# NORTH CAROLINA BOARD OF NURSING NURSE AIDE I TASKS\*

### I. PERSONAL CARE (ADL)

- Bathing (assist, bed bath, tub bath, shower, sitz)
- Mouth care
- Skin care
- Hair care
- Nail care
- Bedmaking (modified)
- Dressing and undressing

### II. BODY MECHANICS

- Turn and position
- Transfer chair and stretcher
- Use of lifts
- Assist with ambulation
- Range of motion exercises

### III. NUTRITION

- Prepare patients for meal time
- Feed patients
- Intake and output
- Force and restrict fluids

# IV. ELIMINATION

- Bedpan/urinal
- Bowel/bladder retraining
- Collect/test specimens
- Perineal/catheter care
- Apply condom caths
- + Douches
  - Enemas
- + Insert rectal tubes/flatus bags
  - Empty drainage devices from body cavities/wounds
- + Maintain gastric suction

### V. SAFETY

- Side rails/ call rails
- Mitts and restraints
- CPR/Heimlich Maneuver
- Infection control

Handwashing Isolation technique Standard precautions

### VI. SPECIAL PROCEDURES

- Vital signs

Temp (oral, rectal,

axillary)

Pulse (radial, apical)

Respirations

BP

- Height and weight (stand-up scales/bed scales)
- Application of heat/cold
- Prevent and care for decubitus ulcers
- + Surgical skin preps and scrubs
  - Clean dressing changes
  - Apply ace bandages, TEDs and binders
  - Apply and remove EKG monitor leads
    - Postmortem care
    - Cough/deep breathing

### Role of Nurse Aide I on Health Care Team\*

\*The licensed nurse maintains accountability and responsibility for the delivery of safe and competent care. Decisions regarding delegation of <u>any</u> of the above activities are made by the licensed nurse on a client-by-client basis. <u>ALL</u> of the following criteria must be met before delegation of any task may occur:

- task is performed frequently in the daily care of a client or group of clients;
- task is performed according to an established sequence of steps:
- task involves little to no modification from one client situation to another;
- task may be performed with a predictable outcome;
- task does <u>not</u> involve on-going assessment, interpretation or decision-making that cannot be logically separated from the task itself; and
- task does not endanger the client's life or well-being.

As part of accountability, the registered nurse <u>must validate the competencies of the NA I prior to delegating tasks</u>. The licensed nurse (RN or LPN) must monitor the client's status and response to care provided on an on-going basis.

- \* Core tasks which the North Carolina Board of Nursing has determined are appropriate for inclusion in basic NAI education programs.
- + Common tasks which are appropriate for delegation to NAI following appropriate education and competency validation by a registered nurse but are not <u>required</u> to be taught in the Division of Health Service Regulation approved 75 hour course.

The "Decision Tree for Delegation to UAP" (www.ncbon.com – Position Statements) is an additional tool to assist the RN and LPN in making appropriate decisions related to delegation of tasks to UAP.