

OSBN Mission

The Oregon State Board of Nursing (OSBN) strives to safeguard the public's health and wellbeing by providing guidance for, and regulation of, entry into the profession, nursing education and continuing safe practice.

OSBN Board Members

Sandra Theis, RN, PhD, President
Ashland, OR

James McDonald, RN, FNP, Secretary
Portland, OR

Marguerite Gutierrez, RN,
Pendleton, OR

Patricia Markesino, RN, Portland, OR
Rolf Olson, Salem, OR

Beverly Shields, RN, Medford, OR

Celina Tobias, LPN, Medford, OR

Jennifer Wagner, LPN, Eugene, OR

Amoy Williamson, Portland, OR

CNA Program Staff

Joan Bouchard, RN, MSN
OSBN Executive Director

Debra Buck, RN, MS
Nursing Assistant Program Consultant

Kimberly Cobrain, Program Executive
Nursing Investigations & Compliance

Suzanne Meadows, RN; Richard O'Brien,
RN; Elana Patel, RN, FNP;

Lani Scarratt, RN; Rick Sherbert;
Jolene Smith, RN, & Lynda Tucker, RN
Practice Investigators/Advisors

DeWayne Hatcher
Licensing & Customer Service Manager

Willie Bliss
CNA Certification Technician

Second CNA Level Benefits CNAs and the Public

The Oregon State Board of Nursing (OSBN) accomplished two things when it adopted the rules creating CNA 2s in November 2003—it increased public safety and gave CNAs who focused on certain categories increased portability.

“Under the system of authorized duties and additional tasks, we don’t know who is being taught, what they’re being taught or the qualifications of the instructor,” explains Debra Buck, RN, OSBN Nursing Assistant Program Consultant. “With CNA 2s, the Board approves the curriculum and instructor qualifications, giving the public greater confidence. We also maintain a registry of each CNA 2 category, making it easier for employers to check potential employees’ qualifications.”

At this point, there are three CNA 2 categories: Restorative Care, Acute Care and Dementia Care. Other categories may be suggested later. The Restorative Care curriculum was adopted in September 2004, and the Acute Care curriculum was adopted in November 2005. The task force currently developing the Dementia Care curriculum hopes to bring a draft to the Board for initial approval in September 2006.

Nine new skills (not found in the current list of Additional Tasks) are included in the CNA 2-Acute Care curriculum. “However, the task force discovered that almost all of these

‘new’ skills are already performed by CNAs in some Oregon health systems,” says Buck. “Now these skills will be standardized in a curriculum.”

The role of the nurse in relation to CNA 2s is clearly stated in each CNA 2 curriculum. “There is no ambiguity,” affirms Buck. For example, the CNA 2-Acute Care curriculum states, “It is understood that a CNA 2-Acute Care will hold a current, unencumbered Oregon CNA 1 certificate, have their name listed on the CNA Registry, and assist licensed nursing personnel in the provision of nursing care. A CNA 2-Acute Care must be regularly supervised by a license nurse; all skills and tasks are to be performed at the direction of the licensed nurse. The CNA 2-Acute Care will be able to provide opportunities for optimal client independence and support behaviors that promote positive healing. A CNA 2-Acute Care will be able to demonstrate to peers, the correct methods and model behavior needed to address patient care needs on an individualized basis.”

Time is Limited

CNA 1s who perform duties within CNA 2 categories are granted 24-months from the time the curriculum is adopted in which they can test to become a CNA 2 without needing to complete a training program. A CNA

Continued on reverse.

Second CNA Level Benefits CNAs and Public

Continued from front

1 wishing to test to become a CNA 2—Restorative Care has until Sept. 16, 2006; a CNA 1 wishing to become a CNA 2—Acute Care has until Nov. 17, 2007.

After that 24-month period, CNA 1s must take a CNA 2 training program and pass the applicable evaluation to become a CNA 2. The alternative is to cease performing CNA 2 duties when the Additional Tasks list in Division 63 sunsets on Dec. 30, 2009.

“Any CNA 1 already doing Restorative Care duties who wants to become a CNA 2—Restorative Care needs to test before Sept. 16, 2006,” Buck clarifies, “or they will have to complete a training program and pass the evaluation before referring to themselves as a CNA 2—Restorative Care.”

Competency Exam

The CNA 2 competency exam has

CNA Update

is published to inform those who train, test and employ CNAs of current laws relating to nursing, OSBN policies and activities, and issues pertaining to the regulation of CNAs and education.

Please call **Barbara Holtry**, Public Information Officer at 971-673-0658, with comments.

written and manual skills components, just like the CNA 1 competency exam. However, CNA 1s taking the CNA 2 exam under the grace period will have chances to re-test any skills they fail.

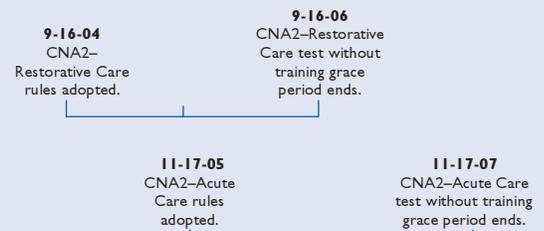
For instance, if a CNA 1 who takes the CNA 2 exam under the grace period passes the written portion, but only passes a few of the skills in the manual skills portion, that CNA will have the opportunity to train on and re-test those skills that they failed.

CNA2 Training Programs

Two CNA 2—Acute Care training programs are in development, and Buck anticipates one program to be submitted to the Board for approval this summer. The four CNA 2—Restorative Care programs are located in Albany, North Bend, The Dalles and Woodburn.

“I encourage anyone considering development of a CNA 2—Restorative Care program to use the curriculum and competency evaluation developed by the Mennonite Village, in associa-

24-Month CNA2 Testing Grace Period



After the CNA 2—Restorative Care & —Acute Care grace periods end, CNA 1s performing those duties must either train and test to become a CNA 2. After Dec. 30, 2009, CNA 1s will no longer be able to perform Additional Tasks.

tion with Linn Benton Community College and WorkSource Oregon,” Buck says. “Because it was developed with grant money, they have made it available to anyone. We have posted it on our website.” The Mennonite Village CNA 2-Restorative Care curriculum can be found at: www.oregon.gov/OSBN/pdfs/policies/restorativecare_curriculum.pdf. Once the CNA 2-Dementia Care curriculum is approved by the Board, training programs may be developed. *(Check the OSBN website for future CNA 2-Dementia Care task force meeting dates.)*

