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	STANDARD	CORRELATING PAGES		
108-003.01 Training for All Nursing Homes Except ICF/MRs				
1.	At least 16 hours of training in the			
	following areas:			
1.a	Communication and interpersonal skills	254–266		
1.b	Infection control	144–178		
1.c	Safety/emergency procedures, including	85–104		
	emergency measures for choking			
1.d	Promoting residents' independence	11, 72, 112, 135, 217, 225, 328–329, 337–339,		
		415, 434, 466–471, 507, 522, 525–528, 533		
1.e	Respecting residents' rights	45–46		
2.	Basic nursing skills:			
2.a	Taking and recording vital signs	342–363		
2.b	Measuring and recording height and	364–369		
	weight			
2.c	Caring for the residents' environment	391–412		
2.d	Recognizing abnormal changes in body	6–8, 215–246		
	functioning and the importance of			
	reporting such changes to a supervisor			
2.e	Caring for residents when death is imminent	537–555		
3.	Personal care skills, including, but not			
	limited to:			
3.a	Bathing	415–419		
3.b	Grooming, including mouth care	410–434		
3.c	Dressing	434–439		
3.d	Toileting	483–507		
3.e	Assisting with eating and hydration	452–467, 476–482		
3.f	Proper feeding techniques	467–471		
3.g	Skin care	440–448		
3.h	Transfers, positioning, and turning	303–318		
4.	Mental health and social service needs:			
4.a	Modifying nursing assistant's behavior in	512–536		
	response to residents' behavior			
4.b	Awareness of developmental tasks	128–132		
	associated with the aging process			
4.c	How to respond to resident behavior	518, 524		
4.d	Allowing the resident to make personal	522, 544		
	choices, providing and reinforcing other			



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	behavior consistent with the resident's dignity	
4.e	Using the resident's family as a source of emotional support	518, 524, 533–534, 541
5.	Care of cognitively impaired residents	
5.a	Techniques for addressing the unique needs and behaviors of individuals with dementia (Alzheimer's and others)	69, 265, 529–530
5.b	Communicating with cognitively impaired residents	520-534
5.c	Understanding the behavior of cognitively impaired residents	520-534
5.d	Appropriate responses to the behavior of cognitively impaired residents	520–534
5.e	Methods of reducing the effect of cognitive impairments	520–534
6.	Basic restorative services:	
6.a	Training the resident in self-care according to the resident's abilities	11, 72, 112, 135, 217, 225, 328–329, 337–339, 415, 434, 466–471, 507, 522, 525–528, 533
6.b	Use of assistive devices in transferring, ambulation, eating and dressing	322–327, 337–338, 466–467, 313–316
6.c	Maintenance of range of motion	330–337
6.d	Proper turning and positioning in bed and chair	303–318
6.e	Bowel and bladder training	507–508
6.f	Care and use of prosthetic and orthotic devices	338, 521–522
7.	Resident rights:	
7.a	Providing privacy and maintenance of confidentiality	44–45, 49, 295–296
7.b	Promoting the resident's right to make personal choices to accommodate his/her needs	544
7.c	Giving assistance in resolving grievances and disputes	267–271
7.d	Providing needed assistance in getting to and participating in resident and family groups and other activities	
7.e	Maintaining care and security of resident personal possessions	393, 396, 533
7.f	Promoting the resident's right to be free from abuse, mistreatment, and neglect and the need to report any instances of such treatment to appropriate facility staff	44–47



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7.g	Avoiding the need for restraints in	69–75				
7.6	accordance with current professional	03 73				
	standards					
	108-003.02 Training for ICF/MRs					
108-003.02A: Personal care training						
1.	Personal care:					
1.a	Bathing	415–419				
1.b	Oral hygiene	424–428				
1.c	Backrubs	407–410				
1.d	Nail care	428–429				
1.e	Shaving	423–424				
1.f	Hair care	419–423				
1.g	Dressing	434–438				
1.h	Bed-making (both occupied and unoccupied)	395–402				
2.	Active range of motion					
2.a	Ambulation	6, 322–327				
2.b	Positioning	182–183, 303–308				
2.c	Transfer techniques	313–317				
2.d	Use of physical restraints	69–75				
3.	Foods and fluids					
3.a	Basic nutrition	452–459				
3.b	Diet descriptions	460–467				
3.c	Preparation of residents for meals	467–471				
3.d	Feeding techniques	469–471				
3.e	Reporting intake and output	468, 478–482				
3.f	Weighing techniques	364–369				
4.	Elimination:					
4.a	Appropriate use of urinal and bedpan	483–489				
4.b	Bowel and bladder retraining	507–508				
4.c	Incontinent care	496–497				
4.d	Enemas	501–504				
5.	Safety and accident prevention:					
5.a	Lighting	59, 65				
5.b	Siderails	70–71				
5.c	Call lights	60, 66, 70, 71, 73				
5.d	Wheelchairs	313–315				
5.e	Smoking	78				
6.	Infection prevention techniques:					
6.a	Handwashing	8, 154–158				
6.b	Care of linen and equipment	164–165, 392–402				
6.c	Introduction to isolation techniques	166–168				
7.	Aging process:					



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7.a	Basic principles	208–211			
7.b	Psychosocial needs	130			
7.c	Communication skills	254–273			
108-003.02	108-003.02B: Therapeutic and emergency procedures				
1.	Fire and disaster safety procedures	76–78, 105–107			
2.	Basic emergency care	86–93			
2.a	Recognition of signs and symptoms of emergencies including bleeding, burns, convulsions, fainting, falls, and choking	93–103			
2.b	Procedures for reporting	291–299			
3.	Measuring vital signs	342–363			
3.a	Temperature	343–352			
3.b	Pulse	352–355			
3.c	Respirations	356–357			
3.d	Blood pressure	357–362			
108-003.02C: Reporting suspected abuse or neglect					
1.	Requirements of Neb. Rev. Stat §§ 28-372 and 28-711	[We do not have copies of these statutes, so we cannot correlate to them exactly. Required			
2.	Resident rights as set forth in 175 NAC 12 and 175 NAC 17	reporting of abuse and neglect are treated on pages 46–47.]			