Nursing Care Quality Assurance Commission

Nursing Education

[ncqac.education@doh.wa.gov](mailto:ncqac.education@doh.wa.gov)

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| **Nursing Assistant Alternative Bridge Training Program –**  **Home Care Aide-Certified Curriculum Verification Requirements** | | | | | |
| Please check the Box next to New Program or Program Renewal  New Program  Program Renewal | | | | | |
| **1. Demographic Information** | | | | | |
| Name of School | | | | | |
| Date of Application/Renewal | | Program Number | | | |
| **2. Curriculum Information** | | | | | |
| This form is to reference the curriculum you submit with your application. Forms that are completed that reference the textbook will not be accepted. Be sure to check both if a curriculum requirement is met and identify where in the curriculum outline the specific requirement is addressed. Example: Infection Control: Page 7 #2-a,b,c. | | | | | |
| Requirements | | | Requirement  is met | | Identify outline page and location |
| 1. Taking and recording vital signs | | |  | |  |
| 2. Measuring and recording height and weight | | |  | |  |
| 3. Fluid and food intake and output of  client | | |  | |  |
| 4. Developmental tasks associated with developmental and age specific | | |  | |  |
| 5. Use and care of prosthetic devices | | |  | |  |
| 6. Adequate ventilation, warmth, light and quiet measures | | |  | |  |
| 7. Principles of body mechanics | | |  | |  |
| 8. Reading, writing, speaking and understanding English at the level  necessary for performing duties of nursing | | |  | |  |
| 9. Healthcare terminology | | |  | |  |
| 10. Recording and reporting observations, actions and information | | |  | |  |
| 11. The scope of practice of nursing assistant-certified | | |  | |  |
| 12. Workers right to know law and the  Uniform Disciplinary Act RCW | | |  | |  |
| Total number of hours of training  program: | Number of clinical  hours: | | | Number of lab  hours: | Number of classroom  hours: |
| Program director signature | | | | | Today’s Date |
| Name of training program | | | | | Phone (enter 10 digit #) |

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