

OSBN Mission

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

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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; the Acute Care curriculum in November 2005; and, the Dementia Care curriculum in November 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

Things to Remember...

- ❖ *The OSBN does not require CNAs to become CNA 2.*
- ❖ *Employers may require CNAs to become CNA 2s; check with your employer.*
- ❖ *CNA 2s are listed on the OSBN website: www.oregon.gov/OSBN/pdfs/cna2registry.pdf.*
- ❖ *To become a CNA 2, contact an approved CNA 2 training program listed on the OSBN website: www.oregon.gov/OSBN/pdfs/CNA_CMAprograms.pdf.*

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.

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Supervision/Monitoring Definitions Clarified

To help clarify the difference between working under monitoring in a community-based setting, and working under supervision in a hospital or nursing home, the Oregon State Board of Nursing (OSBN) adopted minor changes to Division 62 of the Nurse Practice Act.

Remember, a CNA of any level must work under the supervision of a licensed nurse or monitoring by a RN. The changes clarified that “supervision” means that the licensed nurse is physically present and accessible in the immediate client care area, is available to intervene if necessary, and periodically observes and evaluates the skills and abilities of the CNA or CMA to perform authorized duties.

“Monitoring” means that a Registered Nurse assesses and plans for care of the client, assigns duties to the nursing assistant according to the nursing care plan, and evaluates client outcomes as an indicator of CNA/CMA competency.

If you have any questions, please contact OSBN Nursing Assistant Program Consultant Debra Buck, RN, MS, at debra.buck@state.or.us.

CNA Program Staff

Debra Buck, RN, MS
Nursing Assistant Program Consultant

Kimberly Cobrain
Program Executive, Nursing Practice,
Investigations & Compliance

DeWayne Hatcher
Licensing & Customer Service Manager

Willie Bliss
CNA Certification Technician

Website Offers a Wealth of Information

Nursing assistants and their employers can find a wealth of information on the Oregon State Board of Nursing (OSBN) website. From a list of CNA 2 programs to copies of past *CNA News*, CNAs and employers can find answers to almost all of their questions on one of the two websites.

“These websites should be a CNA’s first stop for information,” confirms OSBN NA Program Consultant Debbie Buck, RN, MS. The following is a brief primer on the website, what can be found there and the specific URLs:

Oregon State Board of Nursing Website

- Main site: www.oregon.gov/OSBN.
- Past issues of *CNA News*: www.oregon.gov/OSBN/publications.shtml.
- Board educational policies, including nursing assistant curriculums: www.oregon.gov/OSBN/Position_Papers.shtml.
- CNA rules (Division 61, 62 & 63): www.oregon.gov/OSBN/adminrules.shtml.
- Forms (including certification applications or change-of-address forms): www.oregon.gov/OSBN/forms.shtml.
- List of current CNA 1, CNA 2 and CMA programs: www.oregon.gov/OSBN/pdfs/CNA_CMAprograms.pdf.

For details, contact Buck at 971-673-0636 or OSBN Public Information Officer Barbara Holtry at 971-673-0658.

CNA Questions & Answers

Q: Can CNAs feed babies formula with vitamins and iron added, or a solution called “Sweeteze”—a 24% glucose solution—via bottle?

A: Yes—if the nurse has assessed the baby and determined that it is appropriate, the CNA can bottle-feed babies. It is ultimately the nurse’s responsibility to determine in each case if it is appropriate.

Q: Can CNA’s prep wounds prior to suturing procedures and assist with routine pelvics?

A: CNAs *cannot* prep wounds for suturing—the ability to assess the wound and the client’s

response to the procedure is vital and should be done by a nurse.

CNAs *can* set up the tray and get the speculum for pelvic exams, assist with positioning the client, as well as be present for the procedure.

Q: Can CNA’s manipulate an endoscope and obtain specimens if they have received training as an Endoscopy Technician?

A: No—manipulating an endoscope is outside of a CNA’s authorized duties. If a CNA is functioning as an Endoscopy Technician, they cannot represent themselves as a CNA and would not be able to use those hours to renew their CNA certification.

Second CNA Level Benefits CNAs

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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 for Some

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 1 has until Sept. 16, 2007, to test to become a CNA 2–Restorative Care; until Nov. 17, 2008, to become a CNA 2–Acute Care; and, until Nov. 9, 2009, to become a CNA 2–Dementia Care.

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.

“For instance, any CNA 1 already doing Restorative Care duties who wants to become a CNA 2–Restorative Care needs to contact one of the Restorative Care training programs and test before Sept. 16, 2007,” 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.”

The CNA 2 training programs are listed alongside the CNA 1 and Medication Aide training programs on the OSBN website: www.oregon.gov/OSBN and click on “Educational Programs.”

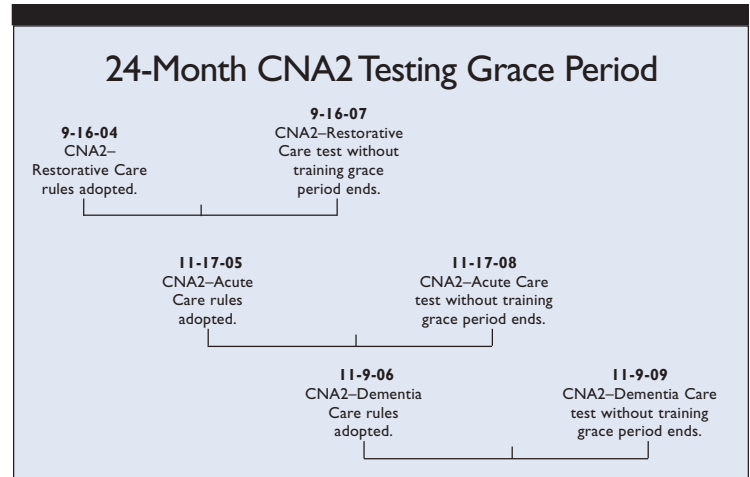
Competency Exam

The CNA 2 competency exam has written and manual skills components, just like the CNA 1 competency exam. However, the exam is done through the training program, not the Board of Nursing.

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.

CNA 2 Training Programs

The five CNA 2–Acute Care training programs are located in Albany, Corvallis, Medford and Portland. The 11 CNA 2–Restorative Care programs are located in Albany, Dallas, McMin-



After each grace period ends, CNA 1s performing CNA 2 duties must train and test to become a CNA 2, or stop performing those tasks. After Dec. 30, 2009, CNA 1s will no longer be able to perform Additional Tasks.

neville, North Bend, Portland, Reed-sport, Seaside, Sublimity, The Dalles and Woodburn. At least one CNA 2–Dementia Care training program is in development currently.

(Check the OSBN website for future additions to the CNA 2 training program list: www.oregon.gov/OSBN/pdfs/CNA_CMAprograms.pdf.)

Need an update on the CNA Standards of Care and Authorized Duties? Call the Oregon State Board of Nursing office at 971-673-0685 for a copy of the CNA Booklet or download a copy from our website: www.oregon.gov/OSBN and click on “Publications.”

Have You Changed Your Name Recently?

If you’ve changed your name since you last renewed your certificate, please notify the Oregon State Board of Nursing. We need written notice stating your previous and new names, and certificate or social security number.

We also need a copy of your marriage license or the appropriate page of your divorce decree or court order. (You don’t have to send the entire document—just the page that specifies your new name.)

Please send your written notice and supporting documentation to the OSBN office at: 800 NE Oregon St., Suite 465, Portland, OR 97232. For more information, call the OSBN office at 971-673-0685.



Oregon State Board of Nursing

800 NE Oregon Street, Suite 465

Portland, Oregon 97232-2162

www.oregon.gov/OSBN

CNA Names & Addresses Open to Disclosure

“**W**hy does the Board of Nursing give my name and address to recruiters?” “How did this magazine get my name?” “I get so much junk mail—How can I make this stop?” Questions such as these—regarding the release of nurse and CNA names and addresses—are some of the most common received in the Oregon State Board of Nursing (OSBN) office.

The Oregon public records law requires the OSBN to disclose its list of nurses and nursing assistants to anyone who asks for it. Although names, addresses and telephone numbers are personal information, according to state law, disclosure of the name, address and telephone number of a licensee or person doing business with a

public body is not an unreasonable invasion of privacy. This includes the names, addresses and telephone numbers of people in databases of public bodies, such as the OSBN.

One exception to this is the “personal safety exemption.” According to the public records law, a licensee may demonstrate to a public body that the personal safety of the individual (or a member of the individual’s family) is in danger if the home address or telephone number remains available for public inspection.

For instance, if a CNA had obtained a restraining order to protect herself (or himself), that CNA would have a compelling reason for exemption from the disclosure of their name, address or telephone number.

For more information on Oregon’s public records law, visit the Oregon Dept. of Justice website at www.doj.state.or.us/pros/mli.htm.

CNA News

is published once a year by the Oregon State Board of Nursing to inform CNAs of current laws relating to nursing, OSBN policies and activities, and issues pertaining to the regulation of CNAs and education. Please call Editor **Barbara Holtry**, OSBN Public Information Officer, at 971-673-0658 with suggestions or comments.

The OSBN office is moving in June 2007! Watch our website for details soon!
(www.oregon.gov/OSBN)