



**PSI Services LLC**  
 3210 E Tropicana  
 Las Vegas, NV 89121  
[www.psiexams.com](http://www.psiexams.com)



# ASSISTED LIVING ADMINISTRATOR AND MEDICATION AIDE CERTIFICATION EXAMINATIONS CANDIDATE INFORMATION BULLETIN

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Please refer to our website to check for the most updated information at [www.psiexams.com](http://www.psiexams.com)

## EXAMINATIONS BY PSI SERVICES LLC

This Candidate Information Bulletin provides you with information pertaining to obtaining certification as an Assisted Living Administrator (CALA) or Medication Aide (CMA) in the State of New Jersey.

The New Jersey Department of Health has contracted with PSI Services LLC (PSI) to conduct the examination testing. PSI provides examinations through a network of computer examination sites in New Jersey.

For Information on official regulations and guidelines;

CALA/CMA certification, please contact:

**New Jersey Department of Health**  
PO Box 360  
Trenton, NJ 08625-0360  
(866) 561-5914 \*\* Fax: (609) 633-9087  
<http://www.nj.gov/health/>

## ELIGIBILITY FOR CALA

In order to be eligible for certification as an assisted living administrator, you must:

- Be at least 21 years of age; and
- Possess a High School diploma or equivalent; and
- Have successfully completed an assisted living training program approved by the NJ Department of Health before registering for the examination.
- Complete the criminal background investigation process and obtain clearance from the Department's Criminal Investigation Unit.

### CRIMINAL BACKGROUND INVESTIGATION (CBI)

All applicants for certification as an assisted living administrator in New Jersey MUST complete a CBI application and a fingerprint appointment. Failure to complete these two requirements will result in disqualification from certification. You will be provided with the required CBI application and fingerprint appointment forms from your training program instructor. You will be charged a fee for the fingerprint submission at the time you make your appointment. Follow all instructions carefully. Failure to follow the instructions on both the CBI Application and on the Fingerprint Appointment Form may delay both processes and result in the denial of your certification.

“CAUTION: Filing a false CBI application results in disqualification from certification for a period of at least two years.”

### IDENTIFICATION REQUIREMENT

Identification must be presented at the time of printing. Identification presented MUST be one (1) document that is current (not expired). A combination of documents will not be accepted. The single document must include the following criteria; Photo, Name, Address (home/employer), Date of Birth and is issued by a Federal, State, County or Municipal entity for Identification purposes. Examples of acceptable ID are:

- 1) Valid U.S. State Photo Driver's License/ Non Driver's License
- 2) U.S. Passport
- 3) USCIS Permanent Resident ID Card (issued after 5/10/2010)
- 4) USCIS Employment Authorization Card (issued after 10/31/2010)

All applicants will be afforded a reasonable amount of time to challenge the accuracy of any criminal history reported to the Department before any final action is taken. Applicants have the right to review the criminal history documents as part of the challenge process. The Department will provide a written summary of any criminal history information to the applicant before taking any action. Also, the Department is prohibited by law from sharing criminal history information with any party other than the applicant, and fingerprint results cannot be shared with your employer or other licensing boards.

This is a summary of your rights under Federal law. If you would like more information, a document is available to explain your rights. Please call us at 866-561-5914 or email us at [CIU@doh.nj.gov](mailto:CIU@doh.nj.gov).”

## ELIGIBILITY FOR CMA

In order to be eligible for certification as a medication aide, you must:

- Be currently certified in New Jersey as a nurse aide, homemaker/home health aide, or personal care assistant
- AND**
- Have successfully completed a medication aide training program approved by the NJDOH before registering for the examination.

**To become eligible to test for ALA or CMA, you must provide a copy of a valid certificate of completion. This certificate must contain the school name, school code, course completion date, and be signed by the Instructor along with the registration form found at the end of this Candidate Information Bulletin. Please include the examination fee.**

Please mail or fax to:

**PSI Regional Processing Office**  
IBIS Plaza South  
3525 Quakerbridge Road, Suite 1000  
Hamilton Township, NJ 08619  
877-774-4243  
FAX 609-570-0168

Once you have met the eligibility requirements, PSI will send you an eligibility notice.

**If this is a first-time registration, you must mail or fax these documents to PSI and allow 2 weeks for processing your initial application.**

An applicant for an assisted living administrator certification shall take the standardized examination within (24) twenty four months of successful completion of a New Jersey Department of Health-approved assisted living administrator training course. *If you do NOT pass the examination within twenty four (24) months of completion of your training program, you will be required to retrain.*



An applicant for medication aide certification shall take the standardized examination within (6) six months of successful completion of a New Jersey Department of Health-approved medication administration training course. *If you do NOT pass the examination within six (6) months of completion of your training program, you will be required to retrain.*

The NJDHSS does **NOT** reciprocate with any other states' medication aide program.

### CRIMINAL BACKGROUND INVESTIGATION (CBI)

The laws of the State of New Jersey require that all new nurse aide candidates, new personal care assistant candidates, and nurse aides (NJAC 8:43I *et seq.*) applying for recertification or reciprocity, and homemaker/home health aides (NJSA 45:11-24.3 *et seq.*) undergo a criminal background investigation (CBI) by the New Jersey State Police and the Federal Bureau of Investigation. Since the medication aide certification is valid **ONLY** when you have a current certification as a nurse aide, personal care assistant or homemaker/home health aide, you are not required to submit fingerprints as part of the certification and recertification process for medication aide. However, you **MUST** comply with the requirements for your nurse aide, personal care assistant, or homemaker/home health aide/certifications.

## WRITTEN EXAMINATION SCHEDULING PROCEDURES

All questions and requests for information about examinations should be directed to PSI.

PSI Services LLC  
3210 E Tropicana  
Las Vegas, NV 89121  
(855) 898-0718 • Fax (702) 932-2666  
[www.psiexams.com](http://www.psiexams.com)

The Examination Registration Form is found at the end of this Candidate Information Bulletin. You must pay PSI at the time you register. Be sure the registration form is complete, accurate, signed, and that you include the correct fee. You must provide a **copy** of a valid certificate of completion with the registration form. The registration form is valid for 1 examination.

### For CALA

- If you do **NOT** pass the examination within twenty four (24) months of completion of your training program, you will be required to retrain
- If you **fail** the examination two (2) times, you must retake an assisted living training program approved by the NJDOH, schedule a new reservation for the exam, and submit a new fee.

### For CMA

- If you do **NOT** pass the examination within six (6) months of completion of your training program, you will be required to retrain
- If you **fail** the examination three (3) times, you must retake a medication aide training program approved

by the NJDHSS, schedule a new reservation for the exam, and submit a new fee.

Examination Fee --

\$53

**NOTE: FEES ARE NOT REFUNDABLE OR TRANSFERABLE**

### SCHEDULING AN APPOINTMENT TO TAKE THE EXAMINATION

Once you have received your eligibility notice, you are responsible for contacting PSI to schedule an appointment to take the examination. PSI will make every effort to schedule the examination site and time that is most convenient for you. You may schedule for an examination via the Internet 24 hours a day at [www.psiexams.com](http://www.psiexams.com). To schedule with a PSI registrar, call (855) 898-0718, Monday through Friday, between 7:30 am and 10:00 pm and Saturday and Sunday, between 9:00 am and 5:30 pm, Eastern Time. If space is available in the examination site of your choice, you may schedule an examination 1 day prior to the examination date of your choice, up to 7:00 p.m. ET. Please be prepared to offer alternate examination appointment choices.

### CANCELLING AN EXAMINATION

You may cancel and reschedule an examination appointment without forfeiting your fee *if your cancellation notice is received 2 days prior to the scheduled examination date*. For example, for a Monday appointment, the cancellation notice would need to be received on the previous Saturday. You may call PSI at (855) 898-0718.

**Note: A voice mail message is not an acceptable form of cancellation. Please use the PSI Website or call PSI to speak directly to a Customer Service Representative.**

### MISSED APPOINTMENT OR LATE CANCELLATION

If you miss your appointment, you will not be able to take the examination as scheduled, further you will forfeit your examination fee, if you:

- Do not cancel your appointment 2 days before the scheduled examination date;
- Do not appear for your examination appointment;
- Arrive after examination start time;
- Do not present proper identification when you arrive for the examination.

### SCHEDULING A RE-TAKE EXAMINATION

Due to processing procedures and reporting of your scores, it is not possible to schedule a retake examination on the same day in which you tested unsuccessfully. For example: if a candidate tests unsuccessfully on Wednesday they may contact PSI on Thursday, and depending on seating availability, may retest as soon as Friday.

To schedule a retake:

- **ON-LINE REGISTRATION ([www.psiexams.com](http://www.psiexams.com))**

Upon completing the on-line registration, send it to us via the Internet. You will be given available dates for scheduling your re-examination. Examination fee must be



paid by a valid credit card (Visa, MasterCard, American Express or Discover).

■ **MAIL (PSI LLC, 3525 Quakerbridge Road, Suite 1000, Hamilton Township, NJ 08619)**

Send the completed registration form to the above address. Allow 2 weeks for processing before scheduling the examination date. Examination fee may be paid by a credit card (Visa, MasterCard, American Express or Discover), money order, company check or cashier's check. Make your money order or check payable to PSI and show your social security number on it. CASH AND PERSONAL CHECKS ARE NOT ACCEPTED.

■ **FAX (609-570-0168)**

Fax completed registration form to PSI. Allow 4 business days for processing before contacting PSI to schedule the examination. Examination fee must be paid by a valid credit card (Visa, MasterCard, American Express or Discover).

■ **PHONE ((855) 898-0718)**

Contact PSI by telephone. You will be given available dates for scheduling your re-examination. Examination fee must be paid by a valid credit card (Visa, MasterCard, American Express or Discover).

**SPECIAL EXAMINATION ARRANGEMENTS**

All examination sites are equipped to provide access in accordance with the Americans with Disabilities Act (ADA) of 1990, and every reasonable accommodation will be made in meeting a candidate's needs. Applicants with disabilities or those who would otherwise have difficulty taking the examination must fill out the form at the end of this Candidate Information Bulletin and fax to PSI (702) 932-2666. Note for the Medication Aid examination per NJSA 8:36-9.2(a)3i an oral examination shall not substitute for the written component of this examination.

**EXAMINATION SITE CLOSING FOR AN EMERGENCY**

In the event that severe weather or another emergency forces the closure of an examination site on a scheduled examination date, your examination will be rescheduled. PSI personnel will attempt to contact you in this situation. However, you may check the status of your examination schedule by calling (855) 898-0718. Every effort will be made to reschedule your examination at a convenient time as soon as possible. You may also check our website at [www.psiexams.com](http://www.psiexams.com). You will not need to pay a new exam fee if the exam site is closed due to an emergency

**SOCIAL SECURITY NUMBER CONFIDENTIALITY**

PSI will use your social security number only as an identification number in maintaining your records and reporting your examination scores to the state.

**EXAMINATION SITE LOCATIONS**

The following directions are generated from the most current mapping services available. However, new road construction

and highway modifications may result in some discrepancies. If you are not familiar with the specific area of the testing site, please consult a reliable map prior to your test date.

**BRICK**

260 CHAMBERS BRIDGE ROAD, UNIT #1A  
BRICK, NJ 08723

TAKE ON I-95 S TOWARD NEW JERSEY TURNPIKE SOUTH/NEWARK (US-46). TAKE EXIT #11/GARDEN STATE PARKWAY (US-9)/WOODBIDGE ONTO GARDEN STATE PKY S TOWARD GARDEN STATE PARKWAY SOUTH/RT-440. CONTINUE ON DRISCOLL BRG. CONTINUE ON GARDEN STATE PKY S. TAKE EXIT #91/LAKEWOOD/BRICK TWP. ONTO LANES MILL RD (CR-549) TOWARD LAKEWOOD/BRICK TWP. CONTINUE ON CHAMBERS BRIDGE RD (CR-549).

**CHERRY HILL**

950 N. KINGS HWY, SUITE 301  
CHERRY HILL, NJ 08034

FROM THE NEW JERSEY TPKE S, TAKE EXIT #4/PHILADELPHIA/CAMDEN ONTO RT-73 N TOWARD CAMDEN/PHILADELPHIA. TAKE RAMP ONTO I-295 S TOWARD DEL MEM BR. TAKE EXIT #34B/CHERRY HILL/CAMDEN ONTO MARLTON PIKE(RT-70 W). TURN RIGHT ON KINGS HWY N (RT-41). NOTE BUILDING 950 IS BEHIND BUILDINGS #900 AND #1030.

**HAMILTON SQUARE AREA**

IBIS PLAZA SOUTH  
3525 QUAKERBRIDGE ROAD, SUITE 1000  
HAMILTON TOWNSHIP, NJ 08619

FROM I-95 S, TAKE EXIT #9/NEW BRUNSWICK (US-1)/EAST BRUNSWICK ONTO RT-18 N TOWARD NEW BRUNSWICK (US-1)/PRINCETON/TRENTON/TOWER CENTER BLVD. TAKE RAMP ONTO US-1 TOWARD TRENTON. TAKE RAMP ONTO CR-533 S TOWARD PROVINCE LINE RD/QUAKER BRIDGE RD/QUAKER BRIDGE RD.

**NORTH BRUNSWICK**

1440 HOW LANE, SUITE 2E  
NORTH BRUNSWICK TOWNSHIP, NJ 08902

FROM US-130 S., TAKE ADAMS LN AND NJ-91 N/JERSEY AVE TO HOW LN IN NEW BRUNSWICK.

**NEW PROVIDENCE**

MURRAY HILL OFFICE CENTER  
571 CENTRAL AVENUE, SUITE 117  
NEW PROVIDENCE, NJ 07094

FROM: ROUTE 78 WESTBOUND. TAKE EXIT 43 ONTO DIAMOND HILL ROAD. AT THE SECOND STOPLIGHT, TURN RIGHT ONTO MOUNTAIN AVENUE. TURN LEFT AT THIRD LIGHT, SOUTH STREET. TURN LEFT AT THE NEXT TRAFFIC LIGHT ONTO CENTRAL AVENUE. THE MURRAY HILL OFFICE CENTER, 571 CENTRAL AVENUE, WILL BE ON YOUR RIGHT.

FROM: ROUTE 78 EASTBOUND. TAKE EXIT 44 TO TRAFFIC LIGHT. TURN LEFT ONTO GLENSIDE AVENUE PROCEED TO THE NEXT LEFT TURN UNDER ROUTE 78 TOWARD NEW PROVIDENCE, AS THE ROAD BECOMES SOUTH STREET. CONTINUE TO THE SECOND LIGHT AND TURN LEFT ONTO CENTRAL AVE. THE MURRAY HILL OFFICE CENTER, 571 CENTRAL AVENUE, WILL BE ON YOUR RIGHT.

FROM: NEW JERSEY TURNPIKE. TAKE EXIT 14, STAY TO THE LEFT THROUGH THE TOLL. FOLLOW SIGNS FOR ROUTE 78 - EXPRESS WESTBOUND. FOLLOW SAME AS ABOVE FOR ROUTE 78 WESTBOUND. FROM: GARDEN STATE PARKWAY SOUTH. TAKE EXIT 142 AND FOLLOW THE SIGNS FOR ROUTE 78 WEST. FOLLOW SAME AS ABOVE FOR ROUTE 78 WESTBOUND.

FROM: GARDEN STATE PARKWAY NORTH. TAKE EXIT 142B AND FOLLOW THE SIGNS FOR ROUTE 78 WEST. FOLLOW SAME AS ABOVE FOR ROUTE 78 WESTBOUND.





## LINWOOD

222 NEW ROAD, SUITE 301  
LINWOOD, NJ 08221

FROM THE NORTH, TAKE THE GARDEN STATE PKY SOUTH TO EXIT # 36 NORTHFIELD/MARGATE ONTO TILTON RD(CR-563). IN JUST UNDER 2 MILES MAKE A RIGHT ONTO NEW RD (US-9). DRIVE 1.5 MILES SOUTH, TILL YOU WILL SEE THE SIGN ON THE LEFT FOR # 222 (CENTRAL PARK EAST), JUST PAST CENTRAL AVE. (IF YOU REACH THE GULF STATION YOU HAVE TRAVELED A LITTLE BIT TOO FAR). TURN LEFT INTO THE PROFESSIONAL PARK AT THE FLOWER BED WITH THE 222 SIGN IN IT. USE THE FIRST PARKING LOT ON YOUR RIGHT, AND LOOK FOR THE LARGE PSI SIGN NEXT TO OUR FRONT DOOR (SUITE 301).

FROM THE SOUTH, TAKE THE GARDEN STATE PKY NORTH TO EXIT # 29 SOMERS POINT. THIS WILL PUT YOU ON NEW RD (US-9). AFTER DRIVING NORTH FOR A LITTLE MORE THAN 4 MILES, YOU WILL FIRST SEE A GULF STATION. NUMBER 222 NEW RD (CENTRAL PARK EAST) IS JUST PAST THE GULF STATION (0.1 MILES) AND ON THE SAME SIDE. TURN RIGHT INTO THE PROFESSIONAL PARK AT THE FLOWER BED WITH THE 222 SIGN IN IT. USE THE FIRST PARKING LOT ON YOUR RIGHT, AND LOOK FOR THE LARGE PSI SIGN NEXT TO OUR FRONT DOOR (SUITE 301).

FROM THE WEST, USE THE BLACK HORSE PIKE (US -40 W/ US-322 W) WHEN YOU REACH HARBOR SQUARE MALL (SHORE MALL), KEEP TO THE RIGHT. JUST PAST THE MALL YOU WILL SEE A SIGN FOR TILTON ROAD/ MARGATE CITY/OCEAN CITY DIRECTING YOU TO MAKE A SLIGHT RIGHT ONTO TILTON RD (CR-563). ONCE YOU ARE ON TILTON RD, DRIVE EAST APPROXIMATELY 2 MILES TILL YOU REACH NEW RD (US-9), TURN RIGHT AND THEN FOLLOW THE DIRECTIONS GIVEN FOR COMING FROM THE NORTH.

## ROCHELLE PARK

365 W. PASSAIC ST, STE 180  
ROCHELLE PARK, NJ 07662

FROM NJ-4W - TAKE THE PARAMUS ST. EXIT. MERGE ONTO PARAMUS ROAD. 365 W PASSAIC ST IS ABOUT ¾ OF A MILE DOWN THE ROAD ON THE RIGHT. WHEN ENTERING THE PARKING LOT, GO TOWARDS THE SOUTH SIDE OF THE BUILDING AND GO AROUND TO THE BACK AND PARK IN THE BACK PARKING LOT. WHEN WALKING TOWARDS THE BUILDING, THERE IS AN ENTRANCE ON THE RIGHT SIDE. TAKE THAT ENTRANCE, THEN TAKE A LEFT. THE PSI TEST CENTER SHOULD BE THE FIRST DOOR ON THE LEFT.

## PARSIPPANY

239 NEW ROAD, SUITE A-203  
PARSIPPANY, NJ 07054

FROM I-280 WEST: TAKE EXIT #1/NEW RD TOWARDS US-46. MAKE A SLIGHT RIGHT ONTO NEW ROAD. CONTINUE TO 239 NEW ROAD ON THE RIGHT. PSI IS LOCATED IN BUILDING A (FIRST BUILDING ON RIGHT), SUITE 203.  
FROM I-280 EAST: TAKE EXIT #1/NEW RD. AT STOPLIGHT (AT END OF RAMP) TURN LEFT ONTO NEW ROAD. CONTINUE TO 239 NEW ROAD ON THE RIGHT. PSI IS LOCATED IN BUILDING A (FIRST BUILDING ON RIGHT), SUITE 203.

## SECAUCUS

110-B MEADOWLANDS PARKWAY, SUITE 204  
SECAUCUS, NJ 07094

FROM I-95 N, TAKE THE RT-3 EXIT, EXIT 16W, TOWARD SECAUCUS/RT-120/LINCOLN TUNNEL. TURN RIGHT ONTO S SERVICE ROAD. MERGE ONTO RT-3 E. TAKE THE MEADOWLAND PARKWAY EXIT.

## REQUIRED IDENTIFICATION

You must provide 2 forms of identification. One must be a VALID form of government-issued identification (Driver's License, State ID, Passport) which bears your signature and has your photograph. The second ID must have your signature and preprinted legal name.

## IMPORTANT NOTICE FOR ALL CANDIDATES

Due to many complaints from the buildings' tenants, PSI (and the properties which house the PSI test centers) cannot accommodate any individuals other than the person who is being tested.

PSI understands that test candidates are often comforted by having guests accompany them to their exams. It may also be necessary for a guest to drive the candidate to the test center. However, incidents from previous guests have prompted warnings from Property Management. For this reason, PSI has adopted the following policy concerning guests.

***"Person(s) accompanying a test candidate may not wait in the test center, inside the building or on the building's property. This applies to guests of any nature, including drivers, children, friends, family, colleagues or instructors."***

There are facilities nearby such as shopping malls, stores or restaurants where guests may go while the candidate takes a test. Please take the time to visit those locations instead of waiting in or around the building.

Also of note, many candidates have been arriving hours before their scheduled exam time. This is not necessary. Please plan to arrive no earlier than 30 minutes before the start-time of your exam. This will provide plenty of time for check-in.

Thank you for your understanding and for your cooperation.

## SECURITY PROCEDURES

The following security procedures will apply during the examination:

- Candidates may take only approved items into the examination room.
- All personal belongings of candidates, with the exception of close-fitting jackets or sweatshirts, should be placed in the secure storage provided at each site prior to entering the examination room. Personal belongings **include, but are not limited to**, the following items:
  - **Electronic devices of any type**, including cellular / mobile phones, recording devices, electronic watches, cameras, pagers, laptop computers, tablet computers (e.g., iPads), music players (e.g., iPods), smart watches, radios, or electronic games.
  - **Bulky or loose clothing or coats** that could be used to conceal recording devices or notes, including coats, shawls, heavy jackets, or overcoats.
  - **Hats or headgear not worn for religious reasons** or as religious apparel, including hats, baseball caps, or visors.
  - **Other personal items**, including purses, notebooks, reference or reading material, briefcases, backpacks,

## REPORTING TO THE EXAMINATION SITE

On the day of the examination, you should arrive 30 minutes before your appointment. This extra time is for sign-in, and identification. *If you arrive late, you may not be admitted to the examination site and you will forfeit your examination registration fee.*



wallets, pens, pencils, other writing devices, food, drinks, and good luck items.

- Person(s) accompanying an examination candidate may not wait in the examination center, inside the building or on the building's property. This applies to guests of any nature, including drivers, children, friends, family, colleagues or instructors.
- No smoking, eating, or drinking is allowed in the examination center.
- During the check in process, all candidates will be asked if they possess any prohibited items. Candidates may also be asked to empty their pockets and turn them out for the proctor to ensure they are empty. The proctor may also ask candidates to lift up the ends of their sleeves and the bottoms of their pant legs to ensure that notes or recording devices are not being hidden there.
- Proctors will also carefully inspect eyeglass frames, tie tacks, or any other apparel that could be used to harbor a recording device. Proctors will ask to inspect any such items in candidates' pockets.
- If prohibited items are found during check-in, candidates shall put them in the provided secure storage or return these items to their vehicle. PSI will not be responsible for the security of any personal belongings or prohibited items.
- Any candidate possessing prohibited items in the examination room shall immediately have his or her test results invalidated, and PSI shall notify the examination sponsor of the occurrence.
- Any candidate seen giving or receiving assistance on an examination, found with unauthorized materials, or who violates any security regulations will be asked to surrender all examination materials and to leave the examination center. All such instances will be reported to the examination sponsor.
- Copying or communicating examination content is violation of a candidate's contract with PSI, and federal and state law. Either may result in the disqualification of examination results and may lead to legal action.
- Once candidates have been seated and the examination begins, they may leave the examination room only to use the restroom, and only after obtaining permission from the proctor. Candidate will not receive extra time to complete the examination.

## TAKING THE EXAMINATION BY COMPUTER

The examination will be administered via computer. You will be using a mouse and computer keyboard.

### IDENTIFICATION SCREEN

You will be directed to a semiprivate testing station to take the examination. When you are seated at the testing station, you will be prompted to confirm your name, identification number, and the examination for which you are registered.

### TUTORIAL

Before you start your examination, an introductory tutorial to the computer and keyboard is provided on the computer screen. The time you spend on this tutorial, up to 15 minutes, DOES NOT count as part of your examination time. Sample

questions are included following the tutorial so that you may practice using the keys, answering questions, and reviewing your answers.



One question appears on the screen at a time. During the examination, minutes remaining will be displayed at the top of the screen and updated as you record your answers.

**IMPORTANT:** After you have entered your responses, you will later be able to return to any question(s) and change your response, provided the examination time has not run out.

### EXAMINATION REVIEW

PSI, in cooperation with the NJDOH, will be consistently evaluating the examinations being administered to ensure that the examinations accurately measure competency in the required knowledge areas. While taking the examination, examinees will have the opportunity to provide comments on any questions, by using the comments key on the keyboard. These comments will be analyzed by PSI examination development staff. PSI does not respond to individuals regarding these comments, all substantive comments are reviewed. **This is the only review of examination materials available to candidates.**

## WRITTEN SCORE REPORTING

The following summary describes the score reporting process for the Written Examination:

- **On paper** - an official score report will be printed at the examination site.
  - If you **pass**, you will immediately receive a successful notification.
  - If you **do not pass**, you will receive a diagnostic report indicating your strengths and weaknesses by examination type with the score report.

If you **pass** the Written Examination and have met all NJDOH requirements, you will receive a certificate at the test site on the day of your examination.

For Assisted Living Administrator, the certificate is valid for thirty-six (36) months from the date you pass the Written Examination. Please see the re-certification process section in this Candidate Information Bulletin.

For Medication Aide, the certificate is valid for twenty-four (24) months from the date you pass the Written Examination.



Please see the re-certification process section in this Candidate Information Bulletin.

### DUPLICATE SCORE REPORTS

You may request a duplicate score report after your examination by emailing [scorereport@psionline.com](mailto:scorereport@psionline.com) or by calling (855) 898-0718.

## TIPS FOR PREPARING FOR YOUR CERTIFICATION EXAMINATION

The following suggestions will help you prepare for your examination.

- Only consider the actual information given in the question, do not read into the question by considering any possibilities or exceptions.
- Planned preparation increases your likelihood of passing.
- Start with a current copy of this Candidate Information Bulletin and use the examination content outline as the basis of your study.
- Read study materials that cover all the topics in the content outline.
- Take notes on what you study. Putting information in writing helps you commit it to memory and it is also an excellent business practice.
- Discuss new terms or concepts as frequently as you can with colleagues. This will test your understanding and reinforce ideas.
- Your studies will be most effective if you study frequently, for periods of about 45 to 60 minutes. Concentration tends to wander when you study for longer periods of time.

## DESCRIPTION OF EXAMINATIONS

### NEW JERSEY ASSISTED LIVING ADMINISTRATOR EXAMINATION

# of Items	Passing Score	Time Allowed
100	75%	120 Minutes

### CONTENT OUTLINE

Use the outline as a guide for pre-examination review course material. The outlines list the topics that are on the examination and the number of questions for each topic. Do not schedule your examination until you are familiar with the topics in the outline.

Topic	# of Items
<b>Basic Concepts of Assisted Living</b>	8
<i>Philosophy and Background, Objectives and Principles, Comparison of AL to other programs, Home-like Environment, Choice, Independence, Privacy, Individuality, Dignity</i>	
<b>Age Related Changes and Aging in Place</b>	8
<i>Aging Process and its Impact, Physical, Psychosocial Pecuniary</i>	
<b>Resident Assessment</b>	10
<i>Purpose and Process, Guidelines for Conducting Assessments, Regulatory Requirements</i>	
<b>Scope of Services and Service Planning</b>	15
<i>Guidelines, Required Services, Discharge Residency Criteria, Resident Contracts, Enhanced Scope of Services (Wound Care, Behavioral Issues, Hospice Care), Regulatory Requirements</i>	
<b>Resident Services</b>	10
<i>Resident Rights, Managed Risk Agreements, Working with Residents Families, Working with External Health and Social Service Providers</i>	
<b>Documentation</b>	10
<i>Purpose and Methods, Developing Policy and Procedure Manuals, Regulatory Requirements</i>	
<b>Effective Management Skills and Staffing</b>	10
<i>Creating scheduling pattern to meet resident needs, hiring and scheduling staff, appropriate staffing patterns, personnel policies and procedures, regulatory requirements, Leadership, Financial</i>	
<b>Nursing Activities and Medication Administration</b>	12
<i>Appropriate Nurse Delegation, Concept of Self Administration, Medication Services, Assistance and Administration of Medications, Medication Storage, Health Related Tasks, Regulatory Requirements, Infection Control and Universal Precautions</i>	
<b>Regulatory and Physical Plant Requirements</b>	17
<i>Maintaining Building, Grounds, and Equipment, Fire, Common Disaster, and Emergency Preparedness, Regulatory Requirements, OSHA requirements</i>	

## RECERTIFICATION FOR NEW JERSEY ASSISTED LIVING ADMINISTRATORS

In order to be eligible to renew a current certification, in accordance with 8:36-3.2 *Qualifications of the administrator of an assisted living residence or comprehensive personal care home*, an assisted living administrator shall:

1. Complete at least 30 hours of continuing education regarding assisted living concepts and related topics, as specified and approved by the Department of Health. Continuing education courses shall cover the topics described in the training program for assisted living



administrators in NJAC 8:36-3.3(a)2, and be earned between the time the current certificate was issued and is due to expire; and

2. Complete a criminal history record background check as required by NJAC 8:43I.
3. If a certified assisted living administrator fails to fulfill the certification renewal requirements at the prescribed time, the certification shall be considered inactive.
4. An individual may apply for recertification without re-examination within three years of the certification renewal date and upon submitting a request for restoration of said certification, in writing, to the Certification Program.
5. An individual requesting restoration of his or her certification from inactive status within three years of inactivity shall be required to pay the then current certification fee and comply with the education requirements identified as follows.  

An applicant for certification as an assisted living administrator shall successfully complete an assisted living training course which covers the concepts and rules of assisted living as outlined in this chapter, given by a trainer qualified in accordance with N.J.A.C. 8:36-3.3.
6. The applicant shall be required to complete 10 hours of continuing education credit for each year in which the certification was inactive in addition to the required 30 hours of continuing education for the last completed triennial certification period in which the applicant's certification was active.
7. An administrator whose certification is in an inactive status and who subsequently fails to meet the requirements identified at (j) through (m) above shall be required to apply in writing for restoration of certification under the requirements as determined by the Certification Program on an individual basis and as provided for in these rules.

Note: Lapsed and/or revoked certificates as an assisted living administrator is addressed in accordance with, 8:36 3.2 *Qualifications of the administrator of an assisted living residence or comprehensive personal care home* and 3.5 *Actions against an assisted living administrator (l-m)*.

At the recertification location, your photo will be taken and your recertification documents will be reviewed for accuracy and completeness. If your recertification documents are complete, your certification will be updated on the Registry and you will receive a new certificate and wallet identification card.

You will receive a renewal reminder approximately sixty (60) days in advance of your certification expiration date. Do not wait until your certification expiration date to recertify.

Choose a recertification location from the list provided on the Renewal Form. On the day of recertification you **MUST** bring to the test site the following:

- \$30 recertification fee (this is the only fee accepted at the test site)
- Two (2) forms of identification. One must be a VALID form of government-issued identification (Driver's License, State ID, Passport) which bears your signature and has your photograph. The second ID must have your signature and preprinted legal name.
- Your Renewal Form.

At the recertification location, your photo will be taken and your recertification documents will be reviewed for accuracy and completeness. If your recertification documents are

complete, your certification will be updated on the Registry and you will receive a new certificate and wallet identification card.

Recertification will be offered on a walk-in basis at any of the 10 NJ test sites on **Mondays ONLY** from 10am-4pm. We also offer recertification on Wednesdays from 10am-4pm at the Hamilton Township, Rochelle Park and Cherry Hill sites ONLY. Evening hours for recertification will be offered at our Rochelle Park site on Wednesdays until 7pm and at our Parsippany site on Thursdays from 4pm-7pm. Please see a listing of the sites in this Candidate Information Bulletin.

The Department of Health (referred to as Department) is required to update your criminal history background check (CBI) each time you are due to renew your certification as an assisted living administrator. There is no need to complete a new CBI application. You will receive a notice about updating your criminal history background check from the Department approximately four (4) months before your certification expiration date. The notice will include an invoice for the cost of the background check which must be remitted before the Department can update the criminal history check. Follow the instructions on the invoice to process your payment.

If the Department is able to identify that you have been successfully fingerprinted for an assisted living certification using the electronic fingerprinting system, the Department will request that the previous image be used to update your criminal history background check. If you are renewing your certification, there is nothing you need to do. You should receive your renewal authorization letter no later than sixty (60) days before your certification is due to expire.

If the Department cannot identify a previous successful fingerprint image for your nurse aide or personal care assistant certification, you will receive a form and a notice to make a fingerprint appointment approximately 120 days before your certification expiration date. You must make and keep a fingerprint appointment before your certification expiration date. It is advisable to obtain an appointment at least sixty (60) days before your certification is due to expire. If you fail to submit a new set of fingerprints, your certification will not be renewed. Attempts to obtain a certification after the expiration date will need to comply with the provisions for persons with expired certifications.

Once the Department determines that there are no new disqualifying convictions they will notify PSI electronically that you can complete the renewal process and will send you written notice that the CBI process is complete. Once you receive that notice you must take your Renewal Form, the \$30 renewal fee, and photo identification to a PSI Test Site to obtain your new certificate.

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## NEW JERSEY CERTIFIED MEDICATION AIDE EXAMINATION

# of Items	Passing Score	Time Allowed
60	78%	90 Minutes





## CONTENT OUTLINE

Use the outline as a guide for pre-examination review course material. The outlines list the topics that are on the examination and the number of questions for each topic. Do not schedule your examination until you are familiar with the topics in the outline.

Topic	# of Items
Five Rights	3
Affects of Medication	6
Authorized Duties	4
Medication Administration	20
Documentation	10
Error Reporting	3
Role/Responsibilities	4
Terminology	5
Regulations	5

## **RECERTIFICATION FOR NEW JERSEY MEDICATION AIDES**

In order to be eligible for recertification, you must complete at least ten (10) hours of continuing education, seminars, or in-service training within your two (2) year certification period. Continuing education will include:

- Five (5) hours in the fundamentals of medication administration and in the skills and knowledge necessary for medication administration, *AND*
- Five (5) hours on topics about current drug use with respect to the elderly.

This continuing education must *be in addition to*:

- Twenty (20) hours of continuing education, every two (2) years in assisted-living concepts and related topics, including cognitive and physical impairment and dementia for personal care assistants. The facility in which you work will keep records of your continuing education hours for at least one renewal period (that is, for your two (2) year certification period). Medication Aides should request copies of their continuing education records from facilities in the event that employment changes.

**Medication aides MUST retain current certification as a nurse aide, personal care assistant, or homemaker/home health aide.**

You will receive a renewal reminder approximately sixty (60) days in advance of your certification expiration date. Do not wait until your certification expiration date to recertify. Complete your Renewal Form **immediately** and make sure that the form is completed and signed by your health care facility employer, an Assisted Living Residence, Assisted Living Program, or Comprehensive Personal Care Home.

Choose a recertification location from the list provided on the Renewal Form. On the day of recertification you **MUST** bring to the test site the following:

- \$30 recertification fee (this is the only fee accepted at the test site)
- Two (2) forms of identification. One must be a **VALID** form of government-issued identification (Driver's License, State ID, Passport) which bears your signature and has your

photograph. The second ID must have your signature and preprinted legal name.

- Your Renewal Form (signed by your current or previous employer)
- A current certification as a New Jersey nurse aide, personal care assistant, or homemaker/home health aide

At the recertification location, your photo will be taken and your recertification documents will be reviewed for accuracy and completeness. If your recertification documents are complete, your certification will be updated on the Registry and you will receive a new certificate and wallet identification card.

Recertification will be offered on a walk-in basis at any of the 10 NJ test sites on **Mondays ONLY** from 10am-4pm. We also offer recertification on Wednesdays from 10am-4pm at the Hamilton Township, Rochelle Park and Cherry Hill sites **ONLY**. Evening hours for recertification will be offered at our Rochelle site on Wednesdays until 7pm and at our Parsippany site on Thursdays from 4pm-7pm. Please see a listing of the sites in this Candidate Information Bulletin.

## REVOKED CERTIFICATE

A certificate issued to a medication aide in accordance with state rules shall be suspended, denied, or revoked in the following cases:

Substantiated findings of resident abuse, resident neglect, or misappropriation (theft) of resident property in any health care facility licensed in accordance with N.J.S.A. 26:2H.;

- Conviction or guilty plea for a crime relating adversely to the ability to provide resident care, such as homicide, assault, kidnapping, a sexual offense, robbery, and a crime against the family, children, or incompetents;
- Sale, purchase, or alteration of a certificate; use of fraudulent means to secure a certificate, including filing false information on the application; or forgery, imposture, dishonesty, or cheating on an examination;
- Documented and verified incompetence and/or negligence as delegated by a registered professional nurse in the performance of the duties that fall within the scope of practice of a certified medication aide;
- Conviction for any offense that could impact on the ability of an individual to safely perform the duties of a medication aide;
- Lapsed, suspended, or revoked nurse aide, homemaker/home health aide, or personal care assistant certification; and/or
- Having one's name removed from the Medication Aide/ALA Registry for a period of more than one (1) year.

**NOTE:** A medication aide will be required to retrain and retest in accordance with the rules in effect at the time of retraining and retesting if his or her name has been removed from the Registry for more than one (1) year.

## ABUSE FINDINGS

Upon receipt of a substantiated allegation of resident neglect, resident abuse, and/or misappropriation (theft) of resident property, you will be mailed a **Notice of Informal Conference**. This letter will include a statement that there are substantiated findings of neglect, abuse and/or misappropriation of resident property and will include instructions for you to attend a scheduled conference, in



person, at the offices of the NJ Department of Health and Senior Services, as well as the following information.

You have a right to bring witnesses and any written evidence that you want to the informal conference. You may represent yourself, or you may have an attorney represent you at your **own** expense. At the conclusion of the informal conference, a determination will be made as to whether to dismiss the case against you or to proceed to a full court hearing at the NJ Office of Administrative Law. The Department will notify you of that decision in writing within ten (10) days of the conference.

If your case is not dismissed, you will receive a **Notice of Right to Hearing**. If you do not request a hearing within thirty (30) days of the date of the **Notice of Right to Hearing** letter, or if a hearing results in a specific finding of abuse, neglect and/or misappropriation of resident property, as applicable, that finding will be placed next to your name on the New Jersey Nurse Aide Registry. The finding will remain on the New Jersey Nurse Aide Registry permanently, unless the finding was made in error or you are found not guilty in a court of law. You will not be permitted to work again as a nurse aide or as a personal care assistant in **any** licensed New Jersey health care facility. You will be notified in writing of this decision and you will be advised that you have a right to appeal the finding. This statement will be maintained on the New Jersey Nurse Aide Registry.

#### **CHANGE OF ADDRESS, NAME, AND/OR EMPLOYER**

If you have changed your address, name, and/or employer, you must inform the Nurse Aide Registry **and** the NJDOH CBI Unit. To notify the Registry of a change, use the form on the following page.

If you have a change of name, you must mail proof of that change (e.g., marriage certificate, divorce decree, or other legal document), along with the form on the following page. No additional documentation is necessary to make an address change.

To inform NJDOH CBI Unit of an address, name, and/or employer change, please use the toll-free number, (866) 561-5914, if you are calling from out of state. If you are calling from within New Jersey, please call (609) 292-4303.



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**NEW JERSEY NURSE AIDE/PERSONAL CARE ASSISTANT  
CHANGE OF ADDRESS, NAME AND/OR EMPLOYER FORM**

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SEND TO:  
PSI HAMILTON SQUARE AREA  
IBIS PLAZA SOUTH  
3525 QUAKERBRIDGE ROAD, SUITE 1000  
HAMILTON TOWNSHIP, NJ 08619

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Use this form to inform the Registry of your change of address, name, and/or employer. Please print or type all information on this form. Be sure to provide all information, or your request cannot be filled.

- **ADDRESS CHANGE** - Complete Sections A & B
- **NAME CHANGE** - Complete Sections A & B: *You must attach a copy of an official document (marriage certificate or other court order) verifying your name change.*
- **EMPLOYER CHANGE** - Complete Sections A, B & C: *You must complete Section C also.*

**A. PRINT YOUR NEW ADDRESS, NEW NAME, OR NEW EMPLOYER'S INFORMATION BELOW.**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Social Security# \_\_\_\_\_ Certification # \_\_\_\_\_

**B. PRINT YOUR OLD ADDRESS, OLD NAME, OR OLD EMPLOYER'S INFORMATION BELOW.**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_

**C. IF YOU ARE NOTIFYING THE REGISTRY WITH NEW EMPLOYER INFORMATION, YOU MUST ALSO FILL IN THIS SECTION.**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_

**YOUR SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_









## SPECIAL ARRANGEMENT REQUEST FORM

All examination centers are equipped to provide access in accordance with the Americans with Disabilities Act (ADA) of 1990. Applicants with disabilities may request special examination arrangements.

Candidates who wish to request special arrangements because of a disability should fax this form and supporting documentation to PSI at (702) 932-2666.

### Requirements for special arrangement requests

You are required to submit documentation from the medical authority or learning institution that rendered a diagnosis. Verification must be submitted to PSI on the letterhead stationery of the authority or specialist and include the following:

- Description of the disability and limitations related to testing
- Recommended accommodation/modification
- Name, title and telephone number of the medical authority or specialist
- Original signature of the medical authority or specialist

Date: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Legal Name: \_\_\_\_\_  
Last Name First Name

Address: \_\_\_\_\_  
Street City, State, Zip Code

Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Home Work

Email Address: \_\_\_\_\_

### Check any special arrangements you require (requests must concur with documentation submitted):

- |   |   |
|---|---|
| <input type="checkbox"/> Reader (as accommodation for visual impairment or learning disability) | <input type="checkbox"/> Extended time (Additional time requested: _____) |
| <input type="checkbox"/> Large-print written examination  | <input type="checkbox"/> Other _____                                      |

- Complete and fax this form, along with supporting documentation, to (702) 932-2666.
- After 4 business days, please call (855) 898-0718 x6750 and leave a voice message.
- PSI Special Accommodations will call you back to schedule the examination within 48 hours.

**DO NOT SCHEDULE YOUR EXAMINATION UNTIL THIS DOCUMENTATION HAS BEEN RECEIVED AND PROCESSED BY PSI SPECIAL ACCOMMODATIONS.**

PSI Services LLC  
3210 E Tropicana  
Las Vegas, NV 89121