

# **Illinois Eastern Community Colleges**



## **Basic Nurse Assistant Training Program**

### **Student Handbook**

**2023-2024**

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Some information in this publication may become outdated due to changes in the Board of Trustees Policy, state law, and Basic Nurse Assistant Training Program guidelines. In such instances current board policy, state law, and Basic Nurse Assistant Training Program guidelines will prevail.

## **Introduction**

Welcome to Illinois Eastern Community Colleges Basic Nurse Assistant Training Program. It is important that you read the [college catalog](#), [college student handbook](#), the course syllabus, and this handbook since you will be expected to adhere to the policies and guidelines found in these documents. IECC reserves the right to change policies and guidelines as needed to facilitate program and student outcomes.

Illinois Eastern Community Colleges Basic Nurse Assistant Training Program is approved by the Illinois Department of Public Health, which is located at 525 West Jefferson Street, Springfield, Illinois 62761, 217/785-5133, website: [www.idph.state.il.us](http://www.idph.state.il.us).

It is our desire to help you meet your educational goals. It is our commitment that you receive quality education while enrolled in the basic nurse assistant training program.

## **Program Mission Statement**

The mission of the Illinois Eastern Community Colleges Basic Nurse Assistant Training Program is to provide educational opportunities for qualified persons to become an Illinois Certified Nurse Aide through the Illinois Department of Public Health. This mission is achieved by providing quality education and clinical skill experience through a community healthcare agency.

## **Nondiscrimination Statement**

Illinois Eastern Community College District No. 529 does not discriminate on the basis of race, color, sex, pregnancy, gender identity, sexual orientation, age, marital status, parental status, religious affiliation, veteran status, national origin, ancestry, order of protection status, conviction record, physical or mental disability, genetic information, or any other protected category. For more information, see [www.iecc.edu/nondiscrimination](http://www.iecc.edu/nondiscrimination).

## **Americans with Disabilities Act**

Illinois Eastern Community Colleges adheres to the Federal Regulations of the Americans with Disabilities Act of 1990 and offers appropriate services or activities with reasonable accommodations to any qualified disabled individual upon request. For more information, see [www.iecc.edu/ada](http://www.iecc.edu/ada).

## **SECTION I: GRADING AND PROGRAM OUTCOMES**

- ◆ **HEA 1203 Course Objectives**
- ◆ **Grading Scale**
- ◆ **Attendance Policy**
- ◆ **Cell Phone Use**
- ◆ **State Certification Requirements**

## HEA 1203 Course Objectives

With a comprehensive score of at least 75%, and satisfactory performance in bedside care, the student, upon completion of this course, will be able to:

1. Demonstrate knowledge of the basic needs of the individual throughout the life cycle.
2. Demonstrate knowledge of body structure and function.
3. Utilize knowledge of growth and development in providing care to persons of all ages.
4. Utilize knowledge of the common daily needs and basic skills in providing care to persons of all ages.
5. Employ principles of body mechanics and anatomical alignment in caring for clients.
6. Understand basic principles of nutrition and fluid balance to assist clients with nutrition and elimination needs.
7. Apply basic principles of rehabilitation nursing.
8. Demonstrate effective interpersonal skills in interactions with others.
9. Utilize knowledge of legal concerns and ethical issues in providing care.
10. Apply basic principles of patient centered care or person directed care to any setting (home care, hospital, or long-term care).
11. Demonstrate basic knowledge of the psychological needs of the terminally ill patient and the family.
12. Demonstrate knowledge of postmortem care.
13. Utilize knowledge of dementia in effectively caring for a person with Alzheimer's disease and related disorders.
14. Demonstrate the ability to initiate basic cardiopulmonary resuscitation.

## Grading Scale

100-90 A  
89-80 B  
79-75 C  
74-65 D  
Below 65 F

## Attendance Policy

**Students are expected to attend class every day it is scheduled and to be on time.** Any work or tests missed when absent must be scheduled for make up before the next scheduled class time. Students are expected to call or notify the instructor if unable to attend a class and set a time for the makeup. If a student is tardy/missing **8 hours** of class or clinical, he/she will be counseled by the program administration and/or faculty and may be dropped from the class.

HEA 1203 is approved by Illinois Department of Public Health (IDPH). We are expected to meet all of the hours on our master schedule and the student is expected to attend. IDPH requires completion of a minimum of 120 hours for a student to be eligible to write for the certification exam. There are also some segments of the course that IDPH requires the student to attend; these are mandatory sections for resident safety.

## **Cell Phone Use**

Personal cell phone use and/or texting during classroom and clinical experiences is prohibited except on breaks or lunch. Cell phones should be turned off or set to silent and put away during classroom and clinical experiences.

## **Illinois State Certification Requirements**

Illinois Department of Public Health requires the following in order to take the State Certified Nurse Aide exam:

Section 395.17 Successful completion of the Basic Nursing Assistant Training Program

A student shall be considered to have successfully completed the BNATP when he or she has:

1. Completed a minimum of 80 hours of theory and 40 hours of clinical instruction, including the required hours of content in accordance with Section 395.150 and
2. Demonstrated competence in the Department-approved performance skills.

A student shall pass the Department established written competency examination.

## **SECTION II: ETHICAL-LEGAL RESPONSIBILITIES**

- ◆ **HIPAA and Confidentiality**
- ◆ **Social Networking**

## **HIPAA and Confidentiality**

The Health Insurance Portability and Accountability Act (HIPAA) protects a person's health information. Students are only allowed to discuss a client's care with his/her instructor or the nurse on duty. Students are not allowed to discuss a client's medical condition or care with a visitor. If a visitor asks questions, the student should direct them to the nurse on duty.

All client records (the chart and any other information, oral or written, and those notes taken from the record) are confidential. Students are not allowed to retain any individually identifiable client information.

## **Social Networking**

Social networking is not permitted during classes, lab, and clinical education. Information about a patient in any context is a possible HIPAA violation. Discussing any clinical information on a social network site is a potential HIPAA violation. If a social networking issue should arise during enrollment in the course, the student may be administratively withdrawn.



## **SECTION III: CRITICAL GUIDELINES FOR CNA CLINICAL**

- ◆ **Healthcare Agency (Clinical) Requirements**
- ◆ **Clinical Student Conduct**
- ◆ **Dress Code**
- ◆ **Standard Precautions**
- ◆ **Bloodborne Pathogen Exposure**
- ◆ **Substance Abuse Policy of IECC**
- ◆ **Procedures for Substance Abuse at Clinical Agency**
- ◆ **Guidelines for Latex Allergy**

## Healthcare Agency (Clinical) Requirements

Prior to going to the clinical setting, students must have documentation of a **two-step TB test** that is less than one year old. The student is also required to have a **Live Scan Fingerprint Background Check** done (at student's or fee-paying agency's expense). Students who are minors are not required by the state of Illinois to complete fingerprinting. Additionally, students who currently work in healthcare may or may not be required to complete the Live Scan Fingerprint Background Check. Class faculty will notify the students of their individual background check requirements during class orientation.

Students are required to comply with any additional agency requirements, such as vaccinations. Cost of receiving vaccinations is at the student's expense. Refusal of the vaccine may impact the student's ability to complete a clinical rotation at certain sites and therefore, may impact his or her ability to complete course clinical requirements.

Any of the following offenses found on a background check will result in the student needing to contact IDPH to see if a waiver can be granted.

1. Murder, homicide, manslaughter, or the concealment of a homicidal death
2. Kidnapping or child abduction
3. Unlawful restraint or forcible detention
4. Assault, battery, or infliction of great bodily harm
5. Sexual assault or sexual abuse
6. Abuse or gross neglect of a long-term care facility resident
7. Criminal neglect of an elderly or disabled person
8. Theft, financial exploitation of an elderly or disabled person, robbery or burglary
9. Criminal trespass
10. Arson
11. Unlawful use of weapons or aggravated discharge of a firearm
12. Manufacture, delivery or trafficking of cannabis
13. Manufacture, delivery or trafficking of controlled substances

**Students will not be allowed to provide direct client care until the waiver has been granted. If a waiver has not been granted by the first day of direct client care, the student will be administratively withdrawn from the course. The student is responsible for any tuition and fees incurred.**

## Clinical Student Conduct

In addition to meeting the IECC student conduct criteria, students must meet the standards of the clinical agency. In the event that the clinical agency refuses to allow a student to complete clinical hours, the student may be administratively withdrawn from the course.

## Dress Code

In order to attend clinical, students must wear navy blue scrub top and bottom uniform with picture ID badge. The clinical instructor has the right to refuse to allow students to participate in clinical if they are not properly dressed. All students are expected to practice personal hygiene including a daily bath, good oral hygiene, use of deodorant, frequent hair washing and shaving as necessary. Anyone with long hair will need to fix it so that it will be off the face and up off the back of the neck.

The following are not acceptable for clinical:

No fingernail polish

No long fingernails (nails must be short and neatly trimmed)

No acrylic, ceramic or press-on nails (infection hazard)

No perfume or strong cologne

No dangle earrings (one pair small studs may be worn)

No visible piercing jewelry other than a single stud earring each earlobe

No jewelry (wedding rings are OK)

No heavy make-up (light make-up is OK)

No visible tattoos (check with instructor)

No sweatpants

No jeans of any kind

No sleeveless or see-through shirts or blouses

No shorts or short skirts

No dirty, ragged shoes (clean, white, leather tennis shoes, running shoes or clinical shoes are OK)

No T-shirts with pictures or lettering

## **Standard Precautions**

Standard Precautions are guidelines recommended by the Centers for Disease Control and Prevention (CDC) to reduce the risk of the spread of infection in a healthcare agency. These precautions include: handwashing and wearing personal protective equipment (PPE) when coming in contact with blood or any body fluids.

## **Bloodborne Pathogen Exposure**

CNA students should immediately report to their clinical instructor any exposure or suspected exposure to bloodborne pathogens. Students are expected to follow the written protocol of the institutions in which they are performing their clinical work. The student is responsible for physician, lab, and treatment costs for services rendered. CNA students will be responsible for meeting the prescribed follow-up care of the clinical agency.

## **Substance Abuse Policy of IECC**

In accordance with the Drug-Free Schools and Communities Act of 1989 and the Drug-Free Workplace Act of 1988, the Board of Trustees of Illinois Eastern Community Colleges (IECC) is committed to providing a college environment free of substance abuse. Measures taken in support of this commitment include: 1) Drug and alcohol abuse awareness, prevention, and treatment initiatives. 2) Prohibiting the unlawful manufacture, sale, distribution, possession, or use of alcohol and use/misuse of drugs while on IECC property or while performing/participating in an IECC-sponsored/related off-site event or function. Learn more at [www.iecc.edu/drugfree](http://www.iecc.edu/drugfree).

## **Procedures for Substance Abuse at Clinical Agency**

Any CNA student who arrives at the clinical agency and is suspected of drug or alcohol use will not be allowed to continue the clinical assignment. The instructor will ask another nurse to validate the student's behavior and/or odor of alcohol-like substance. The other nurse shall be another IECC instructor or the

nurse in charge of the unit, or a nurse appointed by the leader of the nursing department. If the two nurses concur that the student may be under the influence of drug or alcohol, the clinical agency policy for drug screening will be implemented.

If the student is determined to be under the influence of inappropriate drug use, the instructor will attempt to arrange transportation home for him/her. The instructor shall notify program administration as soon as possible.. The student will receive no credit for the clinical lab experience.

Inappropriate drug use means: Impaired ability to function safely in the clinical agency.

Prescribed medication may be used as long as judgment or coordination are not impaired.

The following actions will be taken for a student with suspected and/or confirmed drug/alcohol use:

1. The student will be required to have an evaluation by a substance abuse specialist and follow the recommended plan of care. This will be at the student's expense.
2. Each case will be reviewed by the college site CNA instructor and the Dean of Instruction or Associate Dean of Nursing and Allied Health, who will make a decision regarding the student's continuation in the HEA 1203 class.

## **Guidelines for Latex Allergy**

Latex allergy is a serious threat to health care workers as well as clients. Allergic reactions to latex may be mild, such as skin disturbances, to severe reactions resulting in death. Exposure to latex products may cause hypersensitivity responses either locally or systemically. A systemic reaction may occur even with trivial exposure to latex and may result in cardiopulmonary arrest within minutes.

Students are asked to self-identify known latex sensitivity or allergy. This allows the student, faculty and administration to collaborate regarding potential exposures in campus or agency laboratory experiences. The Basic Nurse Assistant Training Program cannot guarantee a latex free laboratory environment at the college or agency.

### **PROCEDURE:**

- 1) Students should become knowledgeable of latex allergy causes and potential clinical manifestations.
- 2) Students should immediately report to the nursing instructor actual (or suspected) latex allergy incidences.
- 3) Students should seek medical care for EARLY diagnosis and treatment of hand dermatoses and symptoms suggestive of latex allergy. Precautions recommended by the practitioner, if any, should be reported to the instructor.
- 4) The Basic Nurse Assistant Training Program provides latex-free gloves for campus laboratory practice and for use in health care agencies if unavailable in the agencies.

## **SECTION IV: FORMS**

- ◆ **Mandated Manual Skills Performance Verification**
- ◆ **Health Form**
- ◆ **Release of Liability**
- ◆ **Authorization to Release Information**
- ◆ **Student Handbook Review Verification Form**

**ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT #529  
BASIC NURSE ASSISTANT TRAINING PROGRAM**

**HEA 1203 – MANDATED MANUAL SKILLS PERFORMANCE VERIFICATION**

**STUDENT NAME:** \_\_\_\_\_

|     | PROCEDURE   | DATE OF COMPLETION | FACULTY INITIALS |            |
|-----|---|--------------------|------------------|------------|
|     |   |                    | CAMPUS LAB       | AGENCY LAB |
| 1.  | Wash hands  |                    |                  |            |
| 2.  | Perform oral hygiene                                    |                    |                  |            |
| 3.  | Shave a resident  |                    |                  |            |
| 4.  | Perform nail care                                       |                    |                  |            |
| 5.  | Perform perineal care                                   |                    |                  |            |
| 6.  | Give partial bath                                       |                    |                  |            |
| 7.  | Give shower or tub bath                                 |                    |                  |            |
| 8.  | Make occupied bed                                       |                    |                  |            |
| 9.  | Dress a resident  |                    |                  |            |
| 10. | Transfer resident to wheelchair using a transfer belt   |                    |                  |            |
| 11. | Transfer using mechanical lift                          |                    |                  |            |
| 12. | Ambulate with a transfer belt                           |                    |                  |            |
| 13. | Feed a resident   |                    |                  |            |
| 14. | Calculate intake and output                             |                    |                  |            |
| 15. | Place a resident in a side-lying position               |                    |                  |            |
| 16. | Perform passive range of motion                         |                    |                  |            |
| 17. | Apply and remove personal protective equipment (PPE)    |                    |                  |            |
| 18. | Measure and record temperature, pulse, and respirations |                    |                  |            |
| 19. | Measure and record blood pressure                       |                    |                  |            |
| 20. | Measure and record weight                               |                    |                  |            |
| 21. | Measure and record height                               |                    |                  |            |

**Student Signature** \_\_\_\_\_ **Initials** \_\_\_\_\_

**Faculty Signature** \_\_\_\_\_ **Initials** \_\_\_\_\_

**ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529  
BASIC NURSE ASSISTANT TRAINING PROGRAM**

**Health Form**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

**(Note: It is the responsibility of the student to notify the instructor of any changes in his/her health condition throughout the course)**

List all allergies and type of reaction to each:

List all acute illnesses:

List all chronic illnesses:

List all medications (prescription and over the counter) you are currently taking and the purpose of the medication. Include dose and frequency.

Emergency Contact Information:

Primary Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ or \_\_\_\_\_

Alternate Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ or \_\_\_\_\_

02/2011

**ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529  
BASIC NURSE ASSISTANT TRAINING PROGRAM**

**Release of Liability Form**

CNA students should immediately report to their clinical instructor any exposure or suspected exposure to bloodborne pathogens or hazardous products, or any injury sustained in the clinical agency. In the event of an untoward incident, students are expected to follow the written protocol of the institution in which they are performing their clinical work. The student is responsible for physician, diagnostic, and treatment costs for services rendered by a clinical facility. Students are also responsible for meeting the prescribed follow-up care of the institution and for treatment costs of such care.

It is recommended that all CNA students carry their own personal health insurance. Each student is responsible for his/her own health care costs including costs related to incidents occurring in the clinical agencies.

I, \_\_\_\_\_, hereby release and hold harmless Illinois Eastern Community Colleges and all clinical agencies from any and all medical expenses or liability claims that may arise in relation to clinical experiences.

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date



**ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529  
BASIC NURSE ASSISTANT TRAINING PROGRAM**

**Authorization to Release Information Form**

I, \_\_\_\_\_, hereby authorize Illinois Eastern Community Colleges to give appropriate information regarding my scholastic and clinical performance to prospective employers. I realize that the inquiry from such individual(s) might be over the telephone or by letter.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529  
BASIC NURSE ASSISTANT TRAINING PROGRAM**

**CNA Handbook Review Verification Form**

I have read the IECC CNA Student Handbook in its entirety. I acknowledge and understand the policies printed in the handbook and agree to abide by them.

I understand that I must abide by the policies and procedures of all clinical facilities that I attend as a student. I am aware that it is absolutely mandatory that I comply with the Confidentiality/Health Insurance Portability and Accountability Act (HIPAA) statement of the Illinois Eastern Community Colleges Basic Nurse Assistant Training Program and clinical facilities I attend.

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Student Signature

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Date

After this form is signed and dated, it is placed in the student's file.

**ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529  
BASIC NURSE ASSISTANT TRAINING PROGRAM**

**Student Release Form**

Through your association with Olney Central College, you are likely to participate in events that are recorded on behalf of the college. By submitting this release, you authorize Illinois Eastern Community Colleges and those acting on its behalf to copyright, publish and use audio, photographs, video and other recordings or representations of you for promotional and educational purposes. You release and discharge the Illinois Eastern Community Colleges Board of Trustees, its assigns, and those acting on its behalf from any liability arising from such use.

Publications can include:

IECC catalog

IECC poster/brochure

IECC homepage; Intranet, or internet link, including multi-media electronic presentations

IECC printed and electronic marketing materials

IECC newspaper and magazine advertisements

IECC television advertisements

IECC social media pages, including FCC, LTC, OCC and WVC social media pages.

This form verifies that I do not have on file any restrictions prohibiting the release of student information.

Student Name (please print) \_\_\_\_\_

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent's Name (please print) \_\_\_\_\_

Parent's Signature \_\_\_\_\_

Date \_\_\_\_\_

Instructor's Signature \_\_\_\_\_

Date \_\_\_\_\_