left Behind legislation.
- Facilitated business requirements-gathering sessions.
- Served as a direct project liaison to the Commissioner and executive staff.

The Joint Commission – Oakbrook Terrace, Illinois

Project Manager, Technical Architect (2003)

- Led business process and requirements-gathering workshops to create an enterprise reporting and analysis system implementation strategy.
- Designed and implemented Crystal Enterprise and Microsoft SharePoint architecture, integrated a system with Active Directory security, and assisted in security model design.

Kraft Foods North America – Northfield, Illinois

Project Manager, Technical System and Business Architect (2002)

- Worked closely with Crystal Sales to facilitate continued enterprise contract negotiations, sales strategy, custom client proposals, and creation of SOW documentation.
- Created and implemented a strategic enterprise reporting business vision and strategy and an end-user web-based training session via Symposium tool.

Aon Corporation – Chicago, Illinois

Senior Business Systems Analyst and Project Manager (2001–2002)

- Designed, developed, and implemented the Forecast and Budgeting Reporting and Analysis Module.
- Designed and managed all environment architecture, and coordinated and directed activities with the IT support team to manage database configuration and script development through DBA resources.

Aon Corporation – Chicago, Illinois

Senior Business Systems Analyst and Project Manager (2001–2002)

- Designed, developed, and implemented the Forecast and Budgeting Reporting and Analysis Module.
- Designed and managed all environment architecture, and coordinated and directed activities with the IT support team to manage database configuration and script development through DBA resources.

Blue Cross Blue Shield – Chicago, Illinois

Data Cleansing Team Lead (2000–2001)

Quality Assurance and Test Manager (2000)

Pearson VUE

[redacted] continued

US West – Denver, Colorado

Programmer and Business Analyst (2000–2001)

MMI Companies – Deerfield, Illinois

Business Analyst and Testing Coordinator (1999–2000)

Heller Financial – Chicago, Illinois

Project Manager, General Ledger and Accounts Payable System (1999)

Chicago Mercantile Exchange – Chicago, Illinois

Business Analyst, Web Page Requirements Gathering (1998–1999)

Education

JD (Magna Cum Laude), Northern Illinois University College of Law

BBA, Marketing, University of Wisconsin at Madison

BBA, Management, University of Wisconsin at Madison

Pearson VUE

[redacted], continued

Technical Experience

OS and Software Experience	Technical Languages	Methodologies	Databases
Microsoft Windows 2000 - 2003 Server, MS Win NT Server, Windows Vista, XP, 2000, NT,98, 95, 3.1	Visual Studio .NET	Business Objects Certified Crystal Enterprise Architect	SQL Server 7, 2000 (including Analysis Services OLAP DBMS)
Novell	Visual Basic	Full life cycle best practice project management	Oracle 8i-10g
Microsoft SQL Server	ANSI SQL, TSQL	Systems architecture design	
Oracle DB Admin toolset	Trillium	Relational database design and data modeling	
IBM 3270 Terminal	Abinitio	OLAP cube design	
Endevor	COBOL, COBOL II	Elementary business processes re-engineering	
MVS/TSO		Process flow diagrams	
MS DOS		Program structure charts	
Crystal Enterprise 8.0, 8.5, 9.0, 10.0		Unit / system testing approach	
Adobe Illustrator		Implementation testing and planning	
Clarus 5.0			
Microsoft SMS ServerVisio			

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VUE

Pearson VUE

[redacted]

Managing Partner, Credentia Services

Relevant Professional Experience

Credentia Services – Philadelphia, Pennsylvania

Managing Partner (2016–Present)

Resolvent Technologies – Philadelphia, Pennsylvania

Owner/Architect (2000–Present)

Trintech Group(previously J Driscoll/Globeset – Addison, Texas

Principle Software Architect (1998–2004)

Education

Bachelor of Business Administration, Baylor University, Waco, Texas

Pearson VUE

[redacted]

Chief Officer, Operations and Examinations, National Council of State Boards of Nursing (NCSBN)

Relevant Professional Experience

National Council of State Boards of Nursing (NCSBN) – Chicago, Illinois

Chief Officer, Operations and Examinations (2017–Present)

Chief Officer, Examinations (2011–2017)

Director, Examinations (2010–2011)

Elsevier, Inc. – St. Louis, Missouri

Director, Health Professions Testing (2007–2009)

Education

PhD, Quantitative Research in Evaluation and Measurement in Education, Ohio State University, Columbus, Ohio

Pearson VUE

[redacted]

Senior Psychometrician, National Council of State Boards of Nursing (NCSBN)

Relevant Professional Experience

National Council of State Boards of Nursing (NCSBN)

Senior Psychometrician (2013–Present)

American Institute for Research

Senior Psychometrician (2011–2013)

Psychometrician (2007–2010)

Education

PhD, Quantitative, Qualitative, and Psychometric Methods (QQPM), University of Nebraska – Lincoln

Bachelor of Arts, Psychology, Yonsei University, Seoul, Korea

Pearson VUE

[redacted]

Director of Business Operations, National Council of State Boards of Nursing (NCSBN)

Relevant Professional Experience

National Council of State Boards of Nursing (NCSBN), Chicago, Illinois

Director of Business Operations (2018–Present)

Associate Director of Operations (2016–2018)

Operations Manager (2005–2016)

Testing Services Operations Coordinator (2002–2005)

Education

Bachelor of Arts, Sociology/English, Illinois Wesleyan University, Bloomington, Illinois

Pearson VUE

[redacted]

Partner and Co-General Manager, Express Evaluations

Relevant Professional Experience

Express Evaluations – Elburn, Illinois

Partner and Co-General Manager (1992–Present)

AT&T – Chicago, Illinois

Sales and Vice President, Premium Inbound Services (1989–1992)

Branch Manager, Computer Systems (1988–1989)

National Account Manager for First Chicago Corp. (1983–1988)

Systems Manager, Business Systems (1981–1983)

Education

Associate of Science, Business Administrations, Waubonsee Community College

Pearson VUE

[redacted]

Partner and Co-General Manager, Express Evaluations

Relevant Professional Experience

Express Evaluations – Elburn, Illinois

Partner and Co-General Manager (1993–Present)

Telco Systems – St. Charles, Illinois

Systems Administrator/Programmer (1991–1992)

Quotron Systems – Chicago, Illinois

Technical Support Engineer (1882–1989)

Education

Bachelor of Science, Electrical Engineering Technology, Devry Institute of Technology

Pearson
VUE

Similar Work

More so than any other vendor, Pearson VUE is committed to healthcare licensure and certification assessment. Over 100 leading medical licensing and certification programs rely on us to deliver their critical examinations, including the National Council of State Boards of Nursing® (NCSBN®), the National Registry of Emergency Medical Technicians® (NREMT®), and the American Association of Medical Colleges® (AAMC®).

As the industry leader in long-term care nurse aide testing and registry services since 1990, Pearson VUE supports nurse aide testing in 25 jurisdictions, a remarkable achievement when you consider that nurse aide testing contracts are awarded state by state over varying lengths of time.

In 2016 alone, Pearson VUE administered 293,000 nurse aide exams. Longevity, performance, validity, security, and reliability in providing a full continuum of nurse aide testing services are key factors to consider when determining who should administer DAIL's nurse aide testing program.

The Pearson VUE team has 28 consecutive years of experience in administering nurse aide examinations. Our nurse aide client base has an average contractual relationship with Pearson VUE of more than 15 years. The stable nature of these relationships testifies to the flexibility and sustained service quality of the NNAAP® program and our team's commitment to our nurse aide clients and their candidates.

Nursing Assistant Testing Industry Experience

Pearson VUE is the leading provider of nursing assistant testing in the United States, servicing nursing assistant competency evaluation programs in 25 states/territories, including the District of Columbia, Guam, Northern Mariana Islands, American Samoa, and the Virgin Islands. We understand the special requirements of nursing assistant testing better than any other vendor.

Client Name	Duration
Alabama Department of Public Health	1995-present
Alaska State Board of Nursing	1996-present
American Samoa Community College Nursing Department (ASCC)	2014-present
California Chancellor's Office of California Community Colleges	1997-present
Colorado State Board of Nursing	2007-present
District of Columbia Department of Health/Board of Nursing	1996-present
Georgia Medical Care Foundation, Inc.	2007-present
Guam Board of Nurse Examiners	1995-present

Client Name	Duration
Louisiana Department of Health and Hospitals	1995-present
Maryland Board of Nursing	1995-present
Minnesota Department of Health	1992-present
Mississippi State Department of Health	1997-present
New Hampshire Board of Nursing	1997-present
North Carolina Dept. of Health and Human Services	2006-present
North Dakota Board of Nursing	1996-present
Northern Mariana Islands Board of Nursing	2011-present
Pennsylvania Office of Long-Term Living, Department of Aging and Department of Public Welfare	1993-present
Rhode Island Department of Health	1996-present
South Carolina Department of Health and Human Services	1996-present
Texas Health and Human Services Commission (HHSC)	1990-present
Vermont Department of Disabilities, Aging & Independent Living	2012-present
Virgin Islands Department of Health	1995-present
Virginia Board of Nursing	1995-present
Washington Department of Social and Health Services	1997-present
Wisconsin Department of Health Services	2002-present

Qualified Partners

In performance of the nurse aide testing contract, Pearson VUE will continue to collaborate with the following three organizations for DAIL nurse aide examination development, delivery, and scoring services:

National Council of State Boards of Nursing® (NCSBN®)

The quality and public protection commitment that NCSBN® brings is a cornerstone of our offering to DAIL.

Pearson VUE has an exclusive agreement with NCSBN® to administer the National Nurse Aide Assessment Program® (NNAAP®), as well as the Medication Aide Certification Examination® (MACE®). NCSBN® develops and maintains the National Nurse Aide Assessment Program® (NNAAP®), which comprises both written and skills components. Pearson VUE has an exclusive agreement with NCSBN® to administer the NNAAP®, the most widely adopted competency evaluation program for nurse aides. NCSBN® members represent the boards of nursing in the 50 states including– the District of Columbia and four United States territories (Guam, Virgin Islands, American Samoa, and the Northern Mariana Islands). In addition to the NNAAP® examination programs, NCSBN® develops and maintains the National Council Licensure Examination for Registered Nurses® (NCLEX-RN®) and the National Council Licensure Examination for Practical Nurses® (NCLEX-PN®). NCSBN® has also recently been

awarded a contract to administer the NCLEX® RN licensure examinations in Canada. No other nurse aide examination or nurse aide testing vendor has the expertise and support of a highly regarded nurse licensing organization such as NCSBN®.

Credentia

In 2016, Pearson VUE began a partnership with Credentia to provide a more seamless nurse aide testing experience for our clients. Credentia has been responsible for making the recruitment and selection of nurse aide evaluators (NAEs) in Vermont more efficient and less time consuming. Credentia has proven to be a high quality nurse aide competency evaluation services organization that exclusively works under the standards of the National Nurse Aide Assessment Program (NNAAP) to preserve the value of the nurse aide credential and help enable better long-term care in our communities.

Nurse aide competency evaluation is Credentia's full focus; this allows Credentia to align 100% of their investments in their people, processes, and technology supporting nurse aide testing, supporting their goal to be the best nurse aide evaluation company in the market. Their company culture, operational processes, and performance metrics are built singularly around a passion for excellence and customer satisfaction. In addition, their management team has over 15 years' experience in nurse aide testing.

Pearson VUE and Credentia share strong technological capabilities and business process management expertise that allow us to maintain high service performance levels. These synergies make it easier for our clients to do their jobs, allowing them to spend their time on critical activities surrounding the administration of their nurse aide competency examinations.

Credentia's Conductor™ web-based nurse aide scheduling and event management system has revolutionized how the nurse aide evaluator recruitment and assignment process is tracked and managed.

Conductor features support the following functions:

- Evaluator Enrollment
- Evaluator Compliance
- Facility Enrollment

- Facility Compliance
- Test Events
    - Quarterly Rotations
    - Automated Scheduling
    - Automated Bed Assignments
    - Electronic Voucher Management

Pearson VUE has partnered with Credentia in several US jurisdictions to provide more efficient nurse aide competency evaluation. The Pearson VUE and Credentia teams' comprehensive testing services include locating and recruiting clean, well-equipped nurse aide examination facilities, expedited examination registration and scheduling, and recruiting nurse aide evaluation teams.

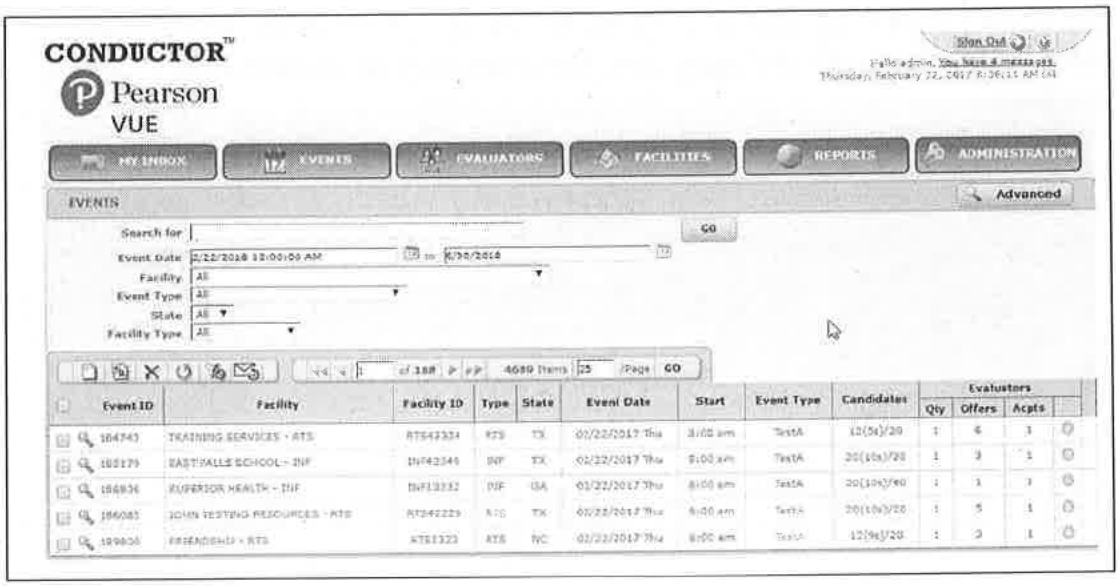


Figure 1: Credentia's Conductor software allows Pearson VUE nurse aide written and skills testing events and NAE scheduling to be managed more effectively.

Express Evaluations

Express Evaluations provides efficient and reliable support for the scoring process used by Pearson VUE to provide Vermont nurse aide candidates with same-day, official results of both the written and the skills components of the NNAAP examination. Express Evaluations' technology and sound workflow process has

been successfully used by Pearson VUE to enhance the speed and reliability of nurse aide test scoring. Since the introduction of the scoring solution in December 2002, over ***2.5 million individual examinations*** have been scored via this method, all without error, and verified by extensive quality control checks.

References

Pearson VUE has provided overviews, contact information, and reference letters for three programs similar to DAIL's nurse aide licensing program, should DAIL wish to contact them regarding our performance:

- Colorado Division of Professions and Occupations, State Board of Nursing
- North Carolina Department of Health and Human Services
- Virginia Board of Nursing

Our client profiles describe the services provided and the value that we were able to bring to our clients' programs. The references are immediately following this page.

Colorado Division of Professions and Occupations, State Board of Nursing

Contact Information

Christina Ostrom, Assistant Program Director, Board of Nursing

1560 Broadway, Suite 1350, Denver, Colorado 80202

Phone: (303) 894-2451; Email: christina.ostrom@.state.co.us

Program Overview

Pearson VUE first began providing the Colorado Division of Professions and Occupations, State Board of Nursing (Board) with test development, test administration, and reporting services for Colorado nurse aide candidates in July 1996. Following a competitive bidding process in 2005, the Board awarded the contract to another vendor. However, after one year of unsatisfactory service, the Board re-awarded the contract to Pearson VUE in January of 2007. Pearson VUE has continued to provide the Board with nurse aide testing services without interruption since.

Pearson VUE offers Colorado candidates increased flexibility and efficiency by processing candidate applications in our Aurora, Colorado office. Nurse aide candidates have access to 21 regional test sites and 55 in-facility test sites. Additionally, nurse aide candidates can take both the written and skills examinations on the same day. With Pearson VUE's rapid processing rates, candidates can complete their exams and be placed on the state registry within 24 hours, increasing the speed at which a certified candidate can obtain employment.

Pearson VUE provides the Board with professional nurse aide evaluator training, and consistent and reliable testing with the standardized National Nurse Aide Assessment Program. In addition, Pearson VUE's test centers provide the highest level of examination security by securing inventory and storing all of the Board's written and practical examination materials.

Program Highlights

- Online access to candidate bulletins and test schedules
- Professional nurse aide evaluator training
- Application screening, including proof of training

- Same-day official score reporting using the fax-back scoring process with wait times of 10 minutes or less
- Support for candidate appeals

COLORADO
Department of
Regulatory Agencies
Division of Professions and Occupations

February 14, 2018

RE: Reference Letter for Pearson VUE

To Whom It May Concern,

I am writing this letter as a reference for Pearson VUE, which has provided Nurse Aide application processing and examination service for the Colorado Board of Nursing since approximately 2007. As Assistant Program Director since August 2017, I can attest to the professionalism and responsiveness of services demonstrated by Pearson VUE and would recommend Pearson VUE to provide like service to similar agencies.

Pearson VUE was first awarded the contract to the Colorado Board of Nursing in 2007 through a competitive RFP process. Since that time, it appears from the contract files, they have successfully processed thousands of nurse aide applications and coordinated the delivery of written and skills examinations.

By partnering with Pearson VUE, the Board of Nursing has benefited from improved and consistent nurse aide exam application processing and exam delivery.

Overall, I am pleased with the level of service, the dedication and professionalism of the employees at Pearson VUE. In closing, I confidently recommend Pearson VUE to your organization.

Sincerely,

Christina Ostrom

Assistant Program Director
Colorado State Board of Nursing

1560 Broadway, Suite 1350, Denver, CO 80202 P 303.894.7800 F 303.894.2821 www.dora.colorado.gov/professions

North Carolina Department of Health and Human Services

Contact Information

Kathy B. Turner, Assistant Chief, HCPR Section, Division of Health Service Regulation

2709 Mail Service Center, Raleigh, North Carolina 27699-2709

Phone: (919) 855-3972; Email: kathy.turner@dhhs.nc.gov

Program Overview

The North Carolina Department of Health and Human Services (DHHS) awarded its nurse aide competency program to Pearson VUE in March 2006 following a competitive bidding process. The DHHS had experienced many challenges with their previous testing system including fraud, inconsistency, and failure to follow approved testing protocols. Pearson VUE was charged with providing a standardized competency evaluation program that was the same for all North Carolina nurse aide candidates, no matter where a candidate may be trained or tested. Within only three months of contract signing, Pearson VUE was able to deliver a smooth implementation of the program, with trained registered nurses administering the examinations.

> **"The staff and management at Pearson VUE and Credentia are professionals in every sense of the word. To their credit, they have not promised us anything they could not deliver. They're open to suggestions and have been receptive to customizing programs to our specifications as much as possible."**
>
> ***Kathy Turner***
> ***Assistant Chief -HCPR Section -Division of Health Service Regulation***

Because of the critical success the DHHS achieved through their partnership with Pearson VUE, they elected to award the administration of state medication aide examinations to Pearson VUE later that same year.

The DHHS's partnership with Pearson VUE has enabled them to streamline their program's processes, better allocate limited state resources, and more effectively serve its residents. Previously, state nurse aide candidates would have to wait several weeks before being placed on the state registry. Now, candidates are admitted to the state

registry within 48 hours of passing their exam, allowing North Carolina nurse aides to obtain employment more quickly. In addition, North Carolina candidates know whether or not they have passed their exam upon leaving the test center, as score reports are provided within minutes of completing the exam.

Pearson VUE also provides the DHHS with daily, weekly, and monthly program reports, which allows them to provide more timely feedback to training programs, plan and implement statewide continuing education programs, and more effectively resolve candidate and registry issues. North Carolina's nurse aide and medication aide training programs also receive data, allowing them to compare their program results to the entire state and better identify areas of opportunity.

The program now serves nearly 30,000 North Carolina nurse aide candidates annually, making it the largest nurse aide program in the United States.

Program Highlights

- Same-day administration of written and skills examinations for nurse aide candidates
- Computer-based test administration for approximately 1,000 annual medication aide candidates
- Certified candidates are referred to the DHHS for inclusion on the state registry via secured FTP site
- Immediate, on-site score reports provided by the evaluator with wait times of ten minutes or less
- Professional nurse aide evaluator training
- Online access to candidate bulletins and test schedules
- Development and distribution of candidate handbook
- Spanish-language testing available upon candidate request

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

MARK PAYNE
DIRECTOR

February 13, 2018

To Whom It May Concern,

It is with pleasure that I offer a letter of recommendation for Pearson VUE, the firm with which North Carolina contracts to administer competency testing for nurse aides and medication aides. As the contract administrator, I play a direct role in day-to-day contract operations and am in a position to speak on behalf of the State for this contract. We are most pleased with Pearson VUE.

Pearson VUE was first awarded the contract to administer nurse aide exams in March 2006 and had three months to become operational. Their staff and subcontractor were ready and the transition went more smoothly than we could have imagined. Because of the critical success we experienced with Pearson VUE in operationalizing nurse aide testing, we also selected them to administer our medication aide testing program in October 2006. Again, Pearson VUE had little time to get a system up and running, but testing was implemented without any problems. Pearson VUE continues to be awarded the contract for nurse aide and medication aide testing in North Carolina and has followed through with our multiple contract requirements since they were first awarded the contract. They fulfilled our request for online applications in 2010 and for online registration and scheduling of Nurse Aide Competency Exams in January of 2013.

While Pearson VUE, through their subcontractor, CREDENTIA, administers and manages testing, our agency maintains the Nurse Aide and Medication Aide Registries. Prior to Pearson VUE, registry listings were delayed several weeks post testing. Now we receive test results within 48 hours of competency, enabling us to list individuals on the registry that same day. This allows aides to obtain employment more quickly. As an added bonus, aides usually know whether they passed or failed before they leave the test site.

Our previous system's challenges such as fraud, inconsistency, and failure to follow approved testing protocols have virtually disappeared. Timely reports provided by Pearson VUE allow us to direct our monitoring and improvement efforts in a more efficient and effective manner. The data allows us to provide more timely feedback to programs and helps us plan and implement statewide continuing education. Training programs also receive data and thus have the capacity to analyze their data for measuring performance and for continuing quality improvement.

Pearson VUE currently has over 40 regional test sites and many in-facility sites in North Carolina that administer traditional paper/pencil tests and skills examinations for nurse aides. Medication aides are tested at six regional Pearson VUE sites via computer. Additionally, at the state's request, Pearson VUE added the option of the Spanish version for testing. Surveys show that aides are satisfied with their experience with the Pearson VUE/CREDENTIA system of test scheduling and administration.

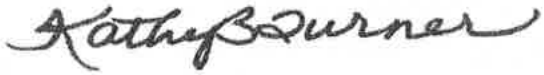
Health Care Personnel Education and Credentialing Section
www.ncnar.org
Tel 919-855-3970 • Fax 919-733-9764
Location: 801 Biggs Drive • Brown Building • Raleigh, NC 27603
Mailing Address: 2709 Mail Service Center • Raleigh, NC 27699-2709
An Equal Opportunity / Affirmative Action Employer

We find Pearson VUE to be a very "hands on" company. Even though North Carolina is one of many states that contract with the company, we receive outstanding customer service. That service demonstrates that we are considered to be "top" priority and if we have an issue, Pearson VUE makes it their issue to resolve. You can absolutely rely on their management's commitment to ensuring the system works for everyone.

The current staff and management at Pearson VUE and CREDENTIA are professionals in every sense of the word. To their credit, they have not promised us anything they could not deliver. When we have a critical concern, everyone works as a team to understand and identify the issue, devise a plan of improvement, and then continue to evaluate the outcomes. They are open to suggestions and have been receptive to customizing programs to our specifications as much as possible.

Our contract with Pearson VUE has enabled us to streamline our operations and more effectively utilize limited staff resources. This has made a positive difference in how we do business at the state level. Without reservation and with great confidence, I recommend Pearson VUE as a company that sets the gold standard in providing competency evaluation services for its clients.

Sincerely,



Kathy Turner, Acting Section Chief
Health Care Personnel Education
and Credentialing Section
Division of Health Service
Regulation Phone 919-855-3972
Fax 919-733-9764
Kathy.turner@dhhs.nc.gov
www.ncnar.gov

Virginia Board of Nursing

Contact Information

Paula Saxby, PhD, RN, Deputy Executive Director

Perimeter Center, 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233-1463

Phone: (804) 367-4597; Email: paula.saxby@dhp.virginia.gov

Program Overview

Pearson VUE has provided the Virginia Board of Nursing (Board) with test development, test administration, and reporting services for nurse aide certification since 1995. In 2008, the Board reaffirmed its satisfaction with Pearson VUE by renewing its contract at the conclusion of a competitive bidding process. Today, Pearson VUE tests nearly 9,000 Virginia nurse aide candidates annually.

Pearson VUE partnered with the National Council of State Boards of Nursing (NCSBN®) to help the Board achieve their goal of aligning Virginia's nurse aide program with national standards. Together, Pearson VUE and Credentia provide the Board with professional nurse aide evaluator training, and consistent and reliable testing with the standardized National Nurse Aide Assessment Program (NNAAP®). In addition, Pearson VUE's test centers provide the highest level of examination security by securing inventory and storing all of the Board's written and practical examination materials. As a result, the Board has not only achieved its goal, but has also benefited from an overall increase in operational efficiency.

Pearson VUE also offers Virginia nurse aide candidates same-day administration of the written and skills examinations at 26 regional and 168 in-facility test sites. During the course of the contract, Pearson VUE worked with the Board to promote nurse aide certification and facilitate communications with nurse aide training programs and employers throughout the Commonwealth.
Pearson VUE's client-focused work processes are based on industry best practices, which have led to the smooth operation of the program and successful support of business rules throughout the program's history.

Program Highlights

- Development and administration of written and skills examinations
- Online access to candidate bulletins and test schedules

- Professional nurse aide evaluator training
- Same-day official score reporting using the fax-back scoring process with wait times of 10 minutes or less
- Application screening, including proof of training and responses to screening questions that require state approval for testing
- Support for candidate appeals

COMMONWEALTH of VIRGINIA

David E. Brown, D.C.
Director

Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginia.gov
TEL (804) 367-4400
FAX (804) 527-4475

March 2, 2018

To Whom It May Concern,

I am writing this letter as a reference for Pearson VUE, which has been providing the nurse aide competency exam (NNAAP) for the Virginia Board of Nursing since 2006. Prior to that date, the Virginia Board of Nursing had a contract with the Pearson VUE companies that were formerly known as ASI (which merged with The Psychological Corporation), Houghton Mifflin/Thompson and Promissor, beginning in 1989. Therefore, we have had a contract with "Pearson VUE" since the Board of Nursing has maintained the Nurse Aide Registry in Virginia. As the Deputy Executive Director for the Virginia Board of Nursing, I can attest to the professionalism and responsiveness of the staff at Pearson VUE in regards to nurse aide testing in Virginia. I would recommend Pearson VUE to provide the nurse aide exam (NNAAP) to similar state agencies.

Throughout the years, Pearson VUE staff have been very responsive to the needs of the nurse aide candidates and the Board of Nursing in Virginia and have provided expertise in the development and maintenance of the nurse aide exam. In 2008, PearsonVUE entered into an agreement with the National Council of State Boards of Nursing (NCSBN) in which NCSBN owns the rights to the exam, and Pearson VUE is responsible for the implementation and delivery of the exam as well as the results of the exam.

Pearson VUE staff have provided annual training to nurse aide program providers in conjunction with the Board of Nursing regarding changes to the NNAAP exam and offering support to the program providers. This training had been well received from all program providers in Virginia.

Pearson VUE staff have always been very responsive in regards to customer service and any issues that have arisen regarding the nurse aide exam. Every five years, the Virginia Board of Nursing has participated in competitive bids for the contract, and each time, the contract has been awarded to Pearson VUE due to the level of confidence the Board has in their ability to provide exceptional service in regards to the nurse aide exam. In 2013, the Virginia Board of Nursing entered into a sole source, evergreen contract with Pearson VUE to provide the nurse aide exam in Virginia.

It is without hesitation that I highly recommend Pearson VUE to provide the nurse aide exam to your organization. Please contact me if you have questions about their service and product to the Virginia Board of Nursing.

Sincerely,

Paula B. Saxby, R.N., Ph.D.

Paula B. Saxby, R.N., Ph.D.
Deputy Executive Director
Virginia Board of Nursing

paula.saxby@dhp.virginia.gov

(804) 367-4597

8. Insurance: Before commencing work on this Agreement the Party must provide certificates of insurance to show that the following minimum coverages are in effect. It is the responsibility of the Party to maintain current certificates of insurance on file with the State through the term of this Agreement. No warranty is made that the coverages and limits listed herein are adequate to cover and protect the interests of the Party for the Party's operations. These are solely minimums that have been established to protect the interests of the State.

Workers Compensation: With respect to all operations performed, the Party shall carry workers' compensation insurance in accordance with the laws of the State of Vermont. Vermont will accept an out-of-state employer's workers' compensation coverage while operating in Vermont provided that the insurance carrier is licensed to write insurance in Vermont and an amendatory endorsement is added to the policy adding Vermont for coverage purposes. Otherwise, the party shall secure a Vermont workers' compensation policy, if necessary to comply with Vermont law.

General Liability and Property Damage: With respect to all operations performed under this Agreement, the Party shall carry general liability insurance having all major divisions of coverage including, but not limited to:

Premises - Operations
Products and Completed Operations
Personal Injury Liability
Contractual Liability

The policy shall be on an occurrence form and limits shall not be less than:

$1,000,000 Each Occurrence
$2,000,000 General Aggregate
$1,000,000 Products/Completed Operations Aggregate
$1,000,000 Personal & Advertising Injury

Automotive Liability: The Party shall carry automotive liability insurance covering all motor vehicles, including hired and non-owned coverage, used in connection with the Agreement. Limits of coverage shall not be less than $500,000 combined single limit. If performance of this Agreement involves construction, or the transport of persons or hazardous materials, limits of coverage shall not be less than $1,000,000 combined single limit.

Additional Insured. The General Liability and Property Damage coverages required for performance of this Agreement shall include the State of Vermont and its agencies, departments, officers and employees as Additional Insureds. If performance of this Agreement involves construction, or the transport of persons or hazardous materials, then the required Automotive Liability coverage shall include the State of Vermont and its agencies, departments, officers and employees as Additional Insureds. Coverage shall be primary and non-contributory with any other insurance and self-insurance.

Notice of Cancellation. There shall be no cancellation or non-renewal of insurance coverage(s) without thirty (30) days written prior written notice to the State.

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/07/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Marsh USA, Inc.
1166 Avenue of the Americas
New York, NY 10036

101712--GAWUS-17-18 GAWX NCSPE

CONTACT NAME:
PHONE (A/C, No, Ext):
FAX (A/C, No):
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Federal Insurance Company	20281
INSURER B : Safety National Casualty Corp.	15105
INSURER C : N/A	N/A
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
NCS Pearson, Inc.
5601 Green Valley Drive
Bloomington, MN 55437

COVERAGES **CERTIFICATE NUMBER:** NYC-008008946-62 **REVISION NUMBER:** 16

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	X COMMERCIAL GENERAL LIABILITY			[redacted]	05/31/2017	05/31/2018	EACH OCCURRENCE	$	2,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$	2,000,000
							MED EXP (Any one person)	$	10,000
							PERSONAL & ADV INJURY	$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$	2,000,000
	X POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$	2,000,000
	OTHER:							$	
B	AUTOMOBILE LIABILITY			[redacted]	05/31/2017	05/31/2018	COMBINED SINGLE LIMIT (Ea accident)	$	2,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$	
	ALL OWNED AUTOS / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$	
	HIRED AUTOS / NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$	
							PHYSICAL DAMAGE	$	SELF INSURED
A	X UMBRELLA LIAB X OCCUR			[redacted]	05/31/2017	05/31/2018	EACH OCCURRENCE	$	1,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$	1,000,000
	DED RETENTION $							$	
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			[redacted]	05/31/2017	05/31/2018	X PER STATUTE OTH-ER		
B	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N N	N/A			05/31/2017	05/31/2018	E.L. EACH ACCIDENT	$	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$	1,000,000
							E.L. DISEASE - POLICY LIMIT	$	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Evidence of Insurance.

CERTIFICATE HOLDER

NCS Pearson, Inc.
5601 Green Valley Drive
Bloomington, MN 55437

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
of Marsh USA Inc.
Steve Ruisi

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AGENCY CUSTOMER ID: 101712

LOC #: New York

ADDITIONAL REMARKS SCHEDULE

AGENCY Marsh USA, Inc.	NAMED INSURED NCS Pearson, Inc. 5601 Green Valley Drive Bloomington, MN 55437
POLICY NUMBER	
CARRIER / NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

The Excess Liability placement was brokered by Marsh Limited (London, UK). Marsh USA Inc. has only acted in the role as consultant to the client with respect to this placement, which is indicated here for your convenience.

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NNAAP® Meets Federal Guidelines for Nursing Assistant Test Content

NNAAP® Compliance with Federal Requirements		
Federal Curriculum Requirements	**NNAAP® Test Content Corresponding to the Federal Requirements**	**Corresponding NCSBN® Nurse Aide Job Analysis High Priority Tasks (average rating of importance, scale 1–4, across employment settings)**
(1) At least a total of 16 hours of training in the following areas prior to any direct contact with a resident: (i) Communication and interpersonal skills; (ii) Infection control; (iii) Safety/emergency procedures, including the Heimlich maneuver; (iv) Promoting residents' independence; and (v) Respecting residents' rights.	**Written Examination** **I. Physical Care Skills** **B. Basic Nursing Skills** 1. Infection control 2. Safety/emergency **III. Role of the Nurse Aide** **Communication** **Client Rights** **Legal and Ethical Behavior** **Member of the Health Care Team** **Clinical Skills Examination** All of the 34 skills forms available with the NNAAP® examination include procedures that incorporate communication and interpersonal skills, infection control, safety/emergency procedures, promoting resident independence, and respecting resident rights. The skill *Washes Hands* is included on all forms.	▪ Prevent and provide protection from injuries (3.59) ▪ Perform Heimlich maneuver (3.59) ▪ Perform cardiopulmonary resuscitation (CPR) (3.57) ▪ Use infection control guidelines (3.56) ▪ Respond per agency protocol in actual or potential disaster or emergency situations (3.50) ▪ Apply and respond to client safety alarms (3.46) ▪ Identify client before providing each service/care (3.45) ▪ Ask for help when needed (3.45) ▪ Implement aspiration precautions (3.43) ▪ Answer call light (3.40) ▪ Accept and complete authorized duties (3.32) ▪ Follow protective precautions for immune suppressed client (3.39) ▪ Follow seizure precautions (3.28) ▪ Assist coworkers (3.26) ▪ Assist with oxygen care (3.12) ▪ Use identified channels/chain of command to voice questions, concerns, suggestions, or complaints (3.03) ▪ Use courtesy in communications (3.03) ▪ Attend and participate in staff education (2.99) ▪ Use active listening (2.97)

NNAAP® Compliance with Federal Requirements		
Federal Curriculum Requirements	**NNAAP® Test Content Corresponding to the Federal Requirements**	**Corresponding NCSBN® Nurse Aide Job Analysis High Priority Tasks (average rating of importance, scale 1–4, across employment settings)**
		▪ Recognize the need for an interpreter (2.97) ▪ Participate in shift report (2.94) ▪ Provide explanation of care to client or family (2.92) ▪ Identify self to client by name and job title (2.89) ▪ Suggest additions or changes to client's plan of care (2.87) ▪ Identify and report barriers to learning (2.85) ▪ Provide ostomy care (e.g., colostomy, ileostomy) (2.79)
(2) Basic nursing skills: (i) Taking and recording vital signs; (ii) Measuring and recording height and weight; (iii) Caring for the residents' environment; (iv) Recognizing abnormal changes in body functioning and the importance of reporting such changes to a supervisor; and (v) Caring for residents when death is imminent.	**Written Examination** **I. Physical Care Skills** **B. Basic Nursing Skills** 3. Therapeutic/technical procedures 4. Data collection and reporting **Clinical Skills Examination** ▪ Counts and records radial pulse ▪ Counts and records respirations ▪ Measures and records blood pressure ▪ Measures and records urinary output ▪ Measures and records weight of ambulatory client ▪ Donning and removing PPE (gown and gloves)	▪ Recognize and report signs and symptoms of client's changing condition (3.66) ▪ Report and record unusual incidents/variances (e.g., errors, injuries, falls) (3.59) ▪ Document or record information accurately (3.35) ▪ Dispose of biohazardous waste properly (3.35) ▪ Provide comfort and care for dying client (3.13) ▪ Check for color, movement, and sensation (CMS) of extremities (3.11) ▪ Take and record client's vital signs (VS) (3.10) ▪ Use pain scale to check client's pain level (2.89) ▪ Measure and record intake and output (2.82) ▪ Perform and record pulse oximetry (2.71)
(3) Personal care skills, including, but not limited to: (i) Bathing; (ii) Grooming, including mouth care;	**Written Examination** **I. Physical Care Skills** **A. Activities of Daily Living** 1. Hygiene 2. Dressing and grooming	▪ Assist client with transfers (3.36) ▪ Provide preventive skin care (e.g., observing for breakdown, applying lotion, applying heel pads, or

Federal Curriculum Requirements	NNAAP® Test Content Corresponding to the Federal Requirements	Corresponding NCSBN® Nurse Aide Job Analysis High Priority Tasks (average rating of importance, scale 1–4, across employment settings)
(iii) Dressing; (iv) Toileting; (v) Assisting with eating and hydration; (vi) Proper feeding techniques; (vii) Skin care; and (viii) Transfers, positioning, and turning.	3. Nutrition and hydration 4. Elimination 5. Rest/sleep/comfort **Clinical Skills Examination** ▪ Assists with use of bedpan ▪ Cleans upper or lower denture ▪ Provides mouth care ▪ Feeds client who cannot feed self ▪ Gives modified bed bath (face and one arm, hand and underarm) ▪ Dresses client with affected (weak) right arm ▪ Provides catheter care for female ▪ Provides perineal care (peri-care) for female ▪ Provides foot care on one foot	applying elbow protectors) (3.32) ▪ Provide care for the client with a sensory impairment (3.10) ▪ Provide shower/bath (e.g.. , partial, whirlpool, bed bath) (3.08) ▪ Provide incontinence care or peri-care (3.03) ▪ Feed client who cannot feed self (3.01) ▪ Provide urinary catheter care (3.01) ▪ Assist client with turning, coughing, and deep breathing or incentive spirometry (2.97) ▪ Provide for toileting needs (2.91) ▪ Provide client with adequate fluids (2.88) ▪ Change incontinence product (2.79) ▪ Provide physical comfort measures (e.g. back rubs, hot/cold compress, sitz bath) (2.74) ▪ Ensure client receives diet as ordered (2.72)
(4) Mental health and social service needs: (i) Modifying aide's behavior in response to residents' behavior; (ii) Awareness of developmental tasks associated with the aging process; (iii) How to respond to resident behavior; (iv) Allowing the resident to make personal choices, providing and reinforcing other behavior consistent with the resident's dignity; and	**Written Examination** **II. Psychosocial Care Skills** **A. Emotional and Mental Health Needs** **B. Spiritual and Cultural Needs**	▪ Recognize and report signs that client might be a danger to themselves or others (e.g., depressed, suicidal, self-harm) (3.69) ▪ Implement strategies to care for the angry or potentially violent client (3.38) ▪ Apply and monitor restraints per nurse's direction (3.29) ▪ Provide client with a feeling of security (3.09) ▪ Provide age appropriate care (2.98) ▪ Observe and report mood changes (2.97)

NNAAP® Compliance with Federal Requirements		
Federal Curriculum Requirements	**NNAAP® Test Content Corresponding to the Federal Requirements**	**Corresponding NCSBN® Nurse Aide Job Analysis High Priority Tasks (average rating of importance, scale 1–4, across employment settings)**
(v) Using the resident's family as a source of emotional support.		▪ Provide emotional support (2.91) ▪ Promote client's feeling of acceptance (2.91) ▪ Use reality orientation (e.g., time, place, person) (2.78) ▪ Participate in client behavior modification program (2.75)
(5) Care of cognitively impaired residents: (i) Techniques for addressing the unique needs and behaviors of individual with dementia (Alzheimer's and others); (ii) Communicating with cognitively impaired residents; (iii) Understanding the behavior of cognitively impaired residents; (iv) Appropriate responses to the behavior of cognitively impaired residents; and (v) Methods of reducing the effects of cognitive impairments.	**Written Examination** **III. Role of the Nurse Aide** **A. Communication** **B. Client Rights** **C. Legal and Ethical Behavior** **D. Member of the Health Care Team**	▪ Identify strategies to care for the client with cognitive impairment (3.11) ▪ Identify behaviors commonly related to a client with cognitive impairment (e.g., dementia, Alzheimer's disease) (3.06)
(6) Basic restorative services: (i) Training the resident in self-care according to the resident's abilities; (ii) Use of assistive devices in transferring, ambulation, eating, and dressing; (iii) Maintenance of range of motion; (iv) Proper turning and positioning in bed and chair; (v) Bowel and bladder training; and (vi) Care and use of prosthetic and orthotic devices.	**Written Examination** **I. Physical Care Skills** C. Restorative skills 1. Prevention 2. Self-care/independence **Clinical Skills Examination** ▪ Transfers from bed to wheelchair using transfer belt ▪ Assists to ambulate using transfer belt ▪ Performs passive range of motion (PROM) for one knee and one ankle ▪ Performs passive range of motion (PROM) for one shoulder ▪ Positions on side ▪ Applies one knee-high elastic stocking	▪ Use proper body mechanics (3.47) ▪ Transfer client using assistive devices (3.42) ▪ Turn and reposition client (3.31) ▪ Assist client with walking (3.27) ▪ Assist client to ambulate with a cane or walker (3.23) ▪ Perform/assist client with range of motion exercises (2.88) ▪ Apply and remove anti-embolic hose or sequential suppression devices (SCD) (2.85) ▪ Promote client's independence in the care, application, and removal of prosthetic and orthotic devices (2.84)

NNAAP® Compliance with Federal Requirements

Federal Curriculum Requirements	NNAAP® Test Content Corresponding to the Federal Requirements	Corresponding NCSBN® Nurse Aide Job Analysis High Priority Tasks (average rating of importance, scale 1–4, across employment settings)
		▪ Use specialty beds for care of client (2.78) ▪ Assist client in bowel and/or bladder training (2.78)
(7) Residents' rights: (i) Providing privacy and maintenance of confidentiality; (ii) Promoting the residents' right to make personal choices to accommodate their needs; (iii) Giving assistance in resolving grievances and disputes; (iv) Providing needed assistance in getting to and participating in resident and family groups and other activities; (v) Maintaining care and security of residents' personal possessions; (vi) Promoting the resident's right to be free from abuse, mistreatment, and neglect and the need to report any instances of such treatment to appropriate facility staff; (vii) Avoiding the need for restraints in accordance with current professional standards.	**Written Examination** **III. Role of the Nurse Aide** **A. Communication** **B. Client Rights** **C. Legal and Ethical Behavior** **D. Member of the Health Care Team**	▪ Promote freedom from abuse, mistreatment, and neglect (3.62) ▪ Report suspicious workplace activity which involves other employees, former employees, clients, or visitors (3.44) ▪ Follow guidelines for ethical conduct (3.31) ▪ Respect client's need for privacy/confidentiality (3.28) ▪ Promote client's right to be free of restraints (3.24) ▪ Accept client's right to refuse care (3.10) ▪ Respect client's personal choices, including advance directives (3.08) ▪ Promote client self-esteem and dignity (2.95) ▪ Encourage client and family to contribute to and follow plan of care (2.95) ▪ Prioritize care based on client's schedule (e.g., tests, physical therapy) (2.89) ▪ Provide a client-centered environment (2.89) ▪ Reinforce client and family education (2.84) ▪ Maintain care and security of client's personal belongings (2.83) ▪ Respect client's religious and cultural beliefs and practices (2.79) ▪ Allow client to do things at his or her own pace (2.79) ▪ Provide assistance to client in resolving grievances and disputes (2.77)

NNAAP® Compliance with Federal Requirements		
Federal Curriculum Requirements	**NNAAP® Test Content Corresponding to the Federal Requirements**	**Corresponding NCSBN® Nurse Aide Job Analysis High Priority Tasks (average rating of importance, scale 1–4, across employment settings)**
		• Encourage client to be independent (2.71)

NNAAP® Nurse Aide Practice Written Exam Packet

The purpose of this Practice Written Examination is to assist individuals in preparing for the NNAAP® Written Examination. The Practice Written Examination will enable you to familiarize yourself with the styles and types of questions that will appear in the actual examination. To obtain the maximum benefits from taking this Practice Written Examination, you are encouraged to follow the procedures below. These are designed to assist you in creating an atmosphere that is as close to an actual test situation as possible.

1. Read all directions first.
2. Take this examination in a quiet location where outside noise or interference is at a minimum. Have two (2) pencils available when you begin.
3. Time yourself. The time allotted to take the test is two (2) hours.

Click boxes below to go to:

NNAAP® Content Outline

Practice Exam

Practice Exam Answer Sheet

Practice Exam Answer Key

Print Packet

Search

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The 2016 National Nurse Aide Assessment Program (NNAAP®) Written (Oral) Examination 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.

Content Domain	2016 Content Outline		2011 Content Outline	
	Weighting of Content Domain	**Number of Items in Domain**	Weighting of Content Domain	Number of Items in Domain
I. Physical Care Skills				
A. Activities of Daily Living	**14%**	**9**	14%	8
1. Hygiene				
2. Dressing and Grooming				
3. Nutrition and Hydration				
4. Elimination				
5. Rest/Sleep/Comfort				
B. Basic Nursing Skills	**39%**	**23**	39%	24
1. Infection Control				
2. Safety/Emergency				
3. Therapeutic and Technical Procedures				
4. Data Collection and Reporting				
C. Restorative Skills	**8%**	**5**	7%	4
1. Prevention				
2. Self Care/Independence				
II. Psychosocial Care Skills				
A. Emotional and Mental Health Needs	**11%**	**6**	11%	6
B. Spiritual and Cultural Needs	**2%**	**2**	2%	2
III. Role of the Nurse Aide				
A. Communication	**8%**	**4**	8%	5
B. Client Rights	**7%**	**4**	7%	4
C. Legal and Ethical Behavior	**3%**	**2**	3%	2
D. Member of the Health Care Team	**8%**	**5**	9%	5
TOTAL	**100%**	**60**	100%	60

Practice Exam

1. **While the nurse aide is assisting a client to the commode, a visitor enters the room. How SHOULD the nurse aide respond?**
   (A) "Can't you knock?"
   (B) "Hi. This will only take a moment, so please take a seat."
   (C) "Would you help me lift the client?"
   (D) "Would you please wait in the lobby?"

2. **The nurse aide should perform oral care on a client who is unconscious at LEAST every:**
   (A) 2 hours.
   (B) 3 hours.
   (C) 4 hours.
   (D) 5 hours.

3. **The nurse aide SHOULD report a client's concerns directly to the:**
   (A) nurse supervisor.
   (B) primary health care provider.
   (C) client's family.
   (D) administrator.

4. **Before assisting a client into a bath or shower, the nurse aide should FIRST:**
   (A) check the temperature of the water.
   (B) shampoo the client's hair.
   (C) soak the client's feet.
   (D) apply lotion or oil to the client's skin.

5. **A client looks forward to playing cards each morning. The nurse aide SHOULD:**
   (A) tell the client that the nurse aide is too busy today to take the client to play cards.
   (B) plan the client's schedule so that the client is bathed and dressed in time for playing cards.
   (C) tell the client that the nurse aide forgot that the client wanted to play cards.
   (D) ask the client to bathe and dress self before taking the client to play cards.

6. **A client with Alzheimer's disease wanders from room to room while moving the belongings of other clients to different locations. Alert and oriented clients are angry that their things have been moved. The nurse aide SHOULD:**
   (A) return the client to the client's room and close the door.
   (B) find the missing articles and return them.
   (C) walk with the client at all times to keep the client from wandering.
   (D) tell the other clients to be understanding of the client's condition.

7. **A client is paralyzed on the left side. The nurse aide SHOULD place the signaling device:**
   (A) on the client's right hand.
   (B) on the left side of the client's bed.
   (C) on the chair at the left of the client's bed.
   (D) on the table at the foot of the bed.

8. **Physical restraints are used MOST often:**
   (A) to prevent client injury.
   (B) when the nurse aide staff is unavailable.
   (C) at the family's request.
   (D) to prevent clients from wandering.

9. **What is the FIRST thing a nurse aide should do when finding an unresponsive client?**
   (A) Place a cold washcloth on the client's forehead
   (B) Call for help
   (C) Close the door to provide privacy to the client
   (D) Call the client's family

10. **What type of fire can be put out with water?**
    (A) Electrical
    (B) Grease
    (C) Paper
    (D) Chemical

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11. **When caring for a client from another country, the nurse aide SHOULD:**
    (A) be sensitive to the client's cultural needs.
    (B) orient the client to the cultural practices of the facility.
    (C) promote participation by the client in group activity.
    (D) explain to the client that cultural preferences are not important when providing care.

12. **If a client has hand tremors, the nurse aide SHOULD:**
    (A) restrain the hand that has the tremor.
    (B) assist the client with activities of daily living (ADL) as needed.
    (C) tell the client to stop shaking and control the tremors.
    (D) do everything for the client.

13. **When taking a client's radial pulse, the nurse aide SHOULD:**
    (A) count 2 pulsations as 1 pulse beat.
    (B) place the nurse aide's fingertips on the client's wrist.
    (C) place the nurse aide's fingertips on the side of the client's neck.
    (D) count for 5 full minutes.

14. **The female perineum SHOULD be cleansed:**
    (A) from front to back.
    (B) without soap.
    (C) with oxygen peroxide.
    (D) from back to front.

15. **To lift an object by using good body mechanics, the nurse aide SHOULD:**
    (A) keep both feet close together.
    (B) lift with abdominal muscles.
    (C) bend the knees and keep the back straight.
    (D) hold the object away from the body.

16. **The nurse aide is caring for a client who has dentures. Which of the following actions SHOULD the nurse aide take when caring for the client's dentures?**
    (A) Store the dentures in the client's bathroom on the sink
    (B) Clean the dentures with regular toothpaste
    (C) Use hot water to disinfect the dentures
    (D) Line the bathroom sink with a towel before cleaning the dentures

17. **Right before dinner, a client is incontinent of urine. The nurse aide SHOULD:**
    (A) minimize the interruption of the client's dinner by cleaning up the client after dinner.
    (B) clean the client and take the client to dinner as soon as possible.
    (C) tell the client not to eat until the client has cleaned and changed self.
    (D) insist that the client eat dinner in the client's room.

18. **When operating a manual bed, the nurse aide SHOULD remember to:**
    (A) elevate the client's head at all times.
    (B) lock the wheels only when the cranks are folded.
    (C) fold the cranks under the bed.
    (D) raise all the side rails.

19. **The nurse aide is providing care for a client after elimination. It would be MOST important for the nurse aide to:**
    (A) keep the client comfortable.
    (B) prevent soiling the bed linen.
    (C) ensure that all feces are removed from the client's skin.
    (D) use soap and water when cleaning the client to keep the linen costs down.

20. **The nursing care plan states, "Transfer with mechanical lift." However, a client is very agitated. To transfer the client, the nurse aide SHOULD:**
   (A) lift the client by placing the nurse aide's hands under the client's underarms.
   (B) place the client in the lift.
   (C) get assistance to move the client.
   (D) keep the wheels unlocked so that the lift can move with the client.

21. **For safety, when leaving a client alone in a room, the nurse aide SHOULD:**
   (A) raise all the side rails.
   (B) place a signaling device within the client's reach.
   (C) apply a restraint to the client.
   (D) leave the bed elevated in the highest position.

22. **The nurse aide sees a client spill water on the floor in the hall. Another client is walking down the hall. The nurse aide SHOULD:**
   (A) call the nurse.
   (B) clean up the spill.
   (C) ask another nurse aide to clean the spill.
   (D) leave the spill.

23. **The nurse aide is walking with a client who uses a wheelchair when the facility fire alarm system is activated. The client becomes excited by the noise. The nurse aide SHOULD:**
   (A) carry the client out of the facility.
   (B) leave the client to search for help.
   (C) comfort the client while moving to a safe place.
   (D) lock the client's wheelchair and check the surrounding area for smoke.

24. **The nurse aide is going to help a client walk from the bed to a chair. What SHOULD the nurse aide put on the client's feet?**
   (A) Socks or stockings only
   (B) Cloth-soled slippers
   (C) Rubber-soled slippers or shoes
   (D) Nothing

25. **The nurse aide SHOULD refuse to perform a task if the:**
   (A) nurse aide has not been trained to do it.
   (B) client is difficult to deal with.
   (C) nurse aide is too busy.
   (D) nurse aide is at the end of the shift.

26. **When assisting a client in resolving grievances, the nurse aide SHOULD report the grievance to the:**
   (A) primary health care provider.
   (B) family.
   (C) administrator.
   (D) nurse in charge.

27. **The nurse aide SHOULD place soiled linen:**
   (A) in the linen closet.
   (B) on the chair.
   (C) in the dirty linen container.
   (D) on the overbed table.

28. **The nurse aide is reviewing fire prevention measures. Which of the following, if performed by the nurse aide, would require follow-up?**
   (A) Taking all cigarettes and matches away from clients and visitors
   (B) Being aware of the locations of fire extinguishers
   (C) Reporting all damaged wiring and/or sockets in clients' rooms
   (D) Participating in fire drills

29. **When giving care for a client, the nurse aide SHOULD avoid unnecessary exposure of the client in order to protect the client's right to:**
   (A) privacy.
   (B) confidentiality.
   (C) personal choice.
   (D) personal hygiene.

30. **When taking an oral temperature, it is important to:**
   (A) place the thermometer in hot water to test the thermometer.
   (B) insert the thermometer under the arm.
   (C) position the thermometer under the tongue.
   (D) put lubricant on the thermometer.

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31. **When caring for a client who uses a protective device (restraint), the nurse aide SHOULD:**

(A) assess the client once during every hour.
(B) assure that the protective device is tight.
(C) check the client's body alignment.
(D) release the protective device once during every shift.

32 **The nurse aide is assisting a client to transfer from the bed to the wheelchair. Which of the following actions SHOULD the nurse aide take?**

(A) Place the bed in the low position
(B) Place a pillow on the wheelchair seat
(C) Lower both footrest pedals
(D) Release the wheel brakes

33. **When communicating with a client's family, the nurse aide SHOULD**

(A) listen to concerns and offer support.
(B) offer advice about the client's medical treatment.
(C) get involved in family problems.
(D) inform the family of any changes in the client's condition.

34. **When performing oral care, in what position SHOULD the nurse aide place a client who is unconscious?**

(A) Supine
(B) Lateral
(C) Prone
(D) Trendelenburg

35. **The nurse aide notices that a client's bedside lamp cord is draped across a chair in order to reach the nearest outlet. The nurse aide SHOULD:**

(A) tell the client that the bedside lamp is a safety hazard and take it away.
(B) unplug the bedside lamp and ask the client not to use it.
(C) see if any changes can be made so that the bedside lamp can be plugged in safely.
(D) ask the client to avoid walking by the bedside lamp.

36. **The nurse aide can provide a client with a sense of security by:**

(A) performing all activities of daily living (ADL) for the client.
(B) leaving the room without speaking.
(C) explaining all routines and procedures.
(D) talking to another nurse aide while providing care.

37. **A client who is confused and disoriented is asking to go home. The nurse aide's BEST action would be to:**

(A) tell the client, "This is your home."
(B) take the client to the activity room.
(C) ask the client to tell the nurse aide about the client's home.
(D) tell the client, "We will take you home later."

38. **A client tells the nurse aide that oral care was last performed 2 days ago. The nurse aide SHOULD report this finding to the:**

(A) client's family.
(B) nurse in charge.
(C) director of nursing.
(D) administrator.

39. **Pressure ulcers can be prevented by:**

(A) placing an incontinence brief on the client.
(B) positioning a pillow under the client's head.
(C) dressing the client in loosely fitting clothing.
(D) repositioning the client every 2 hours.

40. **The electric shaver that the nurse aide is using to shave a client begins to spark and smoke. What should the nurse aide do NEXT?**

(A) Call the nurse in charge
(B) Finish shaving the client as quickly as possible
(C) Use the roommate's shaver to finish the shave
(D) Unplug the shaver

41. **When giving a back rub, the nurse aide SHOULD:**
   (A) use a circular motion.
   (B) position the client in the supine position.
   (C) use short, light strokes.
   (D) warm the lotion in the microwave.

42. **If an alert and oriented client touches a nurse aide inappropriately, the nurse aide's BEST response is to:**
   (A) slap the client's hand.
   (B) step back and ask the client not to do it again.
   (C) refuse to care for the client.
   (D) warn the client that the behavior may be punished.

43. **While making an empty bed, the nurse aide sees that a side rail is broken. The nurse aide SHOULD:**
   (A) wait for the next safety check to report the broken side rail.
   (B) report the broken side rail immediately.
   (C) tie the side rail in the raised position until it is fixed.
   (D) warn the client to be careful when the client gets back into bed

44. **What should the nurse aide do FIRST when changing an ostomy bag?**
   (A) Put on gloves
   (B) Wash hands
   (C) Explain the procedure to the client
   (D) Wash the area around the stoma

45. **Which of the following statements might strongly indicate that a client is considering suicide?**
   (A) "I think I need to see a psychiatrist."
   (B) "I want to go to sleep and never wake up."
   (C) "I woke up feeling sad today."
   (D) "I miss my family."

46. **The nurse aide SHOULD understand that an example of an alternative to restraints is a:**
   (A) lap buddy/tray.
   (B) sedative.
   (C) bed alarm.
   (D) hand mitt.

47. **The BEST razor to use when shaving a diabetic client is:**
   (A) a safety razor.
   (B) an electric razor.
   (C) a disposable razor.
   (D) a straight edge razor.

48. **The Client's Bill of Rights includes:**
   (A) free medical care.
   (B) freedom of choice.
   (C) access to the medicine cart.
   (D) access to the laundry.

49. **When a hearing aid is not being used by a client, it SHOULD:**
   (A) be given to the client's family.
   (B) be left turned on.
   (C) have the battery removed.
   (D) be stored in alcohol.

50. **The nurse aide gave a client the wrong diet. Which of the following actions SHOULD the nurse aide take?**
   (A) Report the error to the nurse
   (B) Ignore the error
   (C) Remove any evidence of the error
   (D) Blame another nurse aide for the error

51. **A client has informed the nurse aide that the client's religious beliefs prohibit eating certain food items. The nurse aide SHOULD report this information to the:**
   (A) dietitian.
   (B) administrator.
   (C) charge nurse.
   (D) client's family.

52. **Incident reports are written in order to:**
   (A) inform the primary health care provider.
   (B) notify family members.
   (C) identify who is at fault.
   (D) record details of unusual events.

GO ON TO NEXT PAGE

53. **While eating dinner, a client starts to choke. The nurse aide SHOULD:**

(A) immediately remove the client's food tray and go to find the nurse in charge.
(B) slap the client on the back until the food dislodges.
(C) call for assistance and perform the Heimlich maneuver (abdominal thrust).
(D) give the client a drink of water.

54. **A client's family member asks the nurse aide what medication the client is receiving. The nurse aide SHOULD:**

(A) allow the family member to review the client's medication list.
(B) tell the family member the medications that the client is taking.
(C) refer the family member to the nurse.
(D) give the family member the client's chart.

55. **When transferring a client to a different unit, the MOST important information the nurse aide needs is the:**

(A) phone number to the client's room.
(B) client's medical diagnosis.
(C) name of the client's spouse.
(D) name and room number.

56. **What is the MAIN purpose of continuing education for the nurse aide?**

(A) Client safety
(B) Review of skills
(C) Facility compliance
(D) Promotes teamwork

57. **A button hook and a sock assist are all part of what type of health care?**

(A) Restorative
(B) Preventive
(C) Protective
(D) Alternative

58. **The nurse aide is caring for a client who answers every question by nodding and saying "yes." Which of the following actions SHOULD the nurse take?**

(A) Inform the nurse of the client's behavior
(B) Ask a family member to translate for the client
(C) Speak to the client while using medical terms
(D) Increase voice volume when speaking to the client

59. **What SHOULD the nurse aide do to communicate with a client who speaks and understands only another language?**

(A) Use gestures
(B) Speak more slowly
(C) Listen and say nothing
(D) Use the services of an interpreter

60. **When ambulating a client who has an unsteady gait, it is BEST for the nurse aide to use a:**

(A) single crutch.
(B) gait belt.
(C) quad cane.
(D) wheelchair.

STOP HERE

Practice Exam for Nurse Aides

ANSWER SHEET

This form is similar to the answer sheet on the nurse aide written examination.

Fill in one bubble for each question, then check your answers using the answer key on page 8.

1	Ⓐ	Ⓑ	Ⓒ	Ⓓ	31	Ⓐ	Ⓑ	Ⓒ	Ⓓ
2	Ⓐ	Ⓑ	Ⓒ	Ⓓ	32	Ⓐ	Ⓑ	Ⓒ	Ⓓ
3	Ⓐ	Ⓑ	Ⓒ	Ⓓ	33	Ⓐ	Ⓑ	Ⓒ	Ⓓ
4	Ⓐ	Ⓑ	Ⓒ	Ⓓ	34	Ⓐ	Ⓑ	Ⓒ	Ⓓ
5	Ⓐ	Ⓑ	Ⓒ	Ⓓ	35	Ⓐ	Ⓑ	Ⓒ	Ⓓ
6	Ⓐ	Ⓑ	Ⓒ	Ⓓ	36	Ⓐ	Ⓑ	Ⓒ	Ⓓ
7	Ⓐ	Ⓑ	Ⓒ	Ⓓ	37	Ⓐ	Ⓑ	Ⓒ	Ⓓ
8	Ⓐ	Ⓑ	Ⓒ	Ⓓ	38	Ⓐ	Ⓑ	Ⓒ	Ⓓ
9	Ⓐ	Ⓑ	Ⓒ	Ⓓ	39	Ⓐ	Ⓑ	Ⓒ	Ⓓ
10	Ⓐ	Ⓑ	Ⓒ	Ⓓ	40	Ⓐ	Ⓑ	Ⓒ	Ⓓ
11	Ⓐ	Ⓑ	Ⓒ	Ⓓ	41	Ⓐ	Ⓑ	Ⓒ	Ⓓ
12	Ⓐ	Ⓑ	Ⓒ	Ⓓ	42	Ⓐ	Ⓑ	Ⓒ	Ⓓ
13	Ⓐ	Ⓑ	Ⓒ	Ⓓ	43	Ⓐ	Ⓑ	Ⓒ	Ⓓ
14	Ⓐ	Ⓑ	Ⓒ	Ⓓ	44	Ⓐ	Ⓑ	Ⓒ	Ⓓ
15	Ⓐ	Ⓑ	Ⓒ	Ⓓ	45	Ⓐ	Ⓑ	Ⓒ	Ⓓ
16	Ⓐ	Ⓑ	Ⓒ	Ⓓ	46	Ⓐ	Ⓑ	Ⓒ	Ⓓ
17	Ⓐ	Ⓑ	Ⓒ	Ⓓ	47	Ⓐ	Ⓑ	Ⓒ	Ⓓ
18	Ⓐ	Ⓑ	Ⓒ	Ⓓ	48	Ⓐ	Ⓑ	Ⓒ	Ⓓ
19	Ⓐ	Ⓑ	Ⓒ	Ⓓ	49	Ⓐ	Ⓑ	Ⓒ	Ⓓ
20	Ⓐ	Ⓑ	Ⓒ	Ⓓ	50	Ⓐ	Ⓑ	Ⓒ	Ⓓ
21	Ⓐ	Ⓑ	Ⓒ	Ⓓ	51	Ⓐ	Ⓑ	Ⓒ	Ⓓ
22	Ⓐ	Ⓑ	Ⓒ	Ⓓ	52	Ⓐ	Ⓑ	Ⓒ	Ⓓ
23	Ⓐ	Ⓑ	Ⓒ	Ⓓ	53	Ⓐ	Ⓑ	Ⓒ	Ⓓ
24	Ⓐ	Ⓑ	Ⓒ	Ⓓ	54	Ⓐ	Ⓑ	Ⓒ	Ⓓ
25	Ⓐ	Ⓑ	Ⓒ	Ⓓ	55	Ⓐ	Ⓑ	Ⓒ	Ⓓ
26	Ⓐ	Ⓑ	Ⓒ	Ⓓ	56	Ⓐ	Ⓑ	Ⓒ	Ⓓ
27	Ⓐ	Ⓑ	Ⓒ	Ⓓ	57	Ⓐ	Ⓑ	Ⓒ	Ⓓ
28	Ⓐ	Ⓑ	Ⓒ	Ⓓ	58	Ⓐ	Ⓑ	Ⓒ	Ⓓ
29	Ⓐ	Ⓑ	Ⓒ	Ⓓ	59	Ⓐ	Ⓑ	Ⓒ	Ⓓ
30	Ⓐ	Ⓑ	Ⓒ	Ⓓ	60	Ⓐ	Ⓑ	Ⓒ	Ⓓ

Answer Key

QUESTION NUMBER	ANSWER	CONTENT CATEGORIES
1	D	Communication
2	A	Activities of Daily Living
3	A	Member of the Health Care Team
4	A	Activities of Daily Living
5	B	Emotional and Mental Health Needs
6	B	Emotional and Mental Health Needs
7	A	Basic Nursing Skills
8	A	Basic Nursing Skills
9	B	Basic Nursing Skills
10	C	Basic Nursing Skills
11	A	Spiritual and Cultural Needs
12	B	Restorative Skills
13	B	Basic Nursing Skills
14	A	Activities of Daily Living
15	C	Basic Nursing Skills
16	D	Activities of Daily Living
17	B	Activities of Daily Living
18	C	Basic Nursing Skills
19	C	Activities of Daily Living
20	C	Basic Nursing Skills
21	B	Basic Nursing Skills
22	B	Basic Nursing Skills
23	C	Basic Nursing Skills
24	C	Basic Nursing Skills

Answer Key continued

QUESTION NUMBER	ANSWER	CONTENT CATEGORIES
25	A	Member of the Health Care Team
26	D	Client Rights
27	C	Basic Nursing Skills
28	A	Basic Nursing Skills
29	A	Client Rights
30	C	Basic Nursing Skills
31	C	Basic Nursing Skills
32	A	Basic Nursing Skills
33	A	Communication
34	B	Activities of Daily Living
35	C	Basic Nursing Skills
36	C	Emotional and Mental Health Needs
37	C	Emotional and Mental Health Needs
38	B	Member of the Health Care Team
39	D	Restorative Skills
40	D	Basic Nursing Skills
41	A	Activities of Daily Living
42	B	Emotional and Mental Health Needs
43	B	Basic Nursing Skills
44	C	Basic Nursing Skills
45	B	Emotional and Mental Health Needs
46	C	Basic Nursing Skills
47	B	Activities of Daily Living

Answer Key continued

QUESTION NUMBER	ANSWER	CONTENT CATEGORIES
48	B	Client Rights
49	C	Restorative Skills
50	A	Legal and Ethical Behavior
51	C	Spiritual and Cultural Needs
52	D	Legal and Ethical Behavior
53	C	Basic Nursing Skills
54	C	Client Rights
55	D	Member of the Health Care Team
56	A	Member of the Health Care Team
57	A	Restorative Skills
58	A	Communication
59	D	Communication
60	B	Restorative Skills

NNAAP.
National Nurse Aide Assessment Program
An NCSBN® Examination

PEARSON VUE

SEARCH

Vermont NURSING ASSISTANT

written (or oral) examination & skills evaluation

CANDIDATE HANDBOOK

March 2017

ALWAYS LEARNING PEARSON

QUICK REFERENCE

CREDENTIA

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. Fri. (EasternTime Zone)

Call Credentia to:

- Obtain a Candidate Handbook
- Obtain an application for testing
- Obtain registration information
- Cancel and reschedule an examination
- Change your current address or name up to eleven (11) days ***before*** testing
- Request an excused absence

Refer any additional questions to:

VERMONT BOARD OF NURSING (VBON)

89 Main Street, 3rd floor
Montpelier, Vermont 05620-3402
www.sec.state.vt.us/professional-regulation/list-of-professions/nursing.aspx
Phone: (802) 828-1503
Fax: (802) 828-2484

Hours of Operation 8:00 a.m. – 4:30 p.m.
(Eastern Time Zone)

- Inquire about special examination requests and services

PEARSON VUE®

Vermont NNAAP®
PO Box 13785
Philadelphia, PA 19101-3785
(877) 244-1694

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

Call Pearson VUE to:

- Obtain information regarding your Score Report
- Request a duplicate Score Report
- Obtain information regarding your examination

Go to Pearson VUE's website (www.pearsonvue.com) to:

- Download a Candidate Handbook
- Download an Application
- View Regional Test Site testing dates
- Download a Nursing Assistant Practice Written Examination

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INTRODUCTION

This handbook is designed for candidates seeking Nursing Assistant licensure in Vermont. It describes the process of applying for and taking the National Nurse Aide Assessment Program (NNAAP®) Examination.

The Vermont Agency of Human Services has contracted with Pearson VUE®, a nationally recognized leading provider of assessment services to regulatory agencies and national associations. Pearson VUE will develop, score, and report the results of the NNAAP® Examination for the Vermont Nursing Assistant Registry. Credentia will be working with Pearson VUE to schedule and administer the examination.

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 Nursing Assistants 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 licensed Nursing Assistant 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 Nursing Assistant-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 Nursing Assistant.

EXAM OVERVIEW

You will be allowed to choose between a Written or Oral Examination. All exams are in English. The two parts of the NNAAP Examination process, the Written (or Oral) Examination and the Skills Evaluation, will be administered on the same day. You must pass both parts to be licensed and listed on the Vermont Nursing Assistant 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 available in English may be taken in place of the Written Examination. The English Oral Examination consists of sixty (60) multiple-choice questions and ten (10) multiple-choice reading comprehension questions provided on an MP3 player. You will be asked to listen to a recording of the Oral Examination and follow along in the test booklet as the questions are read aloud on the MP3 player. **If you want to take the Oral Examination, you must request it when you submit your application.**

At the Skills Evaluation you will be asked to perform five (5) randomly selected Nursing Assistant skills. You will be given thirty (30) minutes to complete the five (5) skills. You will be rated on these skills by a Nursing Assistant Evaluator. You must successfully demonstrate all five (5) skills to pass the Skills Evaluation. 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

All candidates applying to take the NNAAP Examination in Vermont **MUST** complete an *Application for the NNAAP Examination* form using one of the below listed eligibility routes. The completed application and fees and your Authorization to Test letter from the Vermont Board of Nursing must be submitted to Credentia.

You must pass both portions of the NNAAP Examination within two (2) years from the completion date of your training program, or within three (3) test attempts, whichever comes first, in order to be placed on the Vermont Nursing Assistant Registry.

NOTE: If any required document is not attached to the application, you will not be scheduled for testing until the required documentation is received by Credentia.

E1 – NEW NURSING ASSISTANT CANDIDATES

All applicants who have successfully completed a Vermont Board of Nursing-approved Nursing Assistant Education Program.

Candidates must pass both portions of the NNAAP examination within two (2) years **from the completion date of a training program** or within three (3) test attempts, whichever comes first, in order to be placed on the VT Nursing Assistant Registry. Candidates must submit a non-deficient completed application to Credentia before the two-year training expiration date in order to be scheduled for the skills and written/oral competency examination. If the testing application is received after the two-year training expiration date, the candidate must re-train, re-register under Eligibility Route E1 and provide a new training completion date.

Required Documents:

- Legible copy of your Authorization to Test letter from the Board of Nursing

Eligibility Routes continue on following page

Eligibility Routes E2 through E4 require an Authorization to Test letter from the Vermont Board of Nursing prior to registering to test.

E2 – NURSING STUDENTS (PN AND RN) CANDIDATES

Nursing students who are currently enrolled in a nursing program are eligible for licensure by examination IF they have had a course on nursing fundamentals and at least 30 hours in a clinical setting with adult clients. The Board of Nursing will specify the deadline until which a nursing student may take the written/oral and skills portions of the test. A maximum of three (3) attempts is permitted.

Candidates must submit a non-deficient completed application to Credentia in order to be scheduled for the skills and/or written/oral competency examination.

Required Documents:

- Legible copy of your Authorization to Test letter from the Vermont Board of Nursing

E3 – ENDORSEMENT

Applicants who are active and in good standing on another state's CNA or LNA Registry but did not meet the practice requirement (400 hours of LNA work within the last 2 years) ***and*** completed an approved nursing assistant education program within the last 2 years (that consisted of 80 hours or more with at least 30 hours of clinical).

Candidates must pass both portions of the NNAAP examination within two (2) years **from the completion date of the out of State training program** or within three (3) test attempts, whichever comes first, in order to be placed on the VT Nursing Assistant Registry. Candidates must submit a non-deficient completed application to Credentia before the two-year out of State training expiration date in order to be scheduled for the skills and written/oral competency examination. If the testing application is received after the two-year training expiration date, the candidate must re-train and re-test under Eligibility Route E1 (New Nursing Assistant Candidate).

Required Documents:

- Legible copy of your Authorization to Test letter from the Vermont Board of Nursing

E4 – OUT-OF-STATE TRAINED CANDIDATE

Applicants who, within the last 2 years, completed an approved Nursing Assistant training program in another state (consisting of 80 hours or more with at least 30 hours of clinical) ***and*** who did not test in that state. Candidates must pass both portions of the NNAAP examination within two (2) years from program completion date or within three (3) test attempts, whichever comes first, in order to be placed on the VT Nursing Assistant Registry.

Required Documents:

- Legible copy of your Authorization to Test letter from the Vermont Board of Nursing

APPLICATION AND SCHEDULING

FILLING OUT AN APPLICATION

You may get an examination application from your Nursing Assistant training program, or by contacting Credentia. You may also print one from the Pearson VUE website at **www.pearsonvue.com/vt/nurseaides**.

- You are responsible for completing the appropriate sections of the Examination Application. You may ask someone from your Nursing Assistant training program or facility employer for assistance in completing the application.
- If you need help or have any questions about the application, please contact Credentia at (877) 437-9587.
- Mail your completed application, required documents, and appropriate fees **together in one envelope** to:

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

This information must be received by Credentia at least ten (10) business days before the examination date.

EXAM FEES

The fees listed below have been established for the NNAAP Examination in Vermont.

Written Examination & Skills Evaluation	*(both)*	$130
Oral Examination & Skills Evaluation	*(both)*	$130
Written Examination **ONLY**	*(re-test)*	$35
Oral Examination **ONLY**	*(re-test)*	$35
Skills Evaluation **ONLY**	*(re-test)*	$95

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, Pearson VUE voucher, or training program check made payable to "Pearson VUE". Even if it is from your employer, the money order, certified check, Pearson VUE voucher, 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.**

REIMBURSEMENT FOR TRAINING AND TESTING

Under federal and Vermont state laws, candidates employed or with an offer of employment as Nursing Assistants in nursing homes that participate in Medicaid/Medicare programs are prohibited from paying their examination fees. Candidates who have a written commitment or signed acceptance of employment on file in a Medicaid-certified nursing home will have their fees covered.

EXAM SCHEDULING

Once Credentia receives your application, required documents, and fees, they will schedule you for testing. You will not be scheduled to test until all required materials are received. Credentia will mail your Confirmation Letter to you at the address listed on your application within forty-eight (48) hours.

CONFIRMATION LETTER

Your Confirmation Letter has important information about the examination. Credentia will mail a Confirmation Letter to the address listed on your application. If you do not get your Confirmation Letter within ten (10) business days, call Credentia at (877) 437-9587. Credentia is NOT responsible for lost, misdirected, or delayed mail.

TESTING LOCATIONS

The Nursing Assistant examination (both parts) will be given by Credentia at a Regional Test Site. Please visit **www.pearsonvue.com/vt/nurseaides** or call Pearson VUE at (877) 244-1694 to determine the schedule of the test site most convenient to you. Select Regional Test Site and Test Schedule.

ACCOMMODATIONS

The Vermont Board of Nursing 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. The VT BON provides reasonable and appropriate accommodations to individuals with documented disabilities who demonstrate a need for accommodations.

If you have a disability, you must ask for special arrangements for testing before you send your application to Credentia. All requests must be approved in advance by the VT BON. Be sure that the following materials are attached to your LNA licensure application:

- A statement of diagnosed disability from your health care provider or other valid documentation such as a copy of your IEP or 504 plan
- A signed letter from you (the exam applicant) requesting ADA accommodations
- A letter from your instructor detailing accommodations provided during training and specific accommodations needed for testing

If your request for an accommodation was approved by the VT BON, include the approval letter with your application and send them to Credentia. You and your instructor will receive a letter from Credentia confirming that the accommodation will be offered at the stated exam.

Nursing Assistant Evaluators administering the Written (or English Oral) Examination and the Skills Evaluation will be prepared to meet the needs of Nursing Assistant candidates who have approved accomodations.

CANCELLATION AND RESCHEDULING

If you are unable to attend your scheduled examination, you **MUST** call Credentia ***at least four (4) business days*** before the examination date to reschedule (Saturday and Sunday and national holidays are not considered business days). If you do not call Credentia ***at least four (4) business days*** in advance of your examination date to reschedule, and 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 date to another person.

If you notify Credentia in time, there is no penalty and your fee may be transferred to your new examination date.

REFUNDS

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

ABSENCE POLICY

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

Acceptable reasons for rescheduling 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

Examinations will be delayed or cancelled only in emergencies. If severe weather or a natural disaster makes the test center inaccessible or unsafe, the examination will be delayed or cancelled. If the examination has been cancelled, you will be rescheduled for the next available examination 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 check in for both the written and for the skills examinations. You will be required to present proper identification.

WHAT TO BRING

You must have the following items with you when you take the examination:

- Two (2) forms proper identification
- Three (3) No. 2 pencils (sharpened)
- Eraser
- Watch with a second hand

No other materials will be allowed.

PROPER IDENTIFICATION

Candidates are required to bring two (2) forms of official signature-bearing identification to the test site, one of which must be a photo identification. All identification must be **current (not expired)** and no birth certificates will be accepted. If a candidate fails to present proper identification, he or she may not test. Photocopies of identification will NOT be accepted. Examples of proper identification include:

- Government-issued driver's license
- DMV non-driver I.D.
- Passport
- Alien registration card
- Signed Photo High School I.D. (for high school students)
- Signed Photo University I.D. (for university students)
- U.S.-issued Photo Bearing Signed Military I.D.
- Clinic card
- Credit card
- Library card

The name on your identification must be the same as the name you used on the application to register for the examination.

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 Vermont Board of Nursing for review, and your examination will not be scored (see *Testing Policies*).

Please note that 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.***

TESTING POLICIES

The following policies are observed at each test center.

LATENESS

Plan to arrive about thirty (30) minutes before the examination starts. If you are late for your scheduled examination, or do not bring all of your required materials, you will **NOT** be allowed to test and your examination fee will **NOT** be returned. 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 Evaluation.

If you are late for your Skills Evaluation or do not bring all your required materials, you will **NOT** be allowed to test and you will be required to re-apply and pay another examination fee (see *Cancellation* for more details).

ELECTRONIC DEVICES

Cellular phones, beepers, or any other electronic devices are not permitted to be used and must be turned off during testing. There is no place for storage of personal belongings at the test center.

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. 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

If you are discovered causing a disturbance of any kind or engaging in any kind of misconduct, you will be dismissed from the examination and the incident will be reported to the Vermont Board of Nursing.

GUESTS/VISITORS

No guests, visitors, pets, or children are allowed at the test center.

THE WRITTEN (OR ORAL) EXAM

WRITTEN EXAM

The Nursing Assistant Evaluator will hand out materials and give instructions for taking the Written Examination. The Written Examination has seventy (70) multiple-choice questions. You will have two (2) hours to complete the Written Examination. You will be told when fifteen (15) minutes remain. Fill in only one (1) oval 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. Sample questions for the Written Examination are located on page 14.

ENGLISH ORAL EXAM

An English Oral Examination may be taken in place of the Written Examination. You must request an English Oral Examination when filling out your application. The Oral Examination is provided on an MP3 player, which is provided with earphones at the test center. You will be asked to listen to a recording of the Oral Examination and follow along in the test booklet as the questions are read aloud on the MP3 player.

The Oral Examination consists of two (2) parts, and you must pass both parts to pass the Oral Examination. The first part of the Oral Examination has sixty (60) multiple-choice questions. Each of these questions is read twice. As each question is read, you will be 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. These questions test your ability to speak a minimum amount of English by recognizing common words used as a Nursing Assistant in long-term care facilities. Each word is read three (3) times. You are asked to match the word you hear on the recording to the written word in the test booklet. As you find the match, you mark your answer on the answer sheet.

You have up to two (2) hours to complete the Oral Examination. You will be told when fifteen (15) minutes remain. 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.

1. **The client's call light should always be placed:**
   (A) on the bed
   (B) within the client's reach
   (C) on the client's right side
   (D) over the side rail

2. **Which of the following items is used in the prevention and treatment of bedsores or pressure sores?**
   (A) rubber sheet
   (B) air mattress
   (C) emesis basin
   (D) restraint

3. **When caring for a dying client, the Nursing Assistant should:**
   (A) keep the client's room dark and quiet
   (B) allow client to express his feelings
   (C) change the subject if client talks about death
   (D) contact the client's minister, priest or rabbi

4. **What does the abbreviation ADL mean?**
   (A) Ad Lib
   (B) As Doctor Likes
   (C) Activities of Daily Living
   (D) After Daylight

5. **After giving a client a back rub, the Nursing Assistant should always note:**
   (A) the last time the client had a back rub
   (B) any change in the client's skin
   (C) client's weight
   (D) amount of lotion used

6. **How should the Nursing Assistant communicate with a client who has a hearing loss?**
   (A) face the client when speaking
   (B) repeat the statement
   (C) shout so that the client can hear
   (D) use a high-pitched voice

Correct Answers

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

SELF-ASSESSMENT READING TEST

The two-part Self-Assessment Reading Test that appears below will help you decide if you should consider taking the Oral Examination instead of the Written Examination. To complete the reading test, follow the instructions provided below and select the answer to each question. When you have completed the reading test, you will be able to determine the number of questions you answered correctly.

PART 1: VOCABULARY

1. Circle the best answer to each question.
2. When you have finished, check your answers using the answer key on page 18.
3. Count up the number of correct answers.
4. If your score is less than 17, you may have difficulty reading the Written Examination and should consider taking the Oral Examination.

1. You go to a doctor when you _____.
(A) feel sleepy
(B) need socks
(C) feel sick
(D) need money
(E) need clothes

2. A person who flies an airplane is its _____.
(A) pilot
(B) steward
(C) mother
(D) surgeon
(E) director

3. You use a _____ to write.
(A) bow
(B) calculator
(C) pencil
(D) carpenter
(E) needle

4. To EXIT a room means to _____ it.
(A) enter
(B) leave
(C) forget
(D) read
(E) interrupt

5. A wedding is a joyous _____.
(A) focus
(B) vehicle
(C) balloon
(D) occasion
(E) civilization

6. To REQUIRE something means to _____ it.
(A) need
(B) have
(C) forget
(D) understand
(E) hear

go to next page

7. You _____ something to find its length.
(A) slice
(B) lock
(C) measure
(D) force
(E) tape

8. Soup is served in a _____.
(A) plate
(B) bowl
(C) fork
(D) chair
(E) closet

9. To accompany someone means to _____.
(A) disagree with him
(B) work for him
(C) go with him
(D) speak to him
(E) choose him

10. A nursing home resident receives _____ from the staff.
(A) quality
(B) fame
(C) interruption
(D) care
(E) work

11. Medicine is used to _____ pain.
(A) widen
(B) conjure
(C) enliven
(D) increase
(E) relieve

12. To DRENCH the flowers means to _____ them.
(A) steam
(B) drink
(C) touch
(D) soak
(E) anger

13. A bicycle is a means of _____.
(A) nourishment
(B) transportation
(C) prediction
(D) collision
(E) walking

14. When someone speaks in a whisper, it may be difficult to _____.
(A) deceive
(B) understand
(C) frighten
(D) estimate
(E) regulate

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

> 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 Nursing Assistant Evaluator. Before your skills evaluation begins, the evaluator will show you where equipment is located and answer questions about operating the equipment.

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

See pages 25-40 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 Nursing Assistant 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 Nursing Assistant'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; and loose fitting pants that can be rolled up, such as scrubs. 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.

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 Nursing Assistant 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 Nursing Assistant 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 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.

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.

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

NNAAP

RECORDING SHEET FOR MEASUREMENT SKILLS

Date _____

Test Site ID _____

CANDIDATE NAME _____

CANDIDATE ID _____

EVALUATOR NAME _____

EVALUATOR ID _____

SAMPLE

SKILL TESTED *Evaluator must check one box next to the skill being tested.*	
☐ Blood Pressure	☐ Respirations
	☐ Urine Output
☐ Radial Pulse	☐ Weight

CANDIDATE RESULTS	EVALUATOR RESULTS

PEARSON

TIPS FOR THE SKILLS EVALUATION

- You will be expected to perform the skills as you would in a patient care 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 24 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 22 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.

HAND HYGIENE (HAND WASHING)

1 Address client by name and introduces self to client by name
2 Turns on water at sink
3 Wets hands and wrists thoroughly
4 Applies soap to hands
5 **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**
6 Cleans fingernails by rubbing fingertips against palms of the opposite hand
7 **Rinse all surfaces of wrists, hands, and fingers, keeping hands lower than the elbows and the fingertips down**
8 Uses clean, dry paper towel/towels to dry all surfaces of hands, wrists, and fingers then disposes of paper towel/towels into waste container
9 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
10 Does not touch inside of sink at any time

APPLIES ONE KNEE-HIGH ELASTIC STOCKING

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 Client is in supine position (lying down in bed) while stocking is applied
4 Turns stocking inside-out, at least to the heel
5 Places foot of stocking over toes, foot, and heel
6 Pulls top of stocking over foot, heel, and leg

Skill continues

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**

9 Signaling device is within reach and bed is in low position

10 After completing skill, wash hands

ASSISTS TO AMBULATE USING TRANSFER BELT

1 Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible

2 **Before assisting to stand, client is wearing shoes**

3 Before assisting to stand, bed is at a safe level

4 Before assisting to stand, checks and/or locks bed wheels

5 **Before assisting to stand, client is assisted to sitting position with feet flat on the floor**

6 Before assisting to stand, applies transfer belt securely at the waist over clothing/gown

7 Before assisting to stand, provides instructions to enable client to assist in standing including prearranged signal to alert client to begin standing

8 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

9 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

10 Walks slightly behind and to one side of client for a distance of ten (10) feet, while holding onto the belt

11 After ambulation, assists client to bed and removes transfer belt

12 Signaling device is within reach and bed is in low position

13 After completing skill, wash hands

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 handling bedpan

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 Avoids overexposure of client

14 Empties and rinses bedpan and pours rinse into toilet

15 After rinsing bedpan, places bedpan in designated dirty supply area

16 After placing bedpan in designated dirty supply area, 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

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 toothpaste to toothbrush

5 Brushes surfaces of denture

6 Rinses surfaces of denture under moderate temperature running water

7 Before placing denture into cup, rinses denture cup and lid

Skill continues

8 Places denture in denture cup with moderate temperature water/solution and places lid on cup

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 After rinsing equipment and disposing of sink liner, removes and disposes of gloves (without contaminating self) into waste container and washes hands

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 After obtaining pulse by palpating in radial artery position, records pulse rate within plus or minus 4 beats of evaluator's reading

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 Washes hands

5 Records respiration rate within plus or minus 2 breaths of evaluator's reading

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

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 neck and waist

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

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 While avoiding overexposure of client, removes gown from the unaffected side first, then removes gown from the affected side and disposes of gown into soiled linen container

5 Assists to put the right (affected/weak) arm through the right sleeve of the shirt before placing garment on left (unaffected) arm

6 While putting on shirt, moves body gently and naturally, avoiding force and over-extension of limbs and joints

Skill continues

7 Finishes with clothing in place
8 Signaling device is within reach and bed is in low position
9 After completing skill, washes hands

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 with hand wipe before beginning feeding
6 Candidate sits facing client during feeding
7 Tells client what foods are on tray and asks what client would like to eat first
8 Using spoon, offers client one bite of each type of food on tray, telling client the content of each spoonful
9 Offers beverage at least once during meal
10 Candidate asks client if they are ready for next bite of food or sip of beverage
11 At end of meal, candidate cleans client's mouth and hands with wipes
12 Removes food tray and places tray in designated dirty supply area
13 Signaling device is within client's reach
14 After completing skill, washes hands

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 in soiled linen container, while avoiding overexposure of the client
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
7 Dries face with towel
8 Exposes one arm and places towel underneath arm
9 Applies soap to wet washcloth
10 Washes arm, hand, and underarm keeping rest of body covered
11 Rinses and dries arm, hand, 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 After rinsing and drying basin, 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 After placing basin in designated dirty supply area, and disposing of used linen, 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

MEASURES AND RECORDS 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 160 mm 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

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 Measures the amount of urine at eye level with container on flat surface

4 After measuring urine, empties contents of measuring container into toilet

5 Rinses measuring container and pours rinse into toilet

6 Rinses bedpan and pours rinse into toilet

7 After rinsing equipment, and 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

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 shoes on before walking to scale

3 Before client steps on scale, candidate sets scale to zero

4 While client steps onto scale, candidate stands next to scale and assists client, if needed, onto center of scale; then obtains client's weight

5 While client steps off scale, candidate stands next to scale and assists client, if needed, off scale before recording weight

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)

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 Instructs client to inform candidate if pain is experienced during exercise
4 Supports leg at knee and ankle while performing range of motion for knee
5 Bends the knee and then returns leg to client's normal position (extension/flexion) (AT LEAST 3 TIMES unless pain is verbalized)
6 Supports foot and ankle close to the bed while performing range of motion for ankle
7 Pushes/pulls foot toward head (dorsiflexion), and pushes/pulls foot down, toes point down (plantar flexion) (AT LEAST 3 TIMES unless pain is verbalized)
8 **While supporting the limb, moves joints gently, slowly, and smoothly through the range of motion, discontinuing exercise if client verbalizes pain**
9 Signaling device is within reach and bed is in low position
10 After completing skill, washes hands

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 Supports client's upper and lower arm while performing range of motion for shoulder
5 **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). Supporting the limb, moves joint gently, slowly, and smoothly through the range of motion, discontinuing exercise if client verbalizes pain**
6 **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). Supporting the limb, moves joint gently, slowly, and smoothly through the range of motion, discontinuing exercise if client verbalizes pain**
7 Signaling device is within reach and bed is in low position
8 After completing skill, washes hands

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 Slowly rolls onto side as one unit toward raised side rail
6 Places or adjusts pillow under head for support
7 Candidate positions client 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

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 before washing
6 Exposes area surrounding catheter while avoiding overexposure of client
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 (i.e., away from meatus) using a clean area of the cloth for each stroke**
9 **While holding catheter at meatus without tugging, rinses at least four inches of catheter from meatus, moving only in one direction, away from meatus, using a clean area of the cloth for each stroke**
10 While holding catheter at meatus without tugging, dries at least four inches of catheter moving away from meatus
11 Empties, rinses, and dries basin
12 After rinsing and drying basin, 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 After disposing of used linen and cleaning equipment, 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

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)
9 Foot is rinsed (including between the toes)
10 Dries foot (including between the toes)
11 Applies lotion to top and bottom of foot, removing excess (if any) with a towel
12 Supports foot and ankle during procedure
13 Empties, rinses, and dries basin
14 After rinsing and drying basin, places basin in designated dirty supply area
15 Disposes of used linen into soiled linen container
16 After cleaning foot and equipment, and disposing of used linen, removes and disposes of gloves (without contaminating self) into waste container and washes hands
17 Signaling device is within reach

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 clothing protector 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 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 After rinsing toothbrush, empty, rinse and dry the basin and place used toothbrush in designated basin/ container
13 Places basin and toothbrush in designated dirty supply area
14 Disposes of used linen into soiled linen container
15 After placing basin and toothbrush in designated dirty supply area, and disposing of used linen, 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

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 before washing
6 Exposes perineal area while avoiding overexposure of client
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 towel
11 After washing genital area, turns to side, then washes and rinses rectal area moving from front to back using a clean area of washcloth for each stroke. Dries with towel
12 Repositions client
13 Empties, rinses, and dries basin
14 After rinsing and drying basin, places basin in designated dirty supply area
15 Disposes of used linen into soiled linen container and disposes of linen protector appropriately
16 Avoids contact between candidate clothing and used linen
17 After disposing of used linen, and placing used equipment in designated dirty supply area, removes and disposes of gloves(without contaminating self) into waste container and washes hands
18 Signaling device is within reach and bed is in low position

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 along side 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, bed is at a safe level
6 **Before assisting to stand, locks wheels on wheelchair**
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 (candidates hands are in upward position) and maintaining stability of client's legs
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

SCORE REPORTING

EXAM RESULTS

The Nursing Assistant Evaluator will not answer questions about your Score Report. If you have questions about your Score Report, or the content of the examination, call Pearson VUE at (877) 244-1694. **Results will not be given over the phone.**

WRITTEN (OR ENGLISH ORAL) EXAM

After you finish the Written (or English Oral) Examination, the Nursing Assistant Evaluator will fax your answer sheet for scoring. Within approximately ten (10) minutes (from the time the answer sheet was faxed), you will receive an official Score Report. The Score Report will indicate whether you have passed or failed the Written (or English Oral) Examination.

SKILLS EVALUATION

The Nursing Assistant Evaluator will also fax your Skills Evaluation results for scoring. After the Nursing Assistant Evaluator evaluates your performance, he or she will fax the Skills Evaluation answer sheet for scoring. Within approximately ten (10) minutes (from the time the answer sheet was faxed), you will receive an official Score Report. The Score Report will indicate whether you have passed or failed the Skills Evaluation.

Occasionally, due to technical difficulties, Score Reports may not be received at the test center on the day of testing. If this happens your answer sheet will be mailed to Pearson VUE for handscoring. Your Score Report will then be mailed out to you within 5-7 business days after testing. For questions regarding delayed Score Reports, please contact Pearson VUE at (877) 244-1694.

FAILING

If you fail the Written (or English Oral) Examination or the Skills Evaluation, your Score Report will provide you with information on how to re-take either or both parts of the evaluation. A new examination fee is required each time you re-take any part of the NNAAP Examination. To re-take either or both parts, you must submit your official Score Report or a new application and a re-take fee to Credentia.

Vermont and federal regulations allow you three (3) attempts to pass both the Skills Evaluation and the Written (or English Oral) Examination. If you should fail either part or both parts three (3) times, within two (2) years from the completion date of your training program, 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 to be placed on the Vermont Nursing Assistant 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 five (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 five (5) skills 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 following 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.

Vermont NNAAP® Examination Results

Exam: Skills	Result: Fail
Skills Performance:	
Hand Hygiene 1, 5, 10	Unsatisfactory
Provides Mouth Care	Satisfactory
Measures and Records Blood Pressure	Satisfactory
Puts One Knee-High Elastic Stocking on Client	Satisfactory
Measures and Records Weight of Ambulatory Client	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 submitted to the Vermont Board of Nursing. You may view your name on the Registry by going to **www.vtprofessionals.org** and clicking *Look Up a Licensee*. If you have any questions regarding your listing on the Registry you may contact the Vermont BON, Monday through Friday from 8:00 a.m. to 4:30 p.m. (E.S.T.) at **(802) 828-1503**.

You must pass both portions of the NNAAP Examination within two (2) years from the completion date of your training program, or within three (3) test attempts, whichever comes first, in order to be placed on the Vermont Nursing Assistant Registry.

DUPLICATE SCORE REPORT

If you lose your Score Report or need a duplicate Score Report, complete the *Request for Duplicate Score Report Form* and mail it to Pearson VUE (see *Appendix A*).

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/vt/nurseaides/.

Please ensure you complete all information in the form. You will receive a response within 30 days of receipt.

THE REGISTRY

CHANGE OF ADDRESS OR NAME

The Vermont Nursing Assistant Registry must be kept informed of your current address and name.

There is no charge for changing your name, address, or email address on the Registry. You may notify the Registry of a name, address, or email address change by using the Address or Name Change Reporting Form on the Office of Professional Regulation website (go to **www.vtprofessionals.org**, log into your account, and click *Check Your Status/Change Your Address*). Alternately, you may call the Nursing Assistant Registry at **(802) 828-1503** to change your mailing address on the Registry.

If your name changes at any time after you are placed on the Registry, you must send written notification of this change to the Registry. Please remember, however, that if you changed your name, you **MUST** provide official documentation along with your notification. Written documentation must include a COPY of a court-issued marriage certificate, divorce decree, or other legal document that demonstrates the name change. Your letter of notification must include your previous name, current name, mailing address, phone number, and D.O.B. or license number. All documents provided to the Registry in support of your

continues next page

name change **MUST** be official and legal documents. Any documents provided may be subject to verification with the issuing source.

A correct address is required for you to receive notification for renewal.

IMPORTANT INFORMATION FOR MAINTAINING YOUR VERMONT NURSING ASSISTANT LICENSE

- You will receive notification of your LNA license via email.
- LNA licenses expire November 30th of every even-numbered year, except if your initial license was issued within 90 days of the expiration date (in that case the next cycle expiration date will apply.)
- You must meet eligibility requirements to renew your Nursing Assistant License.
- A correct email address is essential in order to receive notification for renewal.
- It is your responsibility to monitor your email for messages from the Vermont Office of Professional Regulation.
- Approximately 45–60 days prior to the expiration date on your license, you will receive a renewal notification by email.
- It is your responsibility to renew your license before the expiration date. Even if you do not receive an email notice from the Vermont Office of Professional Regulation, you are still required to renew before the deadline
- Failure to renew before the expiration date will result in expensive late reinstatement penalty fees. SAVE MONEY, RENEW ON TIME.
- The Nursing Assistant Renewal application is available at **www.vtprofessionals.org**. Click 'Online Licensing' and then 'Renew your license.'

APPENDIX A

Vermont Nursing Assistant

REQUEST FOR DUPLICATE SCORE REPORT OR HANDSCORED ANSWER SHEET

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

☐ **Skills Evaluation** ☐ **Written/Oral Examination**

SEND TO: Vermont Duplicate Score Report
Pearson VUE Processing Center
PO Box 822749
Philadelphia, PA 19182-2745

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.

Your Signature _____ Date _____

PLEASE COMPLETE BOTH SIDES OF THIS FORM

NNAAP®

National Nurse Aide Assessment Program

An NCSBN® Examination

Scored - From: 02/01/2018 Thru: 02/28/2018

Attention:

School Code:

Nurse Aide Written

Candidate	Total Score
[redacted]	PASS

Total Number Of Passing Candidates ==========> 1
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 1

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]

Total Number Of Passing Candidates ==========> 1
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 1

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Scored - From: 02/01/2018 Thru: 02/28/2018

[redacted]

School Code: [redacted]

Nurse Aide Written

Candidate	Total Score
[redacted]	PASS
	PASS
	PASS
	PASS
	PASS
	PASS

Total Number Of Passing Candidates ==========> 6
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 6

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]
	PASS	
	PASS	
	PASS	
	PASS	
	PASS	

Total Number Of Passing Candidates ==========> 6
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 6

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[redacted]

School Code: [redacted]

Nurse Aide Written

Candidate	Total Score
[redacted]	PASS
	PASS
	PASS
	PASS
	PASS

Total Number Of Passing Candidates ==========> 5
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 5

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]
	PASS	
	PASS	
	PASS	
	PASS	

Total Number Of Passing Candidates ==========> 5
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 5

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Attention:

[redacted]

School Code: [redacted]

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	FAIL	[redacted]
	PASS	
	PASS	

Total Number Of Passing Candidates ==========> 2
Total Number Of Failing Candidates ==========> 1
Total Number Of Candidates In This Category==> 3

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Attention:

[redacted]

School Code: [redacted]

Nurse Aide Written

Candidate	Total Score
[redacted]	PASS
	PASS

Total Number Of Passing Candidates ==========> 2
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 2

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]
	PASS	

Total Number Of Passing Candidates ==========> 2
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 2

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Attention:

[redacted]

School Code: [redacted]

Nurse Aide Written

Candidate	Total Score
[redacted]	PASS
	PASS
	PASS
	PASS
	PASS
	PASS
	PASS
	PASS
	PASS
	PASS
	PASS
	PASS
	PASS
	PASS

Total Number Of Passing Candidates ==========> 14
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 14

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]
	PASS	
	FAIL	
	PASS	
	PASS	
	PASS	
	PASS	
	FAIL	
	PASS	
	PASS	
	PASS	
	PASS	
	PASS	
	PASS	

Total Number Of Passing Candidates ==========> 12
Total Number Of Failing Candidates ==========> 2
Total Number Of Candidates In This Category==> 14

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Attention:

[redacted]

School Code: [redacted]

Nurse Aide Written

Candidate	Total Score
[redacted]	PASS
	PASS
	PASS
	PASS

Total Number Of Passing Candidates ==========> 4
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 4

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]
	PASS	
	PASS	
	PASS	

Total Number Of Passing Candidates ==========> 4
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 4

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Attention:

[redacted]

School Code: [redacted]

Nurse Aide Written

Candidate	Total Score
[redacted]	PASS

Total Number Of Passing Candidates ==========> 1
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 1

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS PASS PASS	[redacted]

Total Number Of Passing Candidates ==========> 3
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 3

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Attention:
[redacted]

School Code: [redacted]

Nurse Aide Oral

Candidate	Total Score
[redacted]	FAIL

Total Number Of Passing Candidates ==========> 0
Total Number Of Failing Candidates ==========> 1
Total Number Of Candidates In This Category==> 1

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]

Total Number Of Passing Candidates ==========> 1
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 1

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Scored - From: 02/01/2018 Thru: 02/28/2018

Attention:

[redacted]

School Code: [redacted]

Nurse Aide Written

Candidate	Total Score
[redacted]	PASS
	PASS
	PASS

Total Number Of Passing Candidates ==========> 3
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 3

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]
	PASS	
	PASS	

Total Number Of Passing Candidates ==========> 3
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 3

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Attention:

[redacted]

School Code: [redacted]

Nurse Aide Written

Candidate	Total Score
[redacted]	PASS

Total Number Of Passing Candidates ==========> 1
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 1

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]

Total Number Of Passing Candidates ==========> 1
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 1

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Attention:
[redacted]

School Code: [redacted]

Nurse Aide Written

Candidate	Total Score
[redacted]	PASS
	PASS
	PASS

Total Number Of Passing Candidates ==========> 3
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 3

Nurse Aide Oral

Candidate	Total Score
[redacted]	PASS

Total Number Of Passing Candidates ==========> 1
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 1

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]
	PASS	
	PASS	
	PASS	

Total Number Of Passing Candidates ==========> 4
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 4

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Attention:

[redacted]

School Code [redacted]

Nurse Aide Written

Candidate	Total Score
[redacted]	PASS
	PASS
	PASS

Total Number Of Passing Candidates ==========> 3
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 3

Nurse Aide Oral

Candidate	Total Score
[redacted]	FAIL

Total Number Of Passing Candidates ==========> 0
Total Number Of Failing Candidates ==========> 1
Total Number Of Candidates In This Category==> 1

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]
	FAIL	
	FAIL	
	PASS	

Total Number Of Passing Candidates ==========> 2
Total Number Of Failing Candidates ==========> 2
Total Number Of Candidates In This Category==> 4

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Scored - From: 02/01/2018 Thru: 02/28/2018

Attention:

[redacted]

School Code: [redacted]

Nurse Aide Written

Candidate	Total Score
[redacted]	FAIL
	PASS
	PASS
	PASS
	PASS
	FAIL
	FAIL
	FAIL
	FAIL

Total Number Of Passing Candidates ==========> 4
Total Number Of Failing Candidates ==========> 5
Total Number Of Candidates In This Category==> 9

Nurse Aide Oral

Candidate	Total Score
[redacted]	PASS
	FAIL
	PASS
	PASS

Total Number Of Passing Candidates ==========> 3
Total Number Of Failing Candidates ==========> 1
Total Number Of Candidates In This Category==> 4

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]
	PASS	
	PASS	
	PASS	
	PASS	
	PASS	
	PASS	
	PASS	
	FAIL	

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Nurse Aide Skills Continued

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	FAIL	[redacted]

Total Number Of Passing Candidates ==========> 8
Total Number Of Failing Candidates ==========> 2
Total Number Of Candidates In This Category==> 10

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Scored - From: 02/01/2018 Thru: 02/28/2018

Attention:

[redacted]

School Code: [redacted]

Nurse Aide Written

Candidate	Total Score
[redacted]	PASS
	PASS
	PASS
	PASS
	PASS
	PASS
	PASS
	PASS
	PASS

Total Number Of Passing Candidates ==========> 9
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 9

Nurse Aide Oral

Candidate	Total Score
[redacted]	PASS
	PASS
	PASS

Total Number Of Passing Candidates ==========> 3
Total Number Of Failing Candidates ==========> 0
Total Number Of Candidates In This Category==> 3

Nurse Aide Skills

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]
	PASS	
	FAIL	
	FAIL	
	FAIL	
	PASS	
	PASS	
	PASS	
	FAIL	
	FAIL	

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Nurse Aide Skills Continued

Candidate	Total Score	SKILL CODES - PASS/FAIL
[redacted]	PASS	[redacted]
	PASS	
	FAIL	
	PASS	
	FAIL	
	FAIL	
	PASS	

Total Number Of Passing Candidates ==========> 9
Total Number Of Failing Candidates ==========> 8
Total Number Of Candidates In This Category==> 17
!+X

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CODE: [redacted]

NURSE AIDE COMPETENCY EVALUATION PROGRAM FOR VERMONT

PROGRAM: [redacted]

Attn:

STATE: VERMONT
REPORT: TRNGFXXVT
REPORT DATE: 02/01/2018
REPORTING PERIOD: 10/01/2017-12/31/2017

SUMMARY OF RESULTS FOR WRITTEN EXAMINATIONS ADMINISTERED TO YOUR GRADUATES

T/S CODE	TEST SITE NAME:	AW #TESTED	AW #PASS	AW %PASS	AO #TESTED	AO #PASS	AO %PASS	AS #TESTED	AS #PASS	AS %PASS	Written Exam total #TESTED	Written Exam total #PASS	Written Exam total %PASS
[redacted]		0005	0005	100%	0000	0000	000%	0000	0000	000%	0005	0005	100%
TOTALS FOR YOUR GRADUATES		0005	0005	100%	0000	0000	000%	0000	0000	000%	0005	0005	100%
TOTALS FOR ALL VERMONT		00132	00128	096%	00005	00003	060%	00000	00000	000%	00137	00131	095%

SUMMARY OF CONTENT AREA PERFORMANCE FOR WRITTEN EXAMINATIONS ADMINISTERED TO YOUR GRADUATES

CONTENT AREA	AW #TESTED	AW #PASS	AW %	AO #TESTED	AO #PASS	AO %	AS #TESTED	AS #PASS	AS %	Totals for Your Graduates #TESTED	Totals for Your Graduates #PASS	Totals for Your Graduates %
Activities of Daily Living	0005	0005	100%	0000	0000	000%	0000	0000	000%	0005	0005	100%
Basic Nursing Skills	0005	0004	080%	0000	0000	000%	0000	0000	000%	0005	0004	080%
Restorative Skills	0005	0005	100%	0000	0000	000%	0000	0000	000%	0005	0005	100%
Emotional and Mental Health	0005	0005	100%	0000	0000	000%	0000	0000	000%	0005	0005	100%
Spiritual and Cultural Needs	0005	0005	100%	0000	0000	000%	0000	0000	000%	0005	0005	100%
Communication Needs	0005	0005	100%	0000	0000	000%	0000	0000	000%	0005	0005	100%
Client Rights	0005	0005	100%	0000	0000	000%	0000	0000	000%	0005	0005	100%
Legal and Ethical Behavior	0005	0005	100%	0000	0000	000%	0000	0000	000%	0005	0005	100%
Member of Health Care Team	0005	0005	100%	0000	0000	000%	0000	0000	000%	0005	0005	100%

All Written Exams

Content Area	Your Graduates #TESTED	Your Graduates #PASS	Your Graduates %	All Graduates Statewide #TESTED	All Graduates Statewide #PASS	All Graduates Statewide %
Activities of Daily Living	0005	0005	100%	00137	00121	088%
Basic Nursing Skills	0005	0004	080%	00137	00126	091%
Restorative Skills	0005	0005	100%	00137	00110	080%
Emotional and Mental Health	0005	0005	100%	00137	00131	095%
Spiritual and Cultural Needs	0005	0005	100%	00137	00120	087%
Communication Needs	0005	0005	100%	00137	00128	093%
Client Rights	0005	0005	100%	00137	00124	090%
Legal and Ethical Behavior	0005	0005	100%	00137	00105	076%
Member of Health Care Team	0005	0005	100%	00137	00122	089%

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CODE: [redacted]

NURSE AIDE COMPETENCY EVALUATION PROGRAM FOR VERMONT

PROGRAM: [redacted]

Attn:

STATE: VERMONT
REPORT: TRNGFXXVT
REPORT DATE: 02/01/2018
REPORTING PERIOD: 10/01/2017-12/31/2017

SUMMARY OF RESULTS FOR WRITTEN EXAMINATIONS ADMINISTERED TO YOUR GRADUATES

T/S CODE	TEST SITE NAME:	AW #TESTED	AW #PASS	AW %PASS	AO #TESTED	AO #PASS	AO %PASS	AS #TESTED	AS #PASS	AS %PASS	Written Exam total #TESTED	Written Exam total #PASS	Written Exam total %PASS
[redacted]		0015	0015	100%	0000	0000	000%	0000	0000	000%	0015	0015	100%
TOTALS FOR YOUR GRADUATES		0015	0015	100%	0000	0000	000%	0000	0000	000%	0015	0015	100%
TOTALS FOR ALL VERMONT		00132	00128	096%	00005	00003	060%	00000	00000	000%	00137	00131	095%

SUMMARY OF CONTENT AREA PERFORMANCE FOR WRITTEN EXAMINATIONS ADMINISTERED TO YOUR GRADUATES

CONTENT AREA	AW #TESTED	AW #PASS	AW %	AO #TESTED	AO #PASS	AO %	AS #TESTED	AS #PASS	AS %	Totals for Your Graduates #TESTED	Totals for Your Graduates #PASS	Totals for Your Graduates %
Activities of Daily Living	0015	0015	100%	0000	0000	000%	0000	0000	000%	0015	0015	100%
Basic Nursing Skills	0015	0015	100%	0000	0000	000%	0000	0000	000%	0015	0015	100%
Restorative Skills	0015	0014	093%	0000	0000	000%	0000	0000	000%	0015	0014	093%
Emotional and Mental Health	0015	0015	100%	0000	0000	000%	0000	0000	000%	0015	0015	100%
Spiritual and Cultural Needs	0015	0015	100%	0000	0000	000%	0000	0000	000%	0015	0015	100%
Communication Needs	0015	0015	100%	0000	0000	000%	0000	0000	000%	0015	0015	100%
Client Rights	0015	0014	093%	0000	0000	000%	0000	0000	000%	0015	0014	093%
Legal and Ethical Behavior	0015	0012	080%	0000	0000	000%	0000	0000	000%	0015	0012	080%
Member of Health Care Team	0015	0015	100%	0000	0000	000%	0000	0000	000%	0015	0015	100%

All Written Exams

Content Area	Your Graduates #TESTED	Your Graduates #PASS	Your Graduates %	All Graduates Statewide #TESTED	All Graduates Statewide #PASS	All Graduates Statewide %
Activities of Daily Living	0015	0015	100%	00137	00121	088%
Basic Nursing Skills	0015	0015	100%	00137	00126	091%
Restorative Skills	0015	0014	093%	00137	00110	080%
Emotional and Mental Health	0015	0015	100%	00137	00131	095%
Spiritual and Cultural Needs	0015	0015	100%	00137	00120	087%
Communication Needs	0015	0015	100%	00137	00128	093%
Client Rights	0015	0014	093%	00137	00124	090%
Legal and Ethical Behavior	0015	0012	080%	00137	00105	076%
Member of Health Care Team	0015	0015	100%	00137	00122	089%

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CODE: [redacted]

NURSE AIDE COMPETENCY EVALUATION PROGRAM FOR VERMONT

PROGRAM: [redacted]

Attn:

STATE: VERMONT
REPORT: TRNGFXXVT
REPORT DATE: 02/01/2018
REPORTING PERIOD: 10/01/2017-12/31/2017

SUMMARY OF RESULTS FOR WRITTEN EXAMINATIONS ADMINISTERED TO YOUR GRADUATES

T/S CODE	TEST SITE NAME:	AW #TESTED	AW #PASS	AW %PASS	AO #TESTED	AO #PASS	AO %PASS	AS #TESTED	AS #PASS	AS %PASS	Written Exam total #TESTED	Written Exam total #PASS	Written Exam total %PASS
[redacted]		0002	0002	100%	0000	0000	000%	0000	0000	000%	0002	0002	100%
		0001	0000	000%	0001	0001	100%	0000	0000	000%	0002	0001	050%
TOTALS FOR YOUR GRADUATES		0003	0002	066%	0001	0001	100%	0000	0000	000%	0004	0003	075%
TOTALS FOR ALL VERMONT		00132	00128	096%	00005	00003	060%	00000	00000	000%	00137	00131	095%

SUMMARY OF CONTENT AREA PERFORMANCE FOR WRITTEN EXAMINATIONS ADMINISTERED TO YOUR GRADUATES

CONTENT AREA	AW #TESTED	AW #PASS	AW %	AO #TESTED	AO #PASS	AO %	AS #TESTED	AS #PASS	AS %	Totals for Your Graduates #TESTED	Totals for Your Graduates #PASS	Totals for Your Graduates %
Activities of Daily Living	0003	0003	100%	0001	0001	100%	0000	0000	000%	0004	0004	100%
Basic Nursing Skills	0003	0002	066%	0001	0001	100%	0000	0000	000%	0004	0003	075%
Restorative Skills	0003	0002	066%	0001	0000	000%	0000	0000	000%	0004	0002	050%
Emotional and Mental Health	0003	0002	066%	0001	0001	100%	0000	0000	000%	0004	0003	075%
Spiritual and Cultural Needs	0003	0002	066%	0001	0001	100%	0000	0000	000%	0004	0003	075%
Communication Needs	0003	0002	066%	0001	0000	000%	0000	0000	000%	0004	0002	050%
Client Rights	0003	0002	066%	0001	0001	100%	0000	0000	000%	0004	0003	075%
Legal and Ethical Behavior	0003	0001	033%	0001	0001	100%	0000	0000	000%	0004	0002	050%
Member of Health Care Team	0003	0002	066%	0001	0001	100%	0000	0000	000%	0004	0003	075%

All Written Exams

Content Area	Your Graduates #TESTED	Your Graduates #PASS	Your Graduates %	All Graduates Statewide #TESTED	All Graduates Statewide #PASS	All Graduates Statewide %
Activities of Daily Living	0004	0004	100%	00137	00121	088%
Basic Nursing Skills	0004	0003	075%	00137	00126	091%
Restorative Skills	0004	0002	050%	00137	00110	080%
Emotional and Mental Health	0004	0003	075%	00137	00131	095%
Spiritual and Cultural Needs	0004	0003	075%	00137	00120	087%
Communication Needs	0004	0002	050%	00137	00128	093%
Client Rights	0004	0003	075%	00137	00124	090%
Legal and Ethical Behavior	0004	0002	050%	00137	00105	076%
Member of Health Care Team	0004	0003	075%	00137	00122	089%

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CODE: [redacted]

NURSE AIDE COMPETENCY EVALUATION PROGRAM FOR VERMONT

PROGRAM: [redacted]

Attn:

STATE: VERMONT
REPORT: TRNGFXXVT

REPORT DATE: 02/01/2018
REPORTING PERIOD: 10/01/2017-12/31/2017

SUMMARY OF RESULTS FOR WRITTEN EXAMINATIONS ADMINISTERED TO YOUR GRADUATES

T/S CODE	TEST SITE NAME:	AW #TESTED	AW #PASS	AW %PASS	AO #TESTED	AO #PASS	AO %PASS	AS #TESTED	AS #PASS	AS %PASS	Written Exam total #TESTED	Written Exam total #PASS	Written Exam total %PASS
[redacted]		0006	0006	100%	0000	0000	000%	0000	0000	000%	0006	0006	100%
TOTALS FOR YOUR GRADUATES		0006	0006	100%	0000	0000	000%	0000	0000	000%	0006	0006	100%
TOTALS FOR ALL VERMONT		00132	00128	096%	00005	00003	060%	00000	00000	000%	00137	00131	095%

SUMMARY OF CONTENT AREA PERFORMANCE FOR WRITTEN EXAMINATIONS ADMINISTERED TO YOUR GRADUATES

CONTENT AREA	AW #TESTED	AW #PASS	AW %	AO #TESTED	AO #PASS	AO %	AS #TESTED	AS #PASS	AS %	Totals for Your Graduates #TESTED	Totals for Your Graduates #PASS	Totals for Your Graduates %
Activities of Daily Living	0006	0004	066%	0000	0000	000%	0000	0000	000%	0006	0004	066%
Basic Nursing Skills	0006	0006	100%	0000	0000	000%	0000	0000	000%	0006	0006	100%
Restorative Skills	0006	0006	100%	0000	0000	000%	0000	0000	000%	0006	0006	100%
Emotional and Mental Health	0006	0006	100%	0000	0000	000%	0000	0000	000%	0006	0006	100%
Spiritual and Cultural Needs	0006	0006	100%	0000	0000	000%	0000	0000	000%	0006	0006	100%
Communication Needs	0006	0006	100%	0000	0000	000%	0000	0000	000%	0006	0006	100%
Client Rights	0006	0006	100%	0000	0000	000%	0000	0000	000%	0006	0006	100%
Legal and Ethical Behavior	0006	0005	083%	0000	0000	000%	0000	0000	000%	0006	0005	083%
Member of Health Care Team	0006	0006	100%	0000	0000	000%	0000	0000	000%	0006	0006	100%

All Written Exams

Content Area	Your Graduates #TESTED	Your Graduates #PASS	Your Graduates %	All Graduates Statewide #TESTED	All Graduates Statewide #PASS	All Graduates Statewide %
Activities of Daily Living	0006	0004	066%	00137	00121	088%
Basic Nursing Skills	0006	0006	100%	00137	00126	091%
Restorative Skills	0006	0006	100%	00137	00110	080%
Emotional and Mental Health	0006	0006	100%	00137	00131	095%
Spiritual and Cultural Needs	0006	0006	100%	00137	00120	087%
Communication Needs	0006	0006	100%	00137	00128	093%
Client Rights	0006	0006	100%	00137	00124	090%
Legal and Ethical Behavior	0006	0005	083%	00137	00105	076%
Member of Health Care Team	0006	0006	100%	00137	00122	089%

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PROGRAM: [redacted]

Attn: [redacted]

CODE: [redacted]

STATE: VERMONT
REPORT: TRNGFXXVT
REPORT DATE: 02/01/2018
REPORTING PERIOD: 10/01/2017-12/31/2017

NURSE AIDE COMPETENCY EVALUATION PROGRAM FOR VERMONT

SUMMARY OF RESULTS FOR SKILLS EXAMINATIONS ADMINISTERED TO YOUR GRADUATES

T/S CODE	TEST SITE NAME:	#TESTED	#PASS	%
[redacted]		0005	0005	100%

TOTALS FOR YOUR GRADUATES	0005	0005	100%
TOTALS FOR ALL VERMONT	00155	00126	081%

SUMMARY OF CONTENT AREA PERFORMANCE FOR SKILLS EXAMINATIONS ADMINISTERED TO:

Content Area	Your Graduates #Tested	Your Graduates #Pass	Your Graduates %	All Graduates Statewide #Tested	All Graduates Statewide #Pass	All Graduates Statewide %
Hand Hygiene (Hand Washing)	0005	0005	100%	00155	00155	100%
Applies One Knee-High Elastic Stocking	0000	0000	000%	00029	00027	093%
Assists Client to Ambulate	0001	0001	100%	00032	00032	100%
Assists Client with Use of Bedpan	0002	0002	100%	00032	00032	100%
Cleans Upper or Lower Dentures	0003	0003	100%	00023	00021	091%
Counts and Records Radial Pulse	0002	0002	100%	00037	00035	094%
Counts and Records Respirations	0000	0000	000%	00021	00021	100%
Donning and Removing PPE (Gown and Gloves)	0001	0001	100%	00036	00035	097%
Dresses Client with Affected Right Arm	0003	0003	100%	00026	00019	073%
Feeds Client Who Cannot Feed Self	0001	0001	100%	00032	00030	093%
Give Modified Bed Bath	0000	0000	000%	00032	00029	090%
Measures and Records Blood Pressure	0001	0001	100%	00033	00030	090%
Measures and Records Urinary Output	0002	0002	100%	00032	00028	087%
Measures and Records Weight	0000	0000	000%	00032	00028	087%
Performs Passive ROM for Knee and Ankle	0001	0001	100%	00023	00022	095%
Performs Passive ROM for One Shoulder	0000	0000	000%	00029	00029	100%
Positions Client on Side	0000	0000	000%	00035	00032	091%
Provides Catheter Care	0001	0001	100%	00036	00035	097%
Provides Foot Care	0000	0000	000%	00020	00017	085%
Provides Mouth Care	0000	0000	000%	00025	00023	092%
Provides Perineal Care (Peri-Care)	0002	0002	100%	00027	00022	081%
Transfers Client from Bed to Wheelchair	0000	0000	000%	00028	00027	096%

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PROGRAM: [redacted]

Attn: [redacted]

CODE: [redacted]

STATE: VERMONT
REPORT: TRNGFXXVT
REPORT DATE: 02/01/2018
REPORTING PERIOD: 10/01/2017-12/31/2017

NURSE AIDE COMPETENCY EVALUATION PROGRAM FOR VERMONT

SUMMARY OF RESULTS FOR SKILLS EXAMINATIONS ADMINISTERED TO YOUR GRADUATES

T/S CODE	TEST SITE NAME:	#TESTED	#PASS	%
[redacted]		0015	0014	093%
[redacted]		0001	0001	100%

TOTALS FOR YOUR GRADUATES	0016	0015	093%
TOTALS FOR ALL VERMONT	00155	00126	081%

SUMMARY OF CONTENT AREA PERFORMANCE FOR SKILLS EXAMINATIONS ADMINISTERED TO:

	Your Graduates			All Graduates Statewide		
Content Area	#Tested	#Pass	%	#Tested	#Pass	%
Hand Hygiene (Hand Washing)	0016	0016	100%	00155	00155	100%
Applies One Knee-High Elastic Stocking	0002	0002	100%	00029	00027	093%
Assists Client to Ambulate	0005	0005	100%	00032	00032	100%
Assists Client with Use of Bedpan	0006	0006	100%	00032	00032	100%
Cleans Upper or Lower Dentures	0001	0001	100%	00023	00021	091%
Counts and Records Radial Pulse	0003	0003	100%	00037	00035	094%
Counts and Records Respirations	0003	0003	100%	00021	00021	100%
Donning and Removing PPE (Gown and Gloves)	0005	0005	100%	00036	00035	097%
Dresses Client with Affected Right Arm	0003	0003	100%	00026	00019	073%
Feeds Client Who Cannot Feed Self	0002	0002	100%	00032	00030	093%
Give Modified Bed Bath	0004	0004	100%	00032	00029	090%
Measures and Records Blood Pressure	0004	0004	100%	00033	00030	090%
Measures and Records Urinary Output	0006	0005	083%	00032	00028	087%
Measures and Records Weight	0000	0000	000%	00032	00028	087%
Performs Passive ROM for Knee and Ankle	0002	0002	100%	00023	00022	095%
Performs Passive ROM for One Shoulder	0005	0005	100%	00029	00029	100%
Positions Client on Side	0002	0002	100%	00035	00032	091%
Provides Catheter Care	0005	0005	100%	00036	00035	097%
Provides Foot Care	0000	0000	000%	00020	00017	085%
Provides Mouth Care	0001	0001	100%	00025	00023	092%
Provides Perineal Care (Peri-Care)	0001	0001	100%	00027	00022	081%
Transfers Client from Bed to Wheelchair	0004	0004	100%	00028	00027	096%

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PROGRAM: [redacted]

Attn: [redacted]

CODE: [redacted]

STATE: VERMONT
REPORT: TRNGFXXVT
REPORT DATE: 02/01/2018
REPORTING PERIOD: 10/01/2017-12/31/2017

NURSE AIDE COMPETENCY EVALUATION PROGRAM FOR VERMONT

SUMMARY OF RESULTS FOR SKILLS EXAMINATIONS ADMINISTERED TO YOUR GRADUATES

T/S CODE	TEST SITE NAME:	#TESTED	#PASS	%
[redacted]		0002	0002	100%
		0001	0001	100%

	#TESTED	#PASS	%
TOTALS FOR YOUR GRADUATES	0003	0003	100%
TOTALS FOR ALL VERMONT	00155	00126	081%

SUMMARY OF CONTENT AREA PERFORMANCE FOR SKILLS EXAMINATIONS ADMINISTERED TO:

Content Area	Your Graduates #Tested	Your Graduates #Pass	Your Graduates %	All Graduates Statewide #Tested	All Graduates Statewide #Pass	All Graduates Statewide %
Hand Hygiene (Hand Washing)	0003	0003	100%	00155	00155	100%
Applies One Knee-High Elastic Stocking	0000	0000	000%	00029	00027	093%
Assists Client to Ambulate	0000	0000	000%	00032	00032	100%
Assists Client with Use of Bedpan	0001	0001	100%	00032	00032	100%
Cleans Upper or Lower Dentures	0000	0000	000%	00023	00021	091%
Counts and Records Radial Pulse	0001	0001	100%	00037	00035	094%
Counts and Records Respirations	0000	0000	000%	00021	00021	100%
Donning and Removing PPE (Gown and Gloves)	0002	0002	100%	00036	00035	097%
Dresses Client with Affected Right Arm	0000	0000	000%	00026	00019	073%
Feeds Client Who Cannot Feed Self	0001	0001	100%	00032	00030	093%
Give Modified Bed Bath	0001	0001	100%	00032	00029	090%
Measures and Records Blood Pressure	0000	0000	000%	00033	00030	090%
Measures and Records Urinary Output	0002	0002	100%	00032	00028	087%
Measures and Records Weight	0000	0000	000%	00032	00028	087%
Performs Passive ROM for Knee and Ankle	0000	0000	000%	00023	00022	095%
Performs Passive ROM for One Shoulder	0001	0001	100%	00029	00029	100%
Positions Client on Side	0000	0000	000%	00035	00032	091%
Provides Catheter Care	0001	0001	100%	00036	00035	097%
Provides Foot Care	0000	0000	000%	00020	00017	085%
Provides Mouth Care	0000	0000	000%	00025	00023	092%
Provides Perineal Care (Peri-Care)	0000	0000	000%	00027	00022	081%
Transfers Client from Bed to Wheelchair	0002	0002	100%	00028	00027	096%

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PROGRAM: [redacted]

STATE: VERMONT
REPORT: TRNGFXXVT

REPORT DATE: 02/01/2018
REPORTING PERIOD: 10/01/2017-12/31/2017

Attn: [redacted]

CODE: [redacted]

NURSE AIDE COMPETENCY EVALUATION PROGRAM FOR VERMONT

SUMMARY OF RESULTS FOR SKILLS EXAMINATIONS ADMINISTERED TO YOUR GRADUATES

T/S CODE	TEST SITE NAME:	#TESTED	#PASS	%
[redacted]		0006	0005	083%
		0001	0001	100%

TOTALS FOR YOUR GRADUATES	0007	0006	085%
TOTALS FOR ALL VERMONT	00155	00126	081%

SUMMARY OF CONTENT AREA PERFORMANCE FOR SKILLS EXAMINATIONS ADMINISTERED TO:

	Your Graduates			All Graduates Statewide		
Content Area	#Tested	#Pass	%	#Tested	#Pass	%
Hand Hygiene (Hand Washing)	0007	0007	100%	00155	00155	100%
Applies One Knee-High Elastic Stocking	0003	0003	100%	00029	00027	093%
Assists Client to Ambulate	0001	0001	100%	00032	00032	100%
Assists Client with Use of Bedpan	0000	0000	000%	00032	00032	100%
Cleans Upper or Lower Dentures	0002	0002	100%	00023	00021	091%
Counts and Records Radial Pulse	0001	0001	100%	00037	00035	094%
Counts and Records Respirations	0001	0001	100%	00021	00021	100%
Donning and Removing PPE (Gown and Gloves)	0000	0000	000%	00036	00035	097%
Dresses Client with Affected Right Arm	0001	0001	100%	00026	00019	073%
Feeds Client Who Cannot Feed Self	0001	0001	100%	00032	00030	093%
Give Modified Bed Bath	0001	0001	100%	00032	00029	090%
Measures and Records Blood Pressure	0001	0001	100%	00033	00030	090%
Measures and Records Urinary Output	0000	0000	000%	00032	00028	087%
Measures and Records Weight	0004	0003	075%	00032	00028	087%
Performs Passive ROM for Knee and Ankle	0000	0000	000%	00023	00022	095%
Performs Passive ROM for One Shoulder	0002	0002	100%	00029	00029	100%
Positions Client on Side	0002	0002	100%	00035	00032	091%
Provides Catheter Care	0003	0003	100%	00036	00035	097%
Provides Foot Care	0002	0002	100%	00020	00017	085%
Provides Mouth Care	0002	0002	100%	00025	00023	092%
Provides Perineal Care (Peri-Care)	0000	0000	000%	00027	00022	081%
Transfers Client from Bed to Wheelchair	0001	0001	100%	00028	00027	096%

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Vermont Nurse Aide Newsletter

Highest Performing Skills

Skill Name	Pass Rate	Times Tested
Hand Hygiene (Hand Washing)	100%	155
Assists To Ambulate Using Transfer Belt	100%	32
Assists With Use of Bedpan	100%	33
Counts and Records Respirations	100%	33
Performs Modified Passive Range of Motion	100%	29

Lowest Performing Skills

Skill Name	Pass Rate	Times Tested
Dresses client with affected right arm	73%	26
Provides Perineal Care (Peri-Care) for Female	81%	27
Provides Foot Care	85%	20
Measure and records urinary output	87.5%	32
Measures and records weight of ambulatory patient	87.5%	32

Nurse Aide Areas of Opportunity

Dresses client with affected (weak) right arm:

- Step 4 (50%) – While avoiding overexposure of client, removes gown from the unaffected side first, then removes gown from the affected side and disposes of gown into soiled linen container.
- Step 9 (26%) – After completing skill, washes hands

Provides Perineal Care (Peri-Care) for Female:

- Step 2 (18%) – Privacy is provided with a curtain, screen, or door
- Step 5 (14%) – Places linen protector under perineal area before washing

Provides foot care:

- Step 8 (30%) – Lifts foot from water and washes foot (including between the toes)
- Step 10 (20%) – Dries foot (including between the toes)

Measures and records urinary output:

- Step 5 (15%) – Rinses measuring container and pours rinse into toilet
- Step 6 (9%) – Rinses bedpan and pours rinse into toilet

Measures and records weight of ambulatory client:

- Step 6 (31%) – Before recording, washes hands
- Step 2 (15%) – Client has shoes on before walking to scale

NNAAP Skills Updates are being rolled out this year and are scheduled for administration beginning in July 2018. Training for Nurse Aide Instruction Programs will begin in March with a pre-recorded module and will be accessible through a URL. The module will cover the skill step revisions and NCSBN clarifications, will be available on demand.

Thank you to the many INFs that opened their doors for testing to candidates from other training programs. Your assistance is very much appreciated.

If you have any questions or concerns - or suggestions for the next newsletter, please contact me at 610-617-5056 or via email at kathleen.rowan@pearson.com.

Pearson

Rowan, Kathleen <kathleen.rowan@pearson.com>

Vermont Nurse Assistant Newsletter Issue 1

1 message

Pearson VUE <pearsonvue@direct.pearson.com> Wed, Aug 2, 2017 at 12:54 PM
Reply-To: pvmarketing@direct.pearson.com
To: kathleen.rowan@pearson.com

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Vermont Nurse Assistant Newsletter

August 2017 Issue

STATISTICS:

During the first half of 2017 you achieved a 96% pass rate on the written exam and a 79% pass rate for the skills exam with 38 training programs preparing candidates. The national average in 2016 was 90% for the written exam and 74% for the skills evaluation.

Nurse Assistant skills tests delivered first half of 2016: 466

Nurse Assistant skills tests delivered first half of 2017: 451

Highest Performing Skills

Skill Name	Pass Rate	Times Tested
Feeds client who cannot feed self	100%	71
Hand hygiene (hand washing)	99%	448
Counts and records respirations	98%	84
Provides foot care on one foot	97%	67
Performs modified passive range of motion	96%	80

Lowest Performing Skills

Skill Name	Pass Rate	Times Tested
Provides perineal care (Peri-Care) for female	82%	96
Provides mouth care	83%	83
Assists To ambulate using transfer belt	90%	99
Assists with use of bedpan	90%	82
Counts and records radial pulse	90%	94

Nurse Assistant Areas of Opportunity

Provides Perineal Care (Peri-Care) for Female:

• Step 3 (24) – Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water

0285

• Step 11 (17) – After washing genital area, turns to side, then washes and rinses rectal area moving from front to back using a clean area of washcloth for each stroke. Dries with towel [Critical element step]

• Step 13 (11) – Empties, rinses, and dries basin

• Step 17 (11) – After disposing of used linen, and placing used equipment in designated dirty supply area, removes and disposes of gloves (without contaminating self) into waste container and washes hands

Provides Mouth Care:

• Step 12 (19) – After rinsing toothbrush, empty, rinse and dry the basin and place used toothbrush in designated basin/container.

• Step 13 (12) – Places basin and toothbrush in designated dirty supply area

Assists To Ambulate Using Transfer Belt:

• Step 4 (33) – Before assisting to stand, checks and/or locks bed wheels

• Step 6 (13) – Before assisting to stand, applies transfer belt securely at the waist over clothing/gown

Assists With Use of Bedpan:

• Step 6 (14) – Removes and disposes of gloves (without contaminating self) into waste container and washes hands

• Step 14 (17) – Empties and rinses bedpan and pours rinse into toilet

Counts and Records Radial Pulse:

• Step 6 (12) – After obtaining pulse by palpating in radial artery position, records pulse rate within plus or minus 4 beats of evaluator's reading [Critical element step].

The overall scores for the next skill were average but two steps were missed at a high rate.

Gives Modified Bed Bath (Face and One Arm, Hand and Underarm):

Step 3 (23) – Removes gown and places in soiled linen container, while avoiding overexposure of the client

Step 13 (22) – Puts clean gown on client

Application Form: If you have printed applications that list email as optional, your applications are not current. Please remind your nurse assistant candidates to include their email address on their applications and to be sure to check their email during the registration stage so that they don't miss an appointment confirmation (confirmation letters are also sent out).

Thank you to the many INFs that opened their doors for testing to candidates from other training programs. Your assistance is very much appreciated.

If you have any questions or concerns - or suggestions for the next newsletter, please contact me at 610-617-5056 or via email at Kathleen.Rowan@pearson.com.

Pearson VUE

3 Bala Plaza West
Bala Cynwyd, PA 19004

Contact

Office: 610-617-5056
Mobile: 720-298-7726
Email: Kathleen.Rowan@pearson.com

If you don't wish to be contacted in the future please Unsubscribe.

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Testing Day

Check-in Process

Candidates are advised to arrive 30 minutes prior to the scheduled testing time. Candidates are required to check in for both the written examination and for the manual skills evaluation. Candidates are asked to bring in two official, signature-bearing forms of identification (one of which must be photo-bearing), two No. 2 pencils, and a watch with a second hand.

Written Examination

After all candidates have been registered, the evaluator will hand out materials and give instructions for taking the written examination. The NNAAP® written examination has seventy (70) multiple-choice questions. Candidates will have two (2) hours to complete the examination.

Oral Examination

An oral examination is available upon request as an alternative to the NNAAP® written examination. The NNAAP® oral examination consists of two (2) parts, and the candidate must pass both parts to pass the oral examination. The first part of the Oral Examination has sixty (60) multiple choice questions. Each of these questions is read twice. The second part of the oral examination has ten (10) multiple-choice questions. These questions test a candidate's ability to speak a minimum amount of English by recognizing common words use by nursing assistants in long-term care facilities. Each word is read three (3) times. The candidate is given two hours to complete the oral examination. To request an oral examination, candidates must make this request on their applications. The oral examination is available on a MP3 player.

Skills Evaluation

Following completion of the written examination, candidates will be taken to complete the manual skills evaluation in a separate area of the facility. As previously described, candidates will need to check in again and are expected to arrive 30 minutes prior to their scheduled appointment.

The manual skills evaluation will be administered by an NAE. Before the skills evaluation begins, the evaluator will show the candidate where the equipment is located and answer questions about operating the equipment. The evaluation consists of five tasks and takes 30 minutes to complete.

Conclusion

At the conclusion of the manual skills evaluation, candidates are asked to wash their hands. They are then taken to the check-in area where they wait for their scores. As previously described, Pearson VUE will partner with Express Evaluations to facilitate immediate, on-site scoring of the performance examinations. **Candidates will rarely have to wait longer than ten minutes for a score result.** Thus, candidates leave the test site knowing the next step to achieve certification — either enrollment on the Vermont nursing assistant registry or the steps to be re-scheduled for testing.

Appendix J - Standard Setting Reports

These documents have been marked Confidential, and are included as a separate file.

Vermont Nursing Assistant Program

APPLICATION FOR THE NNAAP® EXAMINATION

PLEASE PRINT LEGIBLY — USE INK ONLY

1. Social Security Number: ___-__-____ **Date of Birth:** __/__/____ (M M / D D / Y Y Y Y) **Gender:** M F

You are required to provide your social security number with the understanding that it will be used only as an identification number for record keeping and verification of your listing on the Vermont Nursing Assistant Registry. The information on this application will be entered on the Vermont Nursing Assistant Registry and, with the exception of your social security number, will be a matter of public record. **Failure to provid complete and accurate information on the application, including an e-mail address, may delay your nurse aide test or prevent your entry on the Registry.**

2. PRINT FULL NAME (For previously certified Nursing Assistants: Your name must match Registry records, or proof of name change is required.)

LAST

FIRST

MIDDLE

MAIDEN NAME/FORMER NAME (If Applicable)

3. MAILING ADDRESS (Please provide only one: Street OR P.O. Box)

STREET (number and name)

APARTMENT NUMBER

PO BOX

CITY

STATE

ZIP CODE

4. PHONE NUMBER

DAYTIME Phone Number: ___-___-____ (AREA CODE)

EVENING Phone Number: ___-___-____ (AREA CODE)

5. E-MAIL ADDRESS (REQUIRED)

6. REGISTRATION FOR EXAM & FEES ***(All candidates MUST CHECK one of the following exam types.)***

Under Federal law, the nursing assistant employed by, or with an offer of employment from a skilled nursing facility participating in the Medicaid/Medicare program, may NOT be charged this fee. **Both parts of the exam must be taken. If you fail one part after the initial try then you only pay and retake the part you failed.**

1. ☐ **Written Exam and Skills Evaluation (BOTH) $130**
2. ☐ **English Oral Exam and Skills Evaluation (BOTH) $130**
3. ☐ **Skills Evaluation Exam ONLY (RETEST) $95**
4. ☐ **Written Exam ONLY (RETEST) $35**
5. ☐ **English Oral Exam ONLY (RETEST) $35**

If using voucher, please enter voucher number: #

Fees MUST accompany ALL applications and are NON-REFUNDABLE

Fees should be made payable to "Pearson VUE"

Fees must be in the form of a certified check, money order, or company check. Personal checks or cash are NOT accepted.

Your application, copy of training program verification (or authorization from the Vermont Board of Nursing), and examination fees must be mailed to:

Credentia
Nurse Aide Processing
3 Bala Plaza West, Suite 400A
Bala Cynwyd, PA 19004

NOTE: If you are requesting ADA accommodations, please submit all required documentation to the Vermont Board of Nursing. Detailed requirements can be found on Page 8 of the Candidate Handbook.

7. I WANT TO TEST: *(You MUST check one option below.)*

☐ **At a Regional Test Site** Provide the test site code and the location of the test site where *you prefer* to test. **If your choice is not available, you will be assigned the first available test site in your area.** The Regional Test Sites and the RTS Codes may be found as a link labeled Regional Test Sites on the Vermont Nursing Assistants page of the Pearson VUE web site (*www.pearsonvue.com*).

Site Code: ☐☐☐-☐☐☐☐☐ **Test Site City/Town:** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

If your choice of test site is not available, would you be willing to travel for a sooner test date? ☐ Yes ☐ No

If YES, would you be willing to travel up to ☐ **30 miles** ☐ **45 miles** ☐ **60+ miles** for the first available test?

☐ **At a State-Approved In-Facility Test Site** *(Complete the information below):*

Training Program Name: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ **Training Program Code:** ☐☐☐☐☐☐

Test Date: ☐☐/☐☐/☐☐☐☐

8. ELIGIBILITY ROUTES *(You MUST SELECT ONE of the following Eligibility Routes.)*

☐ **E1 New Nursing Assistant Candidates.** All applicants who have successfully completed a Vermont Board of Nursing-approved Nursing Assistant Education Program. **I understand that I will be required to complete a new State-approved Nursing Assistant Training Program and re-test if I do not pass the competency exam after three (3) attempts within two (2) years (24 months) of completing my training program. Please complete Section 9 below.**

Eligibility routes E2 through E5 require a copy of your Authorization to Test letter from the Vermont BON.

☐ **E2 Nursing Students (PN and RN) Candidates.**

☐ **E3 Endorsement.** Applicants who are active and in good standing on another state's CNA or LNA Registry but did not meet the practice requirement (400 hours of LNA work within the last 2 years) AND completed an approved nursing assistant education program within the last 2 years (that consisted of 80 hours or more with at least 30 hours of clinical).

☐ **E4 Out-of-State trained candidate.** Applicants who within the last 2 years completed an approved nursing assistant training program in another state (consisting of 80 hours or more with at least 30 hours of clinical) AND who did not test in that state.

9. TRAINING PROGRAM INFORMATION

Name of Training Program: _____

Training Program Code: ☐☐☐☐☐☐ **Training Program Completion Date:** ☐☐/☐☐/☐☐☐☐

10. EMPLOYMENT INFORMATION

Are you currently employed, or do you have an offer of employment, by a Medicare/Medicaid nursing home?

☐ Yes ☐ No If Yes, you are not required to pay the exam fee. Complete the following information so alternate payment arrangements can be made:

Name of Employer/Facility: _____

Address of Employer/Facility: _____

Phone Number of Employer/Facility: ☐☐☐-☐☐☐-☐☐☐☐
AREA CODE

Signature of Administrator, HR Director or DNS: _____

Print Name of Administrator, HR Director or DNS: _____

MAILING INSTRUCTIONS

YOU MUST MAIL THE FOLLOWING, TOGETHER IN ONE ENVELOPE, SO IT IS RECEIVED AT PEARSON VUE AT LEAST 11 BUSINESS DAYS PRIOR TO YOUR REQUESTED EXAM DATE

☐ **1.** Your application

☐ **2.** A copy of required training program verification for E1, or Authorization to Test letter from the VT BON for E2 through E5.

☐ **3.** Correct exam fees: certified check, company check, money order, or voucher **(which are NON-REFUNDABLE)**

If you do not receive a Confirmation Letter within ten (10) business days of mailing your application, call Credentia at (877) 437-9587. *Credentia is not responsible for lost, misdirected, or delayed mail delivery.*

If you cannot attend your scheduled exam date, you MUST call Credentia by noon at least four (4) business days before the test date to reschedule or you will forfeit your exam fees.

CANDIDATE STATEMENT AND SIGNATURE *(All candidates MUST sign.)* I understand that I am responsible for making sure that all of the information provided in this application is completely true and correct. I understand that any information I give that is not true may jeopardize my licensure status and listing as a nursing assistant, and may result in prosecution by the state of Vermont.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

NOTE: Payment should be made to "Pearson VUE."

Mail application and documentation to Credentia, Attn: Nurse Aide Processing (address on page 1).

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Pearson VUE Confidentiality Request

Pearson VUE would like to request that certain portions of our proposal be excepted from disclosure. Pearson VUE hereby requests that the portions of our proposal listed below remain confidential. Pearson VUE has clearly identified within the proposal the confidential material we request be withheld, and has marked the footer of each designated page as "Confidential."

As stated in *1 V.S.A. §§ 317 (c)(9)* and *(15)*:

> *(c) The following public records are exempt from public inspection and copying:*
>
> *(9) trade secrets, including any formulae, plan, pattern, process, tool, mechanism, compound, procedure, production data, or compilation of information which is not patented, which is known only to certain individuals within a commercial concern, and which gives its user or owner an opportunity to obtain business advantage over competitors who do not know it our use it, except that the disclosures required by 18 V.S.A. 4632 shall not be included in this subdivision.*
>
> *(15) records relating specifically to negotiation of contracts including, but not limited to collective bargaining agreements with public employees.*

Accordingly, the portions of our proposal we have designated as confidential or information related specifically to contract negotiation and, thus, request remain confidential are as follows:

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

PROMETRIC

RELATIONSHIPS MATTER

PROPOSAL

RFP No.: DLP 277
TECHNICAL PROPOSAL

Nurse Aide Testing Evaluation Proposal for the Department of Disabilities, Aging, and Independent Living

Submitted To:
Suzanne Leavitt, RN MS,
Assistant Director
Division of Licensing and Protection/DAIL
HC 2 South 280 State Drive
Waterbury, VT 05671-2060

SurveyandCertification@vermont.gov
(802) 241-0346 PHONE

Submitted By:
Stacy Lawson, Director
Global Account Management

Stacy.lawson@prometric.com
443-455-6889 PHONE
410-982-9887 MOBILE

March 30, 2018

Authorized By:
Michael P. Sawicki
Senior VP & General Counsel

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CONFIDENTIAL
Appendix I. Sample Examinations Separately Bound

Information Notice
This proposal is valid for 90 days from the final date for receipt of RFPs.

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LETTER OF SUBMITTAL

PROMETRIC INFORMATION

(a) Information about your organization and any subcontractors, to include the name of the organization, names, addresses, telephone numbers, and address of principal officers and project/program leader, and a description of the type of organization you operate.

Prometric LLC
Address: 1501 S. Clinton Street, Baltimore, MD
Program Leader: Stacy Lawson
Phone: 443-455-6889

Prometric is the world's leading trusted testing provider of technology-enabled, end-to-end test development and delivery solutions, and our history of pioneering enterprise in educational research and assessment dates back nearly 60 years. Prometric has been a key provider of nurse assistant competency examinations since the inception of the federal requirements. Prometric's experience in providing well-rounded, reliable certification services to the healthcare field is well known and is being continuously enhanced. Prometric currently provides certified nurse assistant examination services in 13 states, two of which will begin service this year.

MATERIALS AND ENCLOSURES

(b) A detailed list of all materials and enclosures submitted in the proposal.

All materials and enclosures submitted in the proposal are provided as appendices and listed below:

- Similar Projects and Prior Work Products
- Curricula Vitae
- Letters of Reference
- Detailed Linkage to Federal Requirements
- Sample Candidate Information Bulletin
- Proposed Timeline
- Sample Reports for DAIL
- Clinical Skills Examination Checkpoint List
- Sample Examinations (CONFIDENTIAL)

ADDITIONAL STATEMENTS

(c) Any other statements you wish to convey to DAIL

Confidentiality Statement

Prometric asserts that *Prometric Appendix I. Sample Examinations* included in the proposal (listed below and clearly and conspicuously marked) is Confidential and Proprietary to Prometric and is protected against disclosure pursuant to the Vermont Public Records Law, 1 V.S.A. §§ 317 (c)(9) and (15). In accordance with Section 1 V.S.A §§ 317 (c)(9), "trade secrets…or compilation of information which is not patented, which is known only to certain individuals within a commercial concern, and which gives its user or owner an opportunity to obtain business advantage over competitors who do not know it our use it…" is exempt from release. Our sample examinations are not patented and are exempt from disclosure as the release would give an advantage to competitors or bidders by providing examinations written and developed by Prometric, and would give competitors the benefit of Prometric's experience and expertise acquired during its tenure in the testing industry. Additionally, disclosure would deny Prometric the benefit of receiving compensation for its knowledge and for the work performed when creating the examinations. Disclosure would also cause substantial competitive harm to Prometric by supplying our competitors with solutions to the performance of services requested in this RFP, and similar future requests for proposals released under the public bidding

process, making it impossible for Prometric to maintain its competitive edge. Prometric takes proactive steps to maintain the confidentiality of this information by: (i) distributing only to those employees with a strict "need-to-know" basis. All employees are bound by and certify annually to a robust Code of Business Conduct and Ethics which deals with the protection of company confidential information; (ii) under an executed nondisclosure agreement with potential clients and current clients; (iii) by clearly marking the information Proprietary and Confidential; and (iv) by redacting the information prior to disclosure of documents that are subject to public records laws. Further, Vermont Public Records Law 1 V.S.A. §§ 317(c)(15) provides an exemption for "records relating specifically to negotiation of contracts..." Prometric submits that the Department included a requirement in its Request for Proposal (RFP) for bidders to submit sensitive business information (i.e., sample examinations developed by the bidder). The sole reason Prometric is including its sample examinations is to remain compliant with the requirements of the RFP and eligible for an award of a resulting contract, and respectfully requests that it hold this information confidential.

No Conflict of Interest Statement

Prometric certifies that it does not have a personal or a business interest that presents a conflict of interest with respect to RFP DLP 277: Nurse Aide Testing Evaluation issued on February 1, 2018 by Vermont Department of Disabilities, Aging, and Independent Living, and the resulting contract.

ALTERNATIVE CONTRACT LANGUAGE

(d) Any alternative contract language you wish to propose. If alternate contract language is longer than one page, attach it to your letter in a separate document.

Based on The Department of Disabilities, Aging, and Independent Living's responses to our questions, Prometric does not wish to propose any alternative contract language.

QUALIFICATIONS

Describe the qualifications and relevant expertise of the bidder and include resumes of the individual(s) who will complete core tasks, including subcontractors, if any. Include a description of similar projects and prior work products.

Prometric is currently contracted to provide certified nurse assistant examination services in 13 states using the Competency Evaluation Program (CEP) that is proposed for Vermont. Eleven (Arkansas, Connecticut, Delaware, Florida, Hawaii, Idaho, Louisiana, Michigan, New Mexico, New York and Wyoming) are sole source states where the State has selected a single vendor to administer certified nurse assistant testing and registry services, and are detailed in *Appendix A*. We have recently been awarded sole source testing contracts in Wyoming and Louisiana and will begin administrations in March and July 2018, respectively in those states. We administer exams in two additional multivendor states, Alabama and Oklahoma, where candidates are given multiple testing options. With 25 years of experience in nurse assistant competency evaluation, we have maintained a sterling record for providing legally defensible exams by following a sound test-development process based on well-established and widely accepted psychometric standards.

The Department of Disabilities, Aging, and Independent Living (DAIL) will be supported by Prometric professionals who are designated to provide program oversight, daily operational support, and nurse assistant test development solutions. They will ensure that DAIL contract deliverables and performance expectations are met. **Stacy Lawson**, Director, and **Brigid McDonnell**, Account Manager, will provide oversight, deliverables management, and operational support for DAIL. **Linda Waters, RN, Ph.D.**, will provide content oversight. **Diann Brady, M.S.**, Test Developer, and **Dongyang Li**, Team Lead, both with Test Development Solutions, will provide psychometric and test development support for DAIL. **James Lee**, Vice President, Candidate Services, will provide executive leadership for contact center services. **Susan Gaesser**, Vice President, Technology Solutions, will provide leadership for technology solutions, including the candidate management databases and internet test delivery application for DAIL. **Nancy Patterson**, Director, Operations, U.S.

Delivery Services, will provide oversight and support for Regional and in-facility testing (IFT) sites, and management of Prometric's Nurse Assistant Evaluators (NAEs). Individual curricula vitae/resumes are submitted as attachments in *Appendix B*.

LETTERS OF REFERENCE

Include at least three relevant letters of reference, representing individuals who are able and willing to describe the bidder's competence and performance.

Achieving client satisfaction is a primary element in our service strategy. As a trusted provider of market-leading, technology-enabled test development and delivery solutions, we set the industry benchmark for quality, innovation and responsiveness. Accordingly, we enjoy an excellent record for establishing solid partnerships with our clients. Three letters of reference are provided in *Appendix C*. We encourage you to contact these individuals for details concerning the quality of the services we provide.

INSURANCE CONFIRMATION

Also, include a written statement confirming that the bidder possesses, or will obtain, the required insurance required by the State as outlined in the State's standard terms for contracts and grants, identified as Attachment C in Attachment 1 to this RFP.

Prometric has reviewed and confirms that it possesses the insurance requirements outlined in the State's standard terms for contracts and grants, identified as Attachment C in Attachment 1 to RFP: Nurse Aide Testing Evaluation.

WORK PLAN

Describe the proposed approach for producing each required element, including a high-level description of the method used to produce the elements described in Section C. The narrative must include proposed timelines, strategies for providing services, estimated hours per activity along with each principal involved in completing the activity, and each activity referenced to the budget below.

Prometric's operational team will ensure that all program tasks are performed in accordance with our contractual commitments. It is our goal to exceed your expectations; consequently, Prometric has developed a "score card" process to compare our service levels to those required. It typically takes three to four months to implement a new client program, with much of that time focused on comprehensive communications with all program stakeholders. Please see *Appendix D* for a detailed implementation plan.

1. ADMINISTRATION

1. Administration of Competency Test/Evaluation. Bidders must explain in their proposals how they propose to provide each of the following:

A. Meeting Federal Requirements

A. Conducting a nurse assistant competency testing/evaluation program meeting federal requirements, including both written and clinical components, to be implemented on September 1, 2018.

Prometric has been a key provider of nurse assistant competency examinations and registry management since the inception of the federal requirements. Our experience in providing nurse assistant examinations that meet federal and state requirements that are legally defensible and psychometrically sound is well known nationally by state agencies that offer nurse assistant testing.

As a national testing company, Prometric develops our proprietary nurse assistant competency examinations for compliance specifically with the federal requirements to assure that our exam specifications are compatible with

any state curricula designed to meet the federal requirements. Specifically, Prometric meets or exceeds the following federal requirements:

- Examinations developed from a pool of questions of which only a portion is included in any one examination. Prometric currently maintains a pool of 1,806 nurse assistant items available for the written and oral examinations, with new items developed on an as needed basis.
  - Federal Requirement: Examinations maintained in a system that prevents disclosure of both the pool of questions and the individual competency evaluations. Prometric's nurse assistant item pool is maintained in our secure and proprietary item banking system, which is used to assemble and maintain examinations.
  - Federal Requirement: Nurse assistants allowed to choose either a written or oral exam. Prometric provides candidates the opportunity to choose between taking either a written or oral examination.
- Oral examinations read in a neutral manner. For oral exams, Prometric has each question recorded in a professional studio to ensure that questions are read in a standardized and neutral manner.
  - Federal Requirement: Each course requirement addressed as specified in Sec. 483.152(b).

Please see *Appendix E* for a detailed linkage of Section 432.154 of the Code of Federal Regulations, which specifies that competency evaluations must address each course requirement specified in Sec. 483.152(b).

B. Providing the Competency Evaluation

B. Providing competency evaluation for approximately 800 nurse assistants during each contract year, affording each candidate three opportunities to take the test and be listed on the registry within four months of date of employment by a facility.

Prometric can provide competency evaluations for the approximately 800 nurse assistants in Vermont during each contract year. All candidates will have the opportunity to test three times within four months of date of employment by a facility, with successful candidates listed on the Vermont Nurse Assistant Registry. Once a candidate's initial eligibility has been determined, Prometric's candidate-management system utilizes built-in business rules to ensure that the candidate takes only examinations for which they are eligible. For example, a candidate who already has failed on three attempts to pass the clinical exam would be required to retrain and submit a new application before eligibility can be reinstated. Similarly, candidates whose eligibility expires before they have successfully passed both exams also will be prohibited from scheduling an examination.

C. Accommodated Testing

C. Providing different methods of administering the competency testing/evaluation programs, including:
i. Oral administration of written exams;
ii. Exams for candidates who require ADA accommodations

All candidates will have the ability to choose between a written examination and the oral administration of the written exam. The oral administration contains the same set of questions a candidate takes during the written exam.

All aspiring Vermont nurse assistant candidates deserve the same opportunity to demonstrate their abilities, regardless of accommodation required. For candidates who request testing accommodations, Prometric can provide extended time, readers and other accommodations as approved. Candidates may choose to take an oral version of the written exam. Candidates are provided with a headset to hear the question read to them as they see the question on the computer screen. They can replay questions as needed. The oral test is helpful for many candidates for whom English is a second language, since hearing the questions helps individuals with limited English language skills to better comprehend the meaning of each question.

D. Managing Program Activities

D. Providing all management of exams and registration of candidates, including arranging for testing sites and proctors, recruiting and training of clinical exam raters, and a system for notifying candidates for the exam at least ten (10) working days prior to the exam.

Arranging for Testing Sites and Proctors

Prometric will provide all management of the exams and registration for candidates, including arranging for test sites and proctors. We offer two types of test sites for administering the clinical skills and knowledge tests: regional test sites and in-facility sites. Regional test sites are established at geographic locations convenient to VT candidates, with the required equipment, space and supplies necessary for both tests, and are open to candidates from any training program. In-facility test sites are those sites located where candidates can test where they work or train. We look forward to discussions with DAIL about the best locations for these test sites and will, at least initially, plan to establish regional test sites in the three current statewide locations.

Prometric **employs and trains** Nurse Assistant Evaluators (NAEs) who administer the exams. Hiring NAEs as our own employees, rather than contractors, benefits DAIL by providing enhanced test security and consistency in the administration of the examination. We only hire registered nurses (RNs) who demonstrate an understanding of, and sensitivity to, the testing experience for the applicant and have a respectful perspective on the important contributions of CNAs to healthcare teams. It is important that these nurses foster a testing environment that encourages applicants' best performance and that they provide a standardization in test administration.

Upon receiving and processing a complete application (all required information and payments provided), the candidate will be scheduled into the next available appointment at his/her preferred testing location. An email will be automatically generated by our candidate management system, providing the candidate with confirmation of their eligibility as well as the details of the assigned testing appointment at least ten (10) working days prior to the exam.

E. Pre-Examination Materials

E. Providing for pre-examination materials, including at a minimum, sample test questions for each candidate and materials for the nurse assistants explaining the testing process.

Prometric produces comprehensive English-language candidate information bulletins that contain an explanation of the testing process as well as sample test questions. These documents also include the percentage of questions in each content area and a listing of the skills included in the exams. We also publish a clinical skills checklist, detailing the required evaluation criteria for each skill in the skills demonstration portion. As a part of our standard service offering, we develop materials regarding the application, registration/ scheduling, and examination processes that lead to candidates testing successfully. We will provide bulletins to DAIL for review and approval. A sample Candidate Information Bulletin is included in *Appendix F*.

F. Protecting Examination Content

F. Ensuring security and confidentiality of examination materials including a variety of alternative examination forms.

The exams administered by Prometric via our internet-based system are completely secure throughout the testing process. The exams are initially developed using Prometric's proprietary item banking system, which securely houses all examination content associated with Prometric's nurse assistant examinations. Once the exams are published for delivery, the internet-based system's security takes over. Candidate exams are only available for administration to a candidate following proctor authentication; it is impossible for a candidate to launch an exam on his/her own. At least three forms of the written/oral exam and ten forms of the clinical skills exam will be available.

G. Considering the Candidate

G. Providing testing in a manner that is non-intimidating to and respectful to the candidates, taking into consideration that many candidates will have minimal education and may never have taken a test of this type before.

Recognizing that nurse assistant candidates come from a variety of educational backgrounds and that the success of a nurse assistant in the competency evaluation should not be entirely dependent on the candidate's reading skills, the design of the competency evaluation takes into consideration the typical literacy level, educational background and limited testing experience of the candidate population and is administered in a respectful way. The training provided to Prometric's staff also emphasizes empathy with the candidates without sacrificing the objectivity required to ensure a standardized administration.

H. Detailed Exam Results for Candidates

H. Providing detailed results to the training program and candidate following each test event that indicate areas in which the candidate was deficient, to facilitate re-training and re-testing. The detailed results shall be provided within 10 business days.

Candidates will receive their official exam results immediately following testing. They also can go online to review and reprint their scores, including the diagnostic feedback, at any time.

If a candidate is unsuccessful in passing either the clinical skills exam or the written/oral exam, Prometric will provide diagnostic information to the candidate, as well as the procedures for retaking the examination. This information will also be available in the Candidate Information Bulletin.

Prometric will also mail to each sponsoring training program and/or nursing home nurse assistant employer test score information pertaining to its students/employees within 10 business days of the examination administration date, including the performance of individual students/employees.

I. Reporting to the Vermont Board of Nursing

I. Providing the Vermont Board of Nursing with online access to management reports on an ongoing basis. Reports must include: the number of candidates, the pass/fail rates statewide and by training program, second and third testing attempts and pass/fail rates for each, and test results broken out by skill and content area. Provide a sample report.

Prometric's comprehensive reporting systems will provide DAIL with access on an ongoing basis to a wide range of reports designed to enhance nurse assistant regulators' ability to monitor their program by providing and compiling a wide range of data in readily accessible reporting formats.

Sample reports with the information requested by the Board of Nursing have been provided in *Appendix G*. These reports may be tailored upon award to meet specific program needs.

J. Quarterly Newsletter

J. Providing all training programs and the Vermont Board of Nursing with a quarterly newsletter that includes an analysis of test performance, tips, tools and/or helpful information based on Vermont test performance.

Prometric will provide all training programs and the Vermont Board of Nursing with a quarterly newsletter to include an analysis of test performance tips, tools, and other helpful information based on Vermont test performance.

K. Ongoing Communication

K. Providing ongoing communication, including conducting an annual in-person meeting or presentations at conferences, phone conferences and ad-hoc reports to address concerns.

Prometric will provide ongoing communication with DAIL, including conducting an annual in-person meeting or presentations at conferences, phone conferences and ad hoc reports to address concerns and service

responsibilities outlined in this contract. Prometric manages quality improvement through frequent internal and client-facing operational meetings and regularly scheduled business reviews.

L. Managing Re-testing

L. Managing re-testing and describing the costs for second and third attempts.

Based on federal and DAIL retesting rules, candidates are provided three opportunities to take and pass both the clinical skills examination and the written examination. Unsuccessful candidates will only need to retest the examinations they failed; costs for second and third attempts are included in the price quotation.

To ensure that a candidate who retests in the same eligibility period does not receive a form on which the candidate has previously tested, the following procedures are currently in place:

- Test forms are pre-assigned by the registration/examination administration platform, ensuring equal distribution of all active test forms to first-time test takers.
- The platform ensures that a candidate does not receive the same test form when retesting in the same eligibility period.
- Before the test administration date, the NAE providing testing receives a roster that lists each scheduled candidate, and the test forms assigned for the clinical skills and written/oral exams.

M. Alternative Types of Administration

M. Detailing alternative types of administration of the competency evaluation the contractor is prepared to offer. Bidders should describe a strategy for offering testing frequently enough to ensure candidates have the best possible opportunity to be successful. Specify all costs for testing procedures; including registration, test administration, repeat exams, etc.

Prometric schedules testing events at regional test sites based on historical volume data, typically testing at least once per month at each location, and will adjust schedules as necessary to meet candidate demand. Prometric also works directly with training programs to coordinate testing events at in-facility testing (IFT) sites on an ad hoc basis to meet any alternative requirements. Once a site meets the minimum required number of candidates to support an event (typically at least four candidates), our team and a site representative work together to determine the appropriate testing date as well as all activities related to the administration. Prometric offers testing on a frequency that ensures candidates can be quickly tested and placed on the Registry.

Alternative types of administrations for candidates who need other testing accommodations (e.g., extra time, separate room, reader/recorder) are coordinated on a case-by-case basis.

N. Appeals Process

N. The vendor shall provide a test dispute process that addresses disputes promptly and professionally.

Our goal is to provide a quality exam and a fair standardized testing experience for every candidate. If an individual has a question regarding test results, an appeal may be submitted in writing within 60 days of the test date. Details on how to submit the appeal and information to include will be listed in the Candidate Handbook.

O. Customer Support

O. Providing customer support. Prefer a dedicated State representative if vendor provides testing services in other states. Customers include testing candidates, training program staff, Board of Nursing staff and Department of Disabilities Aging and Independent Living.

Prometric will provide high-quality, dedicated customer services to testing candidates, training program staff, Board of Nursing staff and DAIL. For candidates and training program staff, Prometric's customer service professionals are recruited, trained, coached, assessed and focused on providing helpful and accountable service

to all individuals. Vermont-specific training must be completed by the representatives before any calls can be answered. Prometric's Standard of Care is a key difference for DAIL's candidates versus the typical robotic, policy-reciting approach used by most contact centers. We leverage call and email dispositioning and trending data along with candidate behavior patterns to identify common questions and assemble teams of operational and customer service professionals to explore further service enhancements for candidates. For Board of Nursing and DAIL staff, Prometric will assign a dedicated account manager, **Brigid McDonnell**, to serve as the primary point of contact.

2. SCORING EXAMS

2. Providing and scoring of exams. Proposals must also:

Scoring Written/Oral Examinations

Examinations are administered in English, utilizing a multiple-choice format. Items are presented in a randomized format providing substantially unique examinations for each candidate and reducing the likelihood of item exposure or memorization. This method of administration also allows for immediate scoring. When the test is electronically submitted for scoring, a score report is produced for the candidate at the test location. Candidates will receive additional information on the score report identifying general content areas that should be reviewed in preparing to retest. The score report also will provide candidates who have failed information about rescheduling their test.

Scoring the Clinical Skills Examination (CSE)

The CSE is supported by computer-based testing, by performing the actual scoring of the manual skills exam based on the skills checkpoint information entered by the NAE. The test forms are randomly assigned by the computer at the time the test-site roster or authorization to test is generated. NAEs access the candidate's assigned test form using the candidate's unique Authorization-to-Test (ATT) number and the NAE's username and password. The NAE instructs the candidate on skills to be performed and then records observations and inputs the candidate's performance into the computer at the conclusion of the test. A score report is generated for the candidate immediately; each score report provides feedback for the candidate on missed checkpoints to assist with preparation for a retest.

A. Nurse Assistant Exams

A. Describe the exam(s) the bidder proposes to use.

Written Exam Reflects Knowledge Required for Safe and Competent Care

Prometric's written examination is constructed to reflect the knowledge required for providing safe and competent care to nursing-home residents. The written examination consists of 60 multiple-choice questions. Each form is comprised of 50 scored items and 10 pretest (non-scored) items. Candidates are allowed up to 90 minutes to complete the exam. Each item is weighted one point.

Prometric's Oral Examination

The oral examination is the same set of questions a candidate takes during the written exam, administered electronically with audio recordings of the items that play as the question is displayed.

Clinical Skills Examination (CSE) for Performance-based Assessment

Prometric's CSE is a performance-based exam in which the candidate is required to perform skills that are necessary in caring for residents in long-term care. Each skill is comprised of a series of objective checkpoints

that the NAE will use to evaluate the candidate's performance. A complete list of the checkpoints has been provided in *Appendix H* and is available publicly to candidates, training programs and other constituents at www.prometric.com/nurseaide.

All clinical skills examinations contain Handwashing, Indirect Care and three psychomotor skills represented by one skill from each of the following domains: (1) Personal Care; (2) Promotion of Health and Function; and (3) Measure and Record. To apply equity between forms, each skill within a domain is categorized according to one of three levels of difficulty:

- most difficult;
- moderately difficult; and
- least difficult.

The table below shows the clinical skills divided by their level of difficulty.

SKILLS DEMONSTRATION EXAMINATION MATRIX			
Level of Difficulty	Personal Care	Promotion of Health and Function	Measure and Record Skills
Most	+ Perineal Care + Catheter Care + Dressing + Change Occupied Bed	+ Positioning + Transfer	+ Pulse
Moderate	+ Bedpan + Partial Bed Bath + Mouth Care – Brushing Teeth + Mouth Care – Denture Care	+ Ambulate + ROM – Hip, Knee, and Ankle	+ Contents of Urinary Drainage Bag + Feeding
Least	+ Hand and Nail Care + Foot care	+ ROM – Shoulder + ROM – Elbow and Wrist	+ Respirations

B. Examination Samples

B. Submit a sample examination and samples of other exam related materials such as pre-examination study materials and list any costs individually;

We have included proprietary sample examinations for the clinical skills and written examinations that we propose for Vermont in a separate document, *Prometric Appendix I. Sample Examinations, Confidential*. These examinations are secure test materials and are exempt from public disclosure as designated trademark secrets. We have also provided a sample Candidate Information Bulletin that contains pre-examination study materials in *Appendix F*. The bulletin will be available on Prometric's Vermont-specific webpage and will be free of charge.

C. Alternative Examination Forms

C. Describe how alternative examination forms are developed and guarantee comparability but variations among exams;

The written test forms are statistically equated using an "equating block" of items to ensure that candidates test on forms with equivalent difficulty. Prometric's system automatically rotates form assignment as a means of preventing candidates from taking the same form of an examination when re-testing. Our internet-based testing delivery system then randomizes examination items to provide unique examinations for each candidate, thereby further reducing the likelihood of item exposure, memorization or candidate misconduct.

D. Examination Validity

D. Supply any information on examination validity, including field testing;

Test validation is a continuous process that begins with a job analysis and continues through the development of a valid test-content outline, item pretesting, and statistical analysis of items after they have been determined appropriate as operational test items.

Our most recent job analysis survey, completed in 2016, included task lists that the respondents were asked to rate according to the frequency in which nurse assistants perform the tasks in a nursing home setting. The validity of the skills currently included in our clinical skills exam was supported by the survey results, which also continue to be consistent with the federal requirements for the performance-based component of the Nurse assistant program.

While our test specifications are developed based on our national job analysis study, the item writing and the development of our clinical skills evaluation criteria occurred during our regular National Examination Council (NEC) meetings. These activities have resulted in promoting the reliability and validity of the nurse assistant examination content.

Prometric conducts pilot tests (or pre-testing) of newly written items with at least 200 persons who are representative of the overall candidate population. We conduct a preliminary item analysis of all new items to determine their viability prior to using them as scored items on an exam.

Our psychometric staff monitor item-level statistics, exam-level statistics, and overall exam performance. We utilize a variety of statistical tools and measures to monitor exams and exam items. Examples of statistics we monitor include item difficulty (p-value), point biserial correlations, and reliability coefficients. Questionable items and exams are flagged, reviewed by subject matter experts as necessary, and replaced or modified as appropriate. Questionable items also are presented during the statistical review portion of the examination review workshop.

E. Passing Grade

E. Outline how the passing grade for exam is determined and how the State might adjust the passing grade;

The methodology for determining the passing grade (cut scores) for each test and each test form has resulted in a *Standard Setting Report* that was most recently completed in 2016 for the written exam. The standard setting process we used for the written exam used a Modified Angoff approach with a Beuk Relative-Absolute Compromise method.

Standard setting for the written examinations was most recently completed in November 2016 for the launch of new examinations in 2017. The panel of 10 SMEs included professionals involved in training and evaluation of long-term care CNAs, with regional representation from throughout the country. The panel developed a standard of minimal competence identifying what a minimally competent CNA would know and what they would find challenging. The group considered levels of knowledge, using concepts of basic knowledge, fundamental understanding, or working knowledge. The test specifications were presented to the panel as a starting point for the discussion and articulation of the attributes of minimal competence. Discussions resulted in a final standard of minimal knowledge, skills and abilities composed of specific statements about what the candidate needed to know to be considered minimally competent for certification.

The difficulty standards for the clinical skills exam are established for each specific skill. The scoring of a particular skill does not change based on the form upon which it appears or the combination of skills included on that form because the standard is specific to that skill. The standards for each skill vary, meaning the percentage of points to pass each skill is different. For example, in one skill, the standard may require only 68% of the points to pass the skill and another skill may require 80% of the points to pass.

Upon award, Prometric will review the standard setting reports with the State, which makes the final decision on the standards to be applied. The State could elect to accept the panel's recommendations or choose from several psychometrically valid options based on Vermont's unique needs.

F. Billing for the Competency Evaluation

F. Describe how costs for the competency test/evaluation will be billed to the State

Prometric will accept payment from both DAIL and from candidates. DAIL will be invoiced monthly only for those candidates who are employed or have an offer of employment from a CMS Skilled Nursing facility. Candidates without such an offer will be responsible for their own testing costs.

G. Test Day from the Candidate's Perspective

G. Describe the day of testing from the candidate's perspective.

Prometric's standard practice is to administer the written exam/oral exam and clinical skills exam on a single day. In general, the written/oral exams are administered first to support efficiency throughout the test day, but there is no order dependency to the exams. If a single-day administration is not possible or desirable for some reason, Prometric can administer the clinical skills exam and written exam/oral exam on different days.

NAEs conduct candidate check-in procedures that include checking candidates' government-issued identification (with photo and signature), as well as requiring candidates to empty their pockets and store any personal belongings in the testing room.

The testing system for the written exam is designed for candidates with little or no computer experience and provides an optional online tutorial explaining basic use and navigation. Candidates will take the written exam at a computer station equipped with a monitor and mouse; a keyboard is not required. Candidates can navigate through the examination at their own pace and may end a test at any time. Exams are automatically submitted for scoring at 90 minutes if the candidate has not previously indicated that the test is complete.

The NAE administers a randomly assigned clinical skills exam form that includes five (5) unique skills to each candidate. All forms will include Handwashing, Indirect Care, and three (3) additional psychomotor skills. In our current skills testing procedures, the specific combination of three skills plus the two integrated skills is used to determine the length of the exam, ranging from 31 to 40 minutes. The variable length of the skills exam provides a fairer testing experience for candidates.

Candidates are not required to provide an actor to serve as a resident for the clinical skills exam. Prometric schedules testing appointments so other candidates may serve in this role. We have examined data on these "pairs of candidates" to ensure that a candidate's performance on the clinical skills test is neither advantaged nor disadvantaged by serving as an actor. Additionally, this model provides an additional level of security as the administration process is not revealed to non-candidates.

Scoring for both the written/oral and clinical skills exam is performed by the internet based testing application immediately upon completion of the exams. Written/oral exams are scored when the candidate elects to end the test or time expires, whichever comes first. Clinical skills exams are administered by trained NAEs who transfer ratings into the internet-based testing system for scoring.

Prometric's internet-based testing system enables on-site scoring of both the written and the clinical skills exams so **candidates receive their official results immediately** upon completion of their exams. This process ensures reliable, accurate and automated scoring. In addition, scoring files for internet testing are received at Prometric and are downloaded overnight into our candidate management database, which re-scores 100 percent of the tests for quality assurance.

3. PERFORMANCE MEASURES

3. Performance Measures. Bidders must explain in their proposals how they propose to meet each of the following performance measures:

A. Evaluator Objectivity and Interrater Reliability

A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, including examples of evaluator training and ongoing performance management.

Evaluator Training and Ongoing Performance Management

Prometric **employs and trains** NAEs who administer the CEP. Hiring NAEs as our own employees, rather than contractors, benefits DAIL by providing enhanced test security and consistency in the administration of the examination. Prometric's NAE training team has created an intentional blend of guided computer-based training, one-on-one training, and applied knowledge activities broken down into eLearning courses. We use a Learning Management System (LMS) that supports trackable training and not only helps management hold new hires accountable, but also supports ongoing "recalibration" training for NAEs in the field.

Once new NAEs have completed their online training and assessment, our Senior NAEs are responsible for training. Senior NAEs conduct a series of webinars, after which NAEs have the opportunity to shadow with the Senior NAE who is administering testing. The NAE-in-training and the Senior NAE rate candidates' performances simultaneously. Then, at the conclusion of the test, ratings are reviewed and discussed to ensure consistency and accuracy in recording the candidate's performance. At the end of the testing day, the Senior NAE determines whether the new NAE is prepared to assume the role of administering testing independently or whether she/he requires additional training opportunities.

Every NAE is reviewed at least annually, although additional reviews are conducted upon the request of the operations manager, such as based on complaint investigations or a compliance issue, or as part of remediation plans. The Senior NAE, who functions as a resource to assigned NAEs, may also determine that a review or site visit is indicated in order to respond to an NAE's specific needs. Senior NAEs document and submit reviews online, which are reviewed by the operations manager, who then contacts the Senior NAE and/or NAE to discuss recommendations for remediation, as indicated.

Evaluator Objectivity and Interrater Reliability

Because there are challenges inherent in performance-based testing related to determining inter-rater reliability, Prometric has established proven processes in place to promote inter-rater reliability among NAEs who administer the clinical skills exam and rate candidate performances. Our senior NAEs are responsible for conducting routine reviews of NAEs and receive additional training focused on this responsibility.

When conducting routine reviews, the intent is to promote reliability when rating candidate performances. As a result, the senior NAE and NAE rate candidates together. Should inconsistencies occur in the ratings, the performance is discussed for consensus and the senior NAE intervenes with immediate training to address issues related to understanding the evaluation criteria (checkpoints). If additional training or observations of testing is recommended for NAEs based on these reviews, the Senior NAE escalates it to the Prometric team.

We regularly review questions received from the field, appeals, and statistical data (such as pass rates by school) to identify NAE anomalies. For example, the NAE's mean pass rate is compared to the mean pass rate for all other proctors who tested candidates from the same program type. If the mean pass rate for other NAEs is more than three standard errors away from the NAE's mean in either direction, it indicates that the NAE has a

higher or lower pass rate than would be accounted for by random fluctuation and the NAE is flagged for further review.

While best practice tells us that NAEs should not test any candidates with whom they have a pre-existing relationship to avoid the appearance of a conflict of interest, we understand that the nurse assistant community in Vermont is small. Prometric will work with DAIL to create specific guidelines that allow candidates to test in a timely manner without compromising the testing process.

B. Skill Performance Steps

B. Skill performance steps must be clear, objective, and evidence-based.

Prometric will administer clinical skills exam forms that include five (5) tasks randomly selected from a pool of tasks generally performed by nurse assistants. All forms will include Handwashing, Indirect Care, and three (3) additional psychomotor skills. The skills demonstration will be performed on a live person unless a mannequin is used to ensure standardization or due to the nature of the skill being demonstrated.

Each skill/task on the examination is assessed based on a series of objective checkpoints that are used to evaluate the candidate's performance. These checkpoints are not procedures for candidates to follow but rather behaviors in the skill demonstration that must be observed by the NAE. Another distinction of our testing model is that each checkpoint is weighted according to the criticality of the checkpoint to the safe performance of the skill/task.

The examinations undergo periodic review and are updated based on the recommendations of the SMEs, who are registered nurses experienced in long-term care supervising and/or training nurse assistants.

Federal regulations specify that candidates do not need to be tested on every skill, but that the skills demonstration component of the competency evaluation can consist of randomly selected skills. Prometric's manual skills examination forms are currently constructed with each form testing five skills. All forms include handwashing and indirect care. An important element of this requirement is that candidates cannot (and do not) know in advance which skills they will be asked to perform for their examinations. We will address any new or different requirements that may be imposed as these regulations are amended from time to time. In our current skills testing procedures, the specific combination of three skills plus the two integrated skills is used to determine the length of the exam, ranging from 31 to 40 minutes.

C. Developing Test Questions

C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions.

Prometric has developed test questions consistent with the professional standards and educational principles pertaining to test development and construction as the basis for new questions, skills and revisions. Each question in the item bank is referenced to at least two publicly available nurse assistant textbooks. Prometric recently conducted an update of our Nurse Aide Job Analysis in 2016, which is the basis of the content for our exams. As part of our research for each job analysis we undertake, we also review other documentation, including job analyses completed by organizations such as the National Council of State Boards of Nursing (NCSBN).

D. Ongoing Test Site Monitoring

D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality.

Prometric will ensure that the quality of the test site environment is maintained for each testing event. DAIL and its candidates expect their testing experience to be secure, consistent, and controlled, regardless of location. We maintain strict requirements to which facilities must adhere to administer a nurse assistant examination program. We focus our nurse assistant testing site partners on providing the same high-quality customer service experience to each and every candidate.

Any facility used for testing must meet specific space, internet, equipment and supply requirements to ensure standardization in the examination administration. As part of Prometric's testing procedures, we require that NAEs or the proctor survey the testing area at test-site locations to ensure equipment and supplies are available before test administrations begin.

E. Scheduling the Exam

E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program.

Upon receiving and processing a complete application (all required information and payments provided), the candidate will be scheduled into the next available appointment that is no more than 30 calendar days from the completed application being received, at his/her preferred testing location. Prometric will match the current number of regional testing locations for Vermont nurse assistant candidates and will discuss with DAIL, implementing additional sites should capacity increase. Any site that meets our requirements can also become an in-facility testing location.

F. The Candidate Testing Application

F. The candidate testing application is easy to read, understand, and complete.

The nurse assistant examination application has been developed to be easy to read, understand, and complete. When Prometric processes an application for testing, our system business rules help to ensure that all required information has been provided and all prerequisites for testing have been met. If there is a deficiency of any kind, our system will email the candidate (or sponsor if the sponsor's email has been provided) a deficiency notice detailing any issues that need to be resolved prior to scheduling the candidate.

G. Subcontractors

G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period.

Prometric will not utilize any subcontractors to provide nurse assistant testing evaluation services for the Vermont DAIL. All services will be provided by Prometric employees.

H. Technical Support During Testing Events

H. Customer support is immediately available during all testing events for technical assistance.

Prometric's global test center support team is available 24 hours per day, 7 days a week, to provide technical support. We have also recently expanded our operational support to include extended evening and weekend hours to ensure that candidates testing outside of normal 9:00AM – 5:00PM M-F hours are supported.

I. Customer Support

I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry.

Customer support, as described in *1. Administration, Section O,* will be available within 48 hours of inquiry.

PRICE QUOTATION

The proposal should specify costs per test of each of the following:
(a) Written Test
(b) Clinical Test
(c) Oral Test
(d) No Show

Prometric's proposed pricing reflects the services and requirements described in this RFP and is based on a cost analysis that supports the reasonableness of the prices. The prices are for the period of the initial award and are applicable for the life of the contract resulting from this RFP (initial contract and any extensions if extension options are exercised).

Testing fees for written, oral, and clinical skills exams below are the same for first-time testers and re-testers. Candidates who fail only one portion are only required to retake the failed portion.

Candidates desiring to reschedule their examination appointment must contact Prometric at least five business days before their scheduled appointment. Candidates forfeit their full testing fee for failing to:

+ reschedule at least five business days before exam;
+ arrive on time for testing appointment;
+ appear for scheduled exam; or
+ provide valid identification for admission to exam.

The no show fee may be waived in the case of hardships such as documented illness or emergency.

COST PROPOSAL	
Item	**Cost**
Written Test	$35.00
Clinical Test	$95.00
Oral Test	$35.00
No Show	Full price of exam(s)

APPENDICES

Appendix A. Similar Projects and Prior Work Products

Appendix B. Curricula Vitae

Appendix C. Letters of Reference

Appendix D. Detailed Implementation Plan

Appendix E. Detailed Linkage of Section 432.154 of the Code of Federal Regulations

Appendix F. Sample Candidate Information Bulletin

Appendix G. Sample Reports for DAIL

Appendix H. Clinical Skills Examination Checklist

CONFIDENTIAL

Appendix I. Sample Examinations (Separately Bound)

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APPENDIX A. SIMILAR PROJECTS AND PRIOR WORK PRODUCTS

SOLE-SOURCE NURSE AIDE STATE CONTRACTS
Arkansas Office of Long-Term Care
Victoria Ollison, NATP Review Nurse Arkansas Office of Long Term Care, Division of Medical Services Arkansas Department of Human Services Mail Slot 400 P.O. Box 8050 Little Rock AR 72203 501-320-6276 Victoria.ollison@dph.arkansas.gov
Project Description: The Arkansas Office of Long-Term Care contracts with Prometric for test administration and test development services for both the clinical skills examination (internet-based testing) and the written (knowledge) examination ——(a paper-and-pencil or internet-based examination). Registry support is provided with Prometric handling all aspects of CNA renewals.
Number of Years: 1992 - June 2018. Multiple extension options available.
Connecticut Department of Public Health
Karen G. Wilson, HPA, Nurse Aide Registry 410 Capital Avenue, MS#12MQA P.O. Box 340308 Hartford, CT 06134 860.509.7613 Karen.wilson@ct.gov
Project Description: The Connecticut Department of Public Health contracts with Prometric for test development and internet-based test administration services for both the clinical skills examination and the written (knowledge) examination. Registry support is provided by Prometric for reciprocity application processing; renewals are processed by DPH staff.
Number of Years: April 2007 - December 2020
Delaware Department of Health and Social Services
Barbara M. Webb Delaware Department of Health and Social Services Division of Long-Term Care Residents Protection 3 Mill Rd., Suite 308 Wilmington, DE19806 302-577-6661 Barbara.webb@state.de.us
Project Description: The Delaware Department of Health and Social Services contracts with Prometric for test administration and test development services for both the clinical skills examination and the written (knowledge) examination, ——an internet-based testing examination. Registry support is provided with Department staff, handling most aspects of CNA renewals.
Number of Years: September 2010 - December 2020

SOLE-SOURCE NURSE AIDE STATE CONTRACTS
Florida Department of Health
Kim Clark Florida Department of Health, Florida Board of Nursing Medical Quality Assurance Division 4052 Bald Cypress Way Tallahassee, FL 32399-3252 850-245-4444, ext. 3973 kimberly.clark@flhealth.gov
Project Description: The Florida Department of Health awarded the contract for certified nurse aide testing services to Prometric for complete test development for the written and practical certified nurse aide examinations; information bulletin development and printing, application processing and test administration services.
Number of Years: 2002 - June 2021
Hawaii Department of Commerce and Consumer Affairs
Lee Ann Teshima, Executive Officer, HI State Board of Nursing Hawaii Department of Commerce and Consumer Affairs Professional and Vocational Licensing Division P.O. Box 3469 Honolulu, HI 96801 808-586-2695 lteshima@dcca.hawaii.gov
Project Description: The Hawaii Department of Commerce and Consumer Affairs awarded the contract for certified nurse aide testing services to Prometric for complete test development for the written and clinical skills certified nurse aide examinations, information bulletin development and printing, application processing and test administration services. Prometric also is under contract to provide online registry management services, including processing renewal and reciprocity applications.
Number of Years: August 2012 - July 2021
Idaho Department of Health and Welfare
Debby Ransom Chief, Bureau of Facility Standards Idaho Department of Health and Welfare Bureau of Facility Standards PO Box 83720 Boise, ID 83720-0036 208-334-6626 option 5 ransomd@dhw.idaho.gov
Project Description: The Idaho Department of Health and Welfare contracts with Prometric for test administration and test development services for the written (knowledge) examination, an internet-based testing examination. Registry support is provided with IDHW, handling most aspects of CNA renewals.
Number of Years: April 2010 - March 2022

SOLE-SOURCE NURSE AIDE STATE CONTRACTS
Louisiana Department of Health
Terry Cooper Louisiana Department of Health Health Standards Section 628 North 4th Street Baton Rouge, LA 70802 225-342-5780 Terry.cooper@la.gov
Project Description: The Louisiana Department of Health awarded a sole source contract for certified nurse aide testing services to Prometric for test development for the written and practical certified nurse assistant examinations; information bulletin development; application processing; and test administration services.
Number of Years: March 2018 - February 2021; extensions available
Michigan Department of Licensing and Regulation
Larry Horvath State of Michigan Licensing and Regulatory Affairs LARA-Procurement 611 W. Ottawa Street 1st Floor Lansing, MI 48909 517-241-4160 horvathl@michigan.gov
Project Description: The Michigan Department of Licensing and Regulation contracts with Prometric for test administration and test development services for both the clinical skills examination and the written (knowledge) examination – both delivered via the internet. Prometric manages the nurse aide registry for the state, sending out renewal notices, processing approximately 1,500 renewals per month, and providing verification of candidates' Registry status is via a web interface.
Number of Years: 1989 - December 2019; extension options available.
New Mexico Human Services Department
Cynthia Brown, Quality Bureau New Mexico Human Services Department Medical Assistance Division 2009 S. Pacheco Santa Fe, NM87504 505-827-3166 cynthiay.brown@state.nm.us
Project Description: The New Mexico Human Services Department awarded the contract for certified nurse aide testing services to Prometric for complete test development for the written and practical certified nurse aide examinations; information bulletin development; and printing, application processing and test administration services. All testing is delivered via internet-based testing. Testing began in February 2005, seven weeks after notification of the award of this contract. Prometric also is under contract to provide online registry management services.
Number of Years: 2004 - June 2020

SOLE-SOURCE NURSE AIDE STATE CONTRACTS
New York State Department of Health
Shelly Glock New York State Department of Health Bureau of Professional Credentialing Office of Continuing Care 875 Central Avenue Albany, NY 12206 518-408-1267 shelly.glock@health.ny.gov
Project Description: The New York State Department of Health awarded the contract for certified nurse aide testing services to Prometric for complete test development for the written and practical certified nurse assistant examinations; information bulletin development and printing; application processing; and test administration services. We also provide the nurse aide registry for New York using our online registry program. Associated services include processing renewal and reciprocity applications.
Number of Years: 2003 - March 2023
Wyoming State Board of Nursing
Jennifer Burns Wyoming State Board of Nursing 130 Hobbs Ave Suite B Cheyenne, WY 82002 307-777-6127 Jennifer.Burns1@wyo.gov
Project Description: The Wyoming State Board of Nursing awarded a contract for certified nurse aide testing services to Prometric for test development for the written and practical certified nurse assistant examinations; information bulletin development; application processing; and test administration services.
Number of Years: February 2018 - January 2021; extensions available.

APPENDIX B. CURRICULA VITAE

[redacted]

EXPERIENCE

DIRECTOR, GLOBAL ACCOUNT MANAGEMENT, PROMETRIC — 2004 - PRESENT

- Responsible for Prometric's 13 nurse aide testing and certification programs, as well as several other licensure/certification programs.
- Fosters the expansion of healthcare testing programs through the acquisition of new clients, the retention of existing clients, and the growth of existing testing programs through the addition of value-add services.
- Supervises account management staff for health care clients, supporting over 20 different state agencies and regulatory boards in the administration of licensure and certification programs
- Provides direct access for clients, ensuring a speedy resolution of issues and open communication regarding overall program performance through formal and information program reviews
- Coordinates new clients program implantation activities, including engaging other departments within the company (technology, test development, program management, call center operations, etc.) to meet or exceed all program requirements.

DIRECTOR, BUSINESS DEVELOPMENT, ORBITAL SCIENCES CORPORATION — 2000 - 2003

- Served as director, business development with a staff of three salespersons, two marketing communications team members, three proposal managers and four proposal engineers
- Successfully won new business in excess of $200M in a four year period, submitting proposals to government entities as both a prime contractor and as a subcontractor to leading technology partners
- Improved overall corporate reputation and name recognition in the public transit industry through communication outreach programs

MANAGER, BUSINESS DEVELOPMENT, RAYTHEON — 1995 - 1999

- Developed client relationships to foster director lines of communication during procurement processes and program implementation
- Supervised a team of technical writers and content specialists in the business development organization for a $50M commercial division focused on technology and services for public transportation
- Determined high-level system solutions in conjunction with technology and program management personnel
- Negotiated subcontract select relationships with project partners, including leading technology vendors (i.e. Motorola) and small/disadvantaged businesses with specific niche skills

SENIOR ENGINEER, WESTINGHOUSE ELECTRIC CORPORATION — 1986 - 1994

- Facilitated proposal writing and solution development for computer-aided dispatch and automatic vehicle locations systems for government clients
- Provided program management support for voice and data communication systems including GPS-based automatic vehicle location (AVL) systems for public transit systems
- Provided design and development of electrical interconnection systems for complex ground-based defensive radar systems (USAF TPS-63 and TPS-70), air traffic control radar systems (ASR-9 and ARSR-4), and airborne offensive (USAF APG-68) and defensive radar system upgrades (AWACS)
- Created system documentation for modification kits for field-deployed equipment
- Performed systems and electrical engineering tasks of increasing responsibility

EDUCATION

BACHELOR'S DEGREE – DUKE UNIVERSITY, ELECTRICAL ENGINEERING
BACHELOR'S DEGREE – DUKE UNIVERSITY, BIOMEDICAL ENGINEERING

[redacted]

EXPERIENCE

GLOBAL ACCOUNT MANAGER, PROMETRIC — 2017 - PRESENT

- Provides daily operational support to portfolio to meet objectives, manage client deliverables, and maintain quality across program life cycle by coordinating issue resolution, action plans and solutions and collaborating with key departmental personnel
- Communicates effectively with the client, project team and management team to include program review presentations and status reports
- Manages contract renewals, amendments, and proposal responses within market segments
- Maintains and grow client relationships through regular communication and high-quality of service
- Identifies opportunities to improve service quality across cross-functional teams
- Tracks program progress and communicate to all levels of management

PROJECT MANAGER II IN COURSE PRODUCT DEVELOPMENT, CONNECTIONS EDUCATION — 2016 - 2017

- Managed multiple course development and modification projects for this high-quality, accredited online K-12 education provider, overseeing all aspects of the project life cycle
- Managed the scope, schedule, budget, risks, mitigation strategies, and deliverables for each project
- Provided day-to-day project direction and project tracking for stakeholders
- Lead all project meetings to mitigate risks and keep project schedule on track
- Communicated project status, risks, and potential roadblocks to project stakeholders and Management

PROGRAM DIRECTOR, INTERNATIONAL BOOK BANK — 2012 - 2016

- Created and implemented organizations $450,000 annual budget yielding a reduction in expenses by 14% in first year as Director
- Identified, developed and managed relationships with both small and large funding agencies including World Vision International, FHI360, AIR and others
- Vetted and worked with in-country partners to identify opportunities for strategic advancement and efficiency
- Managed up to 15 ongoing donation projects ranging from 3,000 to 100,000 books from conception to project close
- Managed $21 million gifts-in-kind (GIK) program including solicitation of new in-kind donations
- Planned and executed closure of IBB's 45,000 sq. ft. warehouse on time and under budget
- Hired and supervised all office personnel and interns
- Advised and formally reported to the Board of Directors on IBB's operations, activities and ongoing projects
- Business and technical reporting for Board meetings, annual reports, donor solicitation and feedback
- Developed and implemented feedback mechanism to ensure quality feedback from partners
- Served as spokesperson for IBB to various media outlets, including print, radio and television
- Managed organization's web presence including website content, social media and e-mail distributions

OFFICE ADMINISTRATOR, INTERNATIONAL BOOK BANK **2012**

+ Worked extensively in Salesforce, customized cloud-based supply chain and customer relationship management systems, including tracking outgoing donations and reporting back to GIK donors
+ Coordinated logistics for all domestic and international donations to and from IBB
+ Managed IBB's community volunteer program
+ Handled all accounting (QuickBooks Online) including accounts receivable, accounts payable as well as banking and payroll

MASTERS OF EDUCATION TEACHING INTERN, HOWARD HIGH SCHOOL **2011**

+ Taught English as a second language to high school students with varying levels of English proficiency

LEGAL SECRETARY, WILSON ELSER, MOSKOWITZ, EDELMAN & DICKER, LLP **2009 - 2011**

+ Provided legal support for four in-house attorneys which included drafting correspondence and legal filings in state and federal courts (e.g., complaints, discovery, motions)
+ Simultaneously filled the role of office manager and sole support staff for firm's annex office

EDUCATION

MASTER'S DEGREE – JOHNS HOPKINS UNIVERSITY, 2011

TEACHING ENGLISH TO SPEAKERS OF OTHER LANGUAGES (TESOL)

BACHELOR'S DEGREE – MOUNT ST. MARY'S UNIVERSITY, 2009, PHILOSOPHY, POLITICAL SCIENCE

PROFESSIONAL AFFILIATIONS

INTERNATIONAL BOOK BANK, INC., BOARD MEMBER **2016 - PRESENT**

+ Proudly serves on the Board of this Baltimore-based non-profit organization, working on strategic direction as well as budgeting, financial reporting, and IRS compliance

[redacted]

EXPERIENCE

VICE PRESIDENT, BUSINESS DEVELOPMENT, PROMETRIC **1992 - PRESENT**

+ Responsible for working with client programs within Prometric's diverse market segments.
+ Develops strategic sales plans for the market segments.
+ Leverages changes in the testing industry to enhance services provided to clients.

ASSISTANT DEAN, COLLEGE OF NURSING, UNIVERSITY OF DELAWARE **1980 - 1992**

+ Taught graduate and undergraduate level courses.
+ Advised students and coordinated course selections and course offerings.
+ Recruited students to the University.

NURSE FACULTY FELLOW, SCHOOL OF NURSING, UNIVERSITY OF BALTIMORE **1979 - 1980**

+ Taught undergraduate courses.
+ Developed competencies and skills as adult nurse practitioner.

ASSISTANT PROFESSOR, COLLEGE OF NURSING, UNIVERSITY OF SOUTH CAROLINA **1975 - 1979**

+ Taught undergraduate students.

EDUCATION

DOCTORATE DEGREE – UNIVERSITY OF DELAWARE, EDUCATIONAL MEASUREMENT & STATISTICS
MASTER'S DEGREE – UNIVERSITY OF DELAWARE, EDUCATIONAL MEASUREMENT & STATISTICS
MASTER'S DEGREE – MEDICAL COLLEGE OF GEORGIA, MASTER OF SCIENCE IN NURSING
BACHELOR'S DEGREE – MEDICAL COLLEGE OF GEORGIA, BACHELOR OF SCIENCE IN NURSING

PROFESSIONAL AFFILIATIONS

CLEAR – COUNCIL ON LICENSURE, ENFORCEMENT AND REGULATION

+ Former President, Board of Directors

ATP – ASSOCIATION OF TEST PUBLISHERS

+ Former Board of Directors

ICE – INSTITUTE FOR CREDENTIALING EXCELLENCE

+ Former Board of Directors
+ Commissioner, National Commission for Certifying Agencies

[redacted]

EXPERIENCE

TEST DEVELOPER, PROMETRIC INC. — 2016 - PRESENT

- Collaboration both in person and virtually, with other members of the Test Development team and cross functionally with publishing, account management and business development teams.
- Scheduling of work and gathering requirements to ensure reliable and valid tests are produced for assessment of all candidates.
- Facilitation of in-person and virtual meetings with client representatives and Subject Matter Experts.
- Preparation of materials for workshop participation and preparation of exams for test production.

POST GRADUATE ANALYST FOR THE APPLIED PSYCHOLOGY DEPARTMENT, UNIVERSITY OF BALTIMORE — 2012 - 2015

- Supplemental analysis of survey data included in the U.S. Merit Systems Protection Board report, "Telework: Weighing the Information, Determining an Appropriate Approach".

GRADUATE WORK, UNIVERSITY OF BALTIMORE — 2012 - 2015

- Authored "Work-Life Survey Technical Report" (developing survey questions, cleaning data set, and analyzing/aggregating data, final presentation of results).
- Developed copy and designed layout for the University's Work-Life Integration Webpage.
- Composed book proposal entitled "Leadership in the New Millennium: Work-Life Integration."

MARYLAND TRANSIT AUTHORITY OFFICE OF THE OPM INTERNSHIP, UNIVERSITY OF BALTIMORE — 2012 - 2015

- Initiated discussion for the utilization of employee survey feedback in planning and implementing positive organizational change.
- Facilitation of meetings for senior managers to identify focus areas and develop action plans.

CORPORATE TRAVEL ASSOCIATE, W.L. GORE AND ASSOCIATES — 2006 - 2011

- Arranged domestic and international reservations with air, hotel, car, and ground transportation vendors for associates and customers.
- Extensive interaction with domestic and international clientele.
- Interaction with visiting customers and fielding calls received from the Gore Information Center (GIC).
- Facilitated team culture survey breakout sessions.

CONSUMER AFFAIRS MANAGER, USAIRWAYS — 2005 - 2006

- Liaison between Philadelphia Station Directors and Washington DC company executives to coordinate VIP client services.
- Assisted high profile customers in resolving consumer issues during the merger of US Airways and America West.
- Extensive International work with United/US Airways Star Alliance.

RESEARCH ANALYST, USAIRWAYS — 1994 - 2005

- Compilation of data on staffing, training, and scheduling for Fleet Service Agents, providing monthly reports to management.

- Interfaced with co-workers, various levels of staff, and other airlines for analysis and research of identified problems.
- Developed monitoring system for PAWOB (passengers without bags) statistics via Excel database, therefore meeting company-wide goals by improving baggage service operations and daily operations of personnel and planning for US Airways.

CUSTOMER SERVICE REPRESENTATIVE, USAIRWAYS **1988 - 1994**

- Responsible for ticketing/re-booking passengers, boarding flights, assisting passengers with special needs & resolving customer concerns.
- Diffused situations occurring in daily airline operations while acting as a source of information and mentor for peers and new employees.

EDUCATION

BACHELOR'S DEGREE — ST. FRANCIS COLLEGE, BUSINESS MANAGEMENT/ PSYCHOLOGY MINOR

MASTER'S DEGREE — UNIVERSITY OF BALTIMORE, INDUSTRIAL MANAGEMENT/ORGANIZATIONAL PSYCHOLOGY

PROFESSIONAL AFFILIATIONS

SOCIETY FOR INDUSTRIAL ORGANIZATIONAL PSYCHOLOGY (SIOP)

PERSONNEL TESTING COUNCIL (PTC)

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN (AAUW)

EXPERIENCE

TEAM LEAD, PSYCHOMETRIC TEAM, PROMETRIC **2012 – PRESENT**

+ Conducting and coordinating various psychometric analyses

PSYCHOMETRICIAN, PROMETRIC **2009 – 2012**

+ Conducting various psychometric analyses including item analysis, form analysis, equating, scaling, subscore diagnostics analysis and scoring, on health care and association related testing programs

PSYCHOMETRIC INTERN, CENTER FOR APPLIED LINGUISTICS **2007 - 2009**

+ Conducted DIF, reliability, equating and classification analyses on the 2007 and 2008 WIDA ACCESS assessment data and presented results in the annual technical report for WIDA consortium

PSYCHOMETRIC INTERN, MEASUREMENT RESEARCH DEPARTMENT, ACT **2007**

+ Performed a Monte Carlo simulation study comparing different polytomous IRT equating procedures which involves using different models, scaling methods, and equating approaches

GRADUATE RESEARCH ASSISTANT, UNIVERSITY OF MARYLAND **2005 - 2007**

+ Participated in Dr. Amy Hendrickson's study on the effect of using different base years in conducting vertical scaling with the Iowa Test of Basic Skills data
+ Conducted research with Dr. C. Mitchell Dayton on the current state of instruction on experimental design, particularly in the area of analyses of variances and multiple comparisons; surveyed the top 50 Psychology programs in the States and summarized the results

INSTITUTIONAL RESEARCHER, HOLY FAMILY UNIVERSITY **2001 - 2003**

+ Collected, analyzed and summarized institutional data
+ Provided institutional data to federal and state government agencies, accrediting organizations, associations and publications such as IPEDS program of NCES and US News and World Report
+ Created Institutional Research Office Web site to disseminate and communicate information
+ Compiled annual fact books for executive planning, management, and decision-making

EDUCATION

DOCTORATE DEGREE — UNIVERSITY OF MARYLAND, DEPARTMENT OF MEASUREMENT, STATISTICS AND EVALUATION (EDMS)

MASTER'S DEGREE — UNIVERSITY OF DELAWARE, PUBLIC ADMINISTRATION

BACHELOR'S DEGREE — BEIJING FOREIGN STUDIES UNIVERSITY, ENGLISH

PROFESSIONAL AFFILIATIONS

NCME — NATIONAL COUNCIL ON MEASUREMENT IN EDUCATION

[redacted]

EXPERIENCE

VICE PRESIDENT, GLOBAL CANDIDATE SERVICES, PROMETRIC — 2011 – PRESENT

- Heads worldwide candidate contact center and site support help desk operations.
- Sets operational policies for all contact centers and oversee help desk functions.

DIRECTOR, GLOBAL TEST CENTER SUPPORT, PROMETRIC — 2011

- Directed and led team of global managers who operate regional help desks and manage standards, policies and procedures in supporting Prometric's global test center network.
- Responsible for the level and quality of service provided to Prometric channel partners.
- Responsible for defining standards, policies and procedures for problem tracking and resolution.
- Led the operation of the Global Help Desk by establishing a business driven mission ("Save the Candidate") and a quality of service program.
- Lead the implementation of a channel partner customer service survey tool to evaluate the level and quality of service of help desk operations.
- Led the formal adoption of a proactive support strategy by detecting and correcting issues prior to candidate impact.
- Responsible for departmental budgets and capital expenditures.

DIRECTOR, TECHNOLOGY QUALITY MANAGEMENT, PROMETRIC — 2003 – 2011

- Directed team of test managers and business analyst who maintained and managed quality control and assurance programs
- Was responsible for driving improvements and standards in Prometric's proprietary software quality and product stability
- Led Prometric's formal adoption and implementation of a Software Development Life Cycle (SLDC)
- Led Prometric's adoption of standard templates for software development artifacts such as requirements, release notes, test cases and use cases.
- Led Prometric's creation of an automated load and performance testing program as well as subsequent load and performance testing standards and methodologies
- Was responsible for departmental budgets and capital expenditures

MANAGER, PRODUCTION SYSTEM ENGINEERING, PROMETRIC — 2002 – 2003

- Managed team of system engineers to provide 24/7/365 support for Prometric's production systems
- Led the creation of service level agreements (SLAs) and objectives between systems engineering and internal customers
- Led the development of an engineering level product knowledgebase data store for new application knowledge transfer
- Oversaw system, security and software patch maintenance of all production and QC systems
- Was responsible for defining and standardizing system build instructions and release notes
- Managed deployments to all backed production systems
- Maintained consistencies between production and quality control environments

+ Was responsible for departmental budgets

TEAM LEADER, LAB SERVICES, PROMETRIC **2001 – 2002**

+ Led teams in supporting Prometric's internal development and test lab operations
+ Was responsible for team compliance with build instructions and established protocols
+ Served as production support liaison between Prometric's production operations, software development, software testing and systems integration organizations

MANAGING IT CONSULTANT, CARNEGIE MORGAN INFORMATION TECHNOLOGY **2000 – 2001**

+ Managed team of IT consultants and department budget
+ Managed relationships with client technical function heads
+ Was responsible for pre- and post-sales technical support including providing direct customer escalation support

EDUCATION

UNIVERSITY OF MARYLAND UNIVERSITY COLLEGE, MAJORED IN INFORMATION MANAGEMENT
WINTHROP UNIVERSITY, MAJORED IN BUSINESS ADMINISTRATION
CENTRAL PIEDMONT COMMUNITY COLLEGE, MAJORED IN BUSINESS ADMINISTRATION
CATONSVILLE COMMUNITY COLLEGE, MAJORED IN BUSINESS ADMINISTRATION

SPECIALIZED TRAINING

CONTINUING EDUCATION IN INFORMATION TECHNOLOGY

[redacted]

EXPERIENCE

VICE PRESIDENT, TECHNOLOGY ENGINEERING AND OPERATIONS, PROMETRIC — 2003 - PRESENT

+ Executive technology leader for the development of Prometric's propriety software.
+ Lead the global production readiness team that monitors the production systems and responds to all system issues.
+ Responsible for the state-based and licensure systems and technology solutions that support the state based clients.
+ Responsible for the site software, IBT (PRIME) and Prometric's flagship driver (UTD).
+ Leader of the integration efforts for all third party drivers — lead the integration efforts with clients who have their own test driver.
+ Responsible for data management solutions.
+ Responsible for departmental budgets and capital expenditures.
+ Responsible for all of the scheduling systems.
+ Responsible for all of the item banking and item authoring technology systems.
+ Executive technology leader for TOEFL iBT project. This was a partnership integration effort with ETS and Prometric. The project crossed functional areas within Prometric and ETS. Currently involved in the next phase which is the rGRE project with ETS.
+ Executive technical liaison for ETS — escalation point for all technology questions, issues and projects for ETS.
+ Assisted implementing the software development life cycle (SDLC).

DIRECTOR, TECHNOLOGY, PROMETRIC — 2001 - 2003

+ Managed the driver integration effort for the CPAs (Certified Public Accountants).
+ Development leader for the site software and the UTD driver.
+ Responsible for the upgrading of the channel software from Windows 98 to XP.
+ Managed ETS legacy systems and integration with site software.
+ Managed ETS/GMAT registration integration effort.

MANAGER, TECHNOLOGY, PROMETRIC — 1997 - 2001

+ Implemented new scheduling system for international scheduling system.
+ Development manager for the registrations systems and backend data center utilities.
+ Managed testing projects for registrations system.

MANAGER, XDB SYSTEMS — 1991 - 1997

+ Managed production and distribution department.
+ Developed and maintained the quality control standards for the testing of the products.
+ Developed and implemented a version control system for the production software.
+ Managed and controlled the versioning of the products.

+ Managed and maintained all of the production systems.

OWNER/PARTNER, IMPACT, INC. **1983 - 1991**

+ Customized and installed small business systems.
+ Setup and trained customers on accounting packages and point-of-sale systems.
+ Setup and maintained small local area networks, including Novell.
+ Setup and ran a new office in Wilmington, NC.
+ Managed government maintenance contracts, maintained workforce management of technicians to various sites.
+ Consulted with A8 (minority owned business) performing crisis management for their technology teams.
+ Managed both sets of offices, including accounting, payroll and taxes.

EDUCATION

PMP CERTIFICATION —PROJECT MANAGEMENT INSTITUTE (PMI)

CONTINUING EDUCATION —INFORMATION TECHNOLOGY COURSES IN VISUAL BASIC, JAVA, C AND C++

COURSEWORK — CATONSVILLE COLLEGE, CATONSVILLE, MARYLAND, BUSINESS ADMINISTRATION

[redacted]

EXPERIENCE

DIRECTOR, OPERATIONS, PROMETRIC **2017 – PRESENT**

+ Leads a team accountable for the coordination, scheduling, and completion of on demand tests (ODT) for professions ranging from medical professionals, project managers, and risk professionals to auto mechanics.
+ Oversees cross-functional teams that manage and direct global operations for assigned tests and assessments.
+ Leads the operational transformation and efficiency improvements across Prometric's nurse aide portfolio. Manages a remote team of 300 employees (250 nurses) across the United States.
+ Serves as a key member of initiatives currently underway which include the Global Operations Team to provide empowered resources closer to the test taker, increasing the speed of service by leveraging a defined set of rules for each activity based on global best practices.

DIRECTOR, OPERATIONS, PROMETRIC **2011 – 2017**

+ Led a team accountable for the coordination, scheduling, and completion of computer based testing (CBT) in the US for professions ranging from medical professionals, project managers, and risk professionals to auto mechanics.
+ Led the operational transformation and efficiency improvements across Prometric's CBT proctors. · Managed a remote team of 7 District Managers and 700 proctors across the United States, representing $5M in annual revenue.

DIRECTOR, FINANCE, PROMETRIC **2006 – 2011**

+ Provided financial data and support for key operational areas of the business for decision making.
+ Supported budgetary and forecasting tools and guidelines for operational directors to assist in making operational and financial business decisions

DOMESTIC CONTROLLER, ACCOUNTING, PROMETRIC **2004-2006**

+ Directed the US Accounting team overseeing the revenue and payables teams.
+ Supported month-end closing procedures to ensure timely and accurate accounting for the U.S. financial portfolio.
+ Led a team of 25 employees in the U.S.

EDUCATION

MASTER'S DEGREE — LOYOLA COLLEGE, BALTIMORE, MD, BUSINESS ADMINISTRATION

BACHELOR'S DEGREE — SIENA COLLEGE, LOUDONVILLE, NY, B.B.A. ACCOUNTING

APPENDIX C. LETTERS OF REFERENCE

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

Raul Pino, M.D., M.P.H.
Commissioner

Dannel P. Malloy
Governor

Nancy Wyman
Lt. Governor

Nurse Aide Registry
Practitioner Licensing and Investigations

March 19, 2018

To Whom It May Concern:

The Connecticut Department of Public Health (the Department), Practitioner Licensing and Investigations Unit (PLIS), Connecticut Nurse Aide Registry, has contracted with Prometric since 2007 to implement nurse aide testing and registry services. Prometric is a full service vendor for Connecticut.

On behalf of the Department, Prometric:

- fully implements registry and testing services in accordance with standards prescribed by the Department pursuant to OBRA;
- collects and processes registration and examination fees from candidates;
- delivers and provides a "candidate handbook";
- provides and administers written and manual skills examinations, as well as provides accommodations for candidates requiring an oral examination, or requiring other accommodations by reason of a qualifying disability;
    - performs all services necessary to provide and administer such examinations, provides assistance to the Department in establishing the standards required to pass examinations, and confirms the reliability, validity and security of such examinations.
- issues certificates of registration of behalf of the Department;
- maintains a Registry of all registered nurse aides and provides the Department access to such registry and establishes a telephone line for use of candidates and facilities seeking verifications from the registry; and
- inputs applications and supporting documents.

There are approximately 40,000 current active nurse aides on the Connecticut Nurse Aide Registry. Prometric has adeptly created and administered to Connecticut nurse aide candidates standardized tests that are valid, reliable and fair. Since the initial contract, Prometric has administered yearly over 9000 tests to Connecticut nurse aide candidates. Candidates receive their scores at the testing site on

Phone: (860) 509-7613 • Fax: (860) 707-1983
Telecommunications Relay Service 7-1-1
410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
www.ct.gov/dph
Affirmative Action/Equal Opportunity Employer

the day of testing. Candidates are added to the registry within 48 hours of successfully passing the state test.

The Prometric team assigned to Connecticut delivers superior customer support. The client service manager and director that are assigned to Connecticut are highly accessible, efficient and prompt in replying to queries, providing information and solving issues that may arise in the course of the Department's daily activities. The Prometric management team assigned to Connecticut works closely with the Connecticut nurse aide registry.

Prometric strives to improve technologies and processes that will improve all aspects of the Connecticut nurse aide candidate's experience.

The Department, without hesitation, confidently recommends Prometric, as an expert in their field, to provide their services in other states.

Respectfully,

Karen G. Wilson,
Health Program Associate
Nurse Aide Registry
Practitioner Licensing and Investigations
Department of Public Health

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

RICK SNYDER
GOVERNOR

SHELLY EDGERTON
DIRECTOR

March 27, 2018

To Whom It May Concern:

The Michigan Department of Licensing and Regulatory Affairs (LARA) has worked with Prometric since 1989 for the provision of nurse aide competency evaluation and Registry services. LARA's current contract with Prometric is full service, as demonstrated below. The services provided are following all applicable state and federal regulations. On an annual basis, Prometric administers approximately 20,000 exams and processes nearly 20,000 certification renewal applications.

Highlights of Prometric's services in Michigan include:

- Nationally relevant nurse aide competency evaluation program development by Prometric: Prometric's in-house test development and subject matter expertise ensures that the examination content is appropriate and in alignment with the current scope of practice for nurse aides in our state, and it is important to LARA that Prometric has always included Michigan-resident subject matter experts in all aspects of the test development process.

- Dedicated nurse aide customer service team: Call center, application processing, and appointment scheduling services are provided by a team that is knowledgeable about nurse aide regulations in general and Michigan regulations in specific, helping our candidates navigate the registration/scheduling process on their way to certification.

- Access to convenient testing appointments: Candidates have the opportunity to test in over 30 regional testing locations throughout our state, providing short travel times and reduced wait times. All our candidates take their tests on the computer, receiving official score reports at the test site and quicker Registry placement, allowing them to enter the workforce without unnecessary delays.

- Partnership with a dedicated account team: Prometric's account management team works in close partnership with LARA staff, using a combination of scheduled status calls and in-person business review meetings to make sure lines of communication are open and we're in alignment. Prometric is easily accessible to LARA staff and responsive to any ad hoc inquiries or issues that arise.

Our state recently renewed our contract with Prometric through December 2019. Considering our experiences working with Prometric over the past 25+ years, I highly recommend Prometric to provide similar services in other states.

Sincerely,

Larry Horvath, Director
Bureau of Community and Health Systems

611 W. OTTAWA • P.O. BOX 30004 • LANSING, MICHIGAN 48909
www.michigan.gov/lara • 517-373-1820

DELAWARE HEALTH AND SOCIAL SERVICES

DIVISION OF
LONG TERM CARE RESIDENTS PROTECTION

March 19, 2018

Matt Snyder, Client Services Manager
Prometric
1501 S. Clinton Street
Baltimore, MD 21224

To Whom it May Concern:

The State of Delaware Department of Health and Social Services is currently in a contractual relationship with Prometric to perform competency testing for the purpose of certifying individuals who wish to work in federally certified nursing facilities. Prometric also manages our federally mandated Nurse Aide Registry. Our experience with Prometric's knowledge and expertise in this particular area has been excellent. When we make requests for data, the response has been superb.

We have had several occasions in which we request updates to our materials which reside on Prometric's website, and the requests are processed within a 24-hour period. Our interactions with the client services staff, Stacy Lawson and Matt Snyder, has been exceptional. We have found them to be knowledgeable, responsive and thorough.

If you require additional information, please feel free to contact our Chief of Licensing Robert Smith at 302.421.7448.

Sincerely,

Mary E. Peterson

Mary E. Peterson
Director

3 Mill Road, Suit 308, Wilmington, DE 19806
Telephone: (302) 577-6661 · 1-877-453-0012 · Fax: (302) 577-6672

APPENDIX D. DETAILED IMPLEMENTATION PLAN

While Prometric will develop a full-scale implementation plan upon award, we have included a description of our processes for your review. Prometric applies a program management approach to each new program implementation and to the ongoing maintenance of each program. This approach produces the desired results by focusing multi-departmental attention to every program. A team of highly experienced and skilled staff members monitor and complete the steps needed to successfully launch, continuously operate and enhance your program.

DRAFT PLANNING AND IMPLEMENTATION PLAN			
Deliverable	Timeline	Activity	Principal Person
Eligibility for Competency Evaluation	June 2018	Meet with DAIL to verify all business rules related to eligibility.	Waters/Lawson/McDonnell
	June 2018 - August 2018	Integrate Vermont-specific business rules into candidate management database system.	Gaesser
	August 2018	Create training guide including frequently asked questions and responses for Operations Team on Vermont-specific eligibility rules.	Lawson/McDonnell
	August 2018	Complete training of Operations Team.	Lee/Patterson
Test Development and Delivery	July 2018	Publish Prometric's National Nurse Aide Exams (utilizing Prometric-owned exam content used in multiple states).	Brady
	July 2018	Publish oral versions of the written exams, including recorded audio, in English (utilizing Prometric-owned content used in multiple states).	Brady
	July 2018	Publish multiple forms of the clinical skills demonstration exam (utilizing Prometric-owned content used in multiple states).	Brady
	August 2018	Ensure exams are administered by qualified RNs per federal and State requirements.	Patterson
	July 2018	Develop plan and schedule for administering exams to ensure that nursing facilities' needs are met.	Patterson
Application for Competency Evaluation and Reciprocity	June 2018	Meet with DAIL to determine timeframe for launch of application processing systems.	Lawson/McDonnell
	June 2018	Verify all business rules related to eligibility and application processing.	Lawson/McDonnell

DRAFT PLANNING AND IMPLEMENTATION PLAN			
Deliverable	Timeline	Activity	Principal Person
	July 2018	Develop application materials, including candidate information bulletin, and submit to DAIL for review and approval.	Lawson/McDonnell
	July 2018	Obtain database (electronic) of nursing facilities and training programs from DAIL.	Lawson/McDonnell
	July 2018	Load nursing facilities and training programs into candidate management database system.	Gaesser
	July 2018	Post application materials on Vermont's Prometric-hosted Nurse Aide website.	Lawson/McDonnell
	July 2018	Load candidate management database system with Test Site scheduling information and approved nurse aide evaluator/proctor contact information.	Gaesser
	June 2018	Establish timetable with DAIL for transfer of examination history database from the current vendor and determine when testing will begin.	Lawson/McDonnell
	June 2018	Determine file layout for database transfer.	Gaesser
	July 2018	Receive examination history database from DAIL and load into candidate management database system.	Gaesser
	August 2018	Begin receiving and processing and scheduling candidates for testing.	Lee
	Ongoing	Discuss any concerns over current availability of testing with DAIL.	Lawson/McDonnell
	July 2018 - Ongoing	Confirm test dates with all Test Sites as applicable.	Patterson
Regional and In-Facility Test Sites and Staffing	June 2018	Disseminate information to nursing facilities on criteria for having on-site (in-facility) testing.	Patterson
	Ongoing	Schedule in-facility testing for any nursing facility meeting the requirements.	Patterson
	June 2018	Discuss current test sites with DAIL	Lawson/McDonnell

DRAFT PLANNING AND IMPLEMENTATION PLAN			
Deliverable	Timeline	Activity	Principal Person
		and identify if any additional or replacement sites required.	
	June 2018	Contact existing testing site locations to transition services.	Patterson
	June 2018	Establish agreements with testing sites for specific dates, space, equipment and supplies required for testing.	Patterson
	June 2018 - July 2018	Recruit additional testing sites, as needed.	Patterson
	July 2018	Conduct review of prospective test site by RN/Senior Nurse Aide Evaluator (NAE) before submitting recommendation to DAIL for approval.	Patterson
	June 2018	Discuss means of contacting current NAEs to offer opportunity to continue with new vendor.	Patterson
	June 2018	Run advertisements/notices to recruit RNs meeting CMS and state requirements for (NAE) position(s).	Patterson
	July 2018	Complete interview process with RNs to identify prospective NAEs.	Patterson
	August 2018	Conduct NAE training workshops.	Patterson
	August 2018	Distribute testing materials to NAEs.	Patterson
	August 2018	Identify RN for Senior NAE position.	Patterson
	August 2018	Conduct training of Senior NAE.	Patterson
	August 2018	Load approved NAEs in candidate management database system for scheduling for testing.	Patterson
	August 2018	Begin scheduling candidates for testing, emailing out appointment letters with Authorizations to Test (ATTs).	Lee
	August 2018	Begin transferring eligibility file to internet- based testing server daily.	Gaesser
	September 2018	Begin to administer testing.	Patterson

DRAFT PLANNING AND IMPLEMENTATION PLAN			
Deliverable	Timeline	Activity	Principal Person
Test Scoring	Complete	Conduct standard setting study for the Clinical Skills Exam (CSE) and the Written/Oral Exam (WE/OE).	Brady/Li
	June 2018	Provide DAIL with copies of each standard setting study to assist DAIL in determining standards for scoring of VT nurse aide competency evaluation.	Li/Lawson/McDonnell
	July 2018	Obtain cut score from DAIL.	Lawson/McDonnell
	August 2018	Load cuts into system; complete beta testing of scoring.	Li
	August 2018	Complete the application of state-selected standards to subsequent forms of the WE/OE.	Li
	July 2018	Provide DAIL with copies of the proposed score reports for review and approval.	Lawson/McDonnell
	August 2018	Issue usernames and passwords to approved NAEs for access to the internet-based testing examination.	Patterson
Test Data Reporting	August 2018	Provide DAIL with proposed formats for required reports for review and approval.	Lawson/McDonnell
	August 2018	Establish report schedule and whether report will be provided electronically or in paper copy.	Lawson/McDonnell
	Ongoing	Provide reports as scheduled.	Lawson/McDonnell
Communications and Customer Service Plan	June 2018	Identify stakeholder groups for email distribution, informational meetings and conference calls, etc.	Lawson/McDonnell
	July 2018	Host informational meetings/conference calls to update program stakeholders on new processes and procedures with goal of smooth transition to standardized testing.	Lawson/McDonnell
	July 2018	Develop a comprehensive website dedicated to the Vermont Nurse Aide program, including informational documents about testing and Registry as well as links to related websites and systems.	Lawson/McDonnell
	August	Train the dedicated Nurse Aide	Lawson/McDonnell

DRAFT PLANNING AND IMPLEMENTATION PLAN			
Deliverable	Timeline	Activity	Principal Person
	2018	customer service team on program details in preparation for handling calls and emails from candidates and other program stakeholders.	
Account Management	June 2018 - September 2018	Manage vendor transition and program implementation to minimize candidate impact and transition burden for DAIL staff.	Lawson/McDonnell
	June 2018	Coordinate recurring conference calls (i.e. weekly or bi-weekly) between Prometric staff and DAIL to address program performance and service levels.	Lawson/McDonnell
	Ongoing	Meet with DAIL staff in-person regularly to ensure alignment.	Lawson/McDonnell
	Ongoing	Liaise with all internal Prometric functions to ensure contract requirements are met and high-quality services are provided to program stakeholders.	Lawson/McDonnell

APPENDIX E. DETAILED LINKAGE OF SECTION 432.154 OF THE CODE OF FEDERAL REGULATIONS

Federal Requirement: Each course requirement addressed as specified in Sec. 483.152(b).

Section 432.154 of the Code of Federal Regulations specifies that competency evaluations must address each course requirement specified in Sec. 483.152(b). In the chart below, the course requirements detailed in these regulations are listed in the first column, with the next column containing the corresponding area of Prometric's written examination content outline that addresses the specified content. Information in the "Written Examination Specifications" column represents the most direct connection of content. The last column lists clinical skills that address related content areas in the federal requirements.

FEDERAL REQUIREMENT FOR TRAINING CURRICULUM AND COMPETENCY EVALUATION	WRITTEN EXAMINATION SPECIFICATIONS	CLINICAL SKILLS EXAM SPECIFICATIONS
(1) Introductory (16 hours)		
i. Communication and interpersonal skills	I.C. Interpersonal relations and communication skills	+ Indirect Care
ii. Infection control	II.F. Infection control	+ Indirect Care-Standard + Precautions and Infection Control
iii. Safety/emergency procedures (including the Heimlich maneuver)	IV.B. Acute emergency situations	
iv. Promoting residents' independence	III.D. Psychosocial needs of residents III.B.6.d Self-image I.A.2.c: Self-care	
v. Respecting residents' rights	I.A.3. Promotion and protection of resident rights	+ Indirect Care-Rights
(2) Basic Nursing Skills		
i. Taking and recording vital signs	IV.A.1.b.i. Vital signs	+ Measure and record pulse + Measure and record respirations
ii. Measuring and recording height and weight	IV.A.1.b.iii Height IV.A.1.b.iv Weight	
iii. Caring for the residents' environment	II.D. Safety and comfort	
iv. Recognizing abnormal changes in body function and the importance of reporting such changes to the supervisor	I.A.1 Reporting requirements IV.A.1. Observations and reporting of physical changes	

FEDERAL REQUIREMENT FOR TRAINING CURRICULUM AND COMPETENCY EVALUATION	WRITTEN EXAMINATION SPECIFICATIONS	CLINICAL SKILLS EXAM SPECIFICATIONS
	IV.A.2. Observations and reporting of behavioral changes	
v. Caring for residents when death is imminent	V.C. Care of the dying resident and post-mortem care	
(3) Personal Care Skills		
i. Bathing	III.A.2. Bathing III.A.3. Perineal care, including catheter care	+ Partial bedbath + Perineal care
ii. Grooming, including mouth care	III.A.5. Mouth care III.A.4. Foot/nail care III.A.8. Grooming	+ Oral care, including natural or denture care + Hands and fingernail care + Foot care
iii. Dressing	III.A.9. Dressing/undressing	+ Assistance with dressing and undressing
iv. Toileting	III.A.7 Toileting	+ Incontinence care or perineal care
v. Assisting with eating and hydration	III.A.1. Feeding III.B.2. Nutrition and hydration	+ Assistance with feeding
vi. Proper feeding techniques	III.A.1. Feeding	+ Assistance with feeding
vii. Skin care	III.A.6. Skin care III.B.1 Promoting circulation and skin integrity	+ Partial bedbath backrub + applying lotion
viii. Transfers, positioning and turning	III.B.5.a. Promoting mobility and proper positioning III.B.5. Mobility, including bed mobility III.B.5.c. Safe transfer techniques	+ Transfer + Turn and position in proper body alignment
(4) Mental Health and Social Service Needs		
i. Modifying aide's behavior in	III.D.2. Emotional support	

FEDERAL REQUIREMENT FOR TRAINING CURRICULUM AND COMPETENCY EVALUATION	WRITTEN EXAMINATION SPECIFICATIONS	CLINICAL SKILLS EXAM SPECIFICATIONS
response to resident's behavior	strategies III.D.3. Intervention strategies to assist residents in coping with losses and adjustments to nursing home placement IV.A.2. Observation and reporting of behavioral changes I.C.4. Therapeutic communication techniques	
ii. Awareness of developmental tasks associated with the aging process	III.C. Age-related changes III.D.1. Fundamental human needs	
iii. How to respond to resident behavior	IV.A.2. Observation and reporting of behavioral changes I.C.4. Therapeutic communication techniques III.D.2. Emotional support strategies V.B.2. Special considerations for the safety, care, and comfort of residents with psychological impairments	
iv. Allowing the resident to make personal choices, providing and reinforcing other behavior consistent with the resident's dignity	III.D.2. Emotional support strategies	+ Indirect Care-Rights
v. Using the resident's family as a source of emotional support	III.D. Psychosocial needs of residents	
(5) Care of Cognitively Impaired Residents		
i. Techniques for addressing the unique needs and behaviors of individual with dementia (Alzheimer's and others)	V.B.1. Common psychological impairments and related care	
ii. Communicating with cognitively impaired residents	V.B.1. Common psychological impairments	

FEDERAL REQUIREMENT FOR TRAINING CURRICULUM AND COMPETENCY EVALUATION	WRITTEN EXAMINATION SPECIFICATIONS	CLINICAL SKILLS EXAM SPECIFICATIONS
	and related care V.B.2. Special considerations for the safety, care, and comfort of residents with psychological impairments	
iii. Understanding the behavior of cognitively impaired residents	V.B.1. Common psychological impairments and related care IV.A.2. Observation and reporting of behavioral changes	
iv. Appropriate responses to the behavior of cognitively impaired residents	V.B.1. Common psychological impairments and related care IV.A.2. Observation and reporting of behavioral changes	
v. Methods of reducing the effects of cognitive impairments	V.B.2. Special considerations for the safety, care, and comfort of residents with psychological impairments	
(6) Basic Restorative Services		
i. Training the resident in self-care according to the resident's abilities	I.A.2.c Self-care (e.g., stress management, nutrition, sleep, exercise)	
ii. Use of assistive devices in transferring, ambulation, eating, and dressing	III.B.7. Care and use of assistive devices III.B.5.d. Devices that promote mobility	+ Transfer
iii. Maintenance of range of motion	III.B.5.a. Promoting mobility and proper positioning V.A.1.c. Changes in mobility, including paralysis	+ Active/passive range of motion exercises
iv. Proper turning and positioning in bed and chair	III.B.5.a. Promoting mobility and proper positioning III.B.1.c.ii. Positioning III.B.5.a. Promoting mobility and proper positioning	+ Transfer + Turn and position in proper body alignment

FEDERAL REQUIREMENT FOR TRAINING CURRICULUM AND COMPETENCY EVALUATION	WRITTEN EXAMINATION SPECIFICATIONS	CLINICAL SKILLS EXAM SPECIFICATIONS
v. Bowel and bladder retraining	III.B.4.b. Promoting elimination III.B.4.c. Bowel and bladder training principles	+ Empty urinary drainage bag
vi. Care and use of prosthetic and orthotic devices	III.B.5.d. Devices that promote mobility III.B.7. Care and use of assistive devices	
(7) Residents' Rights		
i. Providing privacy and maintenance of confidentiality	I.A.3.a.i. Confidentiality I.A.3.a.ii. Privacy	+ Indirect care-rights
ii. Promoting the residents' rights to make personal choices to accommodate their needs	I.A.3.a.iii. Self-determination I.A.3.a.iv. Self-expression III.D.2. Emotional support strategies	+ Indirect care-rights
iii. Giving assistance in resolving grievances and disputes	I.A.3.e. Grievance and dispute resolution techniques	
iv. Providing needed assistance in getting to and participating in resident and family groups and other activities	III.D. Psychosocial needs of residents	
v. Maintaining care and security of residents' personal possessions	II.D Safety and comfort	+ Indirect care-rights + Indirect care-comfort + Indirect care safety
vi. Promoting the residents' right to be free from abuse, mistreatment, and neglect and the need to report any instances of such treatment to appropriate facility staff	I.A.3.b. Responsibility for recognizing and reporting violations I.A.3.c. Resident abuse: types, signs, reporting requirements, risk factors and prevention	
vii. Avoiding the need for restraints in accordance with current professional standards	II.D.4. Legal implications in the use of restraints	

APPENDIX F. SAMPLE CANDIDATE INFORMATION BULLETIN

Candidate Information Bulletin
State of Connecticut

CERTIFIED NURSE AIDE EXAMINATION

PROMETRIC

NEW!

Interactive Practice Exams Now Available Online

Visit www.prometric.com/nurseaide

The Connecticut Department of Public Health (DPH) has contracted with Prometric Inc. (Prometric) to develop and administer its Nurse Aide Competency Exam and to manage the Certified Nurse Aide (CNA) Registry.

This handbook describes the steps to becoming a Connecticut nurse aide listed on the CNA Registry.

To become a certified nurse aide in Connecticut

- Complete the Connecticut Nurse Aide Registry Application—Page 17. The application is also available online at **www.prometric.com/NurseAide/CT**.
- Take your tests at your scheduled test location. Be sure to bring the necessary identification with you to the test center—Page 5.
- If you pass both the Clinical Skills and the Written examinations, you will be mailed your CNA certificate and will be added to the Connecticut CNA Registry—Page 8.

To get answers not provided in this bulletin

Direct all questions and requests for information about the exam process to:

Prometric
7941 Corporate Drive
Nottingham, MD 21236
Phone: 866.499.7485
www.prometric.com/NurseAide/CT

Direct certification regulations questions to:

Connecticut Department of Public Health
410 Capitol Avenue MS 12MQA
P.O. Box 340308
Hartford, CT 06134-0308
Phone: 860.509.7596
www.ct.gov/dph

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Eligibility Route Options

Please review the eligibility routes, be sure to select (mark) that option on the Connecticut Nurse Aide Registry Application.

Important If you meet the requirements of Routes **1, 2, 3,** or **4**, you are required to take the Connecticut Nurse Aide Competency Exam.

Route 1—New Nurse Aide Candidate

Select this route if you have successfully completed a Connecticut state-approved nurse aide training program within the past 24 months.

Route 2—Nurse or Student Nurse

Select this route if you have successfully completed a course, or courses, of no less than 100 hours of theory and clinical instruction in an approved **practical nursing or registered nursing program** within the past 24 months

Route 3—Out-of-State Nurse Aide

Select this route if you have successfully completed a state-approved nurse aide training program in another state in the past 24 months that consisted of a minimum of 100 hours and have not successfully completed that state's examination.

Route 4—Lapsed Nurse Aide

Select this certification route if you were a certified nurse aide in Connecticut but your certification has lapsed and you are not eligible for renewal. You must take and pass both tests to be active on the registry.

Important If you meet the requirements of Routes **5** or **7**, you are not required to take the exam. To be placed directly on the Registry, complete the Connecticut Nurse Aide Registry Application and send it to Prometric.

Route 5—Completed Nurse Aide Training and State Exam within the last 24 months

Select this route if you completed a nurse aide training program consisting of a minimum of 100 hours within the past 24 months. The training program must be governed by the Board of Regents for Higher Education and approved by the Department of Public Health.**Reminder.** In Part D of the application, you will need to provide your training program information (code and completion date not needed) and secure your instructor's signature.

Route 7—Reciprocity

Select this route if you are currently active and in good standing on a Registry in another state.

Scheduling your Tests

The Connecticut Nurse Aide Exam consists of a **Clinical Skills Test and a Written (Knowledge) Test**. You are not required to pass one test before taking the other. First-time testers must register for both tests.

Please follow the steps below:

- Determine your eligibility route.
- Complete the Connecticut Nurse Aide Registry Application (Page 17).
- Mail the completed form, any required documentation, and the exam fee to Prometric.
- You will be scheduled for the next available testing date.

Note Complete all forms clearly and accurately. Incomplete, illegible and/or unsigned applications will be returned.

Name Change

Always use your name as it appears on your identification. If your identification and Social Security card have been changed to match a new legal name, you must submit a copy of the legal name change documents to Prometric, along with the Name/Address Change/Duplicate Certification Form located online at **www.prometric.com/NurseAide/CT**. If you want a new certificate showing the changed name, there is a $15 fee.

In-facility Test Sites

If you are taking your exam In-facility, please give your application to your school. A representative from the nursing home or training program where you are taking your exam will schedule your exam appointment and notify you of the scheduled time and date. If you send your application form to Prometric, you will be scheduled at a regional test site.

Regional Test Sites

If you are taking your exam at a regional test site, send your application form and fees to Prometric. Be sure to enter the city where you would like to take your test on the application form. The listing of the most current regional test site locations is posted online at **www.prometric.com/NurseAide/CT**.

Admission Letter

After Prometric reviews your application materials and approves your eligibility to take the exam, Prometric will email you an Admission Letter. The letter has the time, date and location of your exam.

Prometric will send your admission letter to the email address on the testing application. If the scheduled exam date will not work for you, contact Prometric immediately to have your exam rescheduled. More information about rescheduling can be found on Page 4.

Fee Information

Fees must be included with the Connecticut Nurse Aide Registry Application. **Applications received without proper payment will be returned**. You may pay the exam fees:

- By using a valid VISA, American Express or MasterCard credit card. Credit cards will be verified before registrations are processed.

- With a money order or certified check made payable to Prometric. Your name must be written on the money order/certified check. **Personal checks and cash are not accepted**.

Important Testing fees are **nonrefundable and nontransferable**. Fees will only be returned to candidates who are determined to be ineligible to test.

Exam and related fees are as follows:

Test	Fee
Clinical Skills Test and Written Test	$118
Clinical Skills Test and Oral Test	$128
Clinical Skills Test (retakes only)	$73
Written Test (retakes only)	$45
Oral Test (retakes only)	$55
Reciprocity (Route 7)	$55
Routes 5	$55
Rescheduling Fee*	$25
Appeals/Handscore	$25
Duplicate Certificates	$15

**This fee is required to reschedule a testing appointment. Payment of this fee must be made before the candidate can reschedule. This fee is the sole responsibility of the candidate and will not be paid by the state.*

Special Test Considerations

ADA accommodation. Reasonable testing accommodations are provided to allow candidates with documented disabilities recognized under the ADA an opportunity to demonstrate their skills and knowledge.

Candidates should submit professional documentation of the disability with their application to help us determine the necessary testing arrangements. Thirty days' advance notice is required for all testing arrangements. There is no additional charge for these accommodations.

English as a Second Language (ESL) accommodation. The Connecticut Nurse Aide Competency Exam is offered only in English. Translators are not permitted and translation dictionaries may not be used during the exam administration. Information about taking the exam in an oral format is available on Page 5.

Rescheduling and Retesting

Rescheduling fees are the sole responsibility of the candidate and will not be paid by the state. In-facility rescheduling must be handled by your site.

Regional rescheduling fees are as follows:

- **$25** to reschedule **up to five full working days** before your test.
- **A full exam fee** if you reschedule **less than five full working days** before your test, or if you are denied admission into a test site for not providing valid ID on the day of your test.

If absent or late. If you miss your test or are late and are not allowed to test, you will lose your fees and must pay a new fee to test. If you miss your test due to illness or emergency, call Prometric. The rescheduling fee may be waived with proof of your illness or emergency.

Emergency closing. Severe weather or an emergency could require cancellation of scheduled tests. If this occurs, Prometric will attempt to contact you by phone. You may also call 866.499.7485 to see if a site is closed. If the site is closed, your tests will be rescheduled without a rescheduling fee.

Retesting. You must take and pass both the Clinical Skills Test and Written Test within a two-year eligibility period. A testing fee and application are required each time you take a test. You are only required to retake the test you failed.

Note If you do not pass your exam within 24 months of completing your nurse aide training program, you will need to retrain before you can test again.

Taking your Exam

You should arrive at the test site at least **30 minutes before** your scheduled exam appointment. This allows time for you to sign in and for staff to verify your identification.

What to bring to the exam

Admission letter. While you are not required to present the letter sent to you by Prometric, it is recommended that you do so.

Identification required. You must present **two** valid pieces of identification before you may test and one piece **must**:

- Be a current (not expired) government-issued (e.g., driver's license, passport, state-issued identification card or military identification card);
- Contain **both** a current photo and your signature (this must be legible); and
- Have a name that **exactly** matches the name on your ID and Admission Letter.

Examples of acceptable second forms of identification include credit cards and Social Security cards. All forms of identification must have been signed before the day of testing. **The second form of identification must have your signature on it.**

Important If you do not provide correct identification at the time of the exam, it is considered a missed appointment. You will be required to pay the entire exam fee in order to be scheduled for another test date.

What to wear. If you are taking the Clinical Skills Test, you are required to wear flat, nonskid, closed-toed shoes. It is suggested that scrubs be worn on the day of testing. You should also have a watch with a secondhand.

Written Test overview

You do not need computer experience to take the written test. You will use a computer mouse to select answers. The Written test consists of 60 multiple-choice questions. You will have 90 minutes to take the test. The content outline shown on Page 12 is the basis for the Written test.

Oral Test

The Written Test may be taken in an oral form. During an oral test, you will hear the questions read to you while reading and answering questions on the computer. You may replay questions as many times as needed. If you would like to take the oral test, you should select this option on the application form. This request **cannot** be made on the day of testing.

Practice Exam

A Nurse Aide Practice Exam is available online at **www.prometric.com/nurseaide**. The practice exam is created in the same format and uses the same question types as the actual certification exam. The practice exam will also help you become familiar with the computer-based testing process.

During the practice exam, you will get immediate feedback to correct and incorrect responses, rational statements, reference listings, as well as overall feedback at the end of the session. If you like, you may print out the final practice exam results to help you with further test preparation.

The Nurse Aide Practice Exam contains 50 questions. The fee for each practice exam is $10 and is payable online using a credit or debit card at the time you purchase the practice exam.

The Clinical Skills Readiness Test allows you to prepare for your skills exam by testing your knowledge of the skills you will need to perform on the day of testing. There are 6 tests available with 3-4 skills in each. The fee for each Clinical Skill Readiness test is $5 to $7 with a super pack of all skills available for $25. The fee is payable online using a credit or debit card at the time you purchase the practice exam.

Sample Test

A Nurse Aide Certification Sample Test is located on Page 17 of this bulletin. The sample test is intended to help you become familiar with the exam format. How well you do on this sample test does not predict your results on your actual test.

Clinical Skills Test overview

The Clinical Skills Test is a timed test. The skills that you will be asked to perform are assigned by computer at the time you are scheduled for testing. For your test, you will be scored on five skills. While performing three assigned skills, you will also be scored on two additional skills — Handwashing and Indirect Care. Indirect Care is care related to resident rights and preferences, communication with the resident, resident safety, comfort and needs, and infection control.

The amount of time you will have to take your test is based on the skills you are asked to perform. The times for this test vary since some skills take longer to perform than other skills. When you are given the instructions for the skills on your test, you will be told how much time you have for your test. You will be reminded how much time you have just before you begin your test. The time allowed for the Clinical Skills test ranges from 31 minutes to 40 minutes based on the skills you are asked to perform.

To pass the Clinical Skills Test, you must pass all five skills. To pass a skill, you are not required to perform the skill perfectly, but you are required to demonstrate competency of the skill. Each skill has a list of checkpoints. The Nurse Aide Evaluator (NAE) will watch you perform the skill and compare your performance to the checkpoints for the skill. A Clinical Skills Checklist is available online at **www.prometric.com/NurseAide/CT**.

The rules for the Clinical Skills Test allow you to make corrections while performing a skill. You must tell the NAE that you are making a correction during the skill and you must actually perform the correction. Once you have completed a skill, you may not go back to correct a previous skill. There are times when a safety issue

will be addressed by the NAE. If a safety issue has occurred, you will not be able to make a correction.

The NAE who administers the Clinical Skills Test is not permitted to teach, coach, or discuss your results or performance with you.

While you are waiting to take the Clinical Skills test, you will be given a copy of the **General Instructions for the Nurse Aide Clinical Skills Test** to read. These instructions describe the basic rules for the test and other candidate considerations. A copy of this document, along with samples of the forms you will use to document measurements during your test, are available for review at **www.prometric.com/NurseAide/CT**.

Resident Actor

You will be asked to volunteer to act as the resident for another candidate testing on the same day. Specific instructions explaining this will be read before the test begins. The chart below lists the skills that may be performed on you when playing the role of the resident.

Skills to be performed	
Assisting you to walk	Measuring your pulse
Brushing your teeth	Moving you from the bed into a wheelchair
Changing bed linens while you are in bed	Moving your arm or leg through simple exercises
Cleaning and shaping your nails	Placing you on a bedpan (clothes on)
Feeding you a small snack	Turning you on your side in bed
Measuring your breathing	Washing and applying lotion to one foot

When you are playing the role of the resident, you must be able to participate in the skills identified above. If you are unable to participate in any of the skills, speak with the NAE administering the test when you check in at the test site.

Stopping the Testing of a Skill

During the Clinical Skills Test, the NAE can stop the testing of a skill if the resident actor/volunteer is in danger.

Test Site Regulations

The following regulations will be observed at each test site. If you do not follow these rules, it will result in the disqualification of your exam. Prometric reserves the right to audiotape and videotape any examination session.

References

- No reference materials, papers or study materials are allowed at the test center. If you are found with these or any other aids, you will not be allowed to continue the test and your answers will not be scored.

Personal items

- Prometric is not responsible for personal items brought to the test center. It is recommended that personal items not be brought into the test site. Note the following:
- Electronic equipment is **not** permitted in the testing area. This includes **cell phones**, PDAs, pagers, cameras, tape recorders, etc. All of these items will be collected by the Nurse Aide Evaluator (NAE).
- Other personal items—purses, briefcases, etc.—are not permitted in the testing area. **Note:** It is recommended that purses not be brought to the test center. Access to purses will not be allowed during testing.

Restroom Breaks

- If you leave the testing room during a test, you must sign out/in on the roster and you will lose exam time.
- You will not have access to any personal items during this break.
- You are not allowed to use any electronic devices or phones during breaks.

Visitors

- No guests, visitors, children or family members are allowed at the test center.

Misconduct or disruptive behavior

- If you engage in any disruptive or offensive behaviors, you will be dismissed from the exam. If dismissed, your test results will be invalid. Examples are: giving or receiving help, **cell phones ringing in the test center**, resident actors talking, prompting or moving when not directed to do so, taking part in an act of impersonation, removing test materials or notes from the testing room, using rude or offensive language and behavior that delays or interrupts testing.

Weapons

- Weapons are not allowed at the test center.

Important Every time you enter the test room, you will be asked to turn your pockets inside out to confirm that you have no prohibited items. The test center administrator will collect any materials that violate the rules.

Copyrighted questions. All test questions are the property of Prometric Inc. and are protected by copyright. Federal law provides severe civil and criminal penalties for the unauthorized reproduction, distribution, or exhibition of copyrighted materials.

If questions arise. Test site employees are not allowed to answer any questions about the exam content. If you do not understand a question on the test, you should answer the question to the best of your ability.

Your Exam Results

If you pass both parts of the exam, your Connecticut Nurse Aide Certificate will be mailed to you and your name will be added to the Connecticut CNA Registry. People who are successful typically are listed on the registry within 48 hours. You can access the registry by going to **www.prometric.com/NurseAide/CT** and clicking the registry link towards the bottom of the page. Your certificate will be mailed within 15 business days from the date you tested. Scores are confidential and will be given only to you and the state. **Scores are not given over the phone**.

Written (and Oral) Test

Since your test is given on computer, you will get a score report when the test is done. The score report will list either pass or fail. **Test site employees cannot discuss your results with you**.

Clinical Skills Test

Your score report will be given to you at the test site shortly after the completion of your test. You must pass all five skills to pass the Clinical Skills Test. **The nurse giving the test is not allowed to discuss your results with you**.

You may also go online to see your official results. Follow these steps:

Clinical Skills Exam Results

The email address utilized on the application will allow you to access your score report electronically.

If your application was submitted under your Site Contact's email address, please contact the Site Contact to assist with providing your score report. Instruction on how to access score reports are outlined below:

1 Logon to **https://tcnet.prometric.com/ctcna**.

2 Select Forgot Password?

3 Ensure the "Reset Password via E-Mail" is selected. Enter your Prometric ID as your username (this
number is on your ATT letter). If you do not have your letter, you can contact customer service to get it.

4 Continue following the onscreen instruction for resetting password via email. Note: If your application is registered under your Site Contact's email, please contact the Site Contact to assist with accessing your score report.

5 Once your password reset is complete, logon to **https://tcnet.prometric.com/ctcna.**

6 In the Main Menu, click on the link that says Review Scores.

7 Click on the date of the exam results listed in the history box to obtain your Clinical Skills exam score report.

8 To see which checkpoints you missed on your exam, click on the link in the score report that says Item Feedback.

Written (Oral) Exam Results

The email address utilized on the application will allow you to access your score report electronically.

If your application was submitted under your Site Contact's email address, please contact the Site Contact to assist with providing your score report. Instruction on how to access score reports are outlined below:

1 Logon to **https://tcnet.prometric.com/ctcna.**

2 Select Forgot Password?

3 Ensure the "Reset Password via E-Mail" is selected. Enter your Prometric ID as your username (this number is on your ATT letter). If you do not have your letter, you can contact customer service to get it.

4 Continue following the onscreen instruction for resetting password via email. Note: If your application is registered under your Site Contact's email, please contact the Site Contact to assist with accessing your score report.

5 Once your password reset is complete, logon to **https://tcnet.prometric.com/ctcna.**

6 In the Main Menu, click on the link that says Review Scores.

7 Click on the date of the exam results listed in the history box to obtain your Written exam score report.

Unsuccessful candidates

If you fail a test, you will be given an official score report at the test site on the day of testing. If you do not pass an exam, information about retaking the exam will be on the score report.

Appeals Process

Our goal is to provide a quality exam and a pleasant testing experience for every candidate. If you are dissatisfied with either and believe we can correct the problem, we would like to hear from you. We provide an opportunity for general comments at the end of your exam. Your comments will be reviewed by our personnel, but you will not receive a direct response.

If you are requesting a response about exam content, registration, scheduling or test administration (testing site procedures, equipment, personnel, etc.), please submit an appeal in writing. Your appeal letter must provide your name and Prometric ID, the exam title, the date you tested and the details of your concern, including all relevant facts. Letters must be received within 60 days of the exam date. Be sure to include your signature and return address.

Please mail your appeal letter to:

Prometric
ATTN: Appeals Committee
7941 Corporate Drive
Nottingham, MD 21236

The Appeals Committee will review your concern and send you a written response with acknowledgement of receipt within 10 business days.

Important **Faxed appeals will not be accepted** because an original signature is required.

Renewal/ Recertification

To be eligible for renewal, you must have worked for pay as a CNA for at least eight hours during the last 24 months. Renewal periods are for two years from the last day you worked as a CNA.

If you are eligible for renewal, your employer should fill out one of the Employment Verification forms. There is a link to the forms at **www.prometric.com/NurseAide/CT** under the Certificate Renewal Forms heading. The forms are also online at **www.prometric.com/NurseAide/CT** under the Registry Services heading and in this handbook beginning on page 14.

If your record in the Connecticut CNA Registry is flagged for resident abuse or neglect, misappropriation of resident property or Medicaid fraud, your certification will not be renewed.

You will not receive another certificate at time of renewal. Your original testing certificate is your official certificate.

Note You can verify the status of a certified nurse aide online at **https://registry.prometric.com/registry/publicCT**.

Name or Address Change

It is your responsibility to update the registry with any address change or any change in name. If your name changes, you must send legal proof of your name change to Prometric. Forms of legal documentation include a copy of your marriage certificate, divorce decree or legal name change decree.

To make a change to the registry, complete the Name/Address Change/Duplicate Certificate Form located online at **www.prometric.com/NurseAide/CT** and mail the form, along with a copy of your legal documentation, to Prometric.

There is no charge for updating your name with the Connecticut CNA Registry. If you want a new certificate showing the changed name, there is a $15 fee.

Reciprocity to another State

If you are active and in good standing on the CT CNA Registry and wish to apply to another state for reciprocity, you must contact the state you are moving to. Please note that the application will need to be sent to CT in order to obtain verification of certification.

Examination Content Outlines

The Competency Examination consists of two tests, a Written (Knowledge) Test and a performance-based Clinical Skills Test. You must pass both the Written and Clinical Skills tests within 24 months of completing your nurse aide training.

Written (Knowledge) Test Content Outline
60 questions—90 minute time limit

The following outline gives an overview of the content of the Written Test. The test will include questions on the subjects contained in this outline.

I. Role of the Nurse Aide - 18%

A. Personal responsibility
1. Reporting requirements
2. Promotion of personal health and safety
3. Promotion and protection of resident rights
4. Time management and work prioritization
5. Workplace standards, including ethical and unethical behaviors
6. Nurse Aide Registry

B. Nurse aide as a member of the health care team
1. Job responsibilities of the nurse aide, including duties and limitations
2. Interdisciplinary team member roles
3. Teamwork principles (e.g., collaboration, cooperation, sharing information, customer service)
4. The care planning process and implementation
5. Nurse aide's responsibility to provide care according to the care plan

C. Interpersonal relations/communication skills
1. Communication principles
2. Communication types
3. Factors affecting communication
4. Therapeutic communication techniques

II. Promotion of Safety - 18%

A. Potential hazards in the healthcare environment

B. Common injuries of residents (e.g., skin tears and shearing, falls, spills, burns, bruises)

C. Risks related to common injuries

D. Safety and comfort
1. Comfort needs of the resident
2. Accident prevention including fall prevention protocols
3. Restraint techniques and alternatives
4. Legal implications in the use of restraints
5. Risk factors for elopement (resident leaving without staff knowledge)

E. Safety devices (e.g., wanderguard, alarms)

F. Infection prevention and control
1. Maintaining a clean environment
2. Factors that contribute to spread of disease-causing organisms
3. Signs and symptoms of infections
4. Practices that decrease the risk of exposure to disease-causing organisms

G. Emergencies
1. Emergency and disaster response protocols
2. Immediate life-safety techniques
3. Evacuation procedures

H. Fire prevention and safety

III. Promotion of Function and Health of Residents - 24%

A. Personal care skills
1. Feeding
2. Bathing
3. Perineal care, including catheter
4. Foot/nail care
5. Mouth care
6. Skin care
7. Toileting
8. Grooming
9. Dressing/undressing

B. Health maintenance/restoration
1. Promoting circulation and skin integrity (e.g., specialized mattresses, chair cushions, positioning)
2. Nutrition and hydration
3. Sleep and rest needs
4. Elimination (bowel and bladder)
5. Mobility, including bed mobility
6. Effects of immobility
7. Care and use of assistive devices

C. Age-related changes
1. Cognitive (e.g., memory) changes
2. Psychosocial (e.g., relationships) changes
3. Physical changes

D. Psychosocial needs of residents
1. Fundamental human needs (e.g., Maslow's Hierarchy of Needs)
2. Emotional support strategies
3. Intervention strategies to assist residents in coping with losses and adjustments to nursing home placement (e.g., control, autonomy, privacy)

IV. Basic Nursing Care Provided by the Nurse Aide - 26%

A. Routine, chronic, non-life threatening situations
   1. Observation and reporting of physical changes
   2. Observation and reporting of behavioral changes

B. Acute emergency situations
   1. Chest pain
   2. Cardiac arrest
   3. Respiratory distress
   4. Difficulty swallowing
   5. Choking/aspirations
   6. Vomiting
   7. Seizures
   8. Changes in mobility, speech, or other potential signs of stroke
   9. Diabetic situations
   10. Sudden onset of confusion or agitation
   11. Changes in level of consciousness
   12. Falls
   13. Bleeding
   14. Burns

V. Providing Specialized Care for Residents with Changes in Health - 14 %

A. Physical problems
   1. Common physical impairments and related care
   2. Providing for safety, care, and comfort of residents with physical impairments
   3. Impact of impairment on resident safety, care, and comfort

B. Psychological problems
   1. Common psychological impairments and related care (e.g., confusion, anxiety, depression, delirium, phobias, addiction)
   2. Special considerations for the safety, care, and comfort of residents with psychological impairments

C. Care of the dying resident and post-mortem care
   1. Grief process
   2. Responding to the emotional needs of the resident, other residents, family and caregivers in the grief process
   3. Factors influencing responses to grief (e.g., spiritual beliefs, culture, past experience)
   4. Physical changes and needs as death approaches
   5. Post-mortem care procedures

Clinical Skills

The following is a list of the clinical skills that you may be asked to perform during the Clinical Skills Test. A checklist for these skills may be found online at **www.prometric.com/NurseAide/CT.**

Handwashing Note: Your handwashing technique is evaluated at the beginning of the test. This skill is not prompted, which means you will not be told to wash your hands. Nurse aides are expected to know to wash their hands before and after physical contact (touching) with the resident.

I. Clinical Skills List

A. Ambulate the resident using a transfer/gait belt
B. Assist resident needing to use a bedpan
C. Change bed linen while the resident remains in bed
D. Change resident's position to a supported side-lying position
E. Dress a resident who has a weak arm
F. Empty contents of resident's urinary drainage bag, and measure and record urine output on an Intake and Output (I&O) form
G. Feed a resident who is sitting in a chair
H. Measure and record a resident's radial pulse
I. Measure and record a resident's respirations
J. Provide catheter care to a female resident who has an indwelling urinary catheter
K. Provide foot care to a resident who is sitting in a chair
L. Provide mouth care to a resident who has a denture
M. Provide mouth care to a resident who has teeth
N. Provide perineal care to a female resident who is incontinent of urine
O. Provide resident hand and nail care
P. Provide resident a partial bed bath and back rub
Q. Provide resident with passive range of motion (ROM) exercises to one elbow and wrist
R. Provide resident with passive range of motion (ROM) exercises to one shoulder
S. Provide resident with passive range of motion (ROM) exercises to one hip, knee and ankle
T. Transfer the resident from the bed into a wheelchair using a pivot technique and a transfer/gait belt

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

Connecticut Nurse Aide Employment Verification Form

This form is to be used for verifying nurse aide or nursing-related employment in Connecticut for the purpose of maintaining current status on the Connecticut Nurse Aide Registry. Should you have any questions with the completion of this form, please call the Nurse Aide Registry staff at (860) 509-7603 * option #1.

To Be Completed By Nurse Aide:

Name: _____

Current Address: _____

_____

Telephone Number: _____

E-mail Address: _____

Connecticut Nurse Aide Registration Number: _____

Social Security Number: _____

Are you certified in any other states as a nurse aide? _____ If you answered "Yes", please identify the other states in which you are certified.: _____

To Be Completed By Employer:

The Person identified above is/has been employed as a Certified Nurse Aide by the following facility or Agency: (*Please Print*)

Facility/Agency Name: _____

Address: _____

_____

Employer Code (If Applicable) _____

Date of Hire: _____

Last Reported Date of Employment: _____ Termination Date: _____

(*If currently employed, use today's date.*) (*If Applicable*)

_____ _____

Employer Representative (*Please Print*) Telephone Number

_____ _____

Signature of Employer Representative Date

Please note: this form must be completed in its entirety and mailed or faxed directly from the employer to:

CT Nurse Aide Registry Program
Department of Public Health
410 Capitol Avenue, MS #12MQA
P.O. Box 340308
Hartford, CT 06134-0308
Facsimile: (860) 707-1983

Updated: 6/09/14

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

Connecticut Nurse Aide Employment Verification Form
Private Duty

This form is to be used for verifying nurse aide or nursing-related employment in Connecticut for the purpose of maintaining current status on the Connecticut Nurse Aide Registry. Should you have any questions with the completion of this form, please call the Nurse Aide Registry staff at (860) 509-7603 * Press option #1.

To Be Completed By Nurse Aide:

Name: _____

Current Address: _____

_____

Telephone Number: _____

Connecticut Nurse Aide Registration Number: _____

Social Security Number: _____

Are you certified in any other states as a nurse aide? _____ If you answered "Yes", please identify the other states in which you are certified: _____

To Be Completed By Employer:

Employer Name: _____

Address: _____

_____

Date of Hire: _____ Last Reported Date of Employment: _____
(If currently employed, use today's date.)

Please provide a description of the specific nursing or nursing related activities performed (*attach an additional sheet if necessary*):

_____

_____

_____

I certify that all of the information contained herein is true and accurate to the best of my knowledge and belief:

_____ _____
Signature of Employer Representative Telephone Number

_____ _____
Employer Representative *(Please Print)* Date

Please note: this form must be completed in its entirety and mailed or faxed directly from the employer to:

CT Nurse Aide Registry Program
Department of Public Health
410 Capitol Avenue, MS #12MQA
P.O. Box 340308
Hartford, CT 06134-308
Facsimile: (860) 707-1983

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

Out of State Connecticut Nurse Aide Employment Verification Form

This form is to be used for verifying nurse aide or nursing-related employment outside of Connecticut for the purpose of maintaining current status on the Connecticut Nurse Aide Registry. Should you have any questions with the completion of this form, please call the Nurse Aide Registry staff at (860) 509-7603 * Press option #1.

To Be Completed By Nurse Aide:

Name: _____

Current Address: _____

_____

Telephone Number: _____

Connecticut Nurse Aide Registration Number: _____

Social Security Number: _____

Are you certified in any other states as a nurse aide? _____ If you answered "Yes," please identify the other states in which you are certified: _____

To Be Completed By Employer:

AFacility/Agency Name: _____

Address: _____

_____

Date of Hire: _____ Last Reported Date of Employment: _____
(If currently employed, use today's date.)

_____ _____
Signature of Director of Nursing or Administrator Telephone Number

_____ _____
Name of Director or Nursing or Administrator Date
(Please Print)

Please note: this form must be completed in its entirety and mailed or faxed directly from the employer to:

CT Nurse Aide Registry Program
Department of Public Health
410 Capitol Avenue, MS 12MQA
P.O. Box 340308
Hartford, CT 06134-308
Facsimile: (860) 707-1983

Nurse Aide Certification Sample Test

Notice: This Sample Test is provided as a courtesy to individuals who are preparing to take a Prometric Nurse Aide Competency Examination. You are reminded that how well you do on these practice questions, does not predict results on your actual examination.

Directions: This test contains 50 questions. Each question has four suggested answers, (A),(B), (C) or (D). For each question, choose the ONE that best answers it.

---

1. A resident often carries a doll with her, treating it like her baby. One day she is wandering around crying that she can't find her baby. The nurse aide should

   (A) ask the resident where she last had the doll.
   (B) ask the activity department if they have any other dolls.
   (C) offer comfort to the resident and help her look for her baby.
   (D) let the other staff know the resident is very confused and should be watched closely.

2. A nurse aide is asked to change a urinary drainage bag attached to an indwelling urinary catheter. The nurse aide has never done this before. The best response by the nurse aide is to

   (A) change the indwelling catheter at the same time.
   (B) ask another nurse aide to change the urinary drainage bag.
   (C) change the bag asking for help only if the nurse aide has problems.
   (D) ask a nurse to watch the nurse aide change the bag since it is the first time.

3. Before feeding a resident, which of the following is the <u>best</u> reason to wash the resident's hands?

   (A) The resident may still touch his/her mouth or food.
   (B) It reduces the risk of spreading airborne diseases.
   (C) It improves resident morale and appetite.
   (D) The resident needs to keep meal routines.

4. Which of the following is a job task performed by the nurse aide?

   (A) Participating in resident care planning conferences
   (B) Taking a telephone order from a physician
   (C) Giving medications to assigned residents
   (D) Changing sterile wound dressings

5. Which of the following statements is true about range of motion (ROM) exercises?

   (A) Done just once a day
   (B) Help prevent strokes and paralysis
   (C) Require at least ten repetitions of each exercise
   (D) Are often performed during ADLs such as bathing or dressing

6. While the nurse aide tries to dress a resident who is confused, the resident keeps trying to grab a hairbrush. The nurse aide should

   (A) put the hairbrush away and out of sight.
   (B) give the resident the hairbrush to hold.
   (C) try to dress the resident more quickly.
   (D) restrain the resident's hand.

7. A resident who is lying in bed suddenly becomes short of breath. After calling for help, the nurse aide's next action should be to

   (A) ask the resident to take deep breaths.
   (B) take the resident's vital signs.
   (C) raise the head of the bed.
   (D) elevate the resident's feet.

8. A resident who has cancer is expected to die within the next couple of days. Nursing care for this resident should focus on

   (A) helping the resident through the stages of grief.
   (B) providing for the resident's comfort.
   (C) keeping the resident's care routine, such as for bathing.
   (D) giving the resident a lot of quiet time and privacy.

9. While giving a bedbath, the nurse aide hears the alarm from a nearby door suddenly go off. The nurse aide should

   (A) wait a few minutes to see if the alarm stops.
   (B) report the alarm to the charge nurse immediately.
   (C) make the resident being bathed safe and go check the door right away.
   (D) stop the bedbath and go check on the location of all assigned residents.

10. Gloves should be worn for which of the following procedures?

   (A) Emptying a urinary drainage bag
   (B) Brushing a resident's hair
   (C) Ambulating a resident
   (D) Feeding a resident

11. When walking a resident, a gait or transfer belt is often

   (A) worn around the nurse aide's waist for back support.
   (B) used to keep the resident positioned properly in the wheelchair.
   (C) used to help stand the resident, and then removed before walking.
   (D) put around the resident's waist to provide a way to hold onto the resident.

12. Which of the following statements is true about residents who are restrained?

   (A) They are at greater risk for developing pressure sores.
   (B) They are at lower risk of developing pneumonia.
   (C) Their posture and alignment are improved.
   (D) They are not at risk for falling.

13. A resident has diabetes. Which of the following is a common sign of a low blood sugar?

   (A) Fever
   (B) Shakiness
   (C) Thirst
   (D) Vomiting

14. When providing foot care to a resident it is important for the nurse aide to

   (A) remove calluses and corns.
   (B) check the feet for skin breakdown.
   (C) keep the water cool to prevent burns.
   (D) apply lotion, including between the toes.

15. When feeding a resident, frequent coughing can be a sign the resident is

   (A) choking.
   (B) getting full.
   (C) needs to drink more fluids.
   (D) having difficulty swallowing.

16. When a person is admitted to the nursing home, the nurse aide should expect that the resident will

   (A) have problems related to incontinence.
   (B) require a lot of assistance with personal care.
   (C) experience a sense of loss related to the life change.
   (D) adjust more quickly if admitted directly from the hospital.

17. A resident gets dressed and comes out of his room wearing shoes that are from two different pairs. The nurse aide should

   (A) tease the resident by complimenting the resident's sense of style.
   (B) ask if the resident realizes that the shoes do not match.
   (C) remind the resident that the nurse aide can dress the resident.
   (D) ask if the resident lost some of his shoes.

18. A resident's wife recently died. The resident is now staying in his room all the time and eating very little. The best response by the nurse aide is to

   (A) remind the resident to be thankful for the years he shared with his wife.
   (B) tell the resident that he needs to get out of his room at least once a day.
   (C) understand the resident is grieving and give him chances to talk.
   (D) avoid mentioning his wife when caring for him.

19. When a resident refuses a bedbath, the nurse aide should

   (A) offer the resident a bribe.
   (B) wait awhile and then ask the resident again.
   (C) remind the resident that people who smell don't have friends.
   (D) tell the resident that nursing home policy requires daily bathing.

20. When a resident is combative and trying to hit the nurse aide, it is important for the nurse aide to

    (A) show the resident that the nurse aide is in control.
    (B) call for help to make sure there are witnesses.
    (C) explain that if the resident is not calm a restraint may be applied.
    (D) step back to protect self from harm while speaking in a calm manner.

21. During lunch in the dining room, a resident begins yelling and throws a spoon at the nurse aide. The best response by the nurse aide is to

    (A) remain calm and ask what is upsetting the resident.
    (B) begin removing all the other residents from the dining room.
    (C) scold the resident and ask the resident to leave the dining room immediately.
    (D) remove the resident's plate, fork, knife, and cup so there is nothing else to throw.

22. Which of the following questions asked to the resident is <u>most</u> likely to encourage conversation?

    (A) Are you feeling tired today?
    (B) Do you want to wear this outfit?
    (C) What are your favorite foods?
    (D) Is this water warm enough?

23. When trying to communicate with a resident who speaks a different language than the nurse aide, the nurse aide should

    (A) use pictures and gestures.
    (B) face the resident and speak softly when talking.
    (C) repeat words often if the resident does not understand.
    (D) assume when the resident nods his/her head that the message is understood.

24. While walking down the hall, a nurse aide looks into a resident's room and sees another nurse aide hitting a resident. The nurse aide is expected to

    (A) contact the state agency that inspects the nursing facility.
    (B) enter the room immediately to provide for the resident's safety.
    (C) wait to confront the nurse aide when he/she leaves the resident's room.
    (D) check the resident for any signs of injury after the nurse aide leaves the room.

25. Before touching a resident who is crying to offer comfort, the nurse aide should consider

    (A) the resident's recent vital signs.
    (B) the resident's cultural background.
    (C) whether the resident has been sad recently.
    (D) whether the resident has family that visits routinely.

26. When a resident is expressing anger, the nurse aide should

    (A) correct the resident's misperceptions.
    (B) ask the resident to speak in a kinder tone.
    (C) listen closely to the resident's concerns.
    (D) remind the resident that everyone gets angry.

27. When giving a backrub, the nurse aide should

    (A) apply lotion to the back directly from the bottle.
    (B) keep the resident covered as much as possible.
    (C) leave extra lotion on the skin when completing the procedure.
    (D) expect the resident to lie on his/her stomach.

28. A nurse aide finds a resident looking in the refrigerator at the nurses' station at 5 a.m. The resident, who is confused, explains he needs breakfast before he leaves for work. The <u>best</u> response by the nurse aide is to

    (A) help the resident back to his room and into bed.
    (B) ask the resident about his job and if he is hungry.
    (C) tell him that residents are not allowed in the nurses' station.
    (D) remind him that he is retired from his job and in a nursing home.

29. Which of the following is true about caring for a resident who wears a hearing aid?

    (A) Apply hairspray after the hearing aid is in place.
    (B) Remove the hearing aid before showering.
    (C) Clean the earmold and battery case with water daily, drying completely.
    (D) Replace batteries weekly.

30. Residents with Parkinson's disease often require assistance with walking because they

(A) become confused and forget how to take steps without help.
(B) have poor attention skills and do not notice safety problems.
(C) have visual problems that require special glasses.
(D) have a shuffling walk and tremors.

31. A resident who is inactive is at risk of constipation. In addition to increased activity and exercise, which of the following actions helps to prevent constipation?

(A) Adequate fluid intake
(B) Regular mealtimes
(C) High protein diet
(D) Low fiber diet

32. A resident has an indwelling urinary catheter. While making rounds, the nurse aide notices that there is no urine in the drainage bag. The nurse aide should first

(A) ask the resident to try urinating.
(B) offer the resident fluid to drink.
(C) check for kinks in the tubing.
(D) obtain a new urinary drainage bag.

33. A resident who is incontinent of urine has an increased risk of developing

(A) dementia.
(B) urinary tract infections.
(C) pressure sores.
(D) dehydration.

34. When cleansing the genital area during perineal care, the nurse aide should

(A) cleanse the penis with a circular motion starting from the base and moving toward the tip.
(B) replace the foreskin when pushed back to cleanse an uncircumcised penis.
(C) cleanse the rectal area first, before cleansing the genital area.
(D) use the same area on the washcloth for each washing and rinsing stroke for a female resident.

35. Which of the following is considered a normal age-related change?

(A) Dementia
(B) Contractures
(C) Bladder holding less urine
(D) Wheezing when breathing

36. A resident is on a bladder retraining program. The nurse aide can expect the resident to

(A) have a fluid intake restriction to prevent sudden urges to urinate.
(B) wear an incontinent brief in case of an accident.
(C) have an indwelling urinary catheter.
(D) have a schedule for toileting.

37. A resident who has stress incontinence

(A) will have an indwelling urinary catheter.
(B) should wear an incontinent brief at night.
(C) may leak urine when laughing or coughing.
(D) needs toileting every 1-2 hours throughout the day.

38. The doctor has told the resident that his cancer is growing and that he is dying. When the resident tells the nurse aide that there is a mistake, the nurse aide should

(A) understand that denial is a normal reaction.
(B) remind the resident the doctor would not lie.
(C) suggest the resident ask for more tests.
(D) ask if the resident is afraid of dying.

39. A slipknot is used when securing a restraint so that

(A) the restraint cannot be removed by the resident.
(B) the restraint can be removed quickly when needed.
(C) body alignment is maintained while wearing the restraint.
(D) it can be easily observed whether the restraint is applied correctly.

40. When using personal protective equipment (PPE) the nurse aide correctly follows Standard Precautions when wearing

(A) double gloves when providing perineal care to a resident.
(B) a mask and gown while feeding a resident that coughs.
(C) gloves to remove a resident's bedpan.
(D) gloves while ambulating a resident.

41. To help prevent resident falls, the nurse aide should

(A) always raise siderails when any resident is in his/her bed.
(B) leave residents' beds at the lowest level when care is complete.
(C) encourage residents to wear larger-sized, loose-fitting clothing.
(D) remind residents who use call lights that they need to wait patiently for staff.

42. As the nurse aide begins his/her assignment, which of the following should the nurse aide do first?

(A) Collect linen supplies for the shift
(B) Check all the nurse aide's assigned residents
(C) Assist a resident that has called for assistance to get off the toilet
(D) Start bathing a resident that has physical therapy in one hour

43. Which of the following would affect a nurse aide's status on the state's nurse aide registry and also cause the nurse aide to be ineligible to work in a nursing home?

(A) Having been terminated from another facility for repeated tardiness
(B) Missing a mandatory infection control inservice training program
(C) Failing to show for work without calling to report the absence
(D) Having a finding for resident neglect

44. To help prevent the spread of germs between patients, nurse aides should

(A) wear gloves when touching residents.
(B) hold supplies and linens away from their uniforms.
(C) wash hands for at least two minutes after each resident contact.
(D) warn residents that holding hands spreads germs.

45. When a sink has hand-control faucets, the nurse aide should use

(A) a paper towel to turn the water on.
(B) a paper towel to turn the water off.
(C) an elbow, if possible, to turn the faucet controls on and off.
(D) bare hands to turn the faucet controls both on and off.

46. When moving a resident up in bed who is able to move with assistance, the nurse aide should

(A) position self with knees straight and bent at waist.
(B) use a gait or transfer belt to assist with the repositioning.
(C) pull the resident up holding onto one side of the drawsheet at a time.
(D) bend the resident's knees and ask the resident to push with his/her feet.

47. The resident's weight is obtained routinely as a way to check the resident's

(A) growth and development.
(B) adjustment to the facility.
(C) nutrition and health.
(D) activity level.

48. Which of the following is a right that is included in the Resident's Bill of Rights?

(A) To have staff available that speak different languages on each shift
(B) To have payment plan options that are based on financial need
(C) To have religious services offered at the facility daily
(D) To make decisions and participate in own care

49. Which of the following, if observed as a sudden change in the resident, is considered a possible warning sign of a stroke?

(A) Dementia
(B) Contractures
(C) Slurred speech
(D) Irregular heartbeat

50. Considering the resident's activity, which of the following sets of vital signs should be reported to the charge nurse immediately?

(A) Resting: 98.6°-98-32
(B) After eating: 97.0°-64-24
(C) After walking exercise: 98.2°-98-28
(D) While watching television: 98.8°-72-14

Answer Key			
1 – C	14 – B	27 – B	39 – B
2 – D	15 – D	28 – B	40 – C
3 – A	16 – C	29 – B	41 – B
4 – A	17 – B	30 – D	42 – C
5 – D	18 – C	31 – A	43 – D
6 – B	19 – B	32 – C	44 – B
7 – C	20 – D	33 – C	45 – B
8 – B	21 – A	34 – B	46 – D
9 – C	22 – C	35 – C	47 – C
10 – A	23 – A	36 – D	48 – D
11 – D	24 – B	37 – C	49 – C
12 – A	25 – B	38 – A	50 – A
13 – B	26 – C		

PROMETRIC

Connecticut Certified Nursing Assistant Examination Application

Instructions

- Please go to **www.prometric.com/NurseAide/CT** to print the current version of this application and all other forms. **DO NOT submit photocopies** as this may impact the ability to process the application.
- Incomplete, blurred or illegible forms **will not** be processed.
- To apply online please go to: **www.prometric.com/NurseAide/CT.**
- All submitted applications **must** include the **Payment Form** at the end of the application.
- Please mail completed original forms to **Prometric, ATTN: CT Nurse Aide Program, 7941 Corporate Drive, Nottingham, MD 21236.**

STOP

The name you provide on this application **must** match **EXACTLY** the name on your government-issued identification you will provide on the day of testing. If the name does not match **EXACTLY**, you **will not** be permitted to take your exam and **will forfeit** any test fees.

If you have previously taken a nurse aide exam with Prometric and your legal name has changed since then, you **must** provide a **copy** of acceptable legal documentation along with this application. Acceptable documents include marriage certificate; divorce decree; birth certificate; and legal name change court documents. Prometric will be unable to process your application until the legal acceptable documents are received.

- **If applying for Testing Accommodations under the Americans with Disabilities Act (ADA):**
  - Please go to to **www.prometric.com/nurseaide** to print the required ADA Accommodations Request Packet. This packet **MUST** be completed and submitted with this application.
  - Fill out the box below.

Note: *Candidates applying to take the Oral (audio) Exam do not need to apply for ADA accommodations.*

I am applying for **Americans with Disabilities Act (ADA) accommodations.** I am requesting testing accommodations and have included the **required ADA Accommodations Request Packet** along with this application. I understand I must request accommodations **30 days in advance of the test date** and not **all** accommodations can be approved.

☐ **Yes** ☐ **No**

Candidate Information

All fields marked with * are required. Print one number/letter in each box where required.

*Have you taken a Certified Nurse Aide exam with Prometric? ☐ Yes ☐ No

*Social Security Number

☐☐☐-☐☐-☐☐☐☐

*First Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Middle Initial ☐

*Last Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

PROMETRIC

*Date of Birth (Month/Day/Year) ☐☐/☐☐/☐☐☐☐	Previous name (if applicable):
*Street Address (including Apt. number or P.O. Box, if applicable)	
*City	*State ☐☐ *ZIP Code ☐☐☐☐☐
* Phone Number (including area code) ☐☐☐-☐☐☐-☐☐☐☐	
*Email Address (application will not be processed without an email address)	
Gender (check one) ☐ Female ☐ Male	

Certification Option/Eligibility

Please check a certification route.

✓	**Certification Route**
	Route 1 - New Nurse Aide
	Route 2 - Nurse or Student Nurse
	Route 3 - Out-of-State Nurse Aide
	Route 4 - Lapsed Nurse Aide
	Route 5 – Completed Nurse Aide Training and took state exam within the last 24 months
	Route 7 – Reciprocity

Training Information

This section must be completed if the **Certification Route 1 or 5** is selected.

***Training Completion Date:** ☐☐/☐☐/☐☐☐☐	*Training Program Code (if available – see completion certificate)
*Name of Training Program	
*Training Program Mailing Address (Street Address or P.O. Box)	
City	State ☐☐ ZIP Code ☐☐☐☐☐
I certify that this applicant has successfully completed a state-approved nurse aide training program.	
Training Instructors Name:	Training Instructor Signature:

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Test Site Information

Please check one of the following Routes.

✓	Test Site	
	Testing at your Facility: My training program or employer is scheduling my exam and I will take the exam at their facility. I will give this application form to the facility coordinator. **Do not send to Prometric.**	
	Regional Test Site: I am applying to test at a Regional Test Site. My preferred test site code is listed. *A current list of Test Sites with codes can be found online at www.prometric.com/NurseAide/CT.*	*Test site code:

Exam Selection and Processing/Exam Fees

- **Acceptable Forms of Fee(s) Payment:** certified check, money order, MasterCard, Visa or American Express. Make certified checks payable to Prometric. **Personal checks** and **cash** are **not** accepted. Fees are **non-refundable and non-transferrable.**
- The **Payment Form** (last page) **must** be submitted with this application **regardless of payment type**.

✓	**First-Time Tester**	**Fee**	**Total**
	Written Test and Clinical Skills Test	$118	$
	Oral Test and Clinical Skills Test	$128	$
✓	**Re-tester**	**Fee**	
	Clinical Skills Test ONLY	$73	$
	Written Test ONLY	$45	$
	Oral Test ONLY *(You may select this Route even if you previously took the Written test.)*	$55	$
✓	**Other**	**Fee**	
	Route 5 – trained and took state exam in last 24 months	$55	$
	Route 7 – Reciprocity	$55	$
	Rescheduling/No Show	$20	$
		Total Fee	

An additional rescheduling/no show fee of $20 is required to reschedule an exam appointment with less than five business days' notice, no-shows, late arrivals, or not allowed to test. Reschedule fees may apply to roster changes made by IFT testing locations.

Applicant's Affidavit and Candidate Release Statement

- I understand I am responsible for making sure all information provided in this application is completely true and correct.
- I understand if any information given is not true, my registration status as a nursing assistant may be at risk.
- I understand if I pass both parts of the Nursing Assistant Competency Exam, I will be placed on the Connecticut Nursing Assistant Registry.
- I understand I may be asked to play the part of the resident for another candidate on exam day.
- I do not have any physical, medical or other condition that would be affected in any way by my participation in the exam. I agree that I am responsible for my own personal safety both while taking the exam and acting as a resident. I hereby release Prometric, the CDPH , and their agents and assigns from any responsibility or liability for any claim or damage that may result from my participation in the examination.
- I understand all information required on the registration application may be made available for public disclosure (except for Social Security Number).

***Candidate Signature (in box below)**

Date: _____

If you **DO NOT** receive your emailed ATT letter from Prometric within **10-14 business days** of receipt at Prometric, please contact Prometric.

Questions: For additional information, please visit our website at **www.prometric.com/nurseaide.**

Please make a copy of all completed forms for your personal records.

PROMETRIC

Payment Form

*Candidate Name: _____

*Date of Birth: _____

Note: You have the option of submitting your application and payment online using your credit card at **www.prometric.com/en-us/clients/nurseaide.**

Credit Card Type (Check One)

☐ MasterCard ☐ Visa ☐ American Express

Card Number	Expiration Date ☐☐/☐☐
Amount $ ___ ___ ___ . ___ ___	C/C Security Code ☐☐☐☐
Name of Cardholder (Print)	
Signature of Cardholder	

Certified Check or Money Order Payments

☐ Certified Check ☐ 3rd Party/Facility Check ☐ Money Order

Certified Check/Money Order/3rd Party/Facility Check Number (one number or letter in each box):
☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Please mail completed forms to:
Prometric
ATTN: CT Nurse Aide Program
7941 Corporate Drive
Nottingham, MD 21236

APPENDIX G. SAMPLE REPORTS FOR DAIL

CNA First Time Combined Pass Rate by Program
1/1/2017 - 12/31/2017

*NT=No First Time Testers

Training Program Name	Clinical		Written		Spanish		Total First Time Candidate	Combined First Time Passes	Combined First Time Pass Rate
	#Cand	%Pass	#Cand	%Pass	#Cand	%Pass			
[redacted]	29	72.4	28	85.7	0	0.00	25	18	72.0
[redacted]	20	95.0	19	94.7	0	0.00	19	17	89.5
[redacted]	10	100.0	10	100.0	0	0.00	10	10	100.0
[redacted]	32	84.4	32	90.6	0	0.00	30	23	76.7
[redacted]	86	67.4	7	57.1	78	71.79	71	42	59.2
[redacted]	38	86.8	36	83.3	0	0.00	31	26	83.9
[redacted]	31	80.6	33	90.9	0	0.00	29	21	72.4
[redacted]	64	84.4	57	98.2	0	0.00	52	42	80.8
[redacted]	48	77.1	50	86.0	0	0.00	37	25	67.6
[redacted]	36	72.2	37	81.1	0	0.00	35	23	65.7
[redacted]	28	100.0	30	86.7	0	0.00	28	26	92.9
[redacted]	3	0.0	3	66.7	0	0.00	3	0	0.0
[redacted]	4	100.0	4	100.0	0	0.00	3	3	100.0
[redacted]	3	100.0	2	50.0	0	0.00	1	1	100.0
[redacted]	14	92.9	13	92.3	0	0.00	10	10	100.0
[redacted]	55	89.1	51	100.0	0	0.00	51	45	88.2
[redacted]	16	100.0	17	88.2	0	0.00	16	14	87.5
[redacted]	27	77.8	23	95.7	0	0.00	21	15	71.4
[redacted]	2	100.0	2	100.0	0	0.00	2	2	100.0
[redacted]	33	100.0	35	91.4	0	0.00	33	31	93.9
[redacted]	40	90.0	39	97.4	0	0.00	35	30	85.7
[redacted]	3	33.3	2	100.0	0	0.00	2	1	50.0
[redacted]	30	86.7	29	72.4	0	0.00	24	15	62.5
[redacted]	57	89.5	56	94.6	1	100.00	53	46	86.8

PROMETRIC

CNA First Time Combined Pass Rate by Program
1/1/2017 - 12/31/2017

[redacted]	2	0.0	2	50.0	0	0.00	2	0	0.0
[redacted]	0	0.0	0	0.0	0	0.00	0	0	NT*
[redacted]	27	96.3	27	77.8	0	0.00	21	18	85.7
[redacted]	24	70.8	20	100.0	0	0.00	20	15	75.0
[redacted]	16	100.0	16	93.8	0	0.00	16	15	93.8
[redacted]	6	16.7	6	66.7	0	0.00	6	1	16.7
[redacted]	14	78.6	14	92.9	0	0.00	14	11	78.6
[redacted]	35	80.0	38	84.2	0	0.00	28	19	67.9
[redacted]	5	80.0	7	71.4	0	0.00	5	3	60.0
[redacted]	26	84.6	21	100.0	0	0.00	21	19	90.5
[redacted]	21	85.7	17	100.0	0	0.00	17	14	82.4
[redacted]	34	94.1	34	100.0	0	0.00	34	32	94.1
[redacted]	15	100.0	17	82.4	0	0.00	14	11	78.6
[redacted]	13	100.0	14	92.9	0	0.00	13	12	92.3
[redacted]	16	87.5	15	93.3	0	0.00	14	11	78.6
[redacted]	13	92.3	13	84.6	0	0.00	12	10	83.3
[redacted]	12	91.7	12	91.7	0	0.00	12	11	91.7
[redacted]	12	91.7	12	100.0	0	0.00	12	11	91.7
[redacted]	11	72.7	12	91.7	0	0.00	10	7	70.0
[redacted]	3	33.3	2	0.0	0	0.00	2	0	0.0
[redacted]	30	53.3	25	92.0	0	0.00	24	12	50.0
[redacted]	5	60.0	4	75.0	0	0.00	3	0	0.0
[redacted]	33	93.9	33	100.0	0	0.00	33	31	93.9
[redacted]	2	50.0	2	50.0	0	0.00	2	1	50.0
[redacted]	15	66.7	11	63.7	0	0.00	3	1	33.3
[redacted]	11	72.7	11	81.8	0	0.00	9	6	66.7
[redacted]	26	73.1	26	92.3	0	0.00	25	17	68.0
[redacted]	14	100.0	14	100.0	0	0.00	14	14	100.0
[redacted]	4	100.0	0	0.0	4	25.00	4	1	25.0
[redacted]	20	85.0	18	100.0	0	0.00	17	14	82.4
[redacted]	15	66.7	12	83.3	0	0.00	11	5	45.5
[redacted]	17	82.4	18	94.4	0	0.00	15	13	86.7
[redacted]	16	87.5	15	93.3	0	0.00	14	12	85.7
[redacted]	26	73.1	8	100.0	14	85.71	22	14	63.6
[redacted]	64	60.9	55	87.3	0	0.00	50	28	56.0
[redacted]	4	50.0	3	100.0	0	0.00	3	1	33.3
[redacted]	57	80.7	3	66.7	58	70.69	47	30	63.8

PROMETRIC

CNA First Time Combined Pass Rate by Program
1/1/2017 - 12/31/2017

[redacted]	17	82.4	15	100.0	0	0.00	14	11	78.6
	18	94.4	18	100.0	0	0.00	18	17	94.4
	25	88.0	24	100.0	0	0.00	24	21	87.5
	14	57.1	13	76.9	0	0.00	13	7	53.8
	98	68.4	85	85.9	0	0.00	76	49	64.5
	4	75.0	0	0.0	4	100.00	4	3	75.0
	31	74.2	28	82.1	0	0.00	28	17	60.7
	59	61.0	51	82.4	4	75.00	49	27	55.1
	16	62.5	12	91.7	1	100.00	11	8	72.7
	40	92.5	42	90.5	0	0.00	40	33	82.5
	5	60.0	5	100.0	0	0.00	4	3	75.0
	0	0.0	0	0.0	0.00	0.00	0	0	NT*
	8	50.0	4	100.0	0	0.00	4	0	0.0
	11	81.8	12	75.0	0	0.00	9	6	66.7
	17	88.2	14	100.0	2	100.00	15	13	86.7
	2	100.0	1	100.0	0	0.00	1	0	100.0
	12	83.3	10	90.0	1	100.00	11	8	72.7
	278	77.7	0	0.0	262	87.40	243	172	70.8
	15	93.3	14	78.6	0	0.00	13	11	84.6
	27	100.0	27	100.0	0	0.00	27	27	100.0
	3	66.7	3	100.0	0	0.00	3	2	66.7
	33	90.9	33	84.8	0	0.00	33	27	81.8
	16	31.3	13	92.3	0	0.00	12	3	25.0
	23	82.6	22	90.9	0	0.00	19	15	78.9
	28	96.4	27	100.0	0	0.00	27	26	96.3
	27	85.2	28	75.0	0	0.00	26	17	65.4
	9	88.9	9	100.0	0	0.00	9	8	88.9
	52	78.8	53	75.5	0	0.00	45	27	60.0
	16	93.8	17	82.4	0	0.00	15	12	80.0
	0	0.0	0	0.0	0	0.00	0	0	NT*
	23	52.2	22	86.4	0	0.00	22	11	50.0
	1	0.0	1	100.0	0	0.00	0	0	NT*
	20	80.0	20	100.0	0	0.00	20	16	80.0
	19	73.7	24	50.0	1	100.00	18	6	33.3

PROMETRIC

CNA First Time Combined Pass Rate by Program
1/1/2017 - 12/31/2017

[redacted]	0	0.0	0	0.0	1	0.00	0	0	NT*
	31	87.1	29	96.6	0	0.00	28	26	92.9
	28	82.1	26	96.2	0	0.00	26	20	76.9
	21	66.7	23	82.6	0	0.00	21	13	61.9
	20	100.0	20	100.0	0	0.00	19	19	100.0
	38	89.5	40	87.5	0	0.00	36	29	80.6
	36	88.9	35	94.3	0	0.00	34	31	91.2
	28	71.4	32	50.0	0	0.00	26	9	34.6
	44	79.5	45	91.1	0	0.00	44	32	72.7
	11	36.4	10	60.0	0	0.00	9	4	44.4
	49	81.6	47	85.1	0	0.00	45	31	68.9
	12	100.0	12	83.3	0	0.00	12	10	83.3
	36	72.2	33	81.8	0	0.00	30	19	63.3
	9	0.0	9	44.4	0	0.00	9	0	0.0
	18	88.9	19	78.9	0	0.00	16	11	68.8
	39	64.1	38	73.7	0	0.00	33	18	54.5
	37	70.3	31	90.3	0	0.00	28	16	57.1
	36	100.0	36	100.0	0	0.00	36	36	100.0
	54	81.5	53	84.9	0	0.00	50	38	76.0
	16	87.5	16	100.0	0	0.00	16	14	87.5
	42	81.0	45	80.0	0	0.00	41	28	68.3
	2	100.0	3	100.0	0	0.00	2	2	100.0
	40	75.0	40	90.0	0	0.00	34	27	79.4
	53	96.2	52	92.3	0	0.00	52	46	88.5
	2	100.0	2	100.0	0	0.00	1	1	100.0
	1	100.0	1	100.0	0	0.00	1	1	100.0
	2	50.0	2	50.0	0	0.00	1	1	100.0
	15	80.0	15	100.0	0	0.00	15	12	80.0
	31	71.0	28	96.4	0	0.00	28	19	67.9
	33	72.7	27	88.9	0	0.00	25	18	72.0
	2	50.0	2	100.0	0	0.00	2	1	50.0
	3	33.3	3	66.7	0	0.00	2	0	0.0
	27	63.0	25	76.0	0	0.00	22	10	45.5
	4	50.0	2	50.0	0	0.00	1	0	0.0
	3	100.0	0	0.0	3	100.00	3	3	100.0

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CNA First Time Combined Pass Rate by Program
1/1/2017 - 12/31/2017

[redacted]	1	0.0	1	0.0	0	0.00	1	0	0.0
	19	63.2	19	73.7	0	0.00	16	9	56.3
	12	100.0	11	100.0	0	0.00	10	10	100.0
	2	100.0	3	100.0	0	0.00	2	2	100.0
	36	69.4	33	87.9	0	0.00	31	22	71.0
	21	85.7	20	100.0	0	0.00	20	17	85.0
	2	100.0	2	100.0	0	0.00	2	2	100.0
	40	92.5	38	92.1	1	0.00	37	30	81.1
	42	71.4	32	93.8	0	0.00	31	20	64.5
	26	100.0	27	96.3	0	0.00	26	25	96.2
	0	0.0	1	0.0	0	0.00	0	0	NT*
	18	83.3	21	66.7	0	0.00	17	9	52.9
	30	100.0	30	100.0	0	0.00	30	30	100.0
	25	88.0	26	76.9	0	0.00	25	18	72.0
	31	93.5	33	87.9	0	0.00	31	28	90.3
	19	63.2	19	89.5	0	0.00	19	11	57.9
	15	73.3	14	100.0	0	0.00	14	11	78.6
	18	44.4	17	82.4	0	0.00	17	7	41.2
	8	100.0	7	100.0	0	0.00	6	6	100.0
	14	92.9	14	92.9	0	0.00	14	12	85.7
	2	100.0	3	66.7	0	0.00	2	2	100.0
	16	100.0	18	50.0	0	0.00	7	7	100.0
	11	90.9	10	100.0	0	0.00	9	8	88.9
	1	100.0	1	100.0	0	0.00	0	0	NT*
	28	64.3	23	87.0	0	0.00	19	13	68.4
	11	63.6	11	100.0	0	0.00	10	6	60.0
	10	80.0	10	80.0	0	0.00	9	6	66.7
	14	64.3	14	92.9	0	0.00	14	9	64.3
	7	85.7	7	100.0	0	0.00	7	6	85.7
	2	100.0	2	100.0	0	0.00	2	2	100.0
	25	64.0	21	100.0	0	0.00	21	13	61.9
	18	88.9	17	94.1	1	100.00	17	14	82.4
	39	92.3	39	97.4	0	0.00	36	32	88.9
	4	100.0	4	100.0	0	0.00	4	4	100.0

CNA First Time Combined Pass Rate by Program
1/1/2017 - 12/31/2017

[redacted]	72	87.5	75	84.0	0	0.00	68	54	79.4
[redacted]	9	100.0	11	90.9	0	0.00	7	6	85.7
[redacted]	31	87.1	29	93.1	0	0.00	28	22	78.6
[redacted]	0	0.0	0	0.0	0	0.00	0	0	NT*
[redacted]	54	94.4	60	83.3	0	0.00	53	42	79.2
[redacted]	10	60.0	10	90.0	0	0.00	9	4	44.4
[redacted]	36	94.4	36	100.0	0	0.00	36	34	94.4
[redacted]	24	75.0	25	76.0	0	0.00	23	17	73.9
[redacted]	29	96.6	33	90.9	0	0.00	29	28	96.6
[redacted]	25	80.0	25	76.0	0	0.00	25	15	60.0
[redacted]	9	100.0	8	100.0	0	0.00	8	8	100.0
[redacted]	4	25.0	4	75.0	0	0.00	4	0	0.0
[redacted]	18	94.4	18	100.0	0	0.00	17	16	94.1
[redacted]	5	80.0	5	100.0	0	0.00	5	4	80.0
[redacted]	12	83.3	12	91.7	0	0.00	12	10	83.3
[redacted]	34	100.0	34	100.0	0	0.00	34	34	100.0
[redacted]	26	92.3	25	88.0	1	100.00	25	21	84.0
[redacted]	18	77.8	15	93.3	0	0.00	14	9	64.3
STATE TOTALS	**4,146**	**81.0**	**3,593**	**88.6**	**437**	**81.7**	**3,694**	**2,769**	**75.0**

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Report for [redacted]

[redacted] **Nurse Aide Competency Examination**
Training Program Summary Report
10/01/2017 - 12/31/2017

Adult Secondary Schools

	1st Attempt					2nd Attempt					3rd Attempt					All Attempts				
	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total
[redacted] CNA Written Test	271	92.5	22	7.5	293	9	75.0	3	25.0	12	0	0.0	0	0.0	0	280	91.8	25	8.2	305
[redacted] CNA Oral Test	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	0	0.0	2	2	100.0	0	0.0	2
[redacted] CNA Oral Test	4	100.0	0	0.0	4	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	100.0	0	0.0	4
Written (Oral) Test	3	42.9	4	57.1	7	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	42.9	4	57.1	7
[redacted] CNA Written/Oral	5	71.4	2	28.6	7	0	0.0	1	100.0	1	0	0.0	0	0.0	0	5	62.5	3	37.5	8
[redacted] CNA Written/Oral	1	50.0	1	50.0	2	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	1	50.0	2
[redacted] Clinical Skills	250	81.7	56	18.3	306	27	75.0	9	25.0	36	7	100.0	0	0.0	7	284	81.4	65	18.6	349

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[redacted]

Report for [redacted]

[redacted] **Nurse Aide Competency Examination**
Training Program Summary Report
10/01/2017 - 12/31/2017

Employment Organizations

	1st Attempt					2nd Attempt					3rd Attempt					All Attempts				
	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total
[redacted] CNA Written Test	26	86.7	4	13.3	30	2	66.7	1	33.3	3	0	0.0	1	100.0	1	28	82.4	6	17.6	34
[redacted] CNA Oral Test	2	100.0	0	0.0	2	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	0	0.0	2
Written (Oral) Test	3	27.3	8	72.7	11	0	0.0	1	100.0	1	1	50.0	1	50.0	2	4	28.6	10	71.4	14
[redacted] CNA Written/Oral	2	66.7	1	33.3	3	1	100.0	0	0.0	1	0	0.0	0	0.0	0	3	75.0	1	25.0	4
[redacted] CNA Written/Oral	0	0.0	1	100.0	1	0	0.0	1	100.0	1	0	0.0	0	0.0	0	0	0.0	2	100.0	2
[redacted] Clinical Skills	34	75.6	11	24.4	45	5	100.0	0	0.0	5	0	0.0	0	0.0	0	39	78.0	11	22.0	50

Licensed or Pending Lic.

	1st Attempt					2nd Attempt					3rd Attempt					All Attempts				
	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total
[redacted] CNA Written Test	8	57.1	6	42.9	14	1	100.0	0	0.0	1	0	0.0	0	0.0	0	9	60.0	6	40.0	15
[redacted] CNA Oral Test	1	100.0	0	0.0	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	0	0.0	1
Written (Oral) Test	2	100.0	0	0.0	2	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	0	0.0	2
[redacted] Clinical Skills	11	64.7	6	35.3	17	0	0.0	0	0.0	0	0	0.0	0	0.0	0	11	64.7	6	35.3	17

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Report for [redacted]

[redacted] Nurse Aide Competency Examination
Training Program Summary Report
10/01/2017 - 12/31/2017

Other (CBO, etc.)

	1st Attempt					2nd Attempt					3rd Attempt					All Attempts				
	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total
[redacted] Clinical Skills	0	0.0	0	0.0	0	1	100.0	0	0.0	1	0	0.0	0	0.0	0	1	100.0	0	0.0	1

Post-Secondary Schools

	1st Attempt					2nd Attempt					3rd Attempt					All Attempts				
	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total
[redacted] CNA Written Test	348	88.1	47	11.9	395	26	61.9	16	38.1	42	0	0.0	6	100.0	6	374	84.4	69	15.6	443
Written (Oral) Test	0	0.0	1	100.0	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	1	100.0	1
[redacted] CNA Written/Oral	4	100.0	0	0.0	4	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	100.0	0	0.0	4
[redacted] Clinical Skills	337	84.5	62	15.5	399	49	86.0	8	14.0	57	3	75.0	1	25.0	4	389	84.6	71	15.4	460

Practical Nurse: Instate

	1st Attempt					2nd Attempt					3rd Attempt					All Attempts				
	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total	Pass	Percent	Fail	Percent	Total
[redacted] CNA Written Test	5	83.3	1	16.7	6	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	83.3	1	16.7	6
[redacted] Clinical Skills	4	80.0	1	20.0	5	2	100.0	0	0.0	2	0	0.0	0	0.0	0	6	85.7	1	14.3	7

Printed by Prometric on January 18, 2018 [redacted]

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Exam Summary Report

[redacted] Nurse Aide Exam

SUMMARY REPORT
10/01/2017 - 10/31/2017

	Scheduled	NoShows	Tested	Pass	Percent	Fail	Percent
Clinical Skills	819	73	746	530	71.0	216	29.0
Oral	34	2	32	24	75.0	8	25.0
Written	676	70	606	538	88.8	68	11.2
Total:	**1529**	**145**	**1384**	**1092**	**78.9**	**292**	**21.1**

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Page 1 of 1

APPENDIX H. CLINICAL SKILLS EXAMINATION CHECKPOINT LIST

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Clinical Skills Test Checklist

During training, you learn many skills that are important in caring for residents. There are 22 skills that are part of the Clinical Skills Test. When you are registered to test, a computer will decide which skills will be on your test.

A Clinical Skills Test consists of five scored skills. All candidates taking this test are scored on the Handwashing and Indirect Care skills. When you take your test, you will be given instructions for the other three skills that are part of your test. Because you may learn to perform skills in different ways for different residents' needs, you are given instructions that describe how the skill is being tested. For example, if you test on the feeding skill, you will feed a resident positioned in a chair. Remember, you are still responsible for knowing how to feed residents who are positioned in other ways. The Knowledge (Written) Test may also ask questions about feeding residents in other positions.

Each skill in the test has checkpoints. The evaluator (nurse) giving your test will use these checkpoints to rate your performance. After you complete your test, the evaluator will enter his/her observations into a computer. Prometric's system will then determine your results. Your results will be provided to you on the day of testing, unless a technology issue, such as a printer problem at the test site, prevents the evaluator from providing your results. If you are not provided a score report on the day of testing, see the candidate bulletin for information on accessing your results online.

The checkpoints for each of the skills are listed on the pages that follow. It is important that you understand that the checklists are not written as procedures. These checkpoints are not provided to help you learn skills, but to help you understand what the evaluator will look for when you perform a skill.

The procedures for skills are learned from your instructor, nurse aide textbooks, and other training materials. The procedure for any skill may include more detail about important requirements than are shown in the checkpoints. Your performance may include more detail than is included in the checkpoints.

A description of the instructions given to candidates for each skill is provided below along with the checkpoints for each skill. This description includes if a person or mannequin is used for the resident. Usually another candidate will play the role of the resident when a person is used. In special situations, the evaluator may need to play the resident.

While you are waiting to take the test, you will be given General Instructions to read. These are the basic rules for the Clinical Skills Test. For example, these instructions explain what you need to do when you want to make a correction to a skill you are performing. These General Instructions are also available on the website for your state at **www.prometric.com/nurseaide**. You are encouraged to review them before you arrive at the test site.

When you are called into the testing room to take your test, you will be shown around the testing room so you can see where equipment and supplies are located. The testing room will be set up similar to a resident's room. For example, personal care supplies such as the resident's toothbrush, toothpaste, basins, and bedpan will be in the resident's bedside cabinet.

When you are taking your Clinical Skills test, remember that you are required to actually perform the skills. The evaluator is not allowed to answer any questions about how skills are performed.

Handwashing

When taking the test, candidates are not given instructions about when to wash their hands. This is because nurse aides are expected to know that their hands should be washed before any physical contact with a resident. Candidates are evaluated on how well they wash their hands (technique) during the first skill. In Florida, where two nurses will be observing your performance throughout the test, one nurse will observe your handwashing at the beginning of the first skill, and the other nurse will observe your handwashing at the end of first skill.

After the first skill is completed, for the remainder of the test, handwashing is evaluated as a part of Indirect Care with the checkpoint, "Use Standard Precautions and Infection Control Measures when providing care." Handwashing is one of the five skills scored in every Clinical Skills Test.

Handwashing	
Does the candidate:	
1	Begin handwashing by wetting hands and applying soap to hands?
2	Use friction to distribute soap and create lather cleansing front and back of hands, between fingers, around cuticles, under nails, and wrists?
3	Provide cleansing friction for a minimum of 20 seconds with hands lathered with soap?
4	Rinse hands and wrists removing soap?
5	Use clean paper towel(s) to dry hands and wrists, and dispose of used paper towel in trash?
6	End handwashing skill with clean hands avoiding recontamination of hands before procedure completed (e.g., having direct contact with faucet handles or sink surfaces once hands washed)?

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Indirect Care	
Indirect Care is a skill that is evaluated while you perform each skill. This skill evaluates behaviors that are common to any resident care such as: infection control, safety, communication, and resident preferences, needs, comfort and rights. You are not given instructions to perform the Indirect Care skill. The evaluator watches for these behaviors while you perform each skill. In the checkpoints provided for each skill below, Indirect Care checkpoints are identified with an "(IC)" at the end. Indirect Care is one of the five skills scored in every Clinical Skills Test. The Indirect Care checkpoints are:	
Does the candidate:	
1	Greet resident, address by name, and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Ask resident about preferences during care? (IC)
4	Use Standard Precautions and infection control measures when providing care? (IC)
5	Ask resident about comfort or needs during care or before care completed? (IC)
6	Promote resident's rights during care? (IC)
7	Promote resident's safety during care? (IC)

Ambulate the resident using a transfer/gait belt	
The candidate is asked to walk a resident who needs some assistance to stand. A transfer/gait belt is used while walking the resident. The role of the resident is played by a person.	
Does the candidate:	
1	Greet resident, address by name and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Apply transfer/gait belt before standing resident, placing around the resident's waist and over clothing, secure so that only flat fingers/hand fit under belt, and the belt does not catch skin or skin folds (e.g. breast tissue)?
4	Provide signal or cue to resident before assisting to stand?
5	Assist resident to stand while holding onto the transfer/gait belt without holding belt only at the front or only at nearest side (if assisting to stand from the side)?
6	Ask about how resident feels upon standing?
7	Walk resident while standing to the side and slightly behind resident?
8	Provide support while walking resident with an arm around resident's back holding transfer/gait belt?
9	Ask about how resident feels during ambulation?
10	Walk resident at least 10 steps?
11	Assist resident to turn and have back of legs positioned against the seat of chair before resident sits?
12	Provide support to sit resident back into chair?

Ambulate the resident using a transfer/gait belt	
13	Remove transfer/gait belt from resident's waist without harming resident (e.g., pulling transfer/gait belt) when seated in chair after ambulation?
14	Maintain own body mechanics when assisting resident to stand and sit?
15	Leave resident positioned in chair in proper body alignment and hips against back of seat?
16	Ask resident about preferences during care? (IC)
17	Use Standard Precautions and infection control measures when providing care? (IC)
18	Ask resident about comfort or needs during care or before care completed? (IC)
19	Promote resident's rights during care? (IC)
20	Promote resident's safety during care? (IC)

Assist resident needing to use a bedpan	
The candidate is asked to help a resident who has asked for a bedpan. The role of the resident is played by a person who will be wearing a hospital-style gown over clothing. For the purposes of testing, the candidate will pretend that the resident (actor) is not wearing underpants.	
Does the candidate:	
1	Greet resident, address by name and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Place protective pad on bed over bottom sheet, under buttocks/upper thigh area, before placing bedpan, and remove the pad after bedpan is removed?
4	Place and remove bedpan by either having resident positioned on side to turn on/off back, onto/off bedpan, or having resident raise hips off bed?
5	Position bedpan under resident according to form/shape of the selected bedpan?
6	Position bedpan to allow for collection?
7	Raise the head of the bed after positioning the resident on the bedpan, and lower the head of the bed before removing bedpan?
8	Ask resident to call when finished or if needs help, leaving call light within the resident's reach before leaving resident to use bedpan?
9	Leave toilet paper within resident's reach before leaving resident to use bedpan?
10	Wear gloves when removing bedpan and while emptying and cleaning bedpan?
11	Empty contents of bedpan into toilet, rinse bedpan pouring contents into toilet, and dry bedpan?
12	Offer resident damp washcloth or paper towel, or hand wipe, to cleanse hands after bedpan used, before end of care?
13	Complete skill storing bedpan and toilet paper, placing soiled linens in hamper, and disposing of trash?

Assist resident needing to use a bedpan	
14	Keep resident positioned a safe distance from the edge of the bed at all times?
15	Ask resident about preferences during care? (IC)
16	Use Standard Precautions and infection control measures when providing care? (IC)
17	Ask resident about comfort or needs during care or before care completed? (IC)
18	Promote resident's rights during care? (IC)
19	Promote resident's safety during care? (IC)

Change bed linen while the resident remains in bed	
The candidate is asked to change the top and bottom sheets and pillowcase on the bed while the resident stays in the bed. The role of the resident is played by a person. *(not tested in Wyoming)*	
Does the candidate:	
1	Greet resident, address by name and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Keep resident positioned a safe distance from the edge of the bed at all times?
4	Remove and replace bottom sheet on one side of the bed, before turning resident to remove and replace sheet on the other side of the bed?
5	Keep resident positioned on a bottom sheet throughout procedure?
6	Secure bottom sheet to mattress (e.g., for fitted sheet secure over all four corners of the mattress; for flat sheet, tuck at head of bed and on sides and extend toward bottom of mattress so that resident's heels are not against any exposed mattress)?
7	Leave bottom sheet free of creases or folds?
8	Turn or position resident to remove or replace sheet(s) without pulling sheets in a manner that creates friction and risks skin shearing?
9	Replace the top sheet over resident with a clean sheet?
10	Tuck top sheet under foot of mattress leaving sheet placed loosely, avoiding pressure against toes and allowing for foot movement?
11	Leave top sheet placed on top of resident to cover body up to shoulder level, without tucking in along sides?
12	Keep pillow positioned under resident's head throughout and at the end of the procedure, except when removed briefly to replace pillowcase?
13	Complete procedure with resident positioned between the top and bottom sheet?
14	Complete skill placing soiled linens in hamper and disposing of trash?
15	Ask resident about preferences during care? (IC)
16	Use Standard Precautions and infection control measures when providing care? (IC)
17	Ask resident about comfort or needs during care or before care completed? (IC)

Change bed linen while the resident remains in bed	
18	Promote resident's rights during care? (IC)
19	Promote resident's safety during care? (IC)

Change resident's position to a supported side-lying position	
The candidate is asked to change the position of a resident who is lying on his/her back, to a side-lying position. The resident requires support to remain positioned on the side. The role of the resident is played by a person.	
Does the candidate:	
1	Greet resident, address by name, and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Assist resident with turning onto side before placing positioning devices?
4	Keep resident positioned a safe distance from the edge of the bed at all times?
5	Use positioning device/padding or pillow under or against resident's back that maintains side-lying position?
6	Leave resident positioned on side with upper knee bent in front of the lower leg?
7	Support resident's top leg by placing device(s)/ padding or pillow(s) between legs?
8	Position device(s)/padding or pillow(s) placed between legs so that bony prominences of the knees and ankles are separated?
9	Leave the resident positioned on side without lying on the shoulder, arm, and hand?
10	Leave pillow placed under head positioned to also support the resident's neck and chin?
11	Place device/padding or pillow positioned to support the resident's upper arm, supporting both the shoulder and arm?
12	Ask resident about preferences during care? (IC)
13	Use Standard Precautions and infection control measures when providing care? (IC)
14	Ask resident about comfort or needs during care or before care completed? (IC)
15	Promote resident's rights during care? (IC)
16	Promote resident's safety during care? (IC)

Dress a resident who has a weak arm	
The candidate is asked to put a long-sleeved button-front shirt, pants, and socks on a resident who is lying in bed. The resident is not able to help with the dressing and has a weak arm. A mannequin is used for the role of the resident	
Does the candidate:	
1	Greet resident, address by name, and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Include resident in decision-making about clothing to wear?
4	Collect all garments before removing hospital gown?
5	Support affected arm while undressing and dressing?
6	Remove hospital gown?
7	Dress affected arm first?
8	Gather up sleeve to ease pulling over affected arm?
9	Dress resident by putting on pants, shirt with sleeves, and socks?
10	Move resident's extremities gently without over-extension or force when undressing and dressing?
11	Apply clothing correctly (e.g. front of shirt in front), adjust clothing for comfort, neatness, alignment, and close fasteners?
12	Place dirty gown in hamper?
13	Keep resident positioned a safe distance from the edge of the bed at all times?
14	Ask resident about preferences during care? (IC)
15	Use Standard Precautions and infection control measures when providing care? (IC)
16	Ask resident about comfort or needs during care or before care completed? (IC)
17	Promote resident's rights during care? (IC)
18	Promote resident's safety during care? (IC)

Empty contents of resident's urinary drainage bag, and measure and record urine output on an Intake and Output (I&O) form	
The candidate is asked to empty the resident's urinary drainage bag into a graduate container and to measure the amount of urine. An Intake and Output (I&O) Form (see sample on website) is provided to record the measurement. The output should be recorded as urine and the correct time recorded for the measurement. The role of the resident is played by either a person or mannequin. *(not tested in Wyoming)*	
Does the candidate:	
1	Greet resident, address by name, and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Wear gloves while handling the urinary drainage bag, graduate, or any urine-filled container, and remove gloves before documenting I&O?

Empty contents of resident's urinary drainage bag, and measure and record urine output on an Intake and Output (I&O) form	
4	Set graduate or bedpan on barrier placed on floor and empty full contents of drainage bag into the graduate or bedpan?
5	Empty contents of urinary drainage bag without contaminating drainage tube (e.g., touching container) and close and protect drain (e.g., clamp and tuck drain into pocket) after emptying drainage bag?
6	Set graduate on flat surface protected with barrier to read, obtaining measurement by reading graduate at eye level, and if urine poured into graduate from a bedpan, complete task over toilet pouring the full amount of urine into the graduate?
7	Empty urine in graduate into toilet after measuring, rinse and dry container, pouring rinse water into toilet?
8	Record output with clean hands?
9	Record output within +/- 50 mL/cc's of nurse's measurement?
10	Record output as urine and indicate the correct time on the I&O form?
11	Leave bag hanging from bed frame (not side rail), and drainage bag and tubing off (not touching) the floor?
12	Keep urinary drainage bag positioned lower than bladder throughout care?
13	Complete skill having stored equipment, placing soiled linens in hamper, and disposing of trash?
14	Ask resident about preferences during care? (IC)
15	Use Standard Precautions and infection control measures when providing care? (IC)
16	Ask resident about comfort or needs during care or before care completed? (IC)
17	Promote resident's rights during care? (IC)
18	Promote resident's safety during care? (IC)

Feed a resident who is sitting in a chair	
The candidate is asked to feed a snack to a resident who is not able to feed him/herself. The resident is sitting in a chair in an inappropriate position for feeding. A Food and Fluid Intake Form (sample provided on the website) is provided to record the resident's estimated food and fluid intake. The role of the resident is played by a person.	
Does the candidate:	
1	Greet resident, address by name, and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Assist or cue resident to sit upright in chair before feeding?
4	Offer or assist resident to wash hands before feeding using a damp washcloth, paper towel, or hand wipe?

Feed a resident who is sitting in a chair	
5	Sit while feeding the resident?
6	Offer to protect resident's clothing with a barrier before feeding, and if used, remove barrier at end of feeding?
7	Use spoon to feed?
8	Offer fluids to drink throughout feeding; at least every 2-3 bites of food?
9	Allow resident the opportunity to swallow before feeding the next bite?
10	Converse with resident during meal (e.g., encourage intake)?
11	Leave area around resident's mouth clean and dry when care completed?
12	Complete skill placing any used linen in hamper, disposing of trash, and leaving overbed table dry?
13	Record the amount of the resident's food intake on the Food and Fluid Intake Form within 25% of the nurse's measurement?
14	Record the amount of the resident's fluid intake on the Food and Fluid Intake Form within 25% of the nurse's measurement?
15	Ask resident about preferences during care? (IC)
16	Use Standard Precautions and infection control measures when providing care? (IC)
17	Ask resident about comfort or needs during care or before care completed? (IC)
18	Promote resident's rights during care? (IC)
19	Promote resident's safety during care? (IC)

Measure and record a resident's radial pulse	
The candidate is asked to take the resident's radial pulse, measured at the wrist. The pulse should be counted for one full minute. A Measurement Form (sample provided on the website) is provided to record the resident's pulse rate. The role of the resident is played by a person.	
Does the candidate:	
1	Greet resident, address by name, and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Support resident's arm in manner to avoid dangling while pulse is taken?
4	Use fingers (not thumb) to take pulse?
5	Places fingers on wrist at radial pulse to measure pulse rate?
6	Count pulse for one full minute?
7	Record resident's pulse rate on Measurement Form within +/- 4 beats per minute of nurse's measurement?
8	Ask resident about preferences during care? (IC)
9	Use Standard Precautions and infection control measures when providing care? (IC)
10	Ask resident about comfort or needs during care or before care completed? (IC)
11	Promote resident's rights during care? (IC)
12	Promote resident's safety during care? (IC)

Measure and record a resident's respirations	
The candidate is asked to count the resident's respirations. The respirations should be counted for one full minute. During the test, since this skill is tested separately from the measure and record pulse skill, candidates are allowed to tell the resident that his/her pulse is being counted or vital signs taken, instead of stating that respirations are being counted. A Measurement Form (sample provided on the website) is provided to record the resident's respiration rate. The role of the resident is played by a person.	
Does the candidate:	
1	Greet resident, address by name, and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Measure rate of respirations without providing instructions to resident about how to breathe?
4	Count respirations for one full minute?
5	Record resident's respiration rate on Measurement Form within +/- 2 breaths per minute of nurse's measurement?
6	Ask resident about preferences during care? (IC)
7	Use Standard Precautions and infection control measures when providing care? (IC)
8	Ask resident about comfort or needs during care or before care completed? (IC)
9	Promote resident's rights during care? (IC)
10	Promote resident's safety during care? (IC)

Provide catheter care to a female resident who has an indwelling urinary catheter	
The candidate is asked to provide catheter care to a female resident who has an indwelling urinary catheter. Soap and water should be used for the catheter care. For testing purposes, only the cleansing of the front perineal area and catheter are evaluated; cleansing of the rectal area and buttocks is not tested in this skill. A mannequin is used for the role of the resident.	
Does the candidate:	
1	Greet resident, address by name, and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Wear gloves while providing catheter care, cleaning equipment, and handling soiled underpads, washcloths, and towels?
4	Position towel or underpad under buttocks/thigh area before cleansing, and when care completed remove towel or underpad, or leave resident on a dry underpad?

Provide catheter care to a female resident who has an indwelling urinary catheter	
5	Use water of safe temperature for washing and rinsing?
6	Use soapy washcloth to clean inside labia?
7	Change spot on soapy washcloth for each washing stroke, wiping from front to back when cleansing inside labia?
8	Cleanse catheter using clean area of washcloth, washing away from body and down the catheter at least 3-4 inches?
9	Use clean soap-free wet washcloth to remove soap?
10	Change spot on washcloth for each rinsing stroke, wiping front to back inside labia, and away from body when rinsing catheter?
11	Dry perineal area, from front to back after completing cleansing and rinsing?
12	Leave tubing free of kinks or obstructions, and keep tubing and urinary drainage bag off floor?
13	Keep urinary drainage bag positioned lower than bladder throughout procedure?
14	Complete skill having rinsed, dried and stored basin, placing soiled linens in hamper, disposing of trash, and leaving overbed table dry?
15	Keep resident positioned a safe distance from the edge of the bed at all times?
16	Ask resident about preferences during care? (IC)
17	Use Standard Precautions and infection control measures when providing care? (IC)
18	Ask resident about comfort or needs during care or before care completed? (IC)
19	Promote resident's rights during care? (IC)
20	Promote resident's safety during care? (IC)

Provide foot care to a resident who is sitting in a chair	
The candidate is asked to provide foot care to a resident. Soap and water is used and foot care is provided to only one foot. The resident is sitting in a chair. The resident's sock and shoe are replaced at the end of the skill. The resident role is played by a person.	
Does the candidate:	
1	Greet resident, address by name and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Place water filled basin on protective barrier on floor to prepare for foot care?
4	Use water of safe temperature for soaking foot?
5	Soak resident's foot in basin of water?
6	Use soapy washcloth to wash foot without adding soap directly to basin of water?
7	Wash top and bottom of foot and between toes?
8	Remove soap from foot including between toes?

Provide foot care to a resident who is sitting in a chair	
9	Dry entire top and bottom of foot including between toes?
10	Warm lotion before applying to foot (e.g., warming in hands, placing bottle in warm water)?
11	Apply lotion to top and bottom of foot, excluding between toes?
12	Remove visible excess lotion from foot if present after applying?
13	Apply sock to foot leaving sock smooth, and replace shoe; leaving any fasteners, such as ties, secured?
14	Provide support to lower extremity throughout procedure as needed to avoid strain?
15	Avoid placing resident's barefoot directly on floor before, during or after foot care?
16	Complete skill having rinsed, dried and stored basin, placing soiled linens in hamper, and disposing of trash?
17	Ask resident about preferences during care? (IC)
18	Use Standard Precautions and infection control measures when providing care? (IC)
19	Ask resident about comfort or needs during care or before care completed? (IC)
20	Promote resident's rights during care? (IC)
21	Promote resident's safety during care? (IC)

Provide mouth care to a resident who has a denture	
A resident is sitting at an overbed table and the resident's denture is in a denture cup. The resident is not able to provide own mouth or denture care. The resident's denture needs to be cleaned and the resident needs mouth care. The denture is stored in a denture cup after cleaning. The role of the resident is played by a person.	
Does the candidate:	
1	Greet resident, address by name and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Wear gloves when handling denture, providing mouth care, and rinsing equipment?
4	Protect denture from damage while cleaning by lining sink, filling sink with water, or holding denture directly over basin?
5	Protect denture from contamination (e.g., use a barrier when setting denture on surfaces, avoid placing or rinsing denture in sink water)?
6	Use cool or tepid running water to clean and rinse denture?
7	Brush all surfaces of the denture using a toothbrush or denture brush with toothpaste?
8	Rinse denture to remove toothpaste?

Provide mouth care to a resident who has a denture	
9	Handle clean denture maintaining cleanliness after brushed, placing denture in denture cup filled with clean cool or tepid water?
10	Leave denture cup on resident's bedside cabinet or overbed table unless following resident's preference about where denture cup should be stored?
11	Protect resident's clothing before providing mouth care and remove protective cover when care is completed?
12	Provide mouth care cleaning upper and lower gums, using moistened foam-tipped applicator or toothbrush with toothpaste?
13	Offer resident cup of water to rinse mouth after mouth care?
14	Provide emesis basin or disposable cup to resident to use for spitting as needed?
15	Leave area around resident's mouth clean and dry when care is completed?
16	Complete skill having rinsed, dried and stored basin (if used), emptying sink of water and removing barrier from sink (if used), placing soiled linens in hamper, disposing of trash, and leaving overbed table dry?
17	Ask resident about preferences during care? (IC)
18	Use Standard Precautions and infection control measures when providing care? (IC)
19	Ask resident about comfort or needs during care or before care completed? (IC)
20	Promote resident's rights during care? (IC)
21	Promote resident's safety during care? (IC)

Provide mouth care to a resident who has teeth	
A resident who has his/her natural teeth is lying in bed and needs mouth care. The resident is not able to provide own mouth care. The role of the resident is played by a person.	
Does the candidate:	
1	Greet resident, address by name, and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Assist resident to sitting position in bed by raising HOB and using pillows as needed to position resident upright at 60° to 90° before offering fluid or brushing teeth?
4	Protect resident's clothing before providing mouth care and remove protective cover when care completed?
5	Moisten toothbrush with water and apply toothpaste before brushing teeth?
6	Wear gloves when brushing resident's teeth and wear throughout mouth care including when rinsing basin and toothbrush?
7	Brush sides and biting surfaces of teeth and the gum line with a gentle motion?

Provide mouth care to a resident who has teeth	
8	Offer resident cup of water to rinse mouth after brushing?
9	Provide resident an emesis basin or disposable cup to use for spitting as needed, such as after rinsing mouth?
10	Leave area around resident's mouth clean and dry when care completed?
11	Complete skill having rinsed, dried and stored basin, placing soiled linens in hamper, disposing of trash, and leaving overbed table dry?
12	Ask resident about preferences during care? (IC)
13	Use Standard Precautions and infection control measures when providing care? (IC)
14	Ask resident about comfort or needs during care or before care completed? (IC)
15	Promote resident's rights during care? (IC)
16	Promote resident's safety during care? (IC)

Provide perineal care to a female resident who is incontinent of urine	
The candidate is asked to provide perineal care to a resident who is incontinent of urine. The resident is lying in bed on an underpad and is wearing a hospital-style gown that is dry. A mannequin is used for the role of the resident.	
Does the candidate:	
1	Greet resident, address by name and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Wear gloves while providing perineal care, cleaning equipment, and handling soiled underpads, washcloths and towels?
4	Remove soiled underpad and replace with dry underpad before beginning cleansing?
5	Use water of safe temperature for washing and rinsing?
6	Use soapy washcloth to wash front perineum to include genital and skin fold areas of groin?
7	Change spot on washcloth for washing and rinsing strokes when cleansing inside the vulva?
8	Wipe from front to back with all washing and rinsing strokes when cleansing the front perineum, to include the genital and skin fold areas of groin?
9	Use clean, soap-free, wet washcloth to remove soap from resident's skin on front perineum?
10	Dry front perineum after washed and rinsed, using towel to pat dry, moving from front to back?
11	Replace water in basin during care if it becomes cold or soapy?
12	Position resident on side to prepare for cleansing of buttocks and rectal area?
13	Wash, rinse, and dry buttocks and rectal area?
14	Wipe from front to back with all washing and rinsing strokes when cleansing the rectal area?

Provide perineal care to a female resident who is incontinent of urine	
15	Leave resident on dry underpad at completion of procedure?
16	Complete skill having rinsed, dried and stored basin, placing soiled linens in hamper, disposing of trash, and leaving overbed table dry?
17	Keep resident positioned a safe distance from the edge of the bed at all times?
18	Ask resident about preferences during care? (IC)
19	Use Standard Precautions and infection control measures when providing care? (IC)
20	Ask resident about comfort or needs during care or before care completed? (IC)
21	Promote resident's rights during care? (IC)
22	Promote resident's safety during care? (IC)

Provide resident hand and nail care	
The candidate is asked to provide hand and nail care to one hand. The role of the resident is played by a person. *(not tested in Wyoming)*	
Does the candidate:	
1	Greet resident, address by name, and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Use water of safe temperature for soaking fingers or hand?
4	Place fingers or full hand into basin of water to soak before removing residue from under nails?
5	Clean hand surfaces using wet washcloth, cleaning between fingers, and if soap used, rinse or remove soap using a clean, soap-free, wet washcloth?
6	Use flat edge of orangewood stick to remove residue under tips of each fingernail, and remove residue from edge of orangewood stick, if present, before using again to clean under another fingernail?
7	Rest resident's hand on barrier such as a dry towel once removed from basin while providing nail and hand care?
8	Dry hand before completing care?
9	Leave nails smooth (e.g., free of jagged edges)?
10	Apply lotion to cleaned hand after nail care finished?
11	Support resident's arm if raised off table when providing nail and hand care?
12	Remove visible excess lotion from hand if present at completion of hand care?
13	Complete skill having rinsed, dried and stored basin, placing soiled linens in hamper, disposing of trash, disposing of or storing emery board and orangewood stick, and leaving overbed table dry?
14	Ask resident about preferences during care? (IC)
15	Use Standard Precautions and infection control measures when providing care? (IC)

Provide resident hand and nail care	
16	Ask resident about comfort or needs during care or before care completed? (IC)
17	Promote resident's rights during care? (IC)
18	Promote resident's safety during care? (IC)

Provide resident a partial bed bath and back rub	
The candidate is asked to bathe a resident who is in bed and who is not able to help with his/her bathing. For testing purposes only, the candidate is asked to wash just part of the body so that technique can be evaluated. Instructions ask the candidate to wash the resident's face, neck, back, one hand and arm, and the chest and abdomen. Soap and water should be used for the bathing. The resident also needs a back rub. When completing the skill, the mannequin is dressed in a clean hospital-style gown. A mannequin is used for the role of the resident.	
Does the candidate:	
1	Greet resident, address by name and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Use water of safe temperature for washing and rinsing?
4	Cleanse eyes by using soap-free washcloth wiping eye from the inside corner to the outside corner, changing to clean area of washcloth before returning to inner corner and before cleansing the other eye?
5	Wash resident's face using a soap-free wet washcloth, unless ascertains resident's preference to use soap before washing face?
6	Leave face dry after washing?
7	Contain corners of washcloth while washing and rinsing (e.g., forming mitt)?
8	Protect bed linen from becoming wet during washing and rinsing of body (non-face)?
9	Wash resident's body (non-face) using a wet washcloth with small amount of soap?
10	Use clean, soap-free, wet washcloth to remove soap from resident's skin?
11	Wash and rinse resident's neck, hand, arm, chest, and abdomen?
12	Dry neck, hand, arm, chest, and abdomen?
13	Support arm if raised off bed to wash, rinse, and dry the back side of arm?
14	Assist resident to turn onto side before cleansing back?
15	Wash, rinse, and dry back?
16	Replace basin of water during task if it becomes cold or soapy?
17	Warm lotion before applying to resident's back (e.g., warming in hands, placing bottle in warm water)?
18	Use lotion to provide back rub with long gliding and circular motions?

Provide resident a partial bed bath and back rub	
19	Place clean hospital gown on resident and secure gown in back?
20	Complete skill having rinsed, dried and stored basin, placing soiled linens in hamper, disposing of trash, and leaving overbed table dry?
21	Keep resident positioned a safe distance from the edge of the bed at all times?
22	Ask resident about preferences during care? (IC)
23	Use Standard Precautions and infection control measures when providing care? (IC)
24	Ask resident about comfort or needs during care or before care completed? (IC)
25	Promote resident's rights during care? (IC)
26	Promote resident's safety during care? (IC)

Provide resident with passive range of motion (ROM) exercises to one elbow and wrist	
The candidate is asked to provide range of motion exercise to a resident who is not able to help with the exercises. The resident needs his/her elbow flexed and extended, and the wrist flexed and hyperextended. For testing purposes, the resident needs three repetitions of both exercises. The instructions provided at the test site will indicate whether the exercise is to the left or right side. The role of the resident is played by a person.	
Does the candidate:	
1	Greet resident, address by name, and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Exercise **only correct joints** and **only correct side** when performing range of motion (ROM)?
4	Support extremity to protect the working joint throughout ROM exercises?
5	Bend and straighten arm at elbow through ROM (flexion/extension)?
6	Move wrist through ROM by bending wrist to move hand down and back (flexion and hyperextension)?
7	Ask resident to report discomfort during ROM or ask if resident has discomfort during ROM exercises?
8	Control extremity throughout ROM exercises providing smooth, slow, non-forceful movement?
9	Ask resident about preferences during care? (IC)
10	Use Standard Precautions and infection control measures when providing care? (IC)
11	Ask resident about comfort or needs during care or before care completed? (IC)
12	Promote resident's rights during care? (IC)
13	Promote resident's safety during care? (IC)

Provide resident with passive range of motion (ROM) exercises to one shoulder	
The candidate is asked to provide range of motion exercise to a resident who is not able to help with the exercises. The resident needs his/her shoulder flexed and extended, and abducted and adducted. For testing purposes, the resident needs three repetitions of both exercises. The instructions provided at the test site will indicate whether the exercise is to the left or right side. The role of the resident is played by a person.	
Does the candidate:	
1	Greet resident, address by name, and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Exercise **only correct joints** and **only correct side** when performing range of motion (ROM)?
4	Support extremity to protect the working joint throughout ROM exercises?
5	Move shoulder through ROM, raising and lowering arm alongside, toward head of bed (HOB) and back to mattress (flexion/extension)?
6	Move resident's shoulder through ROM taking arm away from side and back to side (abduction/ adduction)?
7	Ask resident to report discomfort during ROM **or** ask if resident has discomfort during ROM exercises?
8	Control extremity throughout ROM exercises providing smooth, slow, non-forceful movement?
9	Ask resident about preferences during care? (IC)
10	Use Standard Precautions and infection control measures when providing care? (IC)
11	Ask resident about comfort or needs during care or before care completed? (IC)
12	Promote resident's rights during care? (IC)
13	Promote resident's safety during care? (IC)

Provide resident with passive range of motion (ROM) exercises to one hip, knee and ankle	
The candidate is asked to provide range of motion exercise to a resident who is not able to help with the exercises. The resident needs his/her hip and knee flexed and extended, and dorsiflexion and plantar flexion to the ankle. For testing purposes, the resident needs three repetitions of both exercises. The instructions provided at the test site will indicate whether the exercise is to the left or right side. The role of the resident is played by a person.	
Does the candidate:	
1	Greet resident, address by name, and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Exercise **only correct joints** and **only correct side** when performing range of motion (ROM)?

	Provide resident with passive range of motion (ROM) exercises to one hip, knee and ankle
4	Support extremity to protect the working joint throughout ROM exercises?
5	Move resident's hip and knee through ROM, flexing knee and hip, raising toward torso and returning back to mattress (flexion/extension)?
6	Support extremity to prevent heel friction against mattress during ROM exercises?
7	Move resident's foot up toward head and point down toward the mattress through ROM (dorsiflexion/plantar flexion)?
8	Ask resident to report discomfort during ROM **or** ask if resident has discomfort during ROM exercises?
9	Control extremity throughout ROM exercises providing smooth, slow, non-forceful movement?
10	Ask resident about preferences during care? (IC)
11	Use Standard Precautions and infection control measures when providing care? (IC)
12	Ask resident about comfort or needs during care or before care completed? (IC)
13	Promote resident's rights during care? (IC)
14	Promote resident's safety during care? (IC)

	Transfer the resident from the bed into a wheelchair using a pivot technique and a transfer/gait belt
The candidate is asked to transfer a resident who is lying in bed, into a wheelchair. A pivot transfer technique is required and a transfer/gait belt is required. The resident is able to stand but cannot take steps. The role of the resident is played by a person.	
Does the candidate:	
1	Greet resident, address by name and introduce self? (IC)
2	Provide explanations to resident about care before beginning and during care? (IC)
3	Place wheelchair near resident's bed before assisting resident to sit at edge of bed?
4	Move wheelchair footrests out of the way before standing resident for transfer (e.g., lift, swing, or remove)?
5	Place nonskid footwear (e.g., shoes) on resident before standing resident for transfer?
6	Provide support to assist resident to sitting position on side of bed, without pulling resident by lower arms or hands?
7	Provide resident opportunity to sit on side of bed to adjust to change in position before beginning transfer?
8	Position resident's feet flat on the floor before standing to begin transfer?
9	Prepare for transfer by positioning wheelchair with front interior wheel close enough to bed so that transfer can be completed as a pivot?

	Transfer the resident from the bed into a wheelchair using a pivot technique and a transfer/gait belt
10	Lock wheelchair before standing resident to begin transfer?
11	Apply transfer/gait belt before standing resident, placing around the resident's waist and over clothing, secured so that only flat fingers/hand fit under belt, and the belt does not catch skin or skin folds (e.g. breast tissue)?
12	Provide cue or signal to resident before assisting to stand?
13	Stand in front of resident reaching under resident's arms to hold transfer/gait belt at sides or around back throughout transfer?
14	Brace one or both of resident's legs during transfer while assisting to stand, turn, and sit?
15	Maintain own body mechanics when assisting resident to stand, turn, and sit?
16	Transfer resident as a pivot completed without having resident take step(s) to reach wheelchair, and before assisting resident to sit in wheelchair, positions with the back of resident's legs against the seat of wheelchair?
17	Support resident to provide for controlled gentle lowering into seat of wheelchair?
18	Leave resident positioned in wheelchair in proper body alignment, hips against back of seat, and feet on footrests?
19	Remove transfer/gait belt from resident's waist without harming resident (e.g., pulling transfer/gait belt) when transfer is complete?
20	Ask resident about preferences during care? (IC)
21	Use Standard Precautions and infection control measures when providing care? (IC)
22	Ask resident about comfort or needs during care or before care completed? (IC)
23	Promote resident's rights during care? (IC)
24	Promote resident's safety during care? (IC)

APPENDIX I. SAMPLE EXAMINATIONS

FULL APPENDIX IS CONFIDENTIAL AND DESIGNATED AS SUCH IN THE LETTER OF SUBMITTAL.

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: ARC

Review Committee Member: Mary Ellen Bean RN. Date of Review Meeting: 4/24/2018

100/100

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%) indirect skills	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%)	3. Efficiency and cost. (20%)	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	5. Ability of the organization to meet the Performance Measures. (10%)
Further Probes	• state has control over skills being tested Validity; Reflects VT Skills; Test Level; Field Tested	arc's • written plan addresses these issues - no reason not to believe ARC will fulfil these points Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL	Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. B. Skill performance steps must be clear, objective, and evidence-based. C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. F. The candidate testing application is easy to read, understand, and complete.G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. H. Customer support is immediately available during all testing events for technical assistance. I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry.
Score	25%	20%	20%	25%	10%

0452

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: ARC

Review Committee Member: Peg Daly

Date of Review Meeting: 4/24/18

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%)	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%)	3. Efficiency and cost. (20%)	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	In state oversight (+) 5. Ability of the organization to meet the Performance Measures. (10%)
Further Probes	• Will need to determine what skills will be included and what to eliminate • Skill sets should be weighted evenly to ensure candidates are able to complete in allotted time • Same day results Validity; Reflects VT Skills; Test Level; Field Tested	Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL	• Change - Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. B. Skill performance steps must be clear, objective, and evidence-based. C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. F. The candidate testing application is easy to read, understand, and complete.G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. H. Customer support is immediately available during all testing events for technical assistance. — Call Center I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry. Call Center
Score	20/25	15/20	15/20	20/25	10/10

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: American Red Cross 90/100

Review Committee Member: Pamela Cota Date of Review Meeting: 4/24/18

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%)	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%)	3. Efficiency and cost. (20%)	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	5. Ability of the organization to meet the Performance Measures. (10%)
Further Probes	Validity; Reflects VT Skills; Test Level; Field Tested	Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL	Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. B. Skill performance steps must be clear, objective, and evidence-based. C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. F. The candidate testing application is easy to read, understand, and complete.G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. H. Customer support is immediately available during all testing events for technical assistance. I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry.
Score	20	20	20	20	10

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: ARC

Review Committee Member: Kristen Hunter

Date of Review Meeting: 4/24/18

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%) P3: California Massachusetts New Hampshire	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%) Work Plan P14	3. Efficiency and cost. (20%) 130 - was	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	5. Ability of the organization to meet the Performance Measures. (10%) Note: Application contained multiple Typos -
Further Probes	Subcontracted: MD, PA WY, WI, VT, DC P6: ALPINE TESTING SOLUTIONS: 60 Questions + 10 non-scored items P6 - Job task analysis P8 - Cut score 71.4% Validity; Reflects VT Skills; Test Level; Field Tested Skills test: can be customized for VT Needs Tests follow federal and state requirements	Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL	IN-STATE ~~Facilitator~~ NURSE COORDINATOR CADRE OF NURSE EXAM Admin. P12 Training on-job P12 + 13 Annual Evaluation Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. + B. Skill performance steps must be clear, objective, and evidence-based. + C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. OWN ATS job analysis + D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. + E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. + F. The candidate testing application is easy to read, understand, and complete.G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. + H. Customer support is immediately available during all testing events for technical assistance. + I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry. +
Score	25/25	20/20	20/20	24/25	9/10

98%

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: Red Cross

Review Committee Member: Suzanne Lemth Date of Review Meeting: 4. 24. 18

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%)	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%)	3. Efficiency and cost. (20%)	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	5. Ability of the organization to meet the Performance Measures. (10%)
Further Probes	Validity; Reflects VT Skills; Test Level; Field Tested	Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL	Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. B. Skill performance steps must be clear, objective, and evidence-based. C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. F. The candidate testing application is easy to read, understand, and complete.G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. H. Customer support is immediately available during all testing events for technical assistance. I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry.
Score	23%	20	20	25	10

0456

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: PVUE

Review Committee Member: Mary Ellen Beam RN

Date of Review Meeting: 4/27/18

60/100

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%)	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%)	3. Efficiency and cost. (20%)	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	5. Ability of the organization to meet the Performance Measures. (10%)
Further Probes	Validity; Reflects VT Skills; Test Level; Field Tested	Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL	Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. B. Skill performance steps must be clear, objective, and evidence-based. C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. F. The candidate testing application is easy to read, understand, and complete. G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. NO PVUE H. Customer support is immediately available during all testing events for technical assistance. I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry.
Score	25	5%	15%	15%	

60%

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: Pearson Vue

Review Committee Member: Peg Daly

Date of Review Meeting: 4/24/18

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%)	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%)	3. Efficiency and cost. (20%)	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	5. Ability of the organization to meet the Performance Measures. (10%)
Further Probes	Validity; Reflects VT Skills; Test Level; Field Tested	Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL	Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. B. Skill performance steps must be clear, objective, and evidence-based. C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. F. The candidate testing application is easy to read, understand, and complete. G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. H. Customer support is immediately available during all testing events for technical assistance. → I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry. →
Score	15/25	10/20	10/20	15/25	5/10

55/100

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: Pearson Vue

Review Committee Member: Kristen Hartree

Date of Review Meeting: 4/24/18

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%) NNAAP NCSBN instrument	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%)	3. Efficiency and cost. (20%) W 38 skills 100 138 OPTION B - STATE manages testing	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	5. Ability of the organization to meet the Performance Measures. (10%)
Further Probes	Validity; Reflects VT Skills; Test Level; Field Tested Page 12 - Page 13	Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances Plan for reports vs. lack of compliance	P. 15 Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL	Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. + B. Skill performance steps must be clear, objective, and evidence-based. + C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. + D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. + E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. + F. The candidate testing application is easy to read, understand, and complete.G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. + H. Customer support is immediately available during all testing events for technical assistance. − I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry. +
Score	25/25	5/20	15/20	5/25	5/10

0459

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: Pearson Vue

65/100

Review Committee Member: Pamela Cota

Date of Review Meeting: 4/24/18

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%)	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%)	3. Efficiency and cost. (20%)	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	5. Ability of the organization to meet the Performance Measures. (10%)
Further Probes	Validity; Reflects VT Skills; Test Level; Field Tested	Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL	Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. B. Skill performance steps must be clear, objective, and evidence-based. C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. F. The candidate testing application is easy to read, understand, and complete.G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. H. Customer support is immediately available during all testing events for technical assistance. I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry.
Score	25	10	10	20	0

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: Pearson Vue

75%

Review Committee Member: Suzanne Leavitt

Date of Review Meeting: April 24 2014

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%)	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%)	3. Efficiency and cost. (20%)	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	5. Ability of the organization to meet the Performance Measures. (10%)
Further Probes	Validity; Reflects VT Skills; Test Level; Field Tested	Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances did not commit to not switch vendors	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL most $	Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. B. Skill performance steps must be clear, objective, and evidence-based. C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. F. The candidate testing application is easy to read, understand, and complete.G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. H. Customer support is immediately available during all testing events for technical assistance. I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry.
Score	25	15	15	15	5

0461

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: Prometric

Review Committee Member: Suzanne Leartt

Date of Review Meeting: 4.24.18

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%)	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%)	3. Efficiency and cost. (20%)	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	5. Ability of the organization to meet the Performance Measures. (10%)
Further Probes	Validity; Reflects VT Skills; Test Level; Field Tested	Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances Compute Test? Yes - will not work	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL ~~Purchase~~ Test? no	Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. B. Skill performance steps must be clear, objective, and evidence-based. C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. F. The candidate testing application is easy to read, understand, and complete.G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. H. Customer support is immediately available during all testing events for technical assistance. I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry.
Score	18	5	20	18	5

0462

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: Prometric

Review Committee Member: Mary Ellen Bean RN Date of Review Meeting: 4/24/18

60/100

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%)	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%)	3. Efficiency and cost. (20%)	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	5. Ability of the organization to meet the Performance Measures. (10%)
Further Probes	Validity; Reflects VT Skills; Test Level; Field Tested use of computers	Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL	Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. B. Skill performance steps must be clear, objective, and evidence-based. C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. F. The candidate testing application is easy to read, understand, and complete.G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. H. Customer support is immediately available during all testing events for technical assistance. I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry.
Score	0%	20%	20%	20%	

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: Prometric

Review Committee Member: Peg Daly

Date of Review Meeting: 4/24/18

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%)	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%)	3. Efficiency and cost. (20%)	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	5. Ability of the organization to meet the Performance Measures. (10%)
Further Probes	Validity; Reflects VT Skills; Test Level; Field Tested	Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL	Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. B. Skill performance steps must be clear, objective, and evidence-based. C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. F. The candidate testing application is easy to read, understand, and complete.G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. H. Customer support is immediately available during all testing events for technical assistance. I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry.
Score	10/25	10/20	10/20	20/25	10/10

0464

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: Promotric 68/100

Review Committee Member: Kristin Hussher Date of Review Meeting: 4/24/18

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%) federal requirements - Page 4; Appendix E Pool of 1,806 items	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%) APPENDIX D pp 41-45 Comprehensive * Need to see → Establish Test sites	3. Efficiency and cost. (20%) 35 Written + oral 95 Skills	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%) APPENDIX A - P18	5. Ability of the organization to meet the Performance Measures. (10%) P. 13-14 - ongoing test site monitoring
Further Probes	* PASSING GRADE for individual skills may vary - due to difficulty P11 → Computerized testing Validity; Reflects VT Skills; Test Level; Field Tested PAGE 10 - Exam Validity: ① 2016 Conduct job analyses survey; ② ITEM WRITING ③ Pilot tests of New items ④ item level, exam level, overall statistics	* Hire + train Exam administrators Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances P11 Billing monthly Immediate feedback to candidates	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL * Did not see BON notification addressed	Similar Projects - Arkansas - Connecticut - New York - Wyoming - NM HI - MI FL - LA ID Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. − B. Skill performance steps must be clear, objective, and evidence-based. C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. + D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. + E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. P. 14 + F. The candidate testing application is easy to read, understand, and complete. P. 14 + G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. P 14 H. Customer support is immediately available during all testing events for technical assistance. P. 14 I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry. P 12 - NAEs are not contractors, trained + evaluated
Score	19/25	15/20	15/20	15/25 NO SUBCONTRACTOR	8/10

0465

2018 Nursing Assistant Testing Proposals Score Sheet

VENDOR: Prometric

78/100

Review Committee Member: Pamela Cota

Date of Review Meeting: 4/24/18

Criteria	1. Applicability and validity of test, including meeting federal requirements, and within the scope of nurse aide practice outlined in the attached list of skills, suitability for the type of person being tested, and success of field testing (25%)	2. Adequacy of work plan and schedule, including ability to meet deadlines. (20%)	3. Efficiency and cost. (20%)	4. Overall ability of the organization to carry out the program, including prior experience, qualifications of staff, ability to implement a program with minimal state support, and capacity to alter program if further changes occur at federal level. (25%)	5. Ability of the organization to meet the Performance Measures. (10%)
Further Probes	Validity; Reflects VT Skills; Test Level; Field Tested	Start 9/1/18; Statewide Testing Staff; Responsive Testing Schedule; Feedback to BON; Feedback to training site; Billing Mechanism; Activity Reports; Required Insurances	Tester travel; Testing Schedule; Testing sites; Info for instructors; Info for applicants; Info to BON, Billing to DAIL	Flexibility; RN Clinical Testers; Qualified written testers	A. Evaluator objectivity and interrater reliability. Due to Vermont's small size and rural nature, test candidates may be known to their evaluators. Bidders must describe how they will ensure objectivity and interrater reliability, include examples of evaluator training and ongoing performance management. B. Skill performance steps must be clear, objective, and evidence-based. C. Written test questions will be developed using a Nurse Aide Job Analysis and NCSBN research as the basis for new questions, skills and revisions. D. The vendor shall provide ongoing monitoring of test sites to include: flow of candidates, environment and equipment to ensure quality. E. All candidates shall be provided with a test date that is no more than 30 calendar days from the completed application being received that is within a 2-hour drive from the training program. F. The candidate testing application is easy to read, understand, and complete.G. If the bidder utilizes subcontractors, there shall be no change of subcontractor during the contract period. H. Customer support is immediately available during all testing events for technical assistance. I. Customer support is available to candidates and training programs regarding questions and/or concerns within 48 hours of inquiry.
Score	15	20	15	20	8