



Nurse Aide Testing

Actor Training Guidelines

This is an instructional handout designed to quickly answer Testing Service Contractor questions regarding the training and certification of Actors for participation during the administration of the Skill Test.

BECOMING AN ACTOR:

You will need to fill out the **Actor Training Affidavit and Confidentiality/Nondisclosure Agreement**. The Testing Services Contractor/RN Test Observer you will be working with can provide you with the link to the agreement form.

To become an Actor, an individual must review these instructions with a certified RN Test Observer as assigned by a Testing Service Contractor, or directly from D&SDT-HEADMASTER staff in some situations, and certify that they received and understand these instructions. The individual must be trained with the state-approved materials that are included within. The Actor would have/should have filled out and signed a Testing Services Contractor generated application. The individual must also meet the criteria listed below. After accomplishing these tasks, the person may then be used as an Actor. These guidelines will be given to Actors for their continued review.

Please do not hesitate to contact D&SDT-HEADMASTER at (800)393-8664, (877)851-2355, or (888)401-0462 with any questions at any time.

These guidelines may also serve as the framework for an Actor Job Description, though Testing Service Contractors/RN Test Observers may design the Job Description as they require.

WHO CAN BE A SKILL TEST ACTOR?

Note: It is not necessary to be a professional actor or have acting experience to be successful as a Skill test actor. If you have acting experience, you may find this much more difficult than working from a script or within dramatic improvisational outlines, and you may find this frustrating. This work has nothing to do with finding dramatic moments or playing to an audience. It has everything to do with disciplining yourself, within the needs of the skill exam. It can be very repetitive as ***exactly the same simulation must be done for every candidate***. *Actors must be 'test neutral' at all times and never influence the outcome of the skill test.*

To qualify as an Actor, the Actor must meet the following criteria:

1. Actors need to understand that they are not able to sit for the State competency test for six (6) months (12 months in Oregon) from the date that they last worked as an Actor.
2. Actors must be of legal working age in the State they are working. Minors must also have a work permit where required by State law.
3. Actors must be trained and certified with these approved materials.
4. Actors must attest to abide by the Actor Training Affidavit and Confidentiality/Nondisclosure Agreement.
5. An Actor may **NOT** be a Nurse Aide who has not been tested.
6. An Actor may **NOT** be a student in any Nurse Aide training.
7. Actors can be registry active Nurse Aides, testing team family members, volunteers, etc.



COMPENSATION FOR BEING A SKILL TEST ACTOR:

Actors may be volunteers. For non-volunteer Actors, the Testing Services Contractor should pay Actors an agreed-upon remuneration for assisting with the administration of a Skill test, at the rate agreed upon by both parties. RN Test Observers must be sure to include the Actor's name for the test events the actor participates in, so D&SDT-HEADMASTER staff can contact them for test dispute investigations when needed.

SKILL TASKS REQUIRING AN ACTOR:

Actors must be comfortable acting as a healthcare resident. If the Actor has any hesitation in participating in the demonstration of any of the skill tasks (the list below is for all states we test nurse aides in, please refer to the Candidate Handbook for the state you will be an Actor in for the state-specific tasks at www.hdmaster.com), they should not become certified as an Actor.

- Catheter Care, Changing an Adult Brief, Male Perineal Care, and Female Perineal Care – are tasks demonstrated on the manikin, no Actor is used for these tasks.
- Abbreviated/modified Bed Bath – Face, arm, hand, and underarm only are washed with soap. No soap is used on the Actor's face. (The Actor should be comfortable with no make-up.)
- Ambulation from Bed to Wheelchair or Wheelchair to Bed using a Gait Belt, Walker, or Cane – Actor will be assisted to take at least ten steps from the bed to the wheelchair or from the wheelchair to the bed.
- Applying an Anti-embolic Stocking to One Leg – Actor will have an anti-embolic knee-high stocking applied to one leg.
- Bedpan and Output – Actor will remain fully clothed. Actor will be placed on a bedpan (standard or fracture) by the candidate. Once the bedpan is removed by the candidate, the RN Test Observer will pour a premeasured amount of fluid into the bedpan while the candidate is holding it.
- Denture Care – Actor does not provide. Sample dentures will be at the test site.
- Dressing a Dependent Resident – Actor will remain fully clothed, with large oversized clothing being put on the Actor to demonstrate dressing technique.
- Emptying a Urinary Drainage Bag – Actor will hold drainage bag tubing under covers while lying in bed.
- Feeding a Dependent Resident – Actor will eat small amounts of solid food and drink small amounts of fluid. An Actor cannot refuse to eat or drink.
- Foot Care – Actor will have one foot washed, dried and lotion rubbed onto the foot.
- Hair Care – Actor will have their hair brushed/combed. An Actor must be comfortable with having hair brushed/combed by the candidate.
- Making an Occupied Bed – Actor will be a weak resident and remain in bed while linens are removed and replaced.
- Mouth Care and Mouth Care for a Comatose Resident – Actor's teeth will be brushed. Actor will keep their mouth open once the candidate has initiated opening their mouth. For mouth care for a comatose resident, the Actor will keep their eyes closed and be non-responsive.
- Nail Care – Actor will have the nails on one hand filed and cuticles pushed back.
- Pivot-transfer from Bed to Wheelchair or Wheelchair to Bed using a Gait Belt – Actor will be a weight-bearing, non-ambulatory resident but stable when standing and will be assisted to the wheelchair from bed, or from the bed to wheelchair.
- Position Resident on Side in Bed – Actor will be weak and positioned on one side.



- Range of Motion Exercises—upper (one shoulder) and lower (one hip and knee or ankle) extremities.
- Vital Signs: Manual Blood Pressure – Actor should have a blood pressure that is easy to hear.
- Vital Signs: Pulse and Respirations – Actor must have a pulse that is not difficult to recognize.
- Vital Signs: Temperature, Pulse, and Respirations – Actor must have a pulse that is not difficult to recognize.
- Vital Signs: Temperature, Respirations, Pulse Oxygen and Electronic Blood Pressure.
- Weighing an Ambulatory Resident – Actor will have weight taken. An actor must be comfortable with having weight taken.

SCHEDULING:

Actors will be contacted by Testing Services Contractors/RN Test Observer to be scheduled for testing dates.

TEST SECURITY:

Actors will be required to maintain, and never violate, the security of the tests or compromise any testing information. If Actors violate test security, they will be held legally accountable and prosecuted to the full extent of the law. **Actors MUST NOT release any test content or information about any candidate's performance to ANYONE other than the RN Test Observer, D&SDT-HEADMASTER staff, or the appropriate State agency.**

APPROPRIATE ATTIRE:

Actors should wear comfortable clothes that do not restrict their motion in any way. Actors should wear sweat pants or comfortable appropriate length (not revealing) shorts, tank top (not too revealing) or tee shirt, or similar non-restrictive clothing. Short sleeves that are easy to push up or no sleeves on shirts are recommended.

SAFETY:

Actors should voice their concerns to the RN Test Observer if at any time they believe that they are in danger. This would include concerns of falling, being bruised, or being hurt in any manner. In addition, the Actor may speak up, if the candidate puts a gait belt on them too tightly. In some cases, these situations can be handled within the test experience. In other situations, a time-out (testing stopped) is necessary.

COMMUNICATING WITH CANDIDATES:

In non-test situations, good care involves cooperative communication between the resident and the candidate. The resident might tell the candidate what is comfortable or ask for what they want. In the test situation, the candidate must rely on learned knowledge and training to give proper care and the actor/resident responses must be SKILL TEST OUTCOME NEUTRAL. (Impact on the outcome of the skill task must be test neutral, the “whatever you think is best” answer to questions the candidates ask puts the decision back on the candidate.) **Do not lead the candidate toward any conclusion about providing further care or care they may not have provided.** The actor may be compelled to “help” a candidate during the exam. This is natural but must be avoided.

Actors may interact with candidates as though they were a typical healthcare resident. There is no need to act particularly sick. **You are having a good day and unless specified have good bed and total room mobility.** If the scenario indicates that you are weak in general or on a specific side, your movements will be slightly slowed and heavy, but remember at no time are you to be “dead weight.” Let the candidate help you up or maintain contact



during ambulation. In general, candidates are just assisting you and should not be put into a position where they are bearing all your weight to any great degree.

1. Actors **may not initiate** communication with the candidate.
2. Actors must not show any body language that may indicate that the candidate did something correctly or incorrectly.
3. Actors cannot prompt the candidate, such as asking them to provide privacy or to place the call light within reach.
4. Many skill tasks include some communication between the Actor and the candidate. A few examples of appropriate communication follow. The Actor NEVER initiates any communication, except for a personal safety concern.
5. Actors should never be conversing (chit-chat or personal conversations) with the RN Test Observer during testing.
6. Actors do not move to set up for the next task until the RN Test Observer has received a verbal closure from the candidate that they are finished with the task they just demonstrated.

These examples are relevant for nearly any skill task and are listed to give a general idea of expectations for an Actor's general mindset, behavior, and the range of communication allowable.

ENTERING A ROOM: If the candidate knocks on the door the Actor should say, "Come in." The actor's communication as a healthcare resident can put the candidate at ease and help the candidate perform better, while still remaining test neutral. Convey non-verbal acceptance with a smile and a relaxed, accepting, positive tone of voice.

DRESSING A DEPENDENT RESIDENT: If the candidate asks, "Do you want to get dressed?" the Actor should say "YES." The Actor should not help, or resist, the candidate with any portion of getting dressed. For left or right-side weakness, the Actor would let the weak side be 'limp'.

AMBULATION WITH A GAIT BELT (WALKER OR CANE): If the candidate asks, "Do you want to go for a walk?" the Actor should say "YES." Actors will not prompt the candidate to put on their non-skid footwear but should say "YES" if they are asked if they want them put on. If the candidate asks "Is it too tight?" say "Whatever you think is best". Always put the decision back with the candidate.

FEEDING A DEPENDENT RESIDENT: "Can you wipe your own hands?" Answer: "NO." Be hungry and positive about eating. You should never refuse to eat or drink. The RN Test Observer will cue you when to stop eating and drinking, which will be before all of the food and fluids are gone.

POSITIONING ON SIDE IN BED: If the candidate asks "Do you want a pillow?" say "Whatever you think is best." This puts the decision-making back on the candidate to place the correct number of pillows during the positioning task.



MOUTH CARE: If the candidate asks, “Can you brush your teeth?” the Actor should say “NO.” If the candidate asks, “Do you want your teeth brushed?” the Actor should say, “YES.”

MOUTH CARE OF A COMATOSE RESIDENT: The Actor will play the part of a comatose resident and keep their eyes closed. Once the candidate initiates opening the Actor’s mouth, the Actor will keep their mouth open.

VITAL SIGNS – MANUAL BLOOD PRESSURE: The Actor should not tell the candidate their blood pressure. If the candidate asks, the Actor would respond, “I don’t know.”

VITAL SIGNS – TEMPERATURE, PULSE, AND RESPIRATIONS: The Actor should not tell the candidate their pulse or respirations. If the candidate asks, the Actor would respond, “I don’t know.”

NAIL CARE ONE HAND: If the candidate asks, “Do you want to get your nails done?” the Actor should say “YES.” The Actor should not help, or resist, the candidate.

RANGE OF MOTION EXERCISES: The candidate must ask sometime during the ROM procedure if there is any pain or discomfort. When asked, you will say “No”. If the candidate is performing ROM to the extent that it is really hurting an Actor, the RN Test Observer will be aware and stop the candidate.

OTHER COMMUNICATION:

If the candidate asks:

- “Do you want your call light and/or water?” say “Whatever you think is best” or “I don’t know”. If a step calls for the candidate to place the call light or signaling device or water within easy reach of the actor, then the decision needs to be placed back on the candidate.
- “Do you need anything?” Answer: “Whatever you think is best” or “I don’t know”.
- If the candidate asks “Are you okay?” “Are you comfortable?” Answer: “Whatever you think is best” or “I don’t know”. All of these are usually asked at the end of a skill test as the candidate is preparing to exit the skill test. Remember all decisions must be placed back with the candidate for the Actor to remain a test-neutral participant.
- If you are in the wheelchair at the end of a skill and far from the call light and the candidate says “Do you want to stay here?” or “Are you okay here?” Say, “I don’t know” or “Whatever you think is best.”
- Sometimes a nervous candidate’s reaction may be to become giggly and tempt the actor/resident into silliness. You will not be helping the candidate if you engage in this overcompensating behavior and it will further distract the candidate. You must remain professional and act out your role as a resident and at all times remain test neutral throughout every candidate's test. Be sure every candidate has the exact same opportunity to perform their best without you impacting the outcome of the candidate’s test.