Domain I: Rehabilitation Nursing Models and Theories (6%)
Task 1: Incorporate evidence-based practice, models, and theories into patient-centered care.

Knowledge of:
- Evidence-based practice
- Nursing theories and models significant to rehabilitation (e.g., King, Rogers, Neuman, Orem)
- Nursing process (i.e., assessment, diagnosis, outcomes identification, planning, implementation, evaluation)
- Rehabilitation standards and scope of practice
- Related theories and models (e.g., developmental, behavioral, cognitive, moral, personality, caregiver development and function)
- Patient-centered care

Skill in:
- Applying nursing models and theories
- Applying rehabilitation scope of practice
- Applying the nursing process
- Incorporating evidence-based practice

Domain II: Functional Health Patterns (theories, physiology, assessment, standards of care, and interventions in individuals with injury, chronic illness, and disability across the lifespan) (58%)
Task 1: Apply the nursing process to optimize the restoration and preservation of the individual's health and well-being.

Knowledge of:
- Physiology and management of health, injury, acute and chronic illness, and adaptability
- Pharmacology
- Rehabilitation standards and scope of practice
- Technology (e.g., smart devices, internet sources, personal response devices, and telehealth)
- Alterations in sexual function and reproduction

Skill in:
- Assessing health status and health practices
- Teaching interventions to manage health and wellness
- Using rehabilitation standards and scope of practice
- Using technology
- Assessing goals related to sexuality and reproduction
- Teaching interventions and technology related to sexuality and reproduction (e.g., body positioning, mirrors, adaptive equipment, medication)

Task 2: Apply the nursing process to promote optimal nutrition.

Knowledge of:
- Adaptive equipment and feeding techniques (e.g., modified utensils, scoop plates, positioning)
- Anatomy and physiology related to nutritional and metabolic patterns (e.g., endocrine, obesity, swallowing)
- Diagnostic testing
- Diet types (e.g., cardiac, diabetic, renal, dysphagia)
- Fluid and electrolyte balance
- Nutritional requirements
- Skin integrity (e.g., Braden scale, pressure ulcer staging)
- Pharmacology (e.g., anticholinergics, opioids, antidepressants)
i. Safety concerns and interventions (e.g., swallowing, positioning, food textures, fluid consistency)

Skill in:
- Assessing nutritional and metabolic patterns (e.g., nutritional intake, fluid volume deficits, skin integrity, metabolic functions, feeding and swallowing)
- Implementing and evaluating interventions for nutrition
- Implementing and evaluating interventions for skin integrity (e.g., skin assessment, pressure relief, moisture reduction, nutrition and hydration)
- Teaching interventions for swallowing deficits
- Using adaptive equipment

Task 3: Apply the nursing process to optimize the individual's elimination patterns.

Knowledge of:
- Anatomy and physiology of altered bowel and bladder function
- Bladder and bowel adaptive equipment and technology (e.g., bladder scan, types of catheters, suppository inserter)
- Bladder and bowel training (e.g., scheduled self-catheterization, timed voiding, elimination programs)
- Pharmacologic and non-pharmacological interventions

Skill in:
- Assessing elimination patterns (e.g., elimination diary, patient's history)
- Implementing and evaluating interventions for bladder and bowel management (e.g., nutrition, exercise, pharmacological, adaptive equipment)
- Teaching interventions to prevent complications (e.g., constipation, urinary tract infections, autonomic dysreflexia)
- Providing patient and caregiver education related to bowel and bladder management
- Using adaptive equipment and technology

Task 4: Apply the nursing process to optimize the individual's highest level of functional ability.

Knowledge of:
- Anatomy, physiology, and interventions related to musculoskeletal, respiratory, cardiovascular, and neurological function
- Assistive devices and technology (e.g., mobility aids, orthostatic devices, orthotic devices)
- Clinical signs of sensorimotor deficits
- Activity tolerance and energy conservation
- Pharmacology (e.g., antispasmodics, vasopressors, analgesics)
- Safety concerns (e.g., falls, burns, skin integrity, infection prevention)
- Self-care activities (e.g., activities of daily living, instrumental activities of daily living)

Skill in:
- Assessing and implementing interventions to prevent musculoskeletal, respiratory, cardiovascular, and neurological complications (e.g., motor and sensory impairments, contractures, heterotrophic ossification, aspiration, pain)
- Assessing, implementing, and evaluating interventions for self-care ability and mobility
- Implementing safety interventions (e.g., sitter, reorientation, environment, redirection, non-behavioral restraints)
- Using technology (e.g., mobility aids, pressure relief devices, informatics, assistive software)
- Teaching interventions to prevent complications of immobility (e.g., skin integrity, DVT prevention)

Task 5: Apply the nursing process to optimize the individual's sleep and rest patterns.

Knowledge in:
a. Factors affecting sleep and rest (e.g., diet, sleep habits, alcohol, pain, environment)
b. Pharmacology
c. Physiology of sleep and rest cycles
d. Technology

Skill in:
   a. Assessing sleep and rest patterns
   b. Evaluating effectiveness of sleep and rest interventions
   c. Teaching interventions and strategies to promote sleep and rest (e.g., energy conversation, environmental modifications)
   d. Using technology (e.g., sleep study, CPAP, BiPAP, relaxation technology)

Task 6: Apply the nursing process to optimize the individual’s neurological function.

Knowledge of:
   a. Measurement tools (e.g., Rancho Los Amigos, Glasgow, Mini Mental State Examination, ASIA, pain analog scales)
   b. Neuroanatomy and physiology (e.g., cognition, judgment, sensation, perception)
   c. Pain (e.g., receptors, acute, chronic, theories)
   d. Pharmacology
   e. Safety concerns (e.g., seizure precautions, fall precautions, impaired judgment)
   f. Technology

Skill in:
   a. Assessing cognition, perception, sensation, apraxia, perseveration, and pain
   b. Implementing and evaluating strategies for safety (e.g., personal response devices, alarms, helmets, padding)
   c. Teaching strategies for neurological deficits
   d. Teaching strategies for pain and comfort management (e.g., pharmacological, non-pharmacological)
   e. Using technology (e.g., TENS unit, baclofen pump)
   f. Implementing behavioral management strategies (e.g., contracts, positive reinforcement, rule setting)

Task 7: Apply the nursing process to promote the individual’s optimal psychosocial patterns and holistic well-being.

Knowledge of:
   a. Individual roles and relationships (e.g., cultural, environmental, societal, familial, gender, age)
   b. Role alterations
   c. Psychosocial disorders (e.g., substance abuse, anxiety, depression, bipolar, PTSD, psychosis)
   d. Theories (e.g., self-concept, role, relationship, interaction, developmental, human behaviors)
   e. Traditional and alternative modalities (e.g., medications, healing touch, botanicals)
   f. Cultural competence

Skill in:
   a. Assessing and promoting self-efficacy, self-care, and self-concept
   b. Accessing supportive team resources and services (e.g., psychologist, clergy, peer support, community support)
   c. Promoting strategies to cope with role and relationship changes (e.g., individual and caregiver counseling, peer support, education)
   d. Including the individual and caregiver in the plan of care
   e. Incorporating cultural and spiritual values
   f. Promoting positive interaction among individual and caregivers
   g. Evaluating the effects of values, belief systems, and spirituality of the individual
Task 8: Apply the nursing process to optimize coping and stress management skills of the individual and caregivers.

Knowledge of:
   a. Community resources (e.g., face-to-face support groups, internet, respite care, clergy)
   b. Coping and stress management strategies for individuals and support systems
   c. Cultural competence
   d. Physiology of the stress response
   e. Safety concerns regarding harm to self and others
   f. Technology for self-management
   g. Theories (e.g., developmental, coping, stress, grief and loss, self-esteem, self-concept)
   h. Types of stress and stressors
   i. Stages of grief and loss

Skill in:
   a. Assessing potential for harm to self and others
   b. Assessing the ability to cope and manage stress
   c. Facilitating appropriate referrals
   d. Implementing and evaluating strategies to reduce stress and improve coping (e.g., biofeedback, cognitive behavioral therapy, complementary alternative medicine, pharmacology)
   e. Using therapeutic communication

Task 9: Apply the nursing process to optimize the individual's ability to communicate effectively.

Knowledge of:
   a. Anatomy and physiology (e.g., cognition, comprehension, sensory deficits)
   b. Communication techniques (e.g., active listening, anger management, reflection)
   c. Cultural competence
   d. Developmental factors
   e. Linguistic deficits (e.g., aphasia, dysarthria, language barriers)
   f. Assistive technology and adaptive equipment

Skill in:
   a. Assessing comprehension and communication (e.g., oral, written, auditory, visual)
   b. Implementing and evaluating communication interventions
   c. Involving and educating support systems
   d. Using assistive technology and adaptive equipment
   e. Using communication techniques

Domain III: The Function of the Rehabilitation Team and Community Reintegration (13%)
Task 1: Collaborate with the interdisciplinary/interprofessional team to achieve patient-centered goals.

Knowledge of:
   a. Goal setting and expected outcomes (e.g., SMART goals, functional independence measures [FIM], WeeFIM)
   b. Types of healthcare teams (e.g., interdisciplinary/interprofessional, multidisciplinary, transdisciplinary)
   c. Rehabilitation philosophy and definition
   d. Roles and responsibilities of team members
   e. Theory (e.g., change, leadership, communication, team function, organizational)

Skill in:
   a. Advocating for inclusion of appropriate team members
b. Applying appropriate theories (e.g., change, leadership, communication, team function, organizational)
c. Communicating and collaborating with the interdisciplinary/interprofessional team
d. Developing and documenting plans of care to attain patient-centered goals

Task 2: Apply the nursing process to promote the individual's community reintegration.

Knowledge of:
   a. Technology and adaptive equipment (e.g., electronic hand-held devices, electrical simulation, service animals, equipment to support activities of daily living)
   b. Community resources (e.g., housing, transportation, community support systems, social services, recreation, CPS, APS)
   c. Personal resources (e.g., financial, caregiver support systems, caregivers, spiritual, cultural)
   d. Professional resources (e.g., psychologist, neurologist, clergy, teacher, case manager, vocational rehabilitation counselor, home health, outpatient therapy)
   e. Teaching and learning strategies for self-advocacy

Skill in:
   a. Accessing community resources
   b. Assessing readiness for discharge
   c. Assessing barriers to community reintegration
   d. Evaluating outcomes and adjusting goals (e.g., interdisciplinary/interprofessional team and patient-centered)
   e. Identifying financial barriers and providing appropriate resources
   f. Initiating referrals
   g. Participating in team and patient caregiver conferences
   h. Planning discharge (e.g., home visits, caregiver teaching)
   i. Teaching health and wellness maintenance
   j. Teaching life skills
   k. Using adaptive equipment and technology (e.g., voice activated call systems, computer supported prosthetics)

**Domain IV: Legislative, Economic, Ethical, and Legal Issues (23%)**

Task 1: Integrate legislation and regulations to guide management of care.

Knowledge of:
   a. Agencies related to regulatory, disability, and rehabilitation (e.g., CARF, The Joint Commission, APS, CPS, CMS, SSA, OSHA)
   b. Specific legislation related to disability and rehabilitation (e.g., Medicare, Medicaid, ADA, rehabilitation acts, HIPAA, Affordable Care Act, workers’ compensation, IDEA, Vocational, IMPACT Act)

Skill in:
   a. Accessing, interpreting, and applying legal, regulatory, and accreditation information
   b. Using assessment, measurement, and reporting tools (e.g., functional independence measures [FIM], patient satisfaction, IRF-PAI)

Task 2: Use the nursing process to deliver cost effective patient-centered care.

Knowledge of:
   a. Clinical practice guidelines
   b. Community and public resources
c. Insurance and reimbursement (e.g., PPS, workers’ compensation)
d. Regulatory agency audit process
e. Staffing patterns and policies
f. Utilization review processes

Skill in:
a. Analyzing quality and utilization data
b. Collaborating with private, community, and public resources
c. Incorporating clinical practice guidelines
d. Managing current and projected resources in a cost effective manner

Task 3: Integrate ethical considerations and legal obligations that affect nursing practice.

Knowledge of:
a. Ethical theories and resources (e.g., deontology, ombudsperson, ethics committee)
b. Legal implications of healthcare related policies and documents (e.g., HIPAA, advance directives, powers of attorney, POLST/MOLST, informed consent)

Skill in:
a. Advocating for the individual
b. Documenting services provided
c. Identifying appropriate resources to assist with legal documents
d. Implementing strategies to resolve ethical dilemmas
e. Applying ethics in the delivery of care

Task 4: Integrate quality and safety in patient-centered care.

Knowledge of:
a. Quality measurement and performance improvement processes (e.g., Agency for Healthcare Research and Quality; Institute of Medicine; National Database of Nursing Quality Indicators)
b. Models and tools used in process improvement (e.g., Plan, Do, Check, Act; Six Sigma; Lean approach)
c. Federal quality measurement efforts
d. Reporting requirements (e.g., infection rates, healthcare acquired pressure injury, sentinel events, discharge to community, readmission rates)

Skill in:
a. Assessing safety risks
b. Minimizing safety risk factors
c. Implementing safety prevention measures
d. Utilizing assessment, measurement, and reporting tools (e.g., functional independence measurement; patient satisfaction)
e. Incorporating standards of professional performance