Typical Nurse Aide Duties to be Stopped and Shifted to Other Non-Direct Care Staff:

- Deliver water and snacks
- Deliver linen and supplies
- Restocking supplies
- Assisting residents in wheelchairs to/from events (bathing, etc.)
- Take menu/orders from residents
- 1-on-1 with residents who have behavioral challenges or need socialization
- Deliver meals to residents during mealtime
- Applying/removing glasses and hearing aids to residents
- Bed making
- Responding to call lights
- Assist with feeding non-choking or non-aspiration risk residents
- Doing errands for the residents
- Doing personal care such as combing hair or washing faces/hands
- Stay with resident while in the bathroom to free up NA to do other tasks while waiting to transfer

Nurse and Nurse Aide duties that could be supported by physical and occupational therapy and speech-language pathology staff:

- Restorative and functional ADL and mobility maintenance services
- Perform and document routine vital signs, orthostatic BPs, etc.
- Assisting to feed moderate risk residents (history of some choking issues)
- Any other basic support duties that could also be performed by non-direct-care staff

Typical Nurse duties to be shifted, stopped, or requests to reduce/discontinue:

- Request discontinue of non-critical medications (e.g. vitamins, calcium)
- Request discontinue or reduced blood sugar checks (e.g. decrease to daily or weekly)
- Request discharge of sliding scale insulin and standard/set amount of long-acting insulin administered every day
- Request to reduce dressing changes to daily or biweekly (as appropriate)
- Routine vital signs decrease to weekly or monthly (as appropriate)
- Orthostatic B/Ps - reduce to one time daily or weekly (as appropriate)
- Stop routine monthly vital signs