NUTRITION AND FEEDING ASSISTANT TRAINING PROGRAM APPLICATION

ARIZONA DEPARTMENT OF HEALTH SERVICES
DIVISION OF LICENSING SERVICES
150 N. 18TH AVENUE, PHOENIX, ARIZONA 85007
A.R.S. Title 36, Chapter 4 and 9 A.A.C. 10

AGENCY INFORMATION

Name of the Individual in Charge: _____

Location of Training Program Records:

Street Address: _____

City: _____ State: _____ Zip Code: _____

A description of the training course being offered by the nutrition and feeding assistant training program for each topic listed below – the information presented for each, the amount of time allotted to each, the skills an individual is expected to acquire for each, the tesing method used to verify an individual has acquired the stated skills for each, and copies of the materials used during training in each:

1. Feeding techniques;
2. Assistance with feeding and hydration;
3. Communication and interpersonal skills;
4. Appropriate responses to resident behavior;
5. Safety and emergency procedures, including the Heimlich maneuver;
6. Infection control;
7. Resident rights;
8. Recognizing a change in a resident that is inconsistent with the resident's normal behavior; and
9. Reporting a change in subsection (8) to a nurse at a nursing care institution.

_____ _____

Signature of the Individual in Charge Title