

Certified Nursing Assistant to Behavioral Aide: Role Transition

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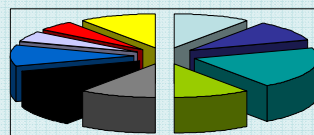
Introduction

Nursing care for patients with Traumatic Brain Injury (TBI) poses a significant challenge due to increased agitated and difficult behaviors present in a growing population in rehabilitation hospitals of patients with higher acuity. Pharmacological interventions used to decrease agitation often complicate these problems and the use of 'sitters' can be ineffective due to their lack of specialized training. The purpose of this poster is to present a plan for integrating a Behavioral Aide role into an existing therapeutic management program. . Brooks Rehabilitation Hospital is currently working on a unique and innovative proposal for the redesign and transition of the Certified Nursing Assistant (CNA) role to a Behavioral Aide (BA) designation on a TBI unit.

Proposed Program

- Establish internal buy-in and manage change
 - Discuss in staff meetings and huddles
 - Allow time for questions and answers
 - Create enthusiasm
- Build collaborative relationships to add momentum
 - Consult with all disciplines
 - Establish consistent communication mechanisms among team members to track patient progress
- Provide training on topics twice a week for 8-10 weeks
 - Provide didactic courses
 - Administer Pre and Post test
 - Complete competency checklist

Training Topics



- ☐ Introduction to the Role of BA
- ☒ Pathophysiology of Brain Injury
- ☒ Therapeutic Behavior Management
- ☒ Documentation
- ☒ Structured Activities
- ☒ Therapeutic Communication
- ☒ Patient Scenarios and Role Play
- ☐ Pre-test
- ☐ Post-test
- ☐ Competency Checklist

Sample Vignette

D.G. is a 37 y/o male involved in a MVC at 45 mph. He sustained a fractured tibia, lacerated diaphragm 10 cm in length and a severe diffuse axonal injury. He was determined to be at a Rancho IV upon admission to the TBI unit. D.G. is severely agitated, impulsive, and has difficulty following directions. He doesn't understand what he feels and that the staff are trying to help him. With specialized training, a Behavioral Aide (BA) would implement a coordinated behavioral management plan that focuses on:

- Re-orienting D.G. frequently and reassuring him that he is safe.
- Providing familiar activities for him that are calming such as listening to music, eating, drawing, etc.
- Managing distracted, restless, and/or agitated, behaviors by providing breaks and pacing activities as needed.
- Maintaining a calm environment such as keeping the room quiet, limiting visitors if needed and using a calm voice.
- Allowing him as much autonomy and movement as is safe.

Discussion

Transitioning CNAs to a BA role will provide the consistency, experience and specialized training beyond what a "sitter" is able to offer. Planning is underway to address some of the anticipated nursing challenges including training needs of staff, financial constraints, and potential resistance to change. Benefits to the BA role include staff's ability to align interventions with specific behaviors, to provide structure for patient care, and to focus on therapeutic communication, which will allow them to guide the patient through periods of agitation.

Conclusion

It is anticipated that this role change will have a positive impact on patient outcomes including decreased acute care transfers and increased well-being. This will also allow for improvement in the patients ability for successful transition to the community or re-entry into the workforce as well as improved family satisfaction as behavior issues begin to decrease.

In addition, staff will be able to provide direct and consistent supervision, ensure safety, collect behavioral data through observation, and offer increased structure needed by these patients. Future dissemination on program implementation and outcomes is planned.

References

- Biggs, J. (2012, October). The role of nursing in the therapeutic learning environment: A charge and a challenge. Paper presented at Contemporary Forums Brain Injuries Conference. Las Vegas, NV.
- Flanagan, S.R., Elovic, E.P., & Sandel, M.E. (2009). Managing agitation associated with traumatic brain injury: Behavior versus pharmacological interventions. American Academy of Physical Medicine and Rehabilitation, 1, 76-80. doi:10.1016/j.pmrj.2008.10.013