

§ 483.152 Requirements for approval of a nurse aide training and competency evaluation program.

(a) For a nurse aide training and competency evaluation program to be approved by the State, it must, at a minimum—

(1) Consist of no less than 75 clock hours of training;

(2) Include at least the subjects specified in paragraph (b) of this section;

(3) Include at least 16 hours of supervised practical training. Supervised practical training means training in a laboratory or other setting in which the trainee demonstrates knowledge while performing tasks on an individual under the direct supervision of a registered nurse or a licensed practical nurse;

(4) Ensure that—

(i) Students do not perform any services for which they have not trained and been found proficient by the instructor; and

(ii) Students who are providing services to residents are under the general supervision of a licensed nurse or a registered nurse;

(5) Meet the following requirements for instructors who train nurse aides;

(i) The training of nurse aides must be performed by or under the general supervision of a registered nurse who possesses a minimum of 2 years of nursing experience, at least 1 year of which must be in the provision of long term care facility services;

(ii) Instructors must have completed a course in teaching adults or have experience in teaching adults or supervising nurse aides;

(iii) In a facility-based program, the training of nurse aides may be performed under the general supervision of the director of nursing for the facility who is prohibited from performing the actual training; and

(iv) Other personnel from the health professions may supplement the instructor, including, but not limited to, registered nurses, licensed practical/vocational nurses, pharmacists, dietitians, social workers, sanitarians, fire safety experts, nursing home administrators, gerontologists, psychologists, physical and occupational therapists, activities specialists, speech/language/hearing therapists, and resident rights experts. Supplemental personnel must have at least 1 year of experience in their fields;

(6) Contain competency evaluation procedures specified in §483.154.

(b) The curriculum of the nurse aide training program must include—

(1) At least a total of 16 hours of training in the following areas prior to any direct contact with a resident:

- (i) Communication and interpersonal skills;
- (ii) Infection control;
- (iii) Safety/emergency procedures, including the Heimlich maneuver;
- (iv) Promoting residents' independence; and
- (v) Respecting residents' rights.

(2) Basic nursing skills;

- (i) Taking and recording vital signs;
- (ii) Measuring and recording height and weight;
- (iii) Caring for the residents' environment;
- (iv) Recognizing abnormal changes in body functioning and the importance of reporting such changes to a supervisor; and
- (v) Caring for residents when death is imminent.

(3) Personal care skills, including, but not limited to—

- (i) Bathing;
- (ii) Grooming, including mouth care;
- (iii) Dressing;
- (iv) Toileting;
- (v) Assisting with eating and hydration;
- (vi) Proper feeding techniques;
- (vii) Skin care; and
- (viii) Transfers, positioning, and turning.

(4) Mental health and social service needs:

- (i) Modifying aide's behavior in response to residents' behavior;
 - (ii) Awareness of developmental tasks associated with the aging process;
 - (iii) How to respond to resident behavior;
 - (iv) Allowing the resident to make personal choices, providing and reinforcing other behavior consistent with the resident's dignity; and
 - (v) Using the resident's family as a source of emotional support.
- (5) Care of cognitively impaired residents:
- (i) Techniques for addressing the unique needs and behaviors of individual with dementia (Alzheimer's and others);
 - (ii) Communicating with cognitively impaired residents;
 - (iii) Understanding the behavior of cognitively impaired residents;
 - (iv) Appropriate responses to the behavior of cognitively impaired residents; and
 - (v) Methods of reducing the effects of cognitive impairments.
- (6) Basic restorative services:
- (i) Training the resident in self care according to the resident's abilities;
 - (ii) Use of assistive devices in transferring, ambulation, eating, and dressing;
 - (iii) Maintenance of range of motion;
 - (iv) Proper turning and positioning in bed and chair;
 - (v) Bowel and bladder training; and
 - (vi) Care and use of prosthetic and orthotic devices.
- (7) Residents' Rights.
- (i) Providing privacy and maintenance of confidentiality;
 - (ii) Promoting the residents' right to make personal choices to accommodate their needs;
 - (iii) Giving assistance in resolving grievances and disputes;

(iv) Providing needed assistance in getting to and participating in resident and family groups and other activities;

(v) Maintaining care and security of residents' personal possessions;

(vi) Promoting the resident's right to be free from abuse, mistreatment, and neglect and the need to report any instances of such treatment to appropriate facility staff;

(vii) Avoiding the need for restraints in accordance with current professional standards.

(c) Prohibition of charges.

(1) No nurse aide who is employed by, or who has received an offer of employment from, a facility on the date on which the aide begins a nurse aide training and competency evaluation program may be charged for any portion of the program (including any fees for textbooks or other required course materials).

(2) If an individual who is not employed, or does not have an offer to be employed, as a nurse aide becomes employed by, or receives an offer of employment from, a facility not later than 12 months after completing a nurse aide training and competency evaluation program, the State must provide for the reimbursement of costs incurred in completing the program on a pro rata basis during the period in which the individual is employed as a nurse aide.