

WAC 388-112A-0320 What are the core competencies and learning objectives for the seventy-hour long-term care worker basic training?

The seventy-hour long-term care worker 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) Regarding communication, 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 noncare 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 his or her 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 service 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 his or her 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 functioning, 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 foodborne 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 foodborne 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 and 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 handwashing and gloves;
 - (d) Demonstrate proper handwashing 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;
 - (l) 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 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) Long-term care workers who complete a DSHS approved basic training meet the four hours of AIDS education as required by the department of health in WAC 246-980-040.

(19) 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 experiencing hearing loss and identifying when and to whom to report when a resident's hearing ability changes.

[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.]