Fox Valley Technical College  
NA Functional Ability Criteria  
5/29/14

The Nursing Assistant program is highly regulated by state and federal law. OBRA, 1987 and Stat of WI, HFS 129, 2009 offer specific criteria for how the program will be run, what is taught, how it is taught, mandated hours needed to be completed, and ability of the nurse aide to do the work required. Also, it is the intent of Fox Valley Technical College (FVTC) to fully comply with Section 504 of the Rehabilitation Act of 1974 and the Americans with Disability Act (ADA) of 1990. (In accordance with the ADA and Section 504, FVTC does not provide students with personal devices and services)

In order to assist students successfully complete the Nursing Assistant program and achieve certification to work through the State of Wisconsin Caregiver Program, FVTC has developed a set of objective functional ability criteria. Students will be asked to sign a form stating whether or not they are able to meet the functional abilities, with or without accommodations, as stated in this document. If a student enters the Nursing Assistant program based on falsification of records related to their ability to meet the functional requirements, he/she may face disciplinary actions. All documents will be kept on file in the Health Division Office at the College.

For students with a disability, reasonable accommodations are available. Reasonable modifications are defined as modifications or adjustments that allow individuals with disabilities to gain equal access and have equal opportunities to participate in FVTC’s courses, services, activities, and use of the facilities. To be eligible for disability-related services/accommodations, students must have a documented disability. This documentation must be provided by a licensed professional, and qualified in the appropriate specialty area. The College is also not obligated to provide an accommodation that poses an undue financial or administrative burden to the College or poses a direct threat to the health and/or safety of others.

**Examples of accommodations allowed, without disability documentation:** supportive back brace or other supportive braces that does not impede required movement or interfere with infection control policies, hearing aids, glasses, and/or contacts. Other student-suggested accommodations will require approval of the Program Chair, the Disabilities Specialist, and the Department of Health Services. All requests should be approved BEFORE the student has enrolled in the program. Any accommodation cannot substantially alter the requirements of the program or inflicts an undue burden on the respective program and clinical sites.

**If after the start of class** a student status changes and no longer meets all of the required NA functional abilities; it is the student’s responsibility to notify their instructor of any changes in their inability to perform and of the Functional Abilities listed here. The College is required to keep these documents on file.

*Print Date: October 2014*
<table>
<thead>
<tr>
<th>Functional Ability</th>
<th>Requirement</th>
<th>Examples of Personal Accommodation Allowed</th>
<th>Examples of FVTC Accommodation Provided</th>
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<tbody>
<tr>
<td><strong>Gross Motor Skills</strong></td>
<td>1. Able to move in confined spaces, maintain balance in standing position, twist body from one side to the other, reach below the waist and to the front or the side of the body to the level of the top of the head. 2. Able to push, pull, stabilize, pivot, and freely move arms to allow movement of 50 pounds as in moving an object or transferring a client from one place to another.</td>
<td>Supportive back brace, arm brace that does not impede required movement or interfere with infection control policies.</td>
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<tr>
<td><strong>Fine Motor Skills</strong></td>
<td>1. Able to possess hand and finger coordination and strength to allow grasp, twist, and pinch of an object weighing five (5) pounds for at least five (5) seconds. 2. Must be able to key/type (e.g. use a computer) and manipulate objects such as pencils, pens, and general medical equipment.</td>
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<td><strong>Tactile Ability</strong></td>
<td>1. Able to distinguish subtle vibrations through the skin (pulse). 2. Able to identify the subtle difference in surface characteristics (feel a raised rash). 3. Able to detect temperature variations through the skin, liquids/solutions, and environmental.</td>
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<td><strong>Mobility</strong></td>
<td>1. Able to squat or modified squat (one knee on floor) for at least one (1) minute. 2. Able to climb and descend a flight of stairs in succession. 3. Able to walk independently without the assistance of a cane, walker, crutches, wheelchair or the assistance of another person. 4. Able to move quickly in response to an emergency.</td>
<td>Supportive brace that does not impede required movement or interfere with infection control policies.</td>
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<tr>
<td>Physical Strength</td>
<td>1. Able to push, pull, stabilize, pivot, and freely move arms to allow movement of 50 pounds as in moving an object or transferring a client from one place to another.</td>
<td>Supportive back brace, arm brace that does not impede required movement or interfere with infection control policies.</td>
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| Environment and Physical Endurance | 1. Able to have stamina sufficient to maintain continuous physical activity or prolonged standing for a period of time from 5-8 hours.  
2. Able to tolerate exposure to common allergens such as pets, body lotions, soaps, cleaning products, and latex products.  
3. Able to tolerate working in confined areas with temperatures as high as 90 degrees for up to ½ hour (giving showers). | Student must inform Program Director in advance of class to assess if a pet resides in the clinical environment. Attempts will be made to place student in a clinical site without a pet. |
| Speech and Communication | 1. Able to interact with others to report observations and advocate for the needs of clients.  
2. Able to speak, write, listen/comprehend spoken/written English in order to be able to communicate with clients as well as report and document client information.  
3. Able to follow verbal and written directions | Hearing aid, glasses, contacts  
English language learning (ELL) classes are offered for students who meet the criteria. It is essential that assistance be sought before the actual start of the class due to the fast pace and large volume of reading that is required. |
| Senses: Smell, Hearing, and Vision | 1. Able to detect differences in body and environmental odors.  
2. Able to hear and understand voices spoken at a normal speaking volume within a distance of 10 feet.  
3. Able to hear faint noises such as whispers within a range of three (3) feet.  
4. Able to see objects clearly within a minimum of 20 feet.  
5. Able to have depth perception and peripheral vision to allow identification of dangerous objects and client situations within the client room.  
6. Able to read and interpret written data held at normal reading distance (including measurement calibrations and grids).  
7. Able to distinguish color and color intensity. | Hearing aid, glasses, contacts  
Seat students in the classroom in closest possible proximity to front of classroom.  
Provide FM system if indicated. Provide interpreter for video and lab if indicated. |
| Emotional Stability          | 1. Able to interact and support clients during times of stress and emotional upset.  
|                            | 2. Able to adapt to emergency situations and changing conditions while maintaining emotional control.  
|                            | 3. Able to cope with strong emotions and physical outbursts of clients while remaining in a reasonable state of calm.  
|                            | 4. Able to focus on client needs despite interruptions and multiple demands.  
|                            | 5. Able to focus attention on tasks.  
|                            | 6. Able to perform multiple responsibilities concurrently. |

| Interpersonal Skills        | 1. Able to apply knowledge gained in the classroom to establish appropriate relationships with clients, families, and coworkers.  
|                            | 2. Able to interact as a member of the health care team.  
|                            | 3. Able to show respect for diversity in culture, religion, sexual orientation, marital status, socio-economic status and abilities and disabilities. |

| Reading                    | 1. Able to read and understand English with ability to understand medical records, charts, graphs and worksheets in order to comprehend assignments, curriculum and patient documentation.  
|                            | 2. Able to read and understand digital and computer displays. |

| Students with learning disabilities must provide documented proof of the need for any reasonable special accommodation. This documented proof may be provided by the student’s health care provider, Individual Learning Plan (IEP), Division of Vocational Rehabilitation’s Individual Learning Plan for employment or other pertinent documentation. Every attempt will be made to make reasonable accommodations based on the student’s documentation. Students with low reading levels are encouraged to seek remediation before the start of the class due to the challenging reading requirements of the class. | Glasses, contacts |
| Math                                                                 | 1. Able to convert numbers within the American System as well as the Metric System.  
|                                                                    | 2. Able to do basic math including add, subtract, multiply, and divide without the use of a calculator.  
|                                                                    | 3. Able to count and understand the meaning of numbers.  
|                                                                    | 4. Able to measure length by reading a tape measure or ruler.  
|                                                                    | 5. Able to tell time on a clock.  
| Glasses, contacts                                                   | Students with low math skills are encouraged to seek remediation before the start of the class.  

| Problem Solving                                                    | 1. Able to know the difference between serious and minor problems in order to request the assistance of nurse as needed.  
|                                                                    | 2. Able to apply knowledge and skill when assisting the client.  
|                                                                    | 3. Able to organize and use information regarding the client.  
|                                                                   |  

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The Americans with Disabilities Act (ADA) of 1990 (42 U.S.C & 12101. et seq.), the ADA Amendment Act of 2008, and Section 504 of the Rehabilitation Act of 1973 (29 U.S.C & 794) prohibits discrimination of persons because of her or his disability. In keeping with these laws, colleges of the Wisconsin Technical College System will make every effort to ensure a quality education for students. The purpose of this document is to ensure that students acknowledge they have been provided information on the functional abilities required of a student in the Nursing Assistant program.

This form is also available by logging into Blackboard with your student id and password. It is to be completed and returned to:

Fox Valley Technical College, Enrollment Services, PO Box 2277, Appleton, WI 54912-2277
or email the signed copy to admissions@fvtc.edu.

<table>
<thead>
<tr>
<th>(initials/date)</th>
<th>I have read and understand the Functional Ability Criteria specific to a student in the Nursing Assistant Program.</th>
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</thead>
<tbody>
<tr>
<td>(initials/date)</td>
<td>I am able to meet the Functional Abilities Criteria as presented with or without accommodation.</td>
</tr>
<tr>
<td>(initials/date)</td>
<td>I was provided with information concerning accommodations or special services if needed at this time.</td>
</tr>
</tbody>
</table>

Student ID ____________________________________________________________

Name of Student (Please print) ____________________________________________

Signature of Student ___________________________________________ Date