- WAC 388-112A-0320 What are the core competencies and learning objectives for the 70-hour home care aide training? The 70-hour home care aide basic training includes core competencies that describe the behavior and skills that a long-term care worker must exhibit when working with residents and the learning objectives associated with each competency as follows:
- (1) Communicate effectively and in a respectful and appropriate manner with residents, family members, and care team members:
- (a) Recognize how verbal and nonverbal cues impact communication with the resident and care team;
- (b) Engage and respect the resident through verbal and nonverbal communication;
- (c) Listen attentively and determine that the resident, when able, understands what has been communicated;
- (d) Recognize and acknowledge resident's communication including indicators of pain, confusion, or misunderstanding;
- (e) Utilize communication strategies to deal with difficult situations; and
- (f) Recognize common barriers to effective communication and identify how to eliminate them.
 - (2) Regarding long-term care worker self-care:
- (a) Identify behaviors, practices, and resources to reduce stress and avoid burnout;
- (b) Recognize common barriers to self-care and ways to overcome them; and
- (c) Recognize aspects of a long-term care worker's job that can lead to stress and burnout, common signs and symptoms of stress and burnout, and the importance of taking action to practice self-care to avoid burnout.
- (3) Regarding the competency of effective problem solving, use effective problem solving skills:
- (a) Explain why it is necessary to understand and utilize a problem solving method;
 - (b) Implement a problem solving process/method; and
- (c) Identify obstacles to effective problem solving and ways to overcome them.
- (4) Regarding the competency of resident rights and dignity, take appropriate action to promote and protect a resident's legal and human rights as protected by federal and Washington state laws, including:
- (a) Protect a resident's confidentiality including what is considered confidential information, who a long-term care worker is allowed or not allowed to give confidential information to, and how to respond if a non-care team member asks for confidential information;
- (b) Promote a resident's dignity and privacy and encourage and support a resident's maximum independence when providing care;
- (c) Maintain a restraint-free environment, including physical, chemical, and environmental restraints and use common, safe alternatives to restraint use; and
- (d) Protect and promote the resident's right to live free of abuse, neglect, abandonment, and financial exploitation.
- (5) Regarding the competency of recognizing indicators of abuse and understanding the mandatory reporting requirements, recognize the signs of abuse and report suspected abuse, abandonment, neglect, and financial exploitation:
- (a) Describe long-term care workers' responsibilities as a mandatory reporter as described in RCW 74.34.020 through 74.34.053; and

- (b) Identify common indications of abuse, abandonment, neglect, and financial exploitation.
- (6) Regarding the competency of resident directed care, take appropriate action when following a resident's direction regarding care:
- (a) Describe a worker's role in resident directed care including determining, understanding, and supporting a resident's choices;
- (b) Describe the importance and impact of resident directed care on a resident's independence, self-determination, and quality of life;
- (c) Identify effective problem solving strategies that help balance a resident's choice with personal safety; and
- (d) Report concerns when a resident refuses care or makes choices that present a possible safety concern.
- (7) Regarding the competency of cultural sensitivity, provide culturally appropriate care:
- (a) Describe how cultural background, lifestyle practices, and traditions can impact care; and
- (b) Use methods to determine and ensure that these are respected and considered when providing care.
- (8) Regarding the competency of body mechanics, utilize current best practices and evidence-based methods of proper body mechanics while performing tasks as outlined in the care plan.
 - (9) Regarding the competency of fall prevention:
- (a) Identify fall risk factors and take action to reduce fall risks for a resident; and
- (b) Take proper steps to assist a resident who is falling or has fallen.
- (10) Regarding the competency of skin and body care, use of personal care practices that promote and maintain skin integrity:
- (a) Explain the importance of observing a resident's skin, when to observe it, and what to look for, including common signs and symptoms of skin breakdown;
 - (b) Identify risk factors of skin breakdown;
- (c) Observe skin at pressure point locations and report any concerns;
- (d) Describe what a pressure ulcer is, what it looks like, and what action to take if a resident appears to be developing or develops a pressure ulcer;
- (e) Describe current best practices that protect and maintain a resident's skin integrity including position changes when sitting or lying for extended periods, and proper positioning and transfer techniques;
- (f) Implement current best practices that promote healthy skin including hygiene, nutrition, hydration, and mobility; and
- (g) Identify when to report skin changes and who to report them to.
- (11) Regarding the competency on long-term care worker roles and boundaries, adhere to basic job standards, expectations, and requirements and maintain professional boundaries:
- (a) Identify when, how, and why to obtain information from appropriate sources about a resident's condition or disease for which they are receiving services and describe how to use this information to provide appropriate, individualized care;
- (b) Describe a resident's baseline functioning level using information provided in the service plan and explain why it is important to know a resident's baseline;
- (c) Identify changes in a resident's physical, mental, and emotional state through observation;

- (d) Report changes from baseline and concerns to the appropriate
 care team member(s);
- (e) Identify basic job standards and requirements (such as coming to work on time) and describe how maintaining these standards are critical to a resident's safety and well-being;
- (f) Explain the purpose of a service plan and describe how it is created, used, and modified;
- (g) Use a resident's service plan to direct a worker's job tasks and any resident directed care tasks;
- (h) Identify what is required of a long-term care worker, as described in WAC 388-112A-0550, prior to performing a nurse-delegated task;
- (i) Describe the role of a care team and a long-term care worker's role in the care team;
- (j) Describe professional boundaries and the importance of maintaining them; and
- (k) Identify signs of unhealthy professional boundaries, barriers to keeping clear professional boundaries, and ways to avoid or eliminate them.
- (12) Regarding the competency on supporting activities of daily living, perform required personal care tasks to the level of assistance needed and according to current best practices and evidence-based guidelines:
- (a) Demonstrate, in the presence of a qualified instructor, all critical steps required for personal care tasks including but not limited to:
 - (i) Helping a resident walk;
 - (ii) Transferring a resident from a bed to a wheelchair;
 - (iii) Turning and repositioning a resident in bed;
 - (iv) Providing oral care;
 - (v) Cleaning and storing dentures;
 - (vi) Shaving a face;
 - (vii) Providing fingernail care;
 - (viii) Providing foot care;
 - (ix) Providing a bed bath;
 - (x) Assisting a resident with a weak arm to dress;
 - (xi) Putting knee-high elastic stockings on a resident;
 - (xii) Providing passive range of motion for one shoulder;
 - (xiii) Providing passive range of motion for one knee and ankle;
 - (xiv) Assisting a resident to eat;
 - (xv) Assisting with peri-care;
 - (xvi) Assisting with the use of a bedpan;
 - (xvii) Assisting with catheter care;
 - (xviii) Assisting with condom catheter care; and
 - (xix) Providing medication assistance;
- (b) In the process of performing the personal care tasks, use proper body mechanics, listen attentively, speak clearly and respectfully while explaining what the long-term care worker is doing, incorporate resident preferences, maintain privacy and dignity, support the resident's level of ability, and assure the resident's comfort and safety;
- (c) Appropriately utilize assistive device(s) specified on the service plan;
- (d) Describe any safety concerns related to each task and how to address the concerns;
- (e) Demonstrate an understanding of bowel and bladder functioning, including factors that promote healthy bowel and bladder func-

tioning, and the signs, symptoms, and common causes of abnormal bowel and bladder function; and

- (f) Identify the importance of knowing a resident's bowel and bladder functioning baseline and when to report changes.
- (13) Regarding the core competency on food preparation and handling, plan and prepare meals using a basic knowledge of nutrition and hydration, incorporating any diet restrictions or modifications, and prevent food borne illness by preparing and handling food in a safe manner:
- (a) Describe how nutrition and hydration can impact a resident's health;
- (b) Plan, shop, and prepare meals for a resident according to the guidelines of good nutrition and hydration, incorporating any dietary requirements and restrictions per the service plan and resident preferences;
- (c) Describe common signs of poor nutrition and hydration, when to report concerns, and who to report concerns to;
- (d) Understand that diet modification is required for certain health conditions, including dysphagia, and describe how to identify diet modifications required for a resident;
- (e) Recognize when a resident's food choices vary from specifications on the care plan and describe when to report concerns and who to report them to;
- (f) Describe what causes food borne illness, the risks associated with food borne illness, and examples of potentially hazardous foods;
 - (g) Describe appropriate food handling practices, including:
 - (i) Avoiding cross contamination from one food to another;
- (ii) Safe storage requirements for cooling of leftover foods, including:
 - (A) Depth;
 - (B) Types of containers and temperatures;
- (C) The need to maintain food at proper temperatures to limit bacterial growth; and
- (D) What are the safe food storage and holding temperatures for both cold and hot foods;
 - (iii) Best practices for thawing and reheating food; and
- (iv) Using clean gloves (if possible) and clean utensils when preparing food;
- (h) Describe the importance and correct procedure for cleaning and disinfecting food contact surfaces; and
- (i) Describe why a long-term care worker with certain types of illnesses and symptoms must not prepare food.
- (14) Regarding the competency of medication assistance, appropriately assist with medications:
- (a) Identify what a long-term care worker is allowed and not allowed to do when assisting with medications as described in chapter 246-888 WAC;
- (b) Define terms related to medication assistance including prescription drugs, over the counter medications, and as needed (PRN) medications, medication side effects, and drug interactions;
- (c) Identify common symptoms of medication side effects, when to report concerns, and who to report them to;
- (d) Store medications according to safe practices and the label instructions;
- (e) Describe, in the proper sequence, each of the five rights of medication assistance; and

- (f) Identify what to do for medication-related concerns, including describing ways to work with a resident who refuses to take medications, identifying when to report when a resident refuses medication, or there are other medication-related concerns, who to report these concerns to, and identifying what is considered a medication error, when to report a medication error, and who to report it to.
- (15) Regarding the competency of infection control and bloodborne pathogens including HIV/AIDS, implement best practices to prevent and control the spread of infections:
- (a) Identify commonly occurring infections, ways that infections are spread, and symptoms of infections;
- (b) Describe the purpose, benefit, and proper implementation of standard precautions in infection control;
- (c) Implement current best practices for controlling the spread of infection, including the use of hand washing and gloves;
- (d) Demonstrate proper hand washing and putting on and taking off gloves;
- (e) Identify immunizations that are recommended for adults to reduce the spread of virus and bacteria;
- (f) Describe laundry and housekeeping measures that help in controlling the spread of infection;
- (g) Describe proper use of cleaning agents that destroy microorganisms on surfaces;
- (h) Describe what bloodborne (BB) pathogens are and how they are transmitted;
- (i) Identify the major BB pathogens, diseases, and high-risk behaviors for BB diseases;
 - (j) Identify measures to take to prevent BB diseases;
- (k) Describe what to do if exposed to BB pathogens and how to report an exposure;
 - (1) Describe how HIV works in the body;
- (m) Explain that testing and counseling for HIV/AIDS is available;
 - (n) Describe the common symptoms of HIV/AIDS;
- (o) Explain the legal and ethical issues related to HIV including required reporting, confidentiality, and nondiscrimination; and(p) Explain the importance of emotional issues and support for
- (p) Explain the importance of emotional issues and support for residents and long-term care workers.
- (16) Regarding the competency on grief and loss, support yourself and the resident in the grieving process:
 - (a) Define grief and loss;
- (b) Describe common losses a resident and long-term care worker may experience;
 - (c) Identify common symptoms associated with grief and loss;
- (d) Describe why self-care is important during the grieving process; and
- (e) Identify beneficial ways and resources to work through feelings of grief and loss.
- (17) Long-term care workers who complete a DSHS approved basic training meet the training requirements for adult family homes in RCW 70.128.250.
- (18) Regarding the competency on identifying indicators of hearing loss, which may be part of the basic training or population specific hours:
 - (a) Identify common symptoms associated with hearing loss; and
- (b) Identify what to do for hearing loss related concerns, including describing ways to communicate with a resident who is experi-

encing hearing loss and identifying when and to whom to report when a resident's hearing ability changes.

[Statutory Authority: RCW 18.20.270, 70.128.230, 74.08.090, 74.39A.070, and 74.39A.074. WSR 23-01-022, § 388-112A-0320, filed 12/9/22, effective 1/9/23. Statutory Authority: RCW 74.39A.009, 74.39A.070, 74.39A.074, 74.39A.351, 74.39A.341, 18.20.270, 18.88B.021, 18.88B.035, 70.128.230, 71A.12.030. WSR 17-22-036, § 388-112A-0320, filed 10/24/17, effective 11/24/17.]