



Long-Term Care Worker Basic Training Enhancement Instructions and Application

TODAY'S DATE

Use this form to request approval for your enhancements to Revised Fundamentals of Caregiving (RFOC) to meet the Long-Term Care Worker Basic Training requirement. [WAC 388-112A-1020](#)

This form must be submitted with one of the following:

- Facility Training Program Application and Updates, DSHS 15-555
- Community Instructor Training Program Application and Updates, DSHS 15-551

Section 1. General Information		
SUBMITTER'S NAME (PLEASE PRINT)		DATE
SUBMITTER'S CONTACT INFORMATION		
PHONE NUMBER (AREA CODE) ()	CELL NUMBER (AREA CODE) ()	EMAIL ADDRESS
TRAINING PROGRAM INFORMATION		If you are not a DSHS approved Training Program, please visit our DSHS Training Requirements and Classes page for application information.
Training Program Name: Training Program Number:		
BUSINESS CONTACT INFORMATION		
CONTRACTOR BUSINESS NAME		DBA
ADDRESS	CITY	STATE ZIP CODE
EMAIL		WEBSITE
Section 2. Instructions for developing enhancements to the long-term care worker basic training requirement		
<p>What is an enhancement?</p> <p>The DSHS developed Revised Fundamentals of Caregiving (RFOC) or another department approved training may be used to teach the seventy-hour long-term care worker (LTCW) basic training but it must include enhancements. Additional student materials are required to ensure the enhancements are well planned and documented for students. The department recommends a minimum of 8 hours of enhancements that include skills practice time, student activities and student materials. WAC 388-112A-0300</p> <p>Examples of enhancements include, but are not limited to the following:</p> <p>More time for workers to practice skills, including:</p> <ul style="list-style-type: none"> • The mechanics of completing the skill correctly. • Resident centered communication and problem solving associated with performing the skill. • The different levels of care required for each skill including independent, supervision, limited, extensive and total. • Working with assistive devices associated with a skill. • Helpful tips or best practices in working through common resident challenges associated with a skill. • Disease specific concerns or challenges associated with a skill. <p>Augmenting or adding additional materials, student activities, videos, or guest speakers* that:</p> <ul style="list-style-type: none"> • More deeply reinforce and fortify the learning outcomes required for basic training. • Ensure each student integrates and retains the knowledge and skills needed to provide quality basic personal care. • Prepares workers for the certification testing environment and process. <p>* Please see WAC 388-112A-1230 regarding guest speakers.</p> <p>Enhancements ARE NOT materials or activities that are one or more of the following:</p> <ul style="list-style-type: none"> • Are out of the scope of practice for a long-term care worker such as content clearly written for registered nurses. • Are identical to, or a direct replacement of, those already included in the RFOC. • Fail to reinforce Washington state laws associated with resident rights and resident directed care. • Long-term care workers are not paid to provide. • Are written above a high school reading level. 		

Section 3. Instructions for completing this application

Identify the module and page WHERE you are adding each enhancement in the enhancement locator in Section 4. The first column in the enhancement locator table, starting on Page 2, is a complete table of contents for RFOC. Find the location where you are adding each attachment and fill out the following information.

Time Allotted: List the total amount of time you are adding in that section. This number must be **IN ADDITION** to the time already allocated in RFOC for that skill or content area.

Adding Student Activity, Adding New Materials: Put a check in the box if you are adding a student activity and/or additional student materials. You can check both boxes if you are doing both things in that section.

What you are doing and expected outcomes: Briefly describe what you are doing with the additional time. Include one or two sentences describing the expected student outcomes with the added material.

Location of materials: **Submit all enhanced or new materials with this form.** Tell us where we can find any handouts, worksheets, videos, quizzes, and instructor info (such as guided discussion questions) you are using. If you are:

- **Emailing attachments** with the actual materials: List the filename of the attachment and what it contains.
- **Using Online training:** List the website address where it can be found, the title of the training, and any necessary login information.
- **Using DVD / Videos:** List the title, publisher name, a brief description of what the video / DVD contains, and video / DVD length. The actual video / DVD does **not** need to be submitted unless requested later by the department.

Example

REVISED FUNDAMENTALS TABLE OF CONTENTS	PAGE	TIME ALLOTTED	CHECK ALL THAT APPLY		BRIEF DESCRIPTION OF ENHANCEMENT AND LEARNING OBJECTIVE	LOCATION OF MATERIALS
			ADDING STUDENT ACTIVITY	ADDING NEW MATERIALS		
The Client	12	1 hour	<input type="checkbox"/>	<input type="checkbox"/>	DVD highlights common client perspectives increasing student awareness and sensitivity to the issues facing clients and how that impacts care.	Living in Assisted Living, Templar Productions, DVD is 1 hr. 5 clients living in an assisted living facility and their families are interviewed.

Section 4. Complete the enhancement locator below

REVISED FUNDAMENTALS TABLE OF CONTENTS	PAGE	TIME ALLOTTED	CHECK ALL THAT APPLY		BRIEF DESCRIPTION OF ENHANCEMENT AND LEARNING OBJECTIVE	LOCATION OF MATERIALS
			ADDING STUDENT ACTIVITY	ADDING NEW MATERIALS		
Module 2 – The Client and Client Rights						
The Client	12		<input type="checkbox"/>	<input type="checkbox"/>		
Client Rights	17		<input type="checkbox"/>	<input type="checkbox"/>		
Freedom of choice	18		<input type="checkbox"/>	<input type="checkbox"/>		
Confidentiality	19		<input type="checkbox"/>	<input type="checkbox"/>		
A Client's Right Health Care Decisions	19		<input type="checkbox"/>	<input type="checkbox"/>		
Advance Directives	20		<input type="checkbox"/>	<input type="checkbox"/>		
Abuse	23		<input type="checkbox"/>	<input type="checkbox"/>		
Mandatory Reporting	27		<input type="checkbox"/>	<input type="checkbox"/>		
Restraints	30		<input type="checkbox"/>	<input type="checkbox"/>		
Effective Problem Solving	33		<input type="checkbox"/>	<input type="checkbox"/>		
Module 3 – The Caregiver						
The Caregiver	39		<input type="checkbox"/>	<input type="checkbox"/>		
Basic Job Responsibilities	39		<input type="checkbox"/>	<input type="checkbox"/>		

Providing Personal Care	40		<input type="checkbox"/>	<input type="checkbox"/>		
Respecting Privacy and Independence	43		<input type="checkbox"/>	<input type="checkbox"/>		
Honoring Differences	45		<input type="checkbox"/>	<input type="checkbox"/>		
Caregiver as Part of a Care Team	46		<input type="checkbox"/>	<input type="checkbox"/>		
Documenting Observations	48		<input type="checkbox"/>	<input type="checkbox"/>		
Reporting	49		<input type="checkbox"/>	<input type="checkbox"/>		
Reporting Guidelines	50		<input type="checkbox"/>	<input type="checkbox"/>		
Professional Conduct	50		<input type="checkbox"/>	<input type="checkbox"/>		
Professional Boundaries	51		<input type="checkbox"/>	<input type="checkbox"/>		
Caregiving as a Professional Job	52		<input type="checkbox"/>	<input type="checkbox"/>		
Safety Habits that Prevent Accidents	54		<input type="checkbox"/>	<input type="checkbox"/>		
Handling Emergencies	54		<input type="checkbox"/>	<input type="checkbox"/>		
Module 4 – Infection Control						
Infections and How They Spread	60		<input type="checkbox"/>	<input type="checkbox"/>		
Infection Control	62		<input type="checkbox"/>	<input type="checkbox"/>		
Handwashing	62		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Handwashing	63		<input type="checkbox"/>	<input type="checkbox"/>		
Wearing gloves	65		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Gloves	66		<input type="checkbox"/>	<input type="checkbox"/>		
Cleaning and Disinfecting	68		<input type="checkbox"/>	<input type="checkbox"/>		
Immunizations	68		<input type="checkbox"/>	<input type="checkbox"/>		
Observing and Reporting Infection	69		<input type="checkbox"/>	<input type="checkbox"/>		
More about Blood Bourne Pathogens	71		<input type="checkbox"/>	<input type="checkbox"/>		
Standard Precautions	72		<input type="checkbox"/>	<input type="checkbox"/>		
HIV / AIDS	75		<input type="checkbox"/>	<input type="checkbox"/>		
Module 5 – Mobility						
Body Mechanics	85		<input type="checkbox"/>	<input type="checkbox"/>		
Mobility	85		<input type="checkbox"/>	<input type="checkbox"/>		
Transfers	86		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Transfers	86		<input type="checkbox"/>	<input type="checkbox"/>		
Helping a Client Walk	89		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Helping a Client Walk	89		<input type="checkbox"/>	<input type="checkbox"/>		
Falls	91		<input type="checkbox"/>	<input type="checkbox"/>		
Fall Prevention	92		<input type="checkbox"/>	<input type="checkbox"/>		

Module 5 – Basic Communication						
Managing Your Communication	97		<input type="checkbox"/>	<input type="checkbox"/>		
Body Language	97		<input type="checkbox"/>	<input type="checkbox"/>		
Making Sure Your Message is Understood	100		<input type="checkbox"/>	<input type="checkbox"/>		
Active Listening	103		<input type="checkbox"/>	<input type="checkbox"/>		
Barriers to Effective Communication	104		<input type="checkbox"/>	<input type="checkbox"/>		
Managing Challenging Communication	106		<input type="checkbox"/>	<input type="checkbox"/>		
Module 7 – Skin and Body Care						
Skin Care	111		<input type="checkbox"/>	<input type="checkbox"/>		
Promoting Healthy Skin Care	111		<input type="checkbox"/>	<input type="checkbox"/>		
Pressure Ulcers	113		<input type="checkbox"/>	<input type="checkbox"/>		
Changing a Client's Position	116		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Turn and Reposition	116		<input type="checkbox"/>	<input type="checkbox"/>		
Personal Hygiene	119		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Mouth Care	119		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Clean and Store Dentures	121		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: A Shave with Safety Razor	122		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Fingernail Care	123		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Foot Care	124		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Bed Bath	126		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Assisting a Client to Dress	127		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Assist Weak Arm to Dress	128		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Put Knee-High Stocking	129		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Passive Range / Motion Shoulder	130		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Passive Range / Motion Ankle	130		<input type="checkbox"/>	<input type="checkbox"/>		
Module 8 – Nutrition and Food Handling						
Nutrition Basics	135		<input type="checkbox"/>	<input type="checkbox"/>		
The Food Pyramid	135		<input type="checkbox"/>	<input type="checkbox"/>		
Four Basic Nutrition Guidelines	137		<input type="checkbox"/>	<input type="checkbox"/>		
Fats	137		<input type="checkbox"/>	<input type="checkbox"/>		
Salt	139		<input type="checkbox"/>	<input type="checkbox"/>		

Empty Calories	140		<input type="checkbox"/>	<input type="checkbox"/>		
Fiber	140		<input type="checkbox"/>	<input type="checkbox"/>		
Meal Planning and Shopping	141		<input type="checkbox"/>	<input type="checkbox"/>		
Food Labels	142		<input type="checkbox"/>	<input type="checkbox"/>		
Poor Nutrition	143		<input type="checkbox"/>	<input type="checkbox"/>		
Assisting a Client with Meals	144		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Assisting a Client to Eat	145		<input type="checkbox"/>	<input type="checkbox"/>		
Special Diets	146		<input type="checkbox"/>	<input type="checkbox"/>		
Water, the Forgotten Nutrient	148		<input type="checkbox"/>	<input type="checkbox"/>		
Dehydration	148		<input type="checkbox"/>	<input type="checkbox"/>		
Food-Borne Illness	150		<input type="checkbox"/>	<input type="checkbox"/>		
Safe Food Handling Practices	151		<input type="checkbox"/>	<input type="checkbox"/>		
Prepare Food Safety	151		<input type="checkbox"/>	<input type="checkbox"/>		
Store Food Safely	153		<input type="checkbox"/>	<input type="checkbox"/>		
Prevent Cross-Contamination	154		<input type="checkbox"/>	<input type="checkbox"/>		
Clean and Disinfect Surfaces Food Touches	155		<input type="checkbox"/>	<input type="checkbox"/>		
Module 9 – The Process of Elimination						
Bowel and Bladder Function	161		<input type="checkbox"/>	<input type="checkbox"/>		
Problems with Urinary Function	163		<input type="checkbox"/>	<input type="checkbox"/>		
Problems with Bowel Function	165		<input type="checkbox"/>	<input type="checkbox"/>		
Assisting with Toileting	168		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Assist Client with Pericare	169		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Assist Client with Bedpan	170		<input type="checkbox"/>	<input type="checkbox"/>		
Catheters	171		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Catheter Care	173		<input type="checkbox"/>	<input type="checkbox"/>		
Skill: Assist Condom Catheter Care	174		<input type="checkbox"/>	<input type="checkbox"/>		
Module 10 – Medications and Other Treatments						
Self-Directed Care	179		<input type="checkbox"/>	<input type="checkbox"/>		
Nurse Delegation	180		<input type="checkbox"/>	<input type="checkbox"/>		
Med Assistance and Med Administration	183		<input type="checkbox"/>	<input type="checkbox"/>		
Five Rights	185		<input type="checkbox"/>	<input type="checkbox"/>		

Skill: Medication Assistance	188		<input type="checkbox"/>	<input type="checkbox"/>		
More on Medications	188		<input type="checkbox"/>	<input type="checkbox"/>		
Module 11 – Self Care and the Caregiver						
Self Care	195		<input type="checkbox"/>	<input type="checkbox"/>		
Reduce Stress in Your Life	196		<input type="checkbox"/>	<input type="checkbox"/>		
Taking Action to Reduce Stress	198		<input type="checkbox"/>	<input type="checkbox"/>		
Setting Limits	199		<input type="checkbox"/>	<input type="checkbox"/>		
Finding Positive Outlets for Your Emotions	200		<input type="checkbox"/>	<input type="checkbox"/>		
Relaxation Techniques	202		<input type="checkbox"/>	<input type="checkbox"/>		
Healthy Choices in Sleep and Physical Act	203		<input type="checkbox"/>	<input type="checkbox"/>		
Loss and Grief	207		<input type="checkbox"/>	<input type="checkbox"/>		
Enhancement Hours Total						

Submit all enhanced or new materials for review with this form.