State Rules and Regulations Pertaining to Nurses Aide Training and Competency

Note: This document is arranged alphabetically by State. To move easily from State to State, click the “Bookmark” tab on the Acrobat navigation column to the left of the PDF document. This will open a Table of Contents for the document. The relevant federal regulations are at the end of the PDF.

ALABAMA

420-5-10-.03 Administrative Management.

...(8) Required training of nursing aides - Definition. Licensed health professional means a physician; physician assistant; nurse practitioner; physical, speech, or occupational therapist; physical or occupational therapy assistant; registered professional nurse; licensed practical nurse; licensed or certified social worker, or dietitians.

Nurse aide means any individual providing nursing related services to residents in a facility who is not a licensed health professional, a registered dietitian, or someone who volunteers to provide such services without pay.

(9) General rule. A facility must not use any individual working in the facility as a nurse aide for more than four months, on a full-time basis, unless:

(a) That individual is competent to provide nursing related services; and

(b) That individual has completed a training and competency evaluation program; or

(c) That individual has been deemed or determined competent by the Alabama Nurse Aide Registry.

(10) Non-permanent employees. A facility must not use on a temporary, per diem, leased, or any basis other than a permanent employee any individual who does not meet the requirements in paragraphs b & c above as a nurse aide.

(11) Competency. A facility must not use any individual who has worked less than four months as a nurse aide in that facility unless the individual:

(a) Is a full-time employee in a State-approved training and competency evaluation program.

(b) Has demonstrated competence through satisfactory participation in a State-approved nurse aide training and competency evaluation program; or

(c) Has been deemed or determined competent by the Alabama Nurse Aide Registry.
(12) Registry verification. Before allowing an individual to serve as a nurse aide, a facility must receive registry verification that the individual has met competency evaluation requirements unless:

(a) The individual is a full-time employee in a training and competency evaluation program approved by the State; or

(b) The individual can prove that he or she has recently successfully completed a training and competency evaluation program approved by the State and has not yet been included in the registry. Facilities must follow up to ensure that such an individual actually becomes registered.

(13) Multi-state registry verification. Before allowing an individual to serve as a nurse aide, a facility must contact the Alabama Nurse Aide registry to seek information from every State registry the facility believes includes information on the individual.

(14) Required retraining. If, since an individual’s most recent completion of a training and competency evaluation program, there has been a continuous period of 24 consecutive months during none of which the individual provided nursing-related services for monetary compensation, the individual must complete a new training and competency evaluation program.

(15) Regular in-service education. The facility must complete a performance review of every nurse aide at least once every 12 months, and must provide regular in-service education based on the outcome of these reviews. The in-service training must:

(a) Be sufficient to ensure that continuing competence of nurse aides, but must be no less than 12 hours per year;

(b) Address areas of weakness as determined in nurse aides’ performance reviews and may address the special needs of residents as determined by the facility staff; and

(c) For nurse aides providing services to individuals with cognitive impairments, also address the care of the cognitively impaired.

(16) Proficiency of Nurse Aides. The facility must ensure that nurse aides are able to demonstrate competency in skills and techniques necessary to care for residents’ needs, as identified through resident assessments, and described in the plan of care.

ALASKA

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Alaska regulations do not include specific content for nurse’s aide training and competency.
Arkansas regulations do not include specific content for nurse’s aide training and competency.

805 STAFF TRAINING

a. In addition to any state or federal training requirements pertaining to long term care facilities, each CNA working in a HomeStyle home shall complete the following eighty (80) hours of training to include but not limited to:

TRAINING: HomeStyle Model v. Traditional Model
HOURS: 4.0
Activities- development of, and appreciation for, activities designed to meet the individual’s personal preferences and needs.
Replacing the medical model role of employees
Disregarding the medical model role of residents
Organizational Culture Change

TRAINING: Universal/Flexible Worker
HOURS: 4.0
Concept
Responsibilities of the Worker

TRAINING: Person-directed Care
HOURS: 4.0
Concepts and Relationship Building
Execution
Documentation

TRAINING: Self-Managed or Self-Directed Work Team
HOURS: 8.0
Concept
Responsibilities
Conflict Resolution and Learning Circles
Staffing

TRAINING: Food Safety
HOURS: 30.0
Introduction
Safety
Contamination
Allergies
Therapeutic Diets
Thickening Agents
Food Preparation

TRAINING: Family style dining
HOURS: 4.0
Concept
Measuring intake
Management
Safety
Documentation
TRAINING: Emergency Situations and Evacuation
HOURS: 8.0
Fire Drills
Tornado Drills
Disaster Drills
Evacuation
Emergency Equipment (fire extinguishers, generators, water and gas shut-offs, etc.)
Behavioral Issues
Choking
Emergency calls
Environmental policy

TRAINING: Cottage Equipment Use
HOURS: 8.0
Appliance Usage (microwave, vent-a-hood, stove, fryer, lifts, whirlpools, washer and dryers, air-conditioners, etc.)
Appliance Safety (changing grease, cleaning vent-a-hood, etc.)

TRAINING: Cottage Orientation
HOURS: 2.0
Phone system
Call system
Cleaning Supply Storage
Cleaning Supply Usage
Workplace Organization
TRAINING: Communication

HOURS: 4.0

Communication Skills

Coaching Skills

Accountability

Support

TRAINING Observation skills

HOURS: 4.0

How to obtain a history from family

How to initiate a resident observation

How a care plan is developed

How to read a care plan

How to modify a care plan

How to identify a resident’s change in condition

806 TRAINING APPROVAL

Each facility seeking designation as a HomeStyle facility shall provide to the Office of Long Term Care a syllabus, a list of required reference and study materials, and a proposed curriculum of training as required in Section 805. For purposes of this section, the term curriculum means a detailed study guide that states the learning objectives and provides information or materials designed to impart to the student or trainee the necessary skills, knowledge or ability required under the learning objectives. The Office of Long Term Care shall evaluate the submission and either approve the submission in writing or inform the facility in writing as to any deficiencies in the training submission. All training required under Section 805 must be approved in writing by the Office of Long Term Care or shall be deemed to be in violation of the requirements of Section 805.

901 GENERAL ADMINISTRATION (ALZHEIMER’S SPECIAL CARE UNITS)

a. General Program Requirements

Documentation shall be maintained by the facility and shall include, but not be limited to, a signed copy of all training received by the employee. Documentation shall be signed by the trainer and employee at the time of training.
905 STAFFING

Alzheimer’s Special Care Units shall staff according to the Rules and Regulations for Nursing Facilities. Furthermore, the following staffing requirements are established for Alzheimer’s Special Care Units.

b. Staff and Training

1. All ASCU staff members and consultants shall have the training specified in these regulations in the care of residents with Alzheimer’s Disease and other related dementia. The facility shall maintain records documenting what training each staff member and consultant has received, the date it was received, the subject of the training, and the source of the training.

2. Within six (6) months of the date that the long-term care facility first advertises or otherwise holds itself out as having one (1) or more special units for residents with a diagnosis of probable Alzheimer's disease or a related dementia, the facility shall have trained all staff who are scheduled or employed to work in the ASCU.

3. Subsequent to the requirements set forth in Section 905(b)(2), fifty percent (50%) of the staff working any shift shall have completed requirements as set forth in Section 905(b)(5)(a), (b), and (c).

4. After meeting the requirements of Section 905(b)(2), all new employees who will be assigned to or will work in the ASCU shall be trained within five (5) months of hiring, with no less than eight (8) hours of training per month during the five (5) month period.

5. In addition to any training requirements for any certification or licensure of the employee, training shall consist of, at a minimum:

A. Thirty (30) hours on the following subjects:

   a. One (1) hour of the ASCU's policies;

   b. Three (3) hours of etiology, philosophy and treatment of dementia;

   c. Two (2) hours on the stages of Alzheimer’s disease;

   d. Four (4) hours on behavior management;

   e. Two (2) hours on use of physical restraints, wandering, and egress control;

   f. Two (2) hours on medication management;

   g. Four (4) hours on communication skills;

   h. Two (2) hours of prevention of staff burnout;

   i. Four (4) hours on activity programming;
j. Three (3) hours on ADLs and Individual-Centered Care; and,
k. Three (3) hours on assessments and creation of ISPs.

B. On-going, in-service training consisting of at least two (2) hours every quarter...

C. If the facility identifies or documents that a specific employee requires training in areas other than those set forth in 905(b), the facility may provide training in the identified or documented areas, and may be substituted for those subjects listed in Section 905(b)(5)(A) and (B).

c. Trainer Requirements

The individual providing the training shall have:

1. A minimum of one (1) year uninterrupted employment in the care of Alzheimer's residents;

2. Training in the care of individuals with Alzheimer's disease and other dementia; or,

3. Been designated by the Alzheimer's Arkansas Program and Services or the Alzheimer's Association or its local chapter as being qualified to meet training requirements.

d. Training Manual

The ASCU shall create and maintain a training manual consisting of the topics listed in Section 905(b). Further, the trainer shall provide training consistent with the training manual.

Rules and Regulations for the Arkansas Long Term Care Facility Nursing Assistant Training Program

Section I AUTHORITY

1. The following rules and regulations for the Long Term Care Facility Nursing Assistant Training Program are duly adopted and promulgated by the Department of Health and Human Services pursuant to Arkansas Code 2010701 et seq.

2. This initiative is pursuant to the Federal mandates of Public Law 100203 (the Nursing Home Reform Act, Subtitle C of the Omnibus Budget and Reconciliation Act of 1987 and technical amendments of OBRA 1989 and 1990) concerning the training and competency evaluation of nursing assistants employed in long term care facilities and the registry of certified nursing assistants.

3. The Federal Omnibus Budget Reconciliation Act of 1987, 1989, and 1990 (OBRA) and regulations issued by the U.S. Department of Health and Human Services – Centers for Medicare and Medicaid Services (formerly Health Care Financing Administration, or HCFA) established the minimum requirements for nursing assistant training and competency evaluation programs in Section 1819(a) (f) and 1919(a) (f) of the Social Security Act.
Section II PURPOSE

1. To develop and approve training and competency evaluation programs for individuals who provide nursing or nursing related services to residents in long term care facilities and who are not licensed health professionals or volunteers who provide services without monetary compensations.

2. These requirements are designed to assist long term care facilities and other educational institutions with training and competency programs for nursing assistants. The objective of the Nursing Assistant Training Program is the provision of quality services to residents by nursing assistants who are able to:

(a) perform uncomplicated nursing procedures and to assist licensed practical nurses or registered nurses in direct resident care;

(b) form a relationship, communicate and interact competently on a one-to-one basis with the residents as part of the team implementing resident care objectives;

(c) demonstrate sensitivity to residents' emotional, social, and mental health needs through skillful, directed interactions;

(d) assist residents in attaining and maintaining functional independence;

(e) exhibit behavior in support and promotion of residents' rights;

(f) demonstrate observational and documenting skills needed in support of the assessment of residents' health, physical condition and wellbeing.

3. The training program must teach the attitudes and behaviors (which reflect attitudes) which promote the healthy functioning of residents both physically and emotionally, and focus on the restoration and maintenance of the resident in an independent as possible status. These attitudes and behaviors of staff are demonstrable in the day-today care environment in the facility.

Section III DEFINITIONS

The following words and terms, when used in this section, shall have the following meaning, unless the context clearly indicates otherwise.

- Abuse The willful, knowing, or reckless act of mistreatment of a resident through words or physical action which results in physical, emotional, or mental injury to a resident.

- Act Public Law 100-203 (the Federal Nursing Home Reform Act, Subtitle C of the Omnibus Budget and Reconciliation Act) of 1987 and technical amendments of OBRA 1989 and 1990. Also may refer to Arkansas Code 2010701 et seq.

- Competency Evaluation An examination that includes manual (skills) and written (or oral component for those with limited literacy skills) evaluations.

- Department The Arkansas Department of Health and Human Services.
- Division The Division of Medical Services within the Department of Health and Human Services.

- Educational Institution An institution that is licensed by the Arkansas State Board of Private Career Education as defined by Act 906 of 1989 (i.e. career colleges, proprietary school, etc).

- Examination (See competency evaluation) A competency evaluation that includes manual (skills) and written evaluations.

- Facility A long term care facility/nursing facility (nursing home) licensed by the Office of Long Term Care. A nursing facility that provides nursing care and supportive care on a 24-hour basis to residents. Facility "premises" include all structures and surrounding property.

- Facility Based Program A nursing assistant training program offered by or in a long term care facility.

- Instructor Training Program A trainthetrainer program of instruction in educational teaching techniques and methods for Primary Instructors and Team Instructors approved by the Office of Long Term Care.

- Licensed Health Professional A physician, physician assistant, nurse practitioner, physical, speech, or occupational therapist, physical or occupational assistant, registered professional nurse, licensed practical nurse, or certified social worker.

- Misappropriation of resident property The taking, secretion, misapplication, deprivation, transfer, or attempted transfer to any person not entitled to receive any property, real or personal, or anything of value belonging to or under the effective control of a resident or other appropriate legal authority, or the taking of any action contrary to any duty imposed by law prescribing conduct relating to the custody or disposition of property of a resident.

- Neglect An act of omission or an act without due care which causes physical or emotional harm to a resident or adversely affects the resident's health, safety, or welfare in any way.

- Nonfacility based program A nursing assistant training program not offered by or in a facility (i.e. career college, community college, VoTech school, proprietary school, etc.)

- Nursing Assistant An individual providing nursing or nursingrelated services to residents in a long term care facility who has successfully completed a training and/or competency evaluation program and is competent to provide such services but not an individual who is a licensed health professional or who volunteers to provide such services without monetary compensation.

- Orientation Program A program which provides the nursing assistant with explanations of facility structure, policies, procedures, philosophy of care, description of the resident population and employee rules. This orientation phase is not included as part of the Nursing Assistant Training Program.

- Performance Record A list of the major duties/skills to be learned in the program and the trainee's performance of each.
- Petitioner A person who appeals a finding that such person has, while acting as a nursing assistant in a facility or while being used by a facility in providing services to a resident, abused or neglected a resident, or has misappropriated a resident's property.

- Primary Instructor (PI) An individual approved by the Office of Long Term Care to provide instruction in a program and who has overall responsibility for conducting a program.

- Program Trainer A registered nurse, licensed practical nurse, or other licensed health professionals who conduct specific classroom lectures based upon an expertise in a given subject area, under the direct supervision of the Primary Instructor.

- Office The Office of Long Term Care within the Division of Medical Services.

- Registry A listing of all individuals who have satisfactorily completed a training and competency evaluation program or a competency evaluation program approved by the Office of Long Term Care.

- Resident A patient residing in a facility.

- Skills training Training composed of both skills demonstration in the classroom lab and skills performance in the clinical area with residents in a long term care facility.

- Team (Additional) Instructor A RN or LPN who, under the general supervision of the Primary Instructor, may provide classroom and skills training.

- Trainee An individual who is enrolled in a nursing assistant training program and who is not permitted to perform nursing services for residents during the training period for which he/she have not been trained and found to be competent.

Section IV NURSING ASSISTANT TRAINING

GENERAL RULE: A facility must not use any individual working in the facility as a nursing assistant for more than four (4) months (120 calendar days) unless that individual has successfully completed a training program and competency evaluation approved by the Office of Long Term Care as described in these regulations.

A. Training

1. Nursing assistant training programs must include materials that provide a basic level of both knowledge and demonstrable skills for each individual completing the program.

2. Each course must be prepared and administered in accordance with the training course guidelines prescribed in the "Arkansas LTCF Nursing Assistant Training Curriculum". This curriculum is to be used as a guide for conducting training in both facility and nonfacility programs.

3. These guidelines essentially provide the outline for each training program and can be enhanced by the inclusion of current information to keep training relevant to changing needs. The content provides fundamental information and leaves open the opportunity for an instructor to function as necessary in response to perceived student requirements. It is
important to recognize that the curriculum guidelines identify the limitations (i.e. scope of practice) of the LTCF nursing assistants’ direct care responsibilities.

4. Each training program must use the behavioral stated objectives in the "Arkansas LTCF Nursing Assistant Training Curriculum" for each unit of instruction. These objectives state the measurable performance criteria that serve as the basis for the state competency evaluation test. Review the unit objectives with the trainees at the beginning of each unit so that each trainee knows what is expected of him/her in each part of the training program.

5. Upon successful completion of the required training, the trainee must pass the state competency evaluation/examination administered by the Department (see Section VII). An individual must complete the state competency examination within 12 months of graduation from a training program or retraining will be required.

B. Implementation Requirements

1. Each course shall consist of a combination of classroom and clinical instruction. The requirement for state certification will be minimum of 90 hours of training with a balance between theory instruction and skills training. Skills training is composed of both skills demonstration in the classroom lab and skills performance in the clinical area with residents in a long term care facility.

2. The clinical site must be a long term care facility, skilled nursing unit or rehabilitation unit located in an acute care facility or inpatient hospice unit which has not been disqualified by restrictions as described in Section V (B).

3. A minimum of 16 hours initial classroom instruction is required in Part I. This will include both theory instruction and skills demonstration in the classroom lab. During Part I the trainee is not allowed on the floor as part of a facility's staffing pattern. After completion of Part I, a trainee may be used in a facility's staffing pattern but only assigned to duties for which they have demonstrated competency. Documentation of acceptable performance of all skills and duties shall be on file with the Primary Instructor (see item C Trainee Activities).

4. Parts II and III requires the completion of the remaining 74 hours of training consisting of theory, classroom lab and clinical skills training. Clinical skills training must include at least 16 hours of supervised practical training in a facility performing tasks on an individual under the direct supervision of the instructor. Supervised practical training is defined as 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 or licensed practical nurse. Clinical training or supervision shall not be performed using the “buddy” system of assigning the trainee to work with an experienced nursing assistant.

5. The ratio of trainees to instructors in classroom must not exceed 24 trainees to one instructor and the ratio for skills training must not exceed 12 trainees to one instructor.

6. In programs that are facility based, who wish to use student trainees in staffing while in training following completion of Part I, a minimum of ten (10) hours per week must be spent in the training program until completed. This provides for the completion of the
training program allowing time for students to challenge and successfully pass the competency evaluation test within the four (4) month (120 calendar days) limit.

7. Each program shall issue to each trainee, upon successful completion of the program, a written statement in the form of a certificate of completion, which shall include the program’s name, the student’s name and a numerical identifier such as a Driver’s License Number or identification number from a valid government issued document that contains a current photo (such as state or national issued ID card, alien registration card, military identification or passport), the date of completion and the signature of the Primary Instructor. Such certificate, or copies thereof, shall serve as evidence of successful completion of a training program in order to be eligible to take the state certification/competency test.

C. Nursing Assistant Trainee Activities

1. Clearly identify each trainee during all skills training portions. Identification must be recognizable to residents, family members, visitors, and staff.

2. A nursing assistant who has begun a training program, whether facility-based or not, and who has not completed the program, may be hired by a facility to provide care for which he/she has received training and has demonstrated competence. In other words, nursing assistants are not permitted to perform services for residents during the training period for which they have not been trained and found by the training program to be competent.

3. Documentation of each trainee’s acceptable performance of each skill/procedure must be maintained by the Primary Instructor on the Task Performance Record provided by the Department (Form DMS741). This record will consist of a listing of the duties/skills expected to be learned in the program, space to record when the trainee performs this duty/skill, and spaces to note satisfactory or unsatisfactory performance, and the instructor supervising the performance.

4. A program must terminate a trainee when provided with substantial evidence or a determination that the trainee is guilty of resident neglect or abuse, or misappropriation of resident property. The program shall establish procedures for a review of the allegations when requested by the trainee. The program shall inform the Department of any trainees terminated under these circumstances.

D. Classroom Facilities & Resources

1. The nursing assistant training program shall require the provision of physical facilities as follows:
   - Comfortable temperatures.
   - Clean and safe conditions.
   - Adequate lighting.
   - Adequate space to accommodate all students.
- All equipment needed, including audiovisual equipment and that needed for simulating resident care.

1. The physical facilities including classrooms, laboratories, conference space, library and educational materials shall be adequate to meet the needs of the program, the number of trainees, and the instructional staff.

2. Suggested training material/resources may include (but not be limited to) a blackboard, flipchart, projector/screen, VCR, interactive video machine, anatomical chart, mannequin, bed, lavatory/sink, etc.

3. The Department will not require or endorse any one textbook or other material such as videotapes, films, etc. There are several textbooks, videotapes, etc. on the market and each facility or school will have the choice in selecting their materials. The curriculum guide is to be used in identifying the information to be taught in order that each program will know the objectives and procedures expected to be communicated to the nursing assistant trainee in order for them to pass the state competency evaluation.

E. Orientation Program

1. All nursing assistants must receive an orientation program that includes, but is not limited to, an explanation of:
   - The organizational structure of the facility;
   - Policies and procedures (including fire/disaster plans, etc.)
   - The philosophy of care of the facility;
   - The description of the resident population; and
   - Employee rules.

2. This facility orientation training program is not included in the required 90 hours of nursing assistant training.

F. Ongoing Inservice Training

1. All facilities will continue to provide ongoing inservice training on a routine basis both in groups and as necessary in specific situations on a one-to-one basis. Each nursing assistant must receive one (1) hour of inservice training per month.

2. The facility must complete a performance review of each nursing assistant at least once per year and provide regular inservice training based on the outcome of these reviews. The inservice training should address areas of weakness and be sufficient to ensure the continuing competence of the nursing assistants.

3. In addition to training needs identified by performance reviews, inservice training should also address the special needs of residents as determined by each
facility. Training can be received on the unit as long as it is directed toward skills improvement, provided by appropriately trained staff and documented (for example, skills demonstration with return demonstration recorded on a check list).

4. Effective July 1, 2006, facilities are strongly encouraged to offer inservice training for nursing home employed CNAs who were certified in Arkansas prior to July 1, 2006 that covers the Barbara Broyles Alzheimer and Dementia Training that is included in Arkansas LTCF Nursing Assistant Training Curriculum. Facilities should maintain records that verify each employed CNA, who was certified in Arkansas prior to July 1, 2006, has received this training. After July 1, 2006 and ongoing, the new Alzheimer’s training is strongly encouraged for CNAs registered in Arkansas through reciprocity from other states and test candidates that are allowed to challenge the State competency test based on exemptions found in Section VII (D) (3 through 6).

G. NonPermanent Employees

1. Nursing assistants who are employed/leased through a temporary hiring service must have completed an approved training program and passed the state competency evaluation test prior to employment and use by a facility.

Section V APPROVAL OF PROGRAMS

A. Location

1. Nursing assistant training programs may be offered by or in nursing facilities, as well as outside facilities. The clinical portion of the training must in all cases utilize a nursing facility and its residents. Nursing facilities may offer complete training program themselves and/or may contract with another organization to provide the training.

2. Other groups and/or institutions such as employee organizations, vocational/technical schools, community colleges, and private institutions may conduct programs, dependent upon Department approval.

3. Programs offered to the public and that charge a tuition fee must be licensed through the State Board of Private Career Education. This provision would not apply to the state schools (VoTech, community colleges, etc.) or programs offered by nursing facilities who train their own employees (or potential “oncall” employees).

B. Restrictions

1. The Department shall not approve a program offered by or in a nursing facility which, in the previous two years:

(A) has operated under a waiver of the nurse staffing requirements in excess of 48 hours during the week;

(B) has been subject to an extended (or partial extended)* survey; or
(C) has been subject to a civil money penalty of not less than $5,000, denial of payment, appointment of temporary management, closure, or transfer of residents.

• Extended survey is defined for this provision as a survey which includes a review of facility policy and procedures pertinent to Level A deficiencies in Resident Rights, Resident Behavior and Facility Practices, Quality of Life or Quality of Care. Partial extended survey is defined as a survey conducted as a result of a deficiency in Level A requirements other than those listed above in the extended survey definition.

2. Facility based training programs are prohibited from charging tuitions/training fees to their nursing assistant employees (or those who have received an offer of employment) for any portion of the program (including any fees for textbooks or other required course materials). See Section X regarding reimbursements.

C. Application

1. Each facility or entity that desires to offer a program shall file an Application for Program Approval form prescribed by the Department (Form DMS724). Application forms are available on request by calling the Nursing Assistant Training Program at 6821807 and on the Office of Long Term Care website.

2. If the course to be offered differs in content or length from the guidelines prescribed in the “Arkansas LTCF Nursing Assistant Training Curriculum”, a basic outline must be attached to the application showing the lesson plans/teaching modules your program will offer to cover the curriculum contents. This should specify the elements covered in each module, hours of classroom theory, hours of lab (return demonstrations), and hours in the clinical area in a nursing home. Additional information deemed important in consideration of the program may be requested by the Department.

3. If applicable, verification of school licensure by the State Board of Private Career Education will be required (see item A of this section). A notarized copy of the school licensure document must be included with applications for new programs and for renewal of programs. Verification of notification to the State Board of Private Career Education for additional instructors and/or changes in instructors shall be required with each application.

4. Application must be submitted to the Department eight weeks (56 calendar days) prior to the start of the first course and every two years thereafter. An application must be completed and signed by the Primary Instructor. All official application forms must be notarized.

5. Applications that are received incomplete may cause postponement of the program starting date. A notice of deficiency in the application will be mailed to an applicant within 15 business days of the date of filing. The applicant will be given an opportunity to correct any deficiencies.

6. Notice of approval or disapproval of the application will be given to the entity within 15 business days of the receipt of a complete application. If the application is to be disapproved, the reasons for disapproval shall be given in the notice.
7. An applicant may request a hearing on a disapproval in writing within 10 business days of receipt of the notice of the proposed disapproval. If no request is made, the entity is deemed to have waived the opportunity for a hearing.

D. Changes in Programs

1. Prior to major changes in the course, an application must be resubmitted for approval.

2. Major changes include:

   - Change in training provider
   - Change in classroom site
   - Change in clinical site
   - Change in instructor
   - Complete revision of course structure

3. Major changes do NOT include:

   - Change in materials (handouts, textbooks, videos, etc.)
   - Change in hours allotted to one or more modules
   - Change in order in which modules are taught
   - Addition of modules/tasks not required by regulations or guidelines

E. Withdrawal of Approval

1. Provisions for monitoring and review of compliance with program requirements are specified in Section IX of these regulations. The Department shall withdraw approval of a training program when;

   (a) One or more restrictions exists as listed in Section V (B).

   (b) The entity offering the program refuses to permit visits by the Department, whether announced or unannounced. (Also, any facility that refuses to permit unannounced visits is subject to having its provider agreement terminated.)

   (c) Curriculum and implementation requirements specified in these regulations are not met by the program.

   (d) An excessive failure rate exists for trainees on the state competency evaluation test.

   (e) The program:

      Purposely makes or causes to be made any false statement or representation of a material fact used in any application for payment by any entity for reimbursement of training costs as allowed in Section X of these regulations;

      Purposely makes or causes to be made any false statement or representation of a material fact for use in determining rights to payment to any entity for training costs as allowed in Section X of these regulations;

      Purposely makes or causes to be made any false statement or representation that training was provided when training was not provided;

      Purposely makes or causes to be made, or induces or seeks to induce the making of, any false statement or representation of a material fact with respect to the conditions or
operation of the program in order that the program may qualify either upon initial approval or reapproval;

Purposely makes or causes to be made any false statement or representation that the amount of training costs is greater than the actual cost of the training to obtain Medicaid reimbursement, as allowed in Section X of these regulations, that exceeds the actual cost of training; or,

Purposely makes or causes to be made any false statement or representation of a material fact in violation of these regulations.

2. When the Department withdraws approval from a training program, it shall:

(a) Notify the program in writing, indicating the reason (or reasons) for withdrawal of approval,

(b) Permit students who have already started the program to finish it.

Section VI QUALIFICATIONS OF INSTRUCTORS

A. Primary Instructor (PI)

1. The Primary Instructor shall be a registered nurse currently licensed in Arkansas and shall not be subject to disciplinary action by the Arkansas State Board of Nursing. Disciplinary action includes, but not limited to: probation, suspension, revocation or voluntary surrender due to disciplinary action.

2. The Primary Instructor must possess a minimum of two (2) years nursing experience including at least one (1) year in the provision in long term care nursing services within the last five (5) years. Experience may include, but is not limited to, employment in a nursing assistant education program or employment in or supervision of nursing students in a nursing facility or unit, geriatrics department (excluding geriatric psychiatry), longterm acute care hospital, home care, hospice care or other long term care setting.

3. In a facility based program, the training of nursing assistants may be performed under the general supervision of the Director of Nursing (DON), who is prohibited from performing the actual training (unless replacement DON coverage is provided).

4. An individual who will be the Primary Instructor and meets the above criteria may submit the Application for Program Approval (Form DMS724) identifying their qualifications to teach. This must include nursing experience, supervisory experience, teaching experience and/or certificate of attendance in an instructor workshop.

B. Primary Instructor Responsibilities

1. There must be one, and only one, Primary Instructor for each course. All questions and correspondence referring to the course will be directed to this person. The PI should participate in the planning of each lesson/teaching module including clinical instruction - whether or not the PI teaches the lesson.
2. The Primary Instructor of a nursing assistant training program shall be responsible for supervision of the program and ensuring that the following requirements are met:

(a) Course objectives are accomplished.

(b) Only persons having appropriate skills and knowledge are selected to conduct any part of the training. Monitors and evaluates each instructor during classroom, learning laboratory and clinical training whenever new material is being taught and at periodic intervals to include, but not limited to, first training calls, following any complaint on a specific instructor and at least annually. Performance reviews of instructors must be documented and maintained.

(c) The provision of direct individual care to assigned residents by a trainee is limited to appropriately supervised clinical experience. Instructors, not unit or facility staff, are expected to function as supervisor of trainees while in clinical areas and providing resident care.

(d) Each trainee demonstrates competence in clinical skills and fundamental principals of resident care. The task performance record (skills checkoff) must be approved by the Primary Instructor who must sign or initial all final skills checkoff records.

(e) Records are kept to verify the participation and performance of each trainee in each phase of the training program. The satisfactory completion of the training program by each trainee shall be attested on each trainee's record.

(f) Each trainee is issued a certificate of completion within ten (10) calendar days of course completion and as described in Section IV (B) (7) of these regulations.

C. Additional Instructors/Trainers

1. Instructors may use other qualified resource personnel from the health field as guest instructors in the program to meet the objectives for a specific unit. Examples are pharmacists, dietitians, social workers, sanitarians, advocates, gerontologists, nursing home administrators, etc. Guest instructors must have a minimum of one (1) year of experience in their respective fields and must not have current disciplinary action by their respective regulatory board.

2. Licensed Practical Nurses (LPN's) may be used to provide classroom and skills training and supervision. They must be under the general supervision of the Primary Instructor, currently licensed in Arkansas and shall not be subject to disciplinary action by the Arkansas State Board of Nursing. Disciplinary action includes, but is not limited to: probation, suspension, revocation or voluntary surrender due to disciplinary action and have a minimum of one (1) year of long term care experience. (All final skills checkoff reviews must be approved by the Primary Instructor.)

3. The Application of Program Approval (Form DMS724) shall be used to identify each additional instructor/trainer and their qualifications to teach.
Section VII REQUIREMENTS FOR TESTING AND CERTIFICATION

A. Transition

The initial implementation of these training and testing requirements have covered three basic phases:

1. Deemed Equivalence Waivers

A nursing assistant shall be deemed to have satisfied the requirement of completing a training and competency evaluation program approved by the State if the nursing assistant:

a. Completed a program that offered a minimum of 60 hours of nursing assistant training before July 1, 1989 and if such received before July 1, 1989 up to 15 hours of supervised and practical nursing assistant training or regular inservice nursing assistant education (initial training must be at least 75 hours); or

b. Completed a course of at least 100 hours of nursing assistant training and was found competent (whether or not by the State) before January 1, 1989; or

c. Has served as a nursing assistant at one or more facilities of the same employer in the State for at least 24 consecutive months before December 19, 1989. Individuals will not qualify for these waivers if they have not provided nursing or nursing related services for a period of 24 months or longer since completing training. They will be required to complete a new training program and state test to obtain current certification. Facilities who wish to obtain certification for the above described individuals should submit to OLTC Form DMS-798, Exemption/Reciprocity Request Form, with attached copies of documents/certificates verifying course completion, number of hours in course, etc.

2. Employment status as of July 1, 1989

All individuals working as nursing assistants in Arkansas nursing facilities as of July 1, 1989 were allowed to become certified by passing the state competency test but were not required to complete the "formal" 75 hour training course.

This phase was completed by October 1, 1990 and does not apply thereafter. Therefore, all individuals must now complete the 90 hour training requirements to qualify to take the state test regardless of past employment status on July 1, 1989.

3. July 1, 1989 Ongoing

Effective July 1, 1989 a facility must not use any individual working in the facility as a nursing assistant for more than four (4) months (120 calendar days) unless that individual has successfully completed a training program and competency evaluation approved by the Office of Long Term Care as described in these regulations.

B. Examination

1. The Department or its appointed agency shall be responsible for administering the competency evaluation/examination. The exam shall be based upon the training curriculum requirements specified in the LTCF Nursing Assistant Training Curriculum Guide.
2. The examination will be in English.

3. The competency examination shall consist of two components, a written (or oral) exam and a skills demonstration. Each test candidate will be allowed to choose between a written or oral exam. The oral examination will be read from a prepared text in a neutral manner.

4. The written/oral component shall be developed from a pool of test questions, only a portion of which is used in any one exam. The skills demonstration shall consist of a demonstration of five randomly selected items drawn from a pool of tasks ranked according to difficulty.

5. The skills demonstration component will be performed in a facility (which has not been disqualified by criteria specified in Section V, item B) or laboratory setting similar to the setting in which the individual will function.

6. The skills demonstration will be administered and evaluated by a registered nurse (RN) with at least one (1) year experience in providing care for the elderly or chronically ill of any age.

7. The skills demonstration component may be proctored by facility/training site personnel (RNs as described above) if secure, standardized, and scored by the testing agency approved by the Department. "Proctoring" will not be approved in facilities subject to prohibitions specified in Section V (item B).

8. To complete the competency evaluation successfully, an individual must pass both the written (or oral) examination and the skills demonstration. If an individual does not complete the evaluation satisfactorily, they will be advised of areas which he/she did not pass and their right to take the test three times.

9. All test candidates will be allowed up to three opportunities to successfully complete the examination. Failure after three attempts will require retraining to qualify for further testing opportunities. A maximum time limit of 12 months shall be imposed on an individual to complete the test. Verification of new retraining will be required after this 12 month limit for further testing opportunities.

10. Effective upon notification of test results, any person who has failed the competency evaluation (either the written/oral or skills portion) after three attempts is prohibited from providing nursing services to residents in a nursing facility. However, based on the program regulations, these individuals may maintain their employment status if they reenroll in a new training program. They would be required to follow the program implementation requirements of completing the first 16 hours (Part I) training prior to direct resident contact and can only be assigned to job duties thereafter in which they have been "checked - off" as competent to perform as they complete the remainder of the full 90 hours of training. Upon successful completion of their training, they should be scheduled for the next available competency exam.

11. All individuals who successfully complete the competency examination shall be placed on the CNA registry and issued a state certificate. Information on the registry shall be made available for public inquiry (see Section VIII).
C. Test Dates, Locations, and Fees

1. Testing will be made available at multiple sites geographically dispersed throughout the state. Schedules of times, locations, and registration requirements will be announced in a timely manner by the Department or designated testing agent.

2. At the option of the NA, the competency evaluation (both written/oral and skills components) may be administered in the facility at which the NA is (or will be) employed (unless the facility is disqualified by the Department under criteria specified in Section V, item B).

3. Each test candidate must have appropriate verification of completion of the training requirements. This will be in form of a "certificate of completion" from an approved training program or other acceptable documents (see item D of this section and Section IV(B) of these regulations).

4. There will be a fee charged to take the state competency evaluation. The amount of the fee will be announced in a timely manner by the Department or designated testing agent.

5. The Department will be responsible to pay the test fee for individuals who are employed by a Medicaid certified nursing facility or those individuals that have a commitment ("letter of intent" as defined in Section X (A) (2) of these regulations) to be employed in a Medicaid certified nursing facility. Letters of intent to hire from Medicaid certified nursing facilities must be dated within 12 months immediately preceding the date of the application to take the test. Independent test candidates who are taking the competency test without an employment connection to a long term care facility will be responsible to pay their own test fee.

D. Candidate Qualifications

The following list identifies those individuals who qualify for the state competency exam.

Note: Individuals listed on the LTCF Employment Clearance Registry with a disqualification status due to an substantiated administrative finding of abuse, neglect, misappropriation of resident property or a disqualifying criminal record in accordance with A.C.A. 2033201 et seq shall not be eligible to take the competency examination.

1. Nursing assistants who were trained in approved nonfacility programs (career colleges, VoTech schools, proprietary schools, etc.) after January 1, 1989.

2. Nursing assistants who were trained in approved facility (nursing homes) programs after July 1, 1989.

3. RN or LPN students who have finished the basic nursing course (Introduction to Nursing, Fundamentals of Nursing, etc.). The individual must provide a copy of their school transcript/document showing successful completion of the basic nursing course in order to qualify to take the state competency test. Registered nurses or licensed practical nurses that have had disciplinary action resulting in suspension, revocation or voluntary surrender due to disciplinary action shall not be allowed an exemption to training or be allowed to challenge the state competency examination.
4. Home health aides who have met appropriate federal training and/or testing requirements for HHA certification. Verification must show completion of a minimum of 75 hours training and/or federal testing requirements as a home health aide. This provision does not apply to “personal care aides” as their training requirements of 40 hours does not meet the LTCF Nursing Assistant Training Program’s 90 hours or curriculum content.

1. Individuals from other states who can verify completion of a state approved geriatric nursing assistant training program but who were not tested and registered. (If registered in the other state, see Section VIII for reciprocity transfers without further testing.) Verification of course completion rest with the individual and must be submitted to OLTC for approval to take the Arkansas competency test.

2. Nursing assistants whose certification has become inactive based on the recertification requirements (see Section VIII, item D.). These individuals shall be required to be retested for recertification. Permission for retesting shall require an "admission slip" obtained from the testing agency prior to the specified test date.

All other persons trained in programs that have not received approval from the Department as a training provider shall not qualify and shall not be allowed to take the examination. Such programs may include hospitals, emergency medical technicians, medical assistant programs, personal care aides, correspondence courses, independent study or on-the-job training/inservice training as they are not acceptable in lieu of the approved training program.

Section VIII REGISTRY

A. Function and Content

1. The Department shall establish and maintain a registry of all individuals who have satisfactorily completed the training and competency evaluation program requirements. The nursing assistant registry shall be incorporated into the Long Term Care Facility Employment Clearance Registry (ECR), which also includes criminal record disqualifications for applicable employees and job applicants, and substantiated administrative findings of abuse, neglect or misappropriation of resident property for employees.

2. The information in the registry shall be made available to the public. Registry information shall be open for inquiries 24 hours per day, 7 days per week (except for scheduled maintenance or at times of technical problems), by telephone through an automated voice response system or by computer through an online website system (see Subsection B of this section).

3. The nursing assistant registry record, for each individual who has successfully obtained certification as a LTCF nursing assistant shall contain the following information:

   individual’s full name;

   date of birth;

   Social Security Number;
name and date of the State approved training program successfully completed;
certification number and date of issuance;
most recent recertification date; and
documentation of investigations showing substantiated findings of resident neglect, abuse,
or misappropriation of resident property by the nursing assistant including a summary of
the findings, and where applicable, the date and results of the hearing or date of a waiver of
hearing, and a statement by the nursing assistant disputing the findings of the investigation.

1. The Department shall review and investigate allegations of neglect, abuse, or
misappropriation of resident property by a nursing assistant. A nursing assistant shall be
given written notice by the Department of a finding on an allegation and must request, in
writing, a formal hearing within 30 days of receipt of the notice or the right to a hearing
shall be waived. Following any appeal, the registry and the nursing assistant shall be
notified of the findings. If the finding is substantiated either by the individual's failure to
appeal or by issuance of a final administrative order, the registry shall include the
documented findings involving an individual listed in the registry, as well as any brief
statement of the individual disputing the findings. (See Subsection E of this Section for the
process to petition to remove findings of neglect.)

2. The Department, in the case of inquiries to the registry, shall verify if the individual is
listed in the registry and shall disclose any information concerning a finding of resident
neglect, resident abuse, or misappropriation of resident property involving an individual
listed in the registry. It shall also disclose any statement by the individual related to the
finding or a clear and accurate summary of such a statement.

B. Inquiry Process

1. A facility must inquire of the registry as to information in the registry concerning any
individual to be used as a nursing assistant. A facility may not use an individual as a nursing
assistant until registry inquiry and clearance is obtained. Registry inquiries shall be
performed within five calendar days of the offer of employment and prior to any resident
contact. A facility must document all inquiries and must include such documentation in the
personnel file of each nursing assistant used by the facility.

2. Registry clearance shall be obtained by contacting the automated voice response system
or by computer access to the online website system. The telephone number to the
automated voice response system and the URL address to the online website system shall
be issued by the OLTC, or its designated agent, and may be subject to change. If needed,
facilities should contact the OLTC for the latest contact information for either system.

3. Both the automated voice response system and the online website system will maintain
an internal log of each inquiry made by Arkansas nursing facilities using a numeric code
(Registry Identification Number) assigned to each facility. The internal log shall be
monitored by OLTC to verify each facility's compliance with inquiry requirements.

4. If utilizing the automated voice response telephone system, the facility shall document
date, time and results of the registry contact in the individual's personnel file. The online
website system is capable of providing a printable registry clearance verification report document for the nursing facility's use in record keeping. If utilizing the online website system, the facility shall be required to print the registry clearance report and maintain this report in the employee's personnel file.

5. Registry clearances accessed through the automated voice response system requires the nursing assistant's Social Security Number (SSN). The online website system may be accessed by either the SSN or certification number. Facilities are required to access by using the SSN or certification number in order to assure an accurate inquiry.

NAME SEARCHES ARE NOT POSSIBLE ON THE AUTOMATED VOICE RESPONSE SYSTEM. NAME SEARCHES ARE POSSIBLE ON THE ONLINE SYSTEM BUT ACCURACY IS NOT ASSURED. NAME SEARCHES MAY ALSO BE OBTAINED BY CALLING THE OLTC. PLEASE NOTE, HOWEVER, THAT NAME SEARCHES BY CALLING OLTC DO NOT GENERATE A VERIFICATION LOG OF THE CLEARANCE. THEREFORE, FACILITIES SHALL AVOID THE USE OF NAME SEARCHES WHEN THE NEED FOR DOCUMENTATION AND ACCURACY OF THE REGISTRY CHECK IS REQUIRED.

C. Interstate (Reciprocity) Transfer

1. If an individual has completed a training and competency evaluation program and become registered as a nursing assistant in other state(s) that meet federal guidelines, reciprocity may be granted without further training or testing. The DMS798, Exemption/Reciprocity Request Form, must be submitted to OLTC with a copy of each other state's certificate/registration document. OLTC will contact each other state to clear the individual's status for the transfer of their certification through reciprocity. However, this process may take several weeks to complete and the facility may not use the individual until each other state's registry is cleared. If the facility wishes, they may telephone each other state's registry, document the contact in the individual's file and use the NA in staffing (if in good standing on the other state's registry) while OLTC processes the official transfer. Contact must be made to all states the individual has worked as a nursing assistant.

2. This process for out of state registry verification becomes complicated if the individual is not officially registered under the new federal standards. Facilities may not use these individuals in staffing until their qualifications have been cleared by OLTC. The same process described above, of submitting the DMS798, Exemption/Reciprocity Request Form, with copies of certificates or documents attached, also applies. Some of these individuals may qualify for registration under certain exemption criteria, some may be required to take the Arkansas state test, and some may be required to complete both training and testing. In any case, OLTC has the responsibility to make these determinations and notify the facility and/or individual of the results.

D. Certification Renewal

1. The initial certification period is valid for 24 months. Each certificate contains an expiration date. The Department will develop a plan and procedure to renew each nursing assistant certification listed in the registry on a biennial basis (every two years). The
renewal process will require the nursing assistant to document having worked as a nursing assistant for monetary compensation during the prior two years. This provision shall be defined by at least one documented day (e.g. eight (8) hours) of employment providing nursing or nursing-related services for monetary compensation in any setting.

2. Employing facilities and/or individuals shall be required to submit update information to the registry to establish ongoing eligibility for active status. The registry shall make "inactive" those individuals who cannot document having worked in an aide capacity within a 24-month period. Nursing assistants who are currently employed as a nursing assistant at the time of their renewal will be renewed for 24 months. Nursing assistants who are not currently employed will be renewed for 24 months beginning with the last day employed as a nursing assistant. A certification that has been expired for a period longer than 24 months cannot be renewed and the individual must retest to recertify to an active status.

3. An individual will be required to successfully complete a new competency evaluation test to become recertified (see Section VII, item D7) if documentation of having worked in an aide capacity within the previous 24-month period can not be provided or for any certification that has been expired for over 24 months.

4. The process to renew a nursing assistant certification shall be implemented by the Department or its agent. Each certified nursing assistant will be mailed a renewal form approximately 60 calendar days before the expiration of their certification. The renewal form shall be mailed to the home address currently listed in the registry database when the nursing assistant was initially tested or renewed. It is the responsibility of each nursing assistant to update their mailing address by contacting the Department or its designated agent. It is the responsibility of each nursing assistant to renew their certification regardless if they have received the mailed renewal notice. Renewal forms may be obtained from the OLTC or its designated agent.

5. Individuals listed on the LTCF Employment Clearance Registry with a disqualification status due to a substantiated administrative finding of abuse, neglect, misappropriation of resident property or a disqualifying criminal record in accordance with A.C.A. 2033201 et seq shall not be eligible to renew their certification. Individuals approved for removal of a neglect finding pursuant to Subsection VIII (E) shall be eligible to renew their certification.

6. Nursing assistant certifications may not be renewed more than 60 calendar days prior to the expiration date.

7. Renewals may be conducted either by mail or through an online website. The Department or its designated agent shall provide instructions for the online renewal process attached to the renewal notice.

8. The Arkansas Nursing Assistant Registry Renewal Form must be fully completed, and the information in the form must be accurate to the best of the knowledge and information of the nursing assistant. Failure to fully complete the form, or the inclusion of false or inaccurate information, shall constitute the basis for denial of certification renewal.

9. When a nursing assistant renewal is processed (either by mail or online) and the nursing assistant is determined to be eligible for renewal, a new certificate showing the new
expiration date will be mailed to the individual and their registry record shall be updated to reflect the new certification period.

E. Petition to Remove Neglect Findings

Pursuant to federal law 42 U.S.C. § 1395i3(g)(1)(D), in the case of a finding of neglect under Subsection A of Section VIII of these regulations, the Office of Long Term Care shall establish a procedure that permits a certified nursing assistant to petition for the removal of a substantiated finding of neglect. The procedure to file a petition shall be as follows:

1. Factors that must be met are:

   a. The certified nursing assistant must have a substantiated finding of neglect. There shall not be a petition process available for substantiated findings of physical abuse, verbal abuse or misappropriation of resident property.

   b. The Office of Long Term Care makes a determination that the petition applicant's employment and personal record does not reflect a pattern of abusive behavior or neglect. Factors to be considered shall include, but shall not be limited to:

      The neglect that resulted in a finding was a singular occurrence as identified in the incident investigation file.

      The petition applicant does not have a criminal conviction related to neglect, abusive behavior or physical violence.

      The petition applicant’s name does not appear on the DHHS/Division of Aging and Adult Services’ Adult Abuse Registry or the DHHS/Division of Children and Family Services’ Child Abuse Registry.

      Whether a pattern of abusive behavior or neglect is discovered through reference checks with prior employers or other parties.

      Character references as provided by the petition applicant.

   c. At least one year has passed since the petition applicant's substantiated finding of neglect was placed on the Registry.

2. The procedure to file for a petition to remove a neglect finding shall include the following:

   a. Petition applicants shall submit a letter requesting the removal of the neglect finding. The letter shall be addressed to:

      Office of Long Term Care Nursing Assistant Training Program Mail Slot S405 P.O. Box 8059 Little Rock, AR 72203-8059

   b. The petition applicant must provide the following information with their request letter:

      Full name and current mailing address

      Daytime phone number
Social Security Number

Date of birth

Name and daytime phone number of at least two personal character references

Letters of reference from any employment within the previous year from the date of the petition request. This letter must include a statement attesting to the petition applicant’s work performance in relation to the lack of any incidents involving abusive or negligent behavior.

A current criminal record report from the Arkansas State Police. If the petition applicant is currently or has recently (within the previous 12 months) lived in another state, a criminal record report must be provided from that state. All criminal record reports must be an original document and copies will not be accepted.

3. The Office of Long Term Care shall review each petition request for consideration for removal of the neglect finding. The review shall be conducted by an administrative review panel consisting of at least three members appointed by the Office Director. The panel shall meet within thirty (30) days of any petition request. The review panel shall consider all information submitted by the petition applicant and may conduct additional research as needed.

4. The review panel shall render a decision within thirty (30) calendar days of the panel’s review, and the petition applicant shall be notified in writing within 10 business days of the review committee’s final determination.

5. If the petition to remove the neglect finding is approved, the Registry shall be updated within 10 work days to show the petition applicant no longer has the neglect record and shall be eligible for employment in Arkansas long term care facilities. Note that any CNA whose certification has been expired for over 24 months must successfully complete the state competency test to reestablish employment eligibility as a certified nursing assistant.

6. Any applicant whose petition has been denied may not reapply for a subsequent petition request for a period of at least 12 months from the date of the previous denial.

7. If the petition to remove the neglect finding is denied by the review panel, any further appeals of the committee’s determination shall be based on the appeals procedures as listed below:

a. Administrative hearings are available to persons, herein referred to as petitioners, who disagree with determinations to deny a petition to remove a neglect finding made by the Office of Long Term Care as described in these regulations.

b. When a petitioner wishes to appeal, he/she may do so by mailing a written notice of appeal to Appeals and Hearings (Slot 1001), Office of Chief Counsel, Arkansas Department of Health and Human Services, P.O. Box 1437, Little Rock, Arkansas 72203. The notice shall be mailed by certified mail, return receipt requested. The notice of appeal shall state the following:
Name of the petitioner;
Address of the petitioner;
Date of birth of the petitioner;
Phone number, if any, of the petitioner;
The petitioner's place of employment;
A short statement explaining why the petitioner believes the determination/decision is in error.

c. The notice of appeal must be received by the Appeals and Hearing Office within 30 calendar days from the mailing date of the notification document of the determination of petition denial. No appeal shall be accepted prior to such a determination/decision.

d. A hearing shall be conducted by the Appeals and Hearings Section, Office of Chief Counsel, Department of Health and Human Services. The procedures to conduct the hearing are as follows:

1. The hearing record will contain all documents, exhibits and testimony admitted into evidence by the hearing officer. Within 20 calendar days of receipt of notice that a petitioner has requested a hearing, the petitioner and the Office of Long Term Care will prepare a file to be submitted to the Appeals and Hearings Section, and mail a copy of the file by certified mail, return receipt requested, to the other party. The file will contain only documentary evidence supporting or tending to support each party's allegations. The Office of Long Term Care will also submit an Administrative Hearing Statement summarizing the determination/decision. This statement is not evidence. Only such portions of each file as are determined by the hearing officer to be relevant shall be included in the Administrative Hearing Record.

2. Both parties will be advised by the Appeals and Hearings Section via certified mail, return receipt requested, that they have ten (10) calendar days from the date the certified mail receipt was signed to review the hearing file and submit a request to subpoena witnesses. The request shall include the name, address and telephone number of all witnesses not employed by the Department of Health and Human Services (DHHS). DHHS employees will be expected to attend hearings and present testimony without the benefit of a subpoena and will be notified by the Appeals and Hearings Section of their required presence at the hearing. Each party will be notified of any witnesses requested and will have five (5) business days from the receipt of this notice to request subpoenas for rebuttal witnesses. The Department of Health and Human Services, Office of Chief Counsel, will issue the subpoenas, pursuant to the terms and authority of Ark. Code Ann. § 2076103.

3. After the time frame has expired for subpoenaing witnesses, the hearing officer will schedule the hearing to afford the petitioner, the Office of Long Term Care, and their attorneys, if any, at least ten (10) calendar days notice of the date, place and time of the hearing. The scheduling letter, sent via certified mail with return receipt requested, shall also contain the name of the hearing officer who will conduct the hearing. In the event the
petitioner, the Office of Long Term Care representative, or an attorney representing the
petitioner suffers from illness or cannot attend the hearing due to scheduling conflicts, that
party may request the hearing be continued. The hearing will be rescheduled by the hearing
officer upon a showing of good cause. A request for continuance made by the petitioner or
the petitioner’s attorney

will constitute a waiver of any objection as to timeliness of the hearing. In each case, the
hearing and hearing record must be completed within one hundred twenty (120) calendar
days of receipt of the request for a hearing.

4. The hearing will take place at a place, time, and manner determined by the Appeals and
Hearing Office. Hearings may be conducted by telephone, by personal appearance of the
parties, or by record review by the Appeals and Hearings Office.

5. If the petitioner fails to appear for the hearing when conducted by telephone or by
personal appearance of the parties and does not contact the Appeals and Hearings Section
prior to the date of the hearing of his/her inability to attend, the appeal will be deemed
abandoned. The petitioner will be advised of this fact in the scheduling letter.

6. It is the responsibility of the Office of Long Term Care to designate a representative prior
to the time of the hearing. The representative should be familiar with the circumstances of
the determination/decision and be able to summarize the pertinent aspects of the situation
and present the documentation to support the basis for the determination/decision. The
representative should also be able to answer questions posed by the petitioner or the
hearing officer relative to the issues and should be prepared to cross examine adverse
witnesses. The representative may request the services of an Office of Chief Counsel
attorney for representation at the hearing.

7. If any party is to be represented by an attorney, notice shall be given to all parties and to
the Appeals and Hearings Section at least ten (10) calendar days prior to the hearing.
Failure to furnish notice shall entitle other parties to a continuance to obtain counsel.
Petitioner's failure to furnish notice shall constitute a waiver of objection as to timeliness of
the hearing.

8. The hearing will be conducted by a hearing officer from the Appeals and Hearings Section
who had no part in the determination/decision upon which the hearing is being conducted.

9. The petitioner may be accompanied by friends or other persons and may be represented
by a friend, legal counsel, or other designated representative.

10. The hearing officer may not review the case record or other material either prior to or
during the hearing unless such material is made available to the petitioner or his/her
representative.

11. The hearing will be conducted in an informal but orderly manner. The hearing officer
will explain the hearing procedure to the petitioner. The administrative hearing statement
will be read by the Office of Long Term Care representative. The Office of Long Term Care
shall then present its case. After completion of the Office's case, the petitioner's case will be
presented. The parties shall have the opportunity to present witnesses, advance arguments,
offer additional evidence, and to confront and cross examine adverse witnesses. If the
petitioner is unable to present his evidence in a logical manner, the hearing officer will assist the petitioner. Questioning of all parties will be confined to the issue(s) involved.

12. The hearing officer will prepare a comprehensive report of the proceedings. The report will consist of an introduction, recommended findings of fact, conclusions of law and decision. The report shall be submitted to the Director of the Division of Medical Services who, after reviewing the record, may accept, reverse or remand the report. If the Director accepts the report, such acceptance shall be reduced to writing and shall constitute the final agency determination. That determination shall be mailed to the petitioner and the Office of Long Term Care. If the Director remands the report, the hearing officer shall proceed in accordance with the instructions contained in the remand determination. The concluding determination made by the Director shall constitute the final agency determination. The determination shall be mailed to the petitioner and the Office of Long Term Care.

e. Any further review must be pursued in accordance with the Administrative procedure Act, Arkansas Code Annotated § 2515101 et seq

Section IX METHODOLOGY FOR REVIEW OF COMPLIANCE WITH PROGRAM REQUIREMENTS

A. Monitoring

1. A program is subject to inspection at any reasonable time by personnel authorized by the Department. After initial approval of a training program, the Department shall do an onsite visit review to determine the program’s implementation of and compliance with the requirements. The Department shall review the program onsite at least every two years.

2. Program reviews may be comprehensive or partial. Based on the findings of the most current review, a program may be reviewed with an increased frequency and depth.

3. An inspector will file a written report with the Department. The report will specify strengths and deficiencies of the program and be available to the program. The Department will terminate those programs not meeting minimum requirements and that do not provide an acceptable plan for correcting deficiencies within the specified time frame as established by the Office of Long Term Care.

B. Minimum Program Standards

1. Each training program shall provide for secure maintenance of records. Records to be maintained shall include but not be limited to:

- names of enrollees
- names of those who successfully complete the program
- dates of initiation and termination of program
- curricular revisions
- tests, grades, course documents, skills checklist
- credentials of instructors
- documentation of state approval
- record of complaints

2. The program monitoring shall review for compliance with requirements, at a minimum:

(a) Program curriculum content

(b) Program length
(c) Ratio of classroom to skills training
(d) Qualifications of instructors
(e) Quality of skills training supervision
(f) Access for clinical training in a nursing facility that was not disqualified based on criteria specified in Section V (B).
(g) Physical (classroom and lab) facilities

1. The quality of care provided by individual nursing assistants that is monitored during a licensure and/or survey and certification survey shall be one part of the program review. The monitoring of "quality of care" shall apply only to graduates of the facility based training program being surveyed.

2. The graduates' success rate on the state competency examination will be monitored by the Department and shall be utilized as a criterion for revoking program approval.

3. Programs that do not meet these minimum standards shall be notified in form of a letter. This letter shall list all deficiencies that require corrective action. The program will be required to respond in writing within 15 business days specifying actions to correct the deficiencies. Failure to respond or inadequate corrective actions may cause withdrawal of the Department's approval of the program.

Section X REIMBURSEMENTS

A. General Provisions

1. This section sets forth policy for direct reimbursement for allowable nursing assistant training costs incurred by Medicaid certified nursing facilities. Allowable training costs will be separately tracked, documented and submitted monthly as described herein. All reimbursements shall be made directly to the Medicaid certified nursing facility.

2. Based on Federal regulations, nursing assistants who are employed by (or who have a "letter of intent" to be employed by) a Medicaid certified nursing facility may not be charged for any portion of the program (including any fees for textbooks or other required course material). The Department shall be responsible to pay for the training costs for individuals who are employed by, or have a "letter of intent" to be employed, by a Medicaid certified nursing facility as set forth in this Section.

The criteria required for reimbursements under the "letter of intent" arrangement must meet the following:

a. Letters of intent must be on the facility letterhead, dated within twelve (12) months immediately preceding the training and signed by the facility Administrator. Copies of the Administrator’s signature are not allowed;

b. The facility must have on file a job application completed and signed by the individual receiving the letter of intent;
c. The facility must complete a criminal record check on the individual in accordance with Arkansas Code Annotated 2033201 et seq; and

d. The facility must retain copies of documents to verify compliance with these provisions as specified in Subsection E of this section.

1. Allowable costs for nursing assistant training reimbursement may include the costs for operation of an approved nursing assistant training program, the costs associated with a cooperative training effort with a neighboring approved training program (not claimed by that program) and the costs of having nursing assistants trained in an approved nonfacility based training program (paid by the facility). Nursing Assistant salaries and fringe benefits, including amounts paid while in training, and inservice/continuing education costs are not directly reimbursable but are included on the facility’s annual cost report and reimbursed through the per diem rates.

2. Reimbursement of nursing facility costs for training of nursing assistants must be allocated between Medicaid, Medicare and private pay patients.

   Medicaid may not be charged for that portion of these costs that are properly charged to Medicare or private pay activities. Therefore, the Office of Long Term Care will pay only the percentage of the total billed or maximum limit (see item D) for nursing assistant training based on the percentage of Medicaid recipients indicated on the billing. Facilities should continue to bill for the total amount of expenses incurred. The recipient information should reflect the midnight census for the last day of the month.

B. Allowable Costs

The following costs are allowable for nursing assistant training:

1. Nursing Assistant Transportation Expenses. The dollar amount of transportation expenses paid directly to or reimbursed for the NA to attend training or to travel to a NA competency evaluation site.

2. Books. The dollar amount spent for books purchased specifically for use in the NA training program.

3. Instructional Equipment. The dollar amount spent for equipment such as overhead projectors, VCRs, film projectors, etc. purchased specifically for use in the NA training program.

4. Instructional Videos. The dollar amount spent for instructional videos, video disc(s), films, etc. purchased specifically for use in the NA training program.

5. Other Training Materials. The dollar amount spent for other training materials purchased specifically for use in the NA training program.

6. Training Space. The dollar amount spent for the rent of classroom space (outside the facility), lab equipment, etc. specifically for the NA training program. Construction costs for training facilities will not be authorized.
7. Instructor Wages. The dollar amount of wages paid to the NA Instructor for training time, only while the NA Instructor is not included in the NF's staffing pattern providing nursing services.

Facilities should not include the time spent proctoring the skills test as training activity reported to OLTC for reimbursement. Information reported to OLTC on the DMS755 is strictly for training, not testing activity.

8. Instructor Fringe Benefits. The dollar amount paid for fringe benefits for the NA Instructor while training, only while the NA Instructor is not included in the NF's staffing pattern providing nursing services.

9. Nursing Assistant Consultant Training Fees. The dollar amount paid to a consultant trainer for NA training.

10. Consultant Reimbursable Expenses. The dollar amount paid to a consultant trainer for reimbursable expenses such as travel and lodging.

11. Instructor Workshop Fees. The amount of tuition and registration fees paid for NA training program instructors to attend instructor workshops. Instructor workshops must meet requirements established by the Office of Long Term Care to qualify for reimbursement and participants must be approved for attendance by the Office of Long Term Care.

12. Instructor Workshop Travel Expenses. Travel expenses and lodging paid directly or reimbursed for NA training program instructors to attend instructor workshops.

13. Nursing Assistant Training Tuition. The dollar amount spent on tuition for employees (and potential employees given a "letter of intent", dated within 12 months immediately preceding the date of the completion of training) to attend NA training in an approved non-facility training program. The actual amount of tuition paid for a student, up to a maximum of $480.00 per student, will be reimbursed as allowable cost. This amount is based on the provision of the minimum 90 hours training required by the Department.

C. Claims Submission

1. Claims for reimbursement of expenses incurred for NA training costs shall be submitted to the Office of Long Term Care on a monthly basis on form DMS 755. Claims can be submitted no earlier than the first day of the month following the expense month. The report forms will be designed to capture the above cost categories by use area in either formal "approved" or combined/cooperative training. Therefore, documentation of these costs should be accounted for in a manner consistent with these categories.

2. Claims must be submitted to the Office of Long Term Care within 30 calendar days following the end of the expense month. Claims not submitted timely or claims that are incomplete will not be accepted for payment and shall be returned to the facility. Corrected claims must be submitted within 15 calendar days of the date returned.
3. A claim for reimbursement may not be submitted for any month in which no students completed training. Unclaimed costs in this circumstance may be carried over to the month when students complete training and will still be subject to the $480.00 maximum cost limit per student (see item D Maximum Cost Limit).

4. All claims submitted must include a copy of each trainee’s Certificate of Completion from the training program and a copy of the OLTC issued CRC Determination Letter. In accordance with Section 203.1 of the Rules and Regulations for Conducting Criminal Record Checks for Employees of Long Term Care Facilities, the facility must complete the criminal record check for each trainee prior to conducting the nursing assistant training or prior to sponsoring the trainee through the "letter for intent to employ" provisions as specified in item A (2) and B (13) of this section.

5. Reimbursements are not allowed and shall be denied to facilities for the following:

   a. Individuals listed on the LTCF Employment Clearance Registry with a disqualification status due to a substantiated administrative finding of abuse, neglect, misappropriation of resident property or a disqualifying criminal record in accordance with A.C.A. 2033201 et seq.

   b. Individuals listed on the LTCF Employment Clearance Registry with an expired certification. These individuals are not required to be retrained and may retest in accordance with Section VII (D) (6) of these regulations.

   c. Individuals who, prior to training, did not complete a criminal record check in accordance with Arkansas Code Annotated 2033201 et seq.

6. All claim forms (DMS755) must be submitted with original signatures of the nursing facility Administrator or designee. "Copied" signatures will not be accepted.

D. Maximum Cost Limit

1. In efforts to establish proper and efficient administration of training costs reimbursements, a reasonable maximum cost limit shall be imposed. Based on analysis of nursing assistant training costs, $480.00 per student will be the maximum paid to facilities on their claims. This limit shall be imposed based on the number of students who finish the training program. Claims must show actual costs incurred and reimbursements will be made for actual costs but not to exceed the maximum limit of $480.00 per student who complete the training.

   2. Example: Claim form shows actual costs is $1250.00 with four students completing the course. As $1250.00 is less than $1920.00 (4 students x $480 = $ 1920 maximum) the actual costs will be reimbursed. If this example had only two students completing, the maximum would be $960.00 (2 students x $480) and the reimbursement would be capped at $960.00 rather than paying the full $1250.00 actual expenses.

E. Cost Reporting and Record Retention
1. NA training costs directly reimbursed by the Department of Health and Human Services shall be included in the nursing facility's annual Financial and Statistical Cost Report (FSR) and shall be reported as revenue offsets to NA training costs. Facilities must retain receipts/documentation of NA training costs submitted to the OLTC for reimbursement for a period of not less than five (5) years or until all audit findings are final. Any facility claiming reimbursement for costs not actually incurred or not properly documented will be required to provide restitution to the Department of Health and Human Services and will be subject to fines and/or prosecution as authorized by State and/or Federal Statutes.

**CALIFORNIA**

Downloaded January 2011

California regulations do not include specific content for nurse's aide training and competency.

**COLORADO**

Downloaded January 2011

4.2 DEPARTMENTS. Each department of the facility shall be under the direction of a person qualified by training, experience, and ability to direct effective services.

4.2.2 All persons assigned to direct resident care shall be prepared through formal education or on-the-job training in the principles, policies, procedures, and appropriate techniques of resident care. The facility shall provide educational programs for employees to be informed of new methods and techniques.

4.3 STAFF DEVELOPMENT COORDINATOR. The long-term care facility shall employ a staff development coordinator who shall be responsible for coordinating orientation, inservice, on-the-job training, and continuing education programs and for determining that staff have been properly trained and are implementing results of their training. The objective of this standard is that staff be appropriately trained in necessary aspects of resident care to carry out their job responsibilities.

4.3.1 The coordinator shall have experience in and ability to prepare and coordinate inservice education and training programs for adult learners in the area of geriatrics.

4.3.2 The facility shall employ a staff development coordinator for a sufficient amount of time to meet inservice, orientation, training and supervision needs of staff. The facility shall provide for appropriate staff follow-up.

4.3.4 The facility shall maintain attendance records with original signatures on inservice programs and course materials or outlines that staff who are unable to attend the program may review.
19-13-D8t. Chronic and convalescent nursing homes and rest homes with nursing supervision

... (I) Nurse's Aide Training and Employment

(1) On and after February 1, 1990, no person shall be employed for more than 120 days as a nurse's aide in a licensed chronic and convalescent nursing home or rest home with nursing supervision unless such person has successfully completed a training and competency evaluation program approved by the department and has been entered on the nurse's aide registry maintained by the department. No such facility shall employ such person as a nurse's aide without making inquiry to the registry pursuant to subdivision (2).

(A) Effective October 1, 2000, the commissioner shall adopt, and revise as necessary, a nurse's aide training program of not less than 100 hours and competency evaluation program for nurse's aides. The standard curriculum of the training program shall include, a minimum of seventy-five (75) hours including but not limited to, the following elements: Basic nursing skills, personal care skills, care of cognitively impaired residents, recognition of mental health and social service needs, basic restorative services and residents' rights presented in both lecture and clinical settings. An additional twenty-five (25) hours of the standard nurse's aide lecture and clinical setting curriculum shall include, but not be limited to specialized training in understanding and responding to physical, psychiatric, psychosocial and cognitive disorders. An individual enrolled in a nurse's aide training program prior to October 1, 2000, may complete such program in accordance with the requirements in effect at the time of enrollment. A trainee's successful completion of training shall be demonstrated by the trainee's performance, satisfactory to the nurse's aide primary training instructor, or the elements required by the curriculum. Each licensed chronic and convalescent nursing home and rest home with nursing supervision that elects to conduct a nurse's aide training program shall submit such information on its nurse's aide training program as the commissioner may require on forms provided by the department. The department may re-evaluate the facility's nurse's aide training program and competency evaluation program for sufficiency at any time.

(B) The commissioner shall adopt, and revise as necessary, a nurse's aide competency evaluation program including, at least, the following elements: basic nursing skills, personal care skills, care of cognitively impaired residents, recognition of mental health and social service needs, basic restorative services and residents' rights and the procedures for determination of competency which may include a standardized test.

(C) Any person employed as a nurse's aide by a chronic and convalescent nursing home or a rest home with nursing supervision as of January 30, 1990 shall be entered on the nurse's aide registry if they meet the requirements set forth in OBRA in accordance with the current Federal Omnibus Budget Reconciliation Act of 1987 (OBRA, 87) as it may be amended from time to time. The facility shall provide such person with the initial preparation necessary to successfully complete a competency evaluation program, as may
be required by OBRA '87. This competency evaluation program shall be approved and administered in accordance with this subsection.

(D) Qualifications of nurse's aide instructors

(i) The training of nurse's aides must be performed by or under the general supervision of a registered nurse who possesses a minimum of two years of nursing experience, at least one year of which must be in a chronic and convalescent nursing home or rest home with nursing supervision.

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

(iii) Qualified personnel from the health field may serve as trainers in the nurse's aide training program under the supervision of the nurse's aide primary training instructor provided they have a minimum of one year of experience in a facility for the elderly or chronically ill of any age within the immediately preceding five years. These health field personnel may include: Registered nurses, sanitarians, fire safety experts, nursing home administrators, gerontologists, psychologists, physical and occupational therapists, therapeutic recreation specialists, speech/language/hearing therapists. All trainers should be, where applicable, licensed, registered and/or certified in their field.

(iv) Licensed practical nurses, under the supervision of the nurse's aide primary training instructor, may serve as trainers in the nurse's aide training program provided the licensed practical nurse has two years experience in caring for the elderly or chronically ill of any age.

(v) The training of nurse's aides may be performed under the general supervision of the director of nurses. The director of nurses is prohibited from performing the actual training of nurse's aides.

(E) The State Department of Education and the Board of Trustees of Community-Technical Colleges may offer such training programs and competency evaluation programs in accordance with these regulations.

(F) In accordance with this subsection any person who has not yet satisfactorily completed training as provided for herein, and who is employed by a facility for a period of one-hundred-twenty days or less, as a nurse's aide may be utilized only to perform tasks for which such person has received training and demonstrated competence to the satisfaction of the employer and shall perform such tasks only under the supervision of licensed nursing personnel. Record of any such training and competence demonstration shall be maintained in the facility for the department's review for three years from the date of completion thereof. The employer may not use such person to satisfy staffing requirements as set forth in the Public Health Code.

(G) In accordance with this subsection a facility may use any person who has satisfactorily completed training, but has not yet satisfactorily completed the competency evaluation program as provided for herein, and who is employed by a facility for a period of 120 days or less as a nurse's aide to satisfy staffing requirements as set forth in the Public Health Code. Record of such training shall be maintained by the facility for the departments review for three years from the date of completion thereof.
(H) On and after February 1, 1990 any chronic and convalescent nursing home or rest home with nursing supervision that utilizes nurse’s aides from a placement agency or from a nursing pool shall develop a mechanism to verify that such nurse’s aide has been entered on the nurse’s aide registry maintained by the department in accordance with subdivision (2).

(2) The department shall establish and maintain a registry of nurse’s aides. Information in the nurse’s aide registry shall include but not be limited to: name, address, date of birth, social security number, training site and date of satisfactory completion. It shall also contain any final determination by the department, after a hearing conducted pursuant to Chapter 54 of the Connecticut General Statutes, relative to a complaint against a nurse’s aide, as well as any brief statement of such person disputing such findings, including resident neglect or abuse or misappropriation of resident property.

(3) If, since an individual’s most recent completion of a training and competency evaluation program, there has been a continuous period of twenty-four (24) consecutive months during none of which the individual performed nursing or nursing-related services for monetary compensation, such individual shall complete a new training and competency evaluation program, or a new competency evaluation program.

(4) Any person who successfully completes or has successfully completed prior to January 1, 1989 the state-sponsored Nurse Assistant Training Program provided through the State Department of Education or through the Connecticut Regional Community College system shall be deemed to have completed a nurse’s aide training and competency evaluation program approved by the commissioner in accordance with this subsection.

(5) Any person who has successfully completed a course or courses comprising not less than one-hundred hours of theoretical and clinical instruction in the fundamental skills of nursing in a practical nursing or registered nursing education program approved by the department with the advice and assistance of the State Board of Examiners for Nursing shall be deemed to have completed a nurse’s aide training program approved by the commissioner in accordance with this subsection, if the curriculum meets the minimum requirements as set forth in this subsection.

(6) The department shall, upon receipt of an application and such supporting documents as the commissioner may require, place on the registry a nurse’s aide who shows to the satisfaction of the department completion of a department approved:

(A) Nurse’s aide training program, and

(B) Competency Evaluation program.

(7) A nurse’s aide registered in another state or territory of the United States may be entered on the registry, provided the department is satisfied that such nurse’s aide has
completed a training and competency evaluation program equal to or better than that required for registration in this state as of the date the nurse's aide was first registered in another state or territory of the United States.

(8) Subject to the provisions of section 20-102ff of the Connecticut General Statutes, a registered nurse or licensed practical nurse licensed in a state other than Connecticut whose license has been verified by the chronic and convalescent nursing home or rest home with nursing supervision as in good standing in the state in which he or she is currently licensed, or a registered nurse trained in another country who has satisfied the certification requirements of the Commission on Graduates of Foreign Nursing Schools, may be utilized as a nurse’s aide in Connecticut for not more than a single one hundred-twenty (120) day period. Said licensed registered nurse or licensed practical nurse shall be deemed to have completed a nurse’s aide training and competency evaluation program approved by the commissioner in accordance with this section. The department shall, upon receipt of an application and such supporting documents as the commissioner may require, enter said licensed registered nurse or licensed practical nurse on the nurse’s aide registry.

DELWARE

3220 Training and Qualifications for Nursing Assistants and Certified Nursing Assistants.

2.0 General Training Requirements And Competency Test.

Each Nursing Assistant/Certified Nursing Assistant employed by any nursing facility either as contract/ agency or facility staff shall be required to meet the following:

2.1 An individual shall complete a nursing assistant training course approved by the Department on the recommendation of the CNA Training Curriculum Committee. The Committee shall consist of individuals with experience in the knowledge and skills required of CNAs.

2.2 Nursing Assistants are required to pass a competency test provided by the Department or by a contractor approved by the Department.

2.3 Nursing Assistants shall take the competency test within 30 days of completion of an approved program. Nursing assistants who fail to obtain a passing score may repeat the test two additional times. Nursing assistants who fail to obtain a passing score after testing three times must repeat the CNA training program before retaking the test. The certificate of completion of an approved program, a prerequisite to testing, must be dated within 24 months of the available testing date. Nursing assistants who are trained in a facility and are counted for staffing purposes pursuant to 16 Del.C. §1162(f) must pass the test within 90 days of completion of the facility program to continue to be counted in staffing calculations.
2.4 In order to qualify for recertification, a CNA must, during each 24 month certification period: (1) complete 24 hours of approved continuing education, and (2) perform at least 64 hours of nursing related services for pay under the supervision of a licensed nurse or physician. A CNA who does not perform at least 64 hours of nursing related services in a certification period or fails to complete the required continuing education must pass the competency test again. Nursing assistants who fail to obtain a passing score after testing three times must repeat the CNA training program before additional testing will be permitted.

2.5 A Certified Nursing Assistant trained and certified outside the State of Delaware in a program that equals or exceeds the federal nurse aide training program requirements in the Code of Federal Regulations §483.152 cannot work in Delaware without a Delaware certificate. Delaware certification is required prior to being employed as a CNA. The Department will grant reciprocity if the following conditions are met:

2.5.1 The CNA must have a current certificate from the jurisdiction where he or she currently practices, except that candidates from the State of Maryland must hold a current Geriatric Nursing Assistant certificate.

2.5.2 The CNA must have 3 months of full-time experience as a CNA performing nursing related services for pay under the supervision of a licensed nurse or physician, or have completed a training and competency evaluation program with the number of hours at least equal to that required by the State of Delaware.

2.5.3 The CNA must be in good standing in the jurisdiction where he/she is currently certified.

2.5.4 The CNA submits $30 to the Department to cover the costs associated with granting the reciprocity.

2.6 Nursing students who are currently enrolled in a nursing program and have satisfactorily completed a Fundamentals/Basic Nursing course with a 75 hour clinical component in a long term care setting will be deemed to meet the training requirements. These individuals will be approved to take the competency test upon submission of a letter from their school of nursing attesting to current enrollment status and satisfactory course completion as described.

2.7 Nursing students who have graduated from an RN or LPN program within 24 months prior to application for certification are deemed qualified to meet the Department's nurse aide training and competency evaluation program requirements and are eligible for certification upon submission of a sealed copy of their diploma. Individuals who have graduated from an RN or LPN program more than 24 months prior to application for certification are deemed qualified to meet the Department's nurse aide training program requirements and are eligible to take the competency test upon submission of a sealed copy of their diploma.

2.8 For the purpose of calculating minimum staffing levels, any individual who has completed all of the classroom training and half of the clinical training in a facility
sponsored training program may be considered as a member of such facility’s staff while undergoing the last 37.5 hours of clinical training at such facility.

2.9 A nursing assistant who is employed by, or who has received an offer of employment from, a federally certified nursing facility on the date on which the aide begins a nurse aide training and competency evaluation program may not be charged for any portion of the program including tuition, any tests taken and fees for textbooks or other required course materials.

2.10 If a Certified Nursing Assistant 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 federally certified nursing facility not later than 12 months after completing a nurse aide training and competency evaluation program, the federally certified nursing facility shall reimburse all documented personally incurred costs in completing the program. Facilities shall accept as documentation canceled checks, paid receipts, written verification from a training program or other written evidence which reasonably establishes the CNA’s personally incurred costs. Such costs include tuition, tests taken and fees for textbooks or other required course materials. Such costs shall be reimbursed in equal quarterly payments with full reimbursement to coincide with the CNA’s completion of one year of employment including the orientation period.

2.11 Any nursing facility which reimburses a Certified Nursing Assistant for documented personally incurred costs of a nurse aide training and competency evaluation program shall notify the Division of Long Term Care Residents Protection of such reimbursement. Notice of such reimbursement shall be entered in the CNA Registry database and information regarding such reimbursement shall be available to facilities upon request.

3.0 CNA Training Program Requirements

3.1 General. Program approval must be obtained from the Division prior to operating a CNA program. To obtain approval, the curriculum content for the Certified Nursing Assistant training programs shall meet each of the following requirements:

3.1.1 The curriculum shall include material that will provide a basic level of both knowledge and demonstrable skills for each individual completing the program.

3.1.2 The program shall be a minimum of 150 hours in length, consisting of: (1) classroom instruction including laboratory time of 75 hours, and (2) clinical skills training of 75 hours in a long term care setting. Additional hours may be added in either of these areas or both.

3.1.3 Classroom instruction and demonstrated proficiency in each skill shall be completed prior to students’ performing direct resident care. Programs shall maintain documentation of required skills that each student has successfully demonstrated to the RN instructor.

3.1.4 The training of nursing assistant must be done by or under the general supervision of a RN who possesses a minimum of two years of nursing experience, at least 1 year of which must be in the provision of long term care facility services. The required one year of full-time (35-hours per week) long term care experience can be met by work experience in, or supervision or teaching of students in a certified skilled nursing facility or nursing facility defined in 42 CFR § 483.5(a).
3.1.5 All instructors (classroom and clinical) must have completed a course in teaching adults or have experience teaching adults or in the case of high school programs, be a state licensed high school teacher. Instructors do not have to have one year of long term care experience if the school has identified a RN supervisor as described in 3.1.4. The RN supervisor shall be available to all instructors, shall assist in developing lesson plans based on experience in taking care of nursing home residents, shall periodically ensure and document that instructors are operating effectively and that the program is operating in accordance with all state and federal regulations. Classroom ratios of student to instructor shall not exceed 24:1.

3.1.6 LPN instructors must have at least three years of nursing experience and must work under the general supervision of a RN.

3.1.7 Clinical instructors shall provide general supervision of students at all times during clinical instruction. Clinical instructors shall provide direct supervision to students in the clinical setting while the student is learning a competency until proficiency has been both demonstrated and documented. Clinical and laboratory ratios of student to Registered Nurse or Licensed Practical Nurse instructor shall not exceed 8:1.

3.1.8 Other personnel from the health profession may supplement the instructor, including but not limited to, registered nurses, licensed practical/vocational nurses, pharmacists, dieticians, social workers, sanitarians, fire safety experts, nursing home administrators, gerontologists, psychologists, physical and occupational therapists, activity specialist, speech/language/hearing therapists and resident rights experts. Supplemental personnel must have at least 1 year of experience in their respective fields.

3.1.9 Programs must notify the Division in writing (which may be faxed) at least 21 days prior to implementing permanent and/or substantial changes to the program or the program’s personnel. Examples of substantial changes include, but are not limited to, instructor(s), clinical or classroom site, major revision of course structure, change in textbook. The 21 day time period may be waived by the Division for good cause shown.

3.2 Equipment All programs shall have available at a minimum the following equipment:

3.2.1 Audio/Visual (Overhead projector and/or TV with VCR)
3.2.2 Teaching Mannequin, Adult, for catheter and perineal care
3.2.3 Hospital Bed
3.2.4 Bedpan/Urinal
3.2.5 Bedside commode
3.2.6 Wheelchair
3.2.7 Scale
3.2.8 Overbed Table
3.2.9 Sphygmomanometer
3.2.10 Stethoscope
3.2.11 Resident Gowns
3.2.12 Thermometers
3.2.13 Crutches
3.2.14 Canes (Variety)
3.2.15 Walker
3.2.16 Miscellaneous Supplies: i.e., Bandages, Compresses, Heating Pad, Hearing Aid, Dentures, Toothbrushes, Razors.
3.2.17 Foley Catheter Drainage Bag
3.2.18 Hydraulic Lift
3.2.19 Adaptive eating utensils/equipment

3.3 Curriculum Content

The following material identifies the minimum competencies that the curriculum content shall develop. Nursing assistants being prepared to work in skilled, intermediate, or assisted living facilities either as direct or contract staff shall master each competency. All demonstrable competencies for each student must be documented as mastered by the RN instructor in order for a student to qualify as successfully having completed that section of programming.

3.3.1 The Nursing Assistant Role And Function. Introduces the characteristics of an effective nursing assistant: personal attributes, on-the-job conduct, appearance, grooming, health and ethical behavior. Also presented are the responsibilities of the nursing assistant as a member of the resident care team. Legal aspects of resident care and resident rights are presented. Relevant Federal and State statutes are also reviewed. Competencies:

3.3.1.1 Function as a nursing assistant within the standards described below:

3.3.1.1.1 Define the role and functions of the nursing assistant and provide awareness of the legal limitations of being a nursing assistant.

3.3.1.1.2 Recognize the responsibilities of the nursing assistant as a member of the health care team. Understand the relevant State and Federal regulations for long term care and legalities of reporting and documenting incidents and accidents.

3.3.1.1.3 Understand the role of Long Term Care advocates, investigators and surveyors.

3.3.1.1.4 Identify the “chain of command” in the organizational structure of the health care agency.
3.3.1.5 Maintain personal hygiene and exhibit dress practices which meet professional standards.

3.3.1.6 Recognize the importance of punctuality and commitment to the job.

3.3.1.7 Differentiate between ethical and unethical behavior on the job.

3.3.1.8 Understand the role, responsibility and functional limitations of the nursing assistant.

3.3.1.2 Demonstrate behavior that maintains resident’s rights.

3.3.1.2.1 Provide privacy and maintenance of confidentiality.

3.3.1.2.2 Promote the resident’s right to make personal choices to accommodate individual needs.

3.3.1.2.3 Give assistance in resolving grievances.

3.3.1.2.4 Provide needed assistance in going to and participating in resident and family groups and other activities.

3.3.1.2.5 Maintain care and security of resident’s personal possessions as per the resident’s desires.

3.3.1.2.6 Provide care which ensures that the residents are free from abuse, mistreatment, neglect or financial exploitation and report any instances of such poor care to the Division of Long Term Care Residents Protection. Discuss the psychological impact of abuse, neglect, mistreatment, misappropriation of property of residents and/or financial exploitation.

3.3.1.2.7 Maintain the resident’s environment and care through appropriate nursing assistant behavior so as to keep the resident free from physical and chemical restraints.

3.3.1.2.8 Discuss the potential negative outcomes of physical restraints, including side rails.

3.3.2 Environmental Needs Of The Resident

Key Concepts: Introduces the nursing assistant to the need to keep residents safe from injury and infection in the long-term care setting. The nursing assistant is taught why and how to use infection control and isolation techniques. Safety through prevention of fires and accidents, and emergency procedures for fire and other disasters are presented.

Competencies:

3.3.2.1 Apply the basic principles of infection control.

3.3.2.1.1 Identify how diseases are transmitted and understand concepts of infection prevention.

3.3.2.1.2 Demonstrate proper hand washing technique.

3.3.2.1.3 Demonstrate appropriate aseptic techniques in the performance of normal duties and understand the role of basic cleaning, disinfecting, and sterilization tasks.
3.3.2.1.4 Demonstrate proper isolation and safety techniques in the care of the infectious resident and proper handling and disposal of contaminated materials.

3.3.2.2 Assist with basic emergency procedures.

3.3.2.2.1 Follow safety and emergency procedures.

3.3.2.2.2 Identify safety measures that prevent accidents to residents.

3.3.2.2.3 Recognize signs when a resident is choking or may have an obstructed airway.

3.3.2.2.4 Assist with clearing obstructed airway.

3.3.2.2.5 Call for help when encountering convulsive disorders, loss of consciousness, shock, hemorrhage, and assist the resident until professional help arrives.

3.3.2.2.6 Follow disaster procedures.

3.3.2.2.7 Report emergencies accurately and immediately.

3.3.2.2.8 Identify potential fire hazards.

3.3.2.3 Provide a safe, clean environment.

3.3.2.3.1 Identify the resident’s need for a clean and comfortable environment. Describe types of common accidents in the nursing home and their preventive measures. Be aware of the impact of environmental factors on the resident in all areas including but not limited to light and noise levels.

3.3.2.3.2 Report unsafe conditions to appropriate supervisor. Use the nurse call system effectively.

3.3.2.3.3 Report evidence of pests to appropriate supervisory personnel.

3.3.2.3.4 Report nonfunctioning equipment to appropriate supervisory/charge personnel.

3.3.2.3.5 Prepare soiled linen for laundry.

3.3.2.3.6 Make arrangement of furniture and equipment for the resident’s convenience and to keep environment safe.

3.3.3 Psychosocial Needs Of The Resident

Key Concepts: Focus is placed on the diverse social, emotional, recreational and spiritual needs of residents in a long term care setting. The curriculum shall describe some of the physical, mental, and emotional changes associated with aging and institutionalization, and present ways in which the nursing assistant may effectively communicate with residents and their families. Competencies:

3.3.3.1 Demonstrate basic skills by identifying the psychosocial characteristics of the populations being served in the nursing facility including persons with mental retardation,
mental illness and persons with dementia, Alzheimer’s disease, developmental disabilities and other related disorders.

3.3.3.1.1 Indicate the ways to meet the resident’s basic human needs for life and mental well being.

3.3.3.1.2 Modify his/her own behavior in response to resident’s behavior. Respect the resident’s beliefs recognizing cultural differences in holidays, spirituality, clothing, foods and medical treatments.

3.3.3.1.3 Identify methods to ensure that the resident may fulfill his/her maximum potential within the normal aging process.

3.3.3.1.4 Provide training in, and the opportunity for, self-care according to the resident’s capabilities.

3.3.3.1.5 Demonstrate principles of behavior management by reinforcing appropriate behavior and reducing or eliminating inappropriate behavior. For persons with dementia, recognize that cognitive functions are impaired, determine what the resident is trying to communicate and respond appropriately.

3.3.3.1.6 Demonstrate skills which allow the resident to make personal choices and promote the resident’s dignity.

3.3.3.1.7 Utilize resident’s family as a source of emotional support and recognize the family’s need for emotional support.

3.3.3.1.8 Recognize how age, illness and disability affect memory, sexuality, mood and behavior, including wandering.

3.3.3.1.9 Recognize aggressive behavior and learn management techniques. Recognize that certain behaviors, such as wandering, are a form of communication. Learn to apply strategies to promote safe behaviors.

3.3.3.1.10 Discuss how appropriate activities are beneficial to residents with cognitive impairments.

3.3.3.1.11 Recognize and utilize augmentative communication devices and methods of nonverbal communication.

3.3.3.2 Demonstrate appropriate and effective communication skills.

3.3.3.2.1 Demonstrate effective verbal and nonverbal communications in keeping with the nursing assistant’s role with residents, their families and staff.

3.3.3.2.2 Observe by using the senses of sight, hearing, touch and smell to report resident behavior to the licensed nurse.

3.3.3.2.3 Document observations using appropriate terms and participate in the care planning process.
3.3.3.2.4 Recognize the importance of maintaining the resident’s record accurately and completely.

3.3.3.2.5 Communicate with residents according to their state of development. Identify barriers to effective communication. Recognize the importance of listening to residents.

3.3.3.2.6 Participate in sensitivity training in order to understand needs of residents with physical or cognitive impairments.

3.3.4 Physical Needs of the Resident

Key Concepts: Presents the basic skills which nursing assistants use in the physical care of residents. The nursing assistant will learn basic facts about body systems and what is needed to promote good functioning. The nursing assistant will learn to provide physical care to residents safely and to keep the resident nourished, hydrated, clean, dry and comfortable. The nursing assistant will also learn to make observations regarding residents and to record and/or report observations. The nursing assistant will be introduced to the basics of range of motion and learn to integrate range of motion into routine personal care activities. Competencies:

3.3.4.1 Apply the principles of basic nutrition in the preparation and serving of meals.

3.3.4.1.1 Incorporate principles of nutrition and hydration in assisting residents at meals.

3.3.4.1.2 Understand basic physiology of nutrition and hydration.

3.3.4.1.3 Understand basic physiology of malnutrition and dehydration.

3.3.4.1.4 Identify risk factors for poor nutritional status in the elderly:

3.3.4.1.4.1 compromised skin integrity

3.3.4.1.4.2 underweight or overweight

3.3.4.1.4.3 therapeutic or mechanically altered diet

3.3.4.1.4.4 poor dental status

3.3.4.1.4.5 drug-nutrient interactions

3.3.4.1.4.6 acute/chronic disease

3.3.4.1.4.7 depression or confusion

3.3.4.1.4.8 decreased appetite

3.3.4.1.5 Recognize how the aging process affects digestion.

3.3.4.1.6 Accurately calculate and document meal intake and report inadequate intake or changes in normal intake.

3.3.4.1.7 Accurately calculate and document fluid intake and report inadequate intake or changes in normal intake.
3.3.4.1.8 Recognize and report signs and symptoms of malnutrition and dehydration.

3.3.4.1.9 Understand concepts of therapeutic diets including dysphagia diets and the related risks associated with dysphagia including aspiration and aspiration pneumonia.

3.3.4.1.10 Incorporate food service principles into meal delivery including:

3.3.4.1.10.1 distributing meals as quickly as possible when they arrive from the kitchen to maintain food temperature.

3.3.4.1.10.2 assisting residents with meal set-up if needed (i.e., opening packets or cartons, buttering bread if desired).

3.3.4.1.10.3 serving meals to all residents seated together at the same time.

3.3.4.1.10.4 offering appropriate substitutions if the residents don't like what they have received.

3.3.4.1.11 Utilize tray card or other mechanism to ensure the resident is served his/her prescribed diet and identify who to notify if a resident receives the wrong diet.

3.3.4.1.12 Demonstrate understanding of how to read menus.

3.3.4.1.13 Assist residents who are unable to feed themselves.

3.3.4.1.14 Demonstrate techniques for feeding someone who:

3.3.4.1.14.1 bites down on utensils

3.3.4.1.14.2 can’t or won’t chew

3.3.4.1.14.3 holds food in mouth

3.3.4.1.14.4 pockets food in cheek

3.3.4.1.14.5 has poor lip closure

3.3.4.1.14.6 has missing or no teeth

3.3.4.1.14.7 has ill fitting dentures

3.3.4.1.14.8 has a protruding tongue or tongue thrust

3.3.4.1.14.9 will not open mouth

3.3.4.1.15 Demonstrate proper positioning of residents at mealtime.

3.3.4.1.16 Demonstrate skills for feeding residents who:

3.3.4.1.16.1 are cognitively impaired

3.3.4.1.16.2 have swallowing difficulty

3.3.4.1.16.3 have sensory problems
3.3.4.16.4 have physical deformities

3.3.4.17 Demonstrate positioning techniques for residents who:

3.3.4.17.1 have poor sitting balance
3.3.4.17.2 must take meals in bed
3.3.4.17.3 fall forward when seated
3.3.4.17.4 lean to one side
3.3.4.17.5 have poor neck control
3.3.4.17.6 have physical deformities

3.3.4.18 Demonstrate use of assistive devices.

3.3.4.19 Identify signs and symptoms that require alerting a nurse, including:

3.3.4.19.1 difficulty swallowing or chewing
3.3.4.19.2 coughing when swallowing liquids
3.3.4.19.3 refusal of meal
3.3.4.19.4 choking on food or fluids
3.3.4.19.5 excessive drooling
3.3.4.19.6 vomiting while eating
3.3.4.19.7 significant change in vital signs

3.3.4.20 Incorporate principles of a pleasant dining environment when assisting residents at mealtime including ensuring adequate lighting and eliminating background noise.

3.3.4.21 Demonstrate positive interaction with residents recognizing individual resident needs.

3.3.4.22 Ensure residents are dressed appropriately.

3.3.4.23 Allow residents to eat at their own pace.

3.3.4.24 Encourage independence and assist as needed.

3.3.4.25 Recognize and report as appropriate the risk factors and signs and symptoms of malnutrition, dehydration and fluid overload.

3.3.4.26 Accurately calculate and document intake and output including meal percentages and fluids.

3.3.4.2 Demonstrate understanding of basic anatomy and physiology in the following areas:
3.3.4.2.1 Respiratory system
3.3.4.2.2 Circulatory system
3.3.4.2.3 Digestive system
3.3.4.2.4 Urinary system
3.3.4.2.5 Musculoskeletal system
3.3.4.2.6 Endocrine system
3.3.4.2.7 Nervous system
3.3.4.2.8 Integumentary system
3.3.4.2.9 Sensory system
3.3.4.2.10 Reproductive system

3.3.4.3 Recognize abnormal signs and symptoms of common illness and conditions. Examples are:

3.3.4.3.1 Respiratory infection – Report coughing, sneezing, elevated temperatures.

3.3.4.3.2 Diabetes – Report excessive thirst, frequent urination, change in urine output, drowsiness, excessive perspiration and headache. Understand the healing process as it relates to diabetes.

3.3.4.3.3 Urinary tract infection – Report frequent urination, burning or pain on urination, elevated temperature, change in amount and color of urine, blood or sediment in urine and strong odors.

3.3.4.3.4 Cardiovascular conditions – Report shortness of breath, chest pain, blue color to lips, indigestion, sweating, change in pulse, edema of the feet or legs.

3.3.4.3.5 Cerebral vascular conditions – Report dizziness, changes in vision such as seeing double, change in blood pressure, numbness in any part of the body, or inability to move arm or leg.

3.3.4.3.6 Skin conditions – Report break in skin, discoloration such as redness, black and blue areas, rash, itching.

3.3.4.3.7 Gastrointestinal conditions – Report nausea, vomiting, pain, inability to swallow, bowel movement changes such as color, diarrhea, and constipation.

3.3.4.3.8 Infectious diseases.

3.3.4.4 Provide personal care and basic nursing skills as directed by the licensed nurse in the appropriate licensed entity.

3.3.4.4.1 Provide for resident’s privacy and dignity when providing personal care.
3.3.4.4.2 Assist the resident to dress and undress.

3.3.4.4.3 Assist the resident with bathing and personal grooming.

3.3.4.4.4 Observe and report condition of the skin.

3.3.4.4.5 Assist the resident with oral hygiene, including prosthetic devices.

3.3.4.4.6 Administer oral hygiene for the unconscious resident.

3.3.4.4.7 Demonstrate measures to prevent decubitus ulcers, i.e., positioning, turning and applying heel and elbow protectors.

3.3.4.4.8 Assist the resident in using the bathroom. Understand consequences of not assisting resident to the bathroom.

3.3.4.4.9 Assist the resident in using a bedside commode, urinal and bedpan.

3.3.4.4.10 Demonstrate proper bed making procedures for occupied and unoccupied beds.

3.3.4.4.11 Feed residents oral table foods in an appropriate manner. Demonstrate proper positioning of residents who receive tube feeding.

3.3.4.4.12 Distribute nourishment and water.

3.3.4.4.13 Accurately measure and record with a variety of commonly used devices:

3.3.4.4.13.1 Blood pressure

3.3.4.4.13.2 Height and weight

3.3.4.4.13.3 Temperature, pulse, respiration

3.3.4.4.14 Assist the resident with shaving.

3.3.4.4.15 Shampoo and groom hair.

3.3.4.4.16 Provide basic care of toenails unless medically contraindicated.

3.3.4.4.17 Provide basic care of fingernails unless medically contraindicated.

3.3.4.4.18 Demonstrate proper catheter care.

3.3.4.4.19 Demonstrate proper perineal care.

3.3.4.4.20 Assist the licensed nurse with a physical examination.

3.3.4.4.21 Apply a non-sterile dressing properly.

3.3.4.4.22 Apply non-sterile compresses and soaks properly and safely.

3.3.4.4.23 Apply cold and/or heat applications properly and safely.

3.3.4.4.24 Demonstrate how to properly apply elastic stockings.
3.3.4.4.25 Demonstrate proper application of physical restraints including side rails.

3.3.4.5 Demonstrate skills which incorporate principles of restorative care under the direction of a licensed nurse.

3.3.4.5.1 Assist the resident in bowel and bladder training.

3.3.4.5.2 Assist the resident in activities of daily living and encourage self-help activities.

3.3.4.5.3 Assist the resident with ambulation aids, i.e., cane, quadcane, walker, crutches, wheelchair and transfer aids, i.e., hydraulic lifts.

3.3.4.5.4 Perform range of motion exercise as instructed by the physical therapist or the licensed nurse.

3.3.4.5.5 Assist in care and use of prosthetic devices.

3.3.4.5.6 Assist the resident while using proper body mechanics.

3.3.4.5.7 Assist the resident with dangling, standing and walking.

3.3.4.5.8 Demonstrate proper turning and/or positioning both in bed and in a chair.

3.3.4.5.9 Demonstrate proper technique of transferring resident from low and high bed to chair.

3.3.4.6 Demonstrate safety and emergency procedures including proficiency in the Heimlich maneuver and certification in cardiopulmonary resuscitation (CPR).

3.3.4.7 Provide care to resident when death is imminent.

3.3.4.7.1 Discuss own feelings and attitude about death.

3.3.4.7.2 Explain how culture and religion influence a person’s attitude toward death.

3.3.4.7.3 Discuss the role of the CNA, the resident’s family and significant others involved in the dying process.

3.3.4.7.4 Discuss the stages of death and dying and the role of the nurse assistant.

3.3.4.7.5 Provide care, if appropriate, to the resident’s body after death.

4.0 Mandatory Orientation Period

4.1 Skilled And Intermediate Care Facilities

4.1.1 General Requirements

4.1.1.1 All Nursing Assistants hired to work in a skilled or intermediate care facility, after completing 150 hours of training, shall undergo a minimum of 80 hours of orientation at least 40 of which shall be clinical. An exception to this requirement is that any Nursing Assistant who has undergone 150 hours of training, sponsored by the facility where the
Nursing Assistant will be employed immediately thereafter, shall only be required to complete additional facility specific orientation of 40 hours in the same facility.

4.1.1.2 All Certified Nursing Assistants hired to work in a skilled or intermediate care facility shall undergo a minimum of 80 hours of orientation; at least 40 of which shall be clinical.

4.1.1.3 While undergoing orientation, Nursing Assistants shall have direct physical contact with residents only while under the visual observation of a Certified Nursing Assistant or licensed nurse employed by the facility.

4.1.1.4 Any Certified Nursing Assistant or Nursing Assistant undergoing orientation may be considered a facility employee for purposes of satisfying the minimum facility staffing requirements.

4.1.2 Orientation Program Requirements

4.1.2.1 The mandatory orientation program shall include but is not limited to a review and written instruction on the following material by a licensed nurse:

4.1.2.1.1 Tour of the facility and assigned residents’ rooms
4.1.2.1.2 Fire and disaster plans
4.1.2.1.3 Emergency equipment and supplies
4.1.2.1.4 Communication (including the facility chain of command) and documentation requirements
4.1.2.1.5 Process for reporting emergencies, change of condition and shift report
4.1.2.1.6 Operation of facility equipment and supplies, including scales, lifts, special beds and tubs.
4.1.2.1.7 Review of the plan of care for each assigned resident including:
4.1.2.1.7.1 ADL/personal care needs
4.1.2.1.7.2 Nutrition, hydration and feeding techniques and time schedules
4.1.2.1.7.3 Bowel and bladder training programs
4.1.2.1.7.4 Infection control procedures
4.1.2.1.7.5 Safety needs
4.1.2.1.7.5.1 Role and function of the CNA/NA
4.1.2.1.7.5.2 Resident rights/abuse reporting
4.1.2.1.7.5.3 Safety and body mechanics: transfer techniques
4.1.2.1.7.5.4 Vital signs

4.1.2.1.7.5.5 Psychosocial needs

4.1.2.1.7.5.6 Facility policies and procedures

4.1.1.2 Nursing Assistants shall satisfactorily demonstrate competency in clinical skills including:

4.1.1.2.1 Taking and recording vital signs

4.1.1.2.2 Measuring and recording height and weight

4.1.1.2.3 Handwashing and infection control techniques

4.1.1.2.4 Caring for the resident’s environment

4.1.1.2.5 Bathing and skin care, including foot and nail care

4.1.1.2.6 Grooming and mouth care, including denture care

4.1.1.2.7 Dressing

4.1.1.2.8 Toileting, perineal and catheter care

4.1.1.2.9 Assisting with eating and hydration

4.1.1.2.10 Proper feeding techniques

4.1.1.2.11 Positioning, turning and transfers

4.1.1.2.12 Range of motion

4.1.1.2.13 Bowel and bladder training

4.1.1.2.14 Care and use of prosthetic and orthotic devices

4.1.1.2.15 Assisting with ambulation

4.1.1.2.16 Measuring intake and output

4.1.1.2.17 Use of elastic stockings, heel and ankle protectors

4.1.1.2.18 Bedmaking skills

5.0 Voluntary Senior Certified Nursing Assistant Certification

5.1 Training Requirements and Competency Test

Any Certified Nursing Assistant may pursue designation as a Senior Certified Nursing Assistant and shall be so designated if such individual meets the following minimum requirements:
5.1.1 Has been a Certified Nursing Assistant for a minimum of three years, in good standing with no adverse findings entered on the Nurse Aide Registry;

5.1.2 Has successfully completed an additional 50 hours of advanced training in a program approved by the Department;

5.1.3 Has passed a competency test provided by the Department or by a contractor approved by the Department.

5.2 Voluntary Senior CNA Curriculum

The Senior CNA program must meet the same requirements as those specified in Section 2 of these regulations in terms of classroom ratios of students to instructors. The Senior CNA curriculum must meet the following minimum course content, which will provide an advanced level of knowledge and demonstrable skills. All demonstrable competencies shall be documented by the RN instructor.

5.2.1 Leadership Training And Mentoring Skills

Key Concepts: Senior Certified Nursing Assistants will learn how to teach new Nursing Assistants standards of care. Senior CNAs will learn how to be a role model and preceptor for new Nursing Assistants and CNAs. Senior CNAs will learn how prepare assignments, conduct team meetings and resolve conflicts. Competencies: Function effectively as a team leader and mentor/preceptor within the facility.

5.2.1.1 Define the role and functions of an effective team leader and mentor.

5.2.1.2 Identify principles of adult learning.

5.2.1.3 Recognize various learning styles and communication barriers.

5.2.1.4 Assess learner knowledge.

5.2.1.5 Reserved

5.2.1.6 Demonstrate effective communication techniques.

5.2.1.7 Recognize the importance of teamwork.

5.2.1.8 Actively participate in resident care plan and team meetings.

5.2.1.9 Identify strategies for conflict management.

5.2.1.10 Learn how to prepare assignments, assist with scheduling and other administrative duties.

5.2.2 Dementia Training

Key Concepts: The senior CNA will gain greater knowledge of Alzheimer’s Disease and related dementias. The senior CNA will gain the skills necessary to effectively care for residents exhibiting signs and symptoms of dementia. The senior CNA will act as a role model and resource person for other CNAs. Competencies: Demonstrate appropriate skills
and techniques necessary to provide care to residents exhibiting signs and symptoms of dementia.

5.2.2.1 Recognize signs and symptoms of Alzheimer’s Disease and related disorders.

5.2.2.2 Identify types of dementias.

5.2.2.3 Discuss methods for managing difficult behavior.

5.2.2.4 Demonstrate effective communication techniques.

5.2.2.5 Recognize specific issues that arise in providing care to persons with Alzheimer’s Disease and other memory loss conditions and appropriate interventions for dealing with these problems including, but not limited to, agitation, combativeness, sundown syndrome, wandering.

5.2.3 Advanced Geriatric Nursing Assistant Training

Key Concepts: The senior CNA will gain greater knowledge of anatomy and physiology with emphasis on the effects of aging. The senior CNA will effectively carry out restorative nursing skills as specified in the resident’s plan of care.

Competencies:

5.2.3.1 Verbalize understanding of anatomy, physiology and pathophysiology of common disorders of the elderly.

5.2.3.1.1 Describe the effects of aging on the various organs and systems within the body.

5.2.3.1.2 Describe signs and symptoms of common disorders.

5.2.3.1.3 Describe the pathophysiology of common disorders.

5.2.3.1.4 Identify measures to assist residents with common medical problems (e.g., promoting oxygenation in residents with breathing problems).

5.2.3.1.5 Observe, report and document condition changes using appropriate medical terminology.

5.2.3.1.6 Recognize basic medical emergencies and how to respond appropriately.

5.2.3.2 Maintain or improve resident mobility and the resident’s ability to perform activities of daily living. Understand the reasons for rehabilitation (physiologically), reasons for, and benefits of Restorative Nursing and be able to demonstrate the same.

5.2.3.2.1 Assist the resident with exercise routine as specified in his/her care plan.

5.2.3.2.2 Carry out special rehabilitation procedures as ordered including working with the visually impaired, special feeding skills/devices, splints, ambulatory devices and prostheses.

5.2.3.2.3 Identify ways to prevent contractures.

5.2.3.2.4 Effectively communicate with the Rehabilitation Department.
6.0 Train-the-trainer Program Requirements

6.1 Each train-the-trainer program shall meet the following minimum requirements:

6.1.1 Training Course Content

6.1.1.1 Role of Trainer

6.1.1.2 Communication techniques

6.1.1.3 Demonstration skills

6.1.1.4 Teaching a process

6.1.1.5 Teaching techniques

6.1.1.6 Training techniques

6.1.1.7 Developing a formal training plan

6.1.2 Course Management Information

6.2.1.1 Training time shall consist of sixteen minimum hours.

6.2.1.2 The train-the-trainer instructor must have formal educational preparation or experience with skills of adult learning. Or in the case of High School Programs be a state-licensed high school teacher.

3211 NURSING PERSONNEL

3211.9 A facility shall not employ an individual, other than a certified nurse aide, as a nurse aide unless that person is enrolled and actively participating in a training and competency evaluation program approved by the District.

3211.10 A facility shall not employ an individual, other than a certified nurse aide, as a nurse aide if that person has been employed as a nurse aide for six (6) of the immediately preceding twelve (12) months and he or she has not completed a training and competency evaluation program approved by the District.

3211.11 The facility shall provide regular performance review and regular in-service education to ensure that individuals employed as nurse aides are competent to perform services as nurse aides.

3211.12 The facility shall ensure that nurse aides, including certified nurse aides, are competent in those skills necessary to care for residents’ needs, as identified in the residents’ individualized assessments and plans of care.
400.141 Administration and management of nursing home facilities.

...(2) Facilities that have been awarded a Gold Seal under the program established in s. 400.235 may develop a plan to provide certified nursing assistant training as prescribed by federal regulations and state rules and may apply to the agency for approval of their program.

400.211 Persons employed as nursing assistants; certification requirement.

(1) To serve as a nursing assistant in any nursing home, a person must be certified as a nursing assistant under part II of chapter 464, unless the person is a registered nurse or practical nurse licensed in accordance with part I of chapter 464 or an applicant for such licensure who is permitted to practice nursing in accordance with rules adopted by the Board of Nursing pursuant to part I of chapter 464.

(2) The following categories of persons who are not certified as nursing assistants under part II of chapter 464 may be employed by a nursing facility for a period of 4 months:

(a) Persons who are enrolled in, or have completed, a state-approved nursing assistant program;

(b) Persons who have been positively verified as actively certified and on the registry in another state with no findings of abuse, neglect, or exploitation in that state; or

(c) Persons who have preliminarily passed the state’s certification exam.

The certification requirement must be met within 4 months after initial employment as a nursing assistant in a licensed nursing facility.

(3) Nursing homes shall require persons seeking employment as a certified nursing assistant to submit an employment history to the facility. The facility shall verify the employment history unless, through diligent efforts, such verification is not possible. There shall be no monetary liability on the part of, and no cause of action for damages shall arise against, a former employer who reasonably and in good faith communicates his or her honest opinion about a former employee’s job performance.

400.23 Rules; evaluation and deficiencies; licensure status.

...(3) (c) Licensed practical nurses licensed under chapter 464 who are providing nursing services in nursing home facilities under this part may supervise the activities of other licensed practical nurses, certified nursing assistants, and other unlicensed personnel providing services in such facilities in accordance with rules adopted by the Board of Nursing.
464.201 Definitions.

--As used in this part, the term:
(1) "Approved training program" means:
(a) A course of training conducted by a public sector or private sector educational center licensed by the Department of Education to implement the basic curriculum for nursing assistants which is approved by the Department of Education. Beginning October 1, 2000, the board shall assume responsibility for approval of training programs under this paragraph.
(b) A training program operated under s. 400.141.
(2) "Board" means the Board of Nursing.
(3) "Certified nursing assistant" means a person who meets the qualifications specified in this part and who is certified by the board as a certified nursing assistant.
(4) "Department" means the Department of Health.
(5) "Practice of a certified nursing assistant" means providing care and assisting persons with tasks relating to the activities of daily living. Such tasks are those associated with personal care, maintaining mobility, nutrition and hydration, toileting and elimination, assistive devices, safety and cleanliness, data gathering, reporting abnormal signs and symptoms, postmortem care, patient socialization and reality orientation, end-of-life care, cardiopulmonary resuscitation and emergency care, residents' or patients' rights, documentation of nursing-assistant services, and other tasks that a certified nurse assistant may perform after training beyond that required for initial certification and upon validation of competence in that skill by a registered nurse. This subsection does not restrict the ability of any person who is otherwise trained and educated from performing such tasks.
(6) "Registry" means the listing of certified nursing assistants maintained by the board.

History.--s. 204, ch. 99-397; s. 79, ch. 2000-318; s. 4, ch. 2005-62.

Note.--Former s. 468.821.

464.202 Duties and powers of the board.

--The board shall maintain, or contract with or approve another entity to maintain, a state registry of certified nursing assistants. The registry must consist of the name of each certified nursing assistant in this state; other identifying information defined by board rule; certification status; the effective date of certification; other information required by state or federal law; information regarding any crime or any abuse, neglect, or exploitation as provided under chapter 435; and any disciplinary action taken against the certified nursing assistant. The registry shall be accessible to the public, the certificateholder, employers, and other state agencies. The board shall adopt by rule testing procedures for use in certifying nursing assistants and shall adopt rules regulating the practice of certified nursing assistants and specifying the scope of practice authorized and the level of supervision required for the practice of certified nursing assistants. The board may contract with or approve another entity or organization to provide the examination services, including the development and administration of examinations. The board shall require that the contract provider offer certified nursing assistant applications via the Internet, and may require the contract provider to accept certified nursing assistant applications for processing via the Internet. The board shall require the contract provider to provide the preliminary results of the certified nursing examination on the date the test is administered. The provider shall pay all reasonable costs and expenses incurred by the board in evaluating the provider's
application and performance during the delivery of services, including examination services and procedures for maintaining the certified nursing assistant registry.

History.--s. 204, ch. 99-397; s. 79, ch. 2000-318; s. 5, ch. 2005-62.

Note.--Former s. 468.822.

464.203 Certified nursing assistants; certification requirement.--

(1) The board shall issue a certificate to practice as a certified nursing assistant to any person who demonstrates a minimum competency to read and write and successfully passes the required Level I or Level II screening pursuant to s. 400.215 and meets one of the following requirements:

(a) Has successfully completed an approved training program and achieved a minimum score, established by rule of the board, on the nursing assistant competency examination, which consists of a written portion and skills-demonstration portion approved by the board and administered at a site and by personnel approved by the department.

(b) Has achieved a minimum score, established by rule of the board, on the nursing assistant competency examination, which consists of a written portion and skills-demonstration portion, approved by the board and administered at a site and by personnel approved by the department and:
   1. Has a high school diploma, or its equivalent; or
   2. Is at least 18 years of age.

(c) Is currently certified in another state; is listed on that state's certified nursing assistant registry; and has not been found to have committed abuse, neglect, or exploitation in that state.

(d) Has completed the curriculum developed under the Enterprise Florida Jobs and Education Partnership Grant and achieved a minimum score, established by rule of the board, on the nursing assistant competency examination, which consists of a written portion and skills-demonstration portion, approved by the board and administered at a site and by personnel approved by the department.

(2) If an applicant fails to pass the nursing assistant competency examination in three attempts, the applicant is not eligible for reexamination unless the applicant completes an approved training program.

(3) An oral examination shall be administered as a substitute for the written portion of the examination upon request. The oral examination shall be administered at a site and by personnel approved by the department.

(4) The board shall adopt rules to provide for the initial certification of certified nursing assistants.

(5) Certification as a nursing assistant, in accordance with this part, may be renewed until such time as the nursing assistant allows a period of 24 consecutive months to pass during which period the nursing assistant fails to perform any nursing-related services for monetary compensation. When a nursing assistant fails to perform any nursing-related services for monetary compensation for a period of 24 consecutive months, the nursing assistant must complete a new training and competency evaluation program or a new competency evaluation program.

(6) A certified nursing assistant shall maintain a current address with the board in accordance with s. 456.035.

(7) A certified nursing assistant shall complete 12 hours of inservice training during each calendar year. The certified nursing assistant shall be responsible for maintaining
documentation demonstrating compliance with these provisions. The Council on Certified Nursing Assistants, in accordance with s. 464.2085(2)(b), shall propose rules to implement this subsection.

(8) The department shall renew a certificate upon receipt of the renewal application and imposition of a fee of not less than $20 and not more than $50 biennially. The department shall adopt rules establishing a procedure for the biennial renewal of certificates. Any certificate that is not renewed by July 1, 2006, is void.

History.--s. 204, ch. 99-397; s. 164, ch. 2000-160; s. 79, ch. 2000-318; s. 50, ch. 2001-45; s. 77, ch. 2002-1; s. 6, ch. 2005-62.

Note.--Former s. 468.823.

464.204 Denial, suspension, or revocation of certification; disciplinary actions.--

(1) The following acts constitute grounds for which the board may impose disciplinary sanctions as specified in subsection (2):

(a) Obtaining or attempting to obtain certification or an exemption, or possessing or attempting to possess certification or a letter of exemption, by bribery, misrepresentation, deceit, or through an error of the board.

(b) Intentionally violating any provision of this chapter, chapter 456, or the rules adopted by the board.

(2) When the board finds any person guilty of any of the grounds set forth in subsection (1), it may enter an order imposing one or more of the following penalties:

(a) Denial, suspension, or revocation of certification.

(b) Imposition of an administrative fine not to exceed $150 for each count or separate offense.

(c) Imposition of probation or restriction of certification, including conditions such as corrective actions as retraining or compliance with an approved treatment program for impaired practitioners.

(3) The board may, upon the request of a certificateholder, exempt the certificateholder from disqualification of employment in accordance with chapter 435 and issue a letter of exemption. The board must notify an applicant seeking an exemption from disqualification from certification or employment of its decision to approve or deny the request within 30 days after the date the board receives all required documentation.

History.--s. 204, ch. 99-397; s. 165, ch. 2000-160; s. 79, ch. 2000-318.

Note.--Former s. 468.824.

464.205 Availability of disciplinary records and proceedings.

--Pursuant to s. 456.073, any complaint or record maintained by the department pursuant to the discipline of a certified nursing assistant and any proceeding held by the board to discipline a certified nursing assistant shall remain open and available to the public.

History.--s. 204, ch. 99-397; s. 166, ch. 2000-160; s. 79, ch. 2000-318.

Note.--Former s. 468.825.

464.206 Exemption from liability.

--If an employer terminates or denies employment to a certified nursing assistant whose certification is inactive as shown on the certified nursing assistant registry or whose name
appears on a criminal screening report of the Department of Law Enforcement, the employer is not civilly liable for such termination and a cause of action may not be brought against the employer for damages, regardless of whether the employee has filed for an exemption from the board under s. 464.204(3). There may not be any monetary liability on the part of, and a cause of action for damages may not arise against, any licensed facility, its governing board or members thereof, medical staff, disciplinary board, agents, investigators, witnesses, employees, or any other person for any action taken in good faith without intentional fraud in carrying out this section.

History.--s. 204, ch. 99-397; s. 79, ch. 2000-318; s. 105, ch. 2000-349.

Note.--Former s. 468.826

464.207 Penalties.

--It is a misdemeanor of the first degree, punishable as provided under s. 775.082 or s. 775.083, for any person, knowingly or intentionally, to fail to disclose, by false statement, misrepresentation, impersonation, or other fraudulent means, in any application for voluntary or paid employment or certification regulated under this part, a material fact used in making a determination as to such person's qualifications to be an employee or certificateholder.

History.--s. 204, ch. 99-397; s. 79, ch. 2000-318.

Note.--Former s. 468.827

464.208 Background screening information; rulemaking authority.--

(1) The Agency for Health Care Administration shall allow the board to electronically access its background screening database and records.
(2) An employer, or an agent thereof, may not use criminal records or juvenile records relating to vulnerable adults for any purpose other than determining if the person meets the requirements of this part. Such records and information obtained by the board shall remain confidential and exempt from s. 119.07(1).
(3) If the requirements of the Omnibus Budget Reconciliation Act of 1987, as amended, for the certification of nursing assistants are in conflict with this part, the federal requirements shall prevail for those facilities certified to provide care under Title XVIII (Medicare) or Title XIX (Medicaid) of the Social Security Act.
(4) The board shall adopt rules to administer this part.


Note.--Former s. 468.828.

464.2085 Council on Certified Nursing Assistants.

--The Council on Certified Nursing Assistants is created within the department, under the Board of Nursing.
(1) The council shall consist of five members appointed as follows:
(a) The chairperson of the Board of Nursing shall appoint two members who are registered nurses. One of the members must currently supervise a certified nursing assistant in a licensed nursing home.
(b) The chairperson of the Board of Nursing shall appoint one member who is a licensed practical nurse who is currently working in a licensed nursing home.
(c) The State Surgeon General or his or her designee shall appoint two certified nursing assistants currently certified under this chapter, at least one of whom is currently working in a licensed nursing home.

(2) The council shall:

(a) Recommend to the department policies and procedures for the certification of nursing assistants.

(b) Develop all rules regulating the education, training, and certification process for nursing assistants certified under this chapter. The Board of Nursing shall consider adopting a proposed rule developed by the council at the regularly scheduled meeting immediately following the submission of the proposed rule by the council.

(c) Make recommendations to the board regarding all matters relating to the certification of nursing assistants.

(d) Address concerns and problems of certified nursing assistants in order to improve safety in the practice of certified nursing assistants.

History.--s. 80, ch. 2000-318; s. 84, ch. 2008-6.

GEORGIA

Downloaded January 2011

Georgia regulations do not include specific content for nurse aide training and competency.

HAWAII

Downloaded January 2011

CNA Training and Competency Requirements for the State of Hawaii

§11-100-6 Personnel and staffing requirements.

(a) To qualify as a licensee of a Type I adult residential care home, an individual shall:

(1) Be at least eighteen years of age;

(2) Be a nurse aide;

(3) Have completed adult residential care home teaching modules approved by the department;

(4) Have at least one year's experience working full time in an intermediate care facility, skilled nursing facility, home health agency, or hospital;

(5) Have no activities outside the facility sufficiently demanding of the licensee's time and energy as to interfere with proper and adequate care of the residents;
(6) Have no family responsibilities sufficiently demanding on the licensee’s time and energy as to interfere with proper and adequate care of the residents;

(7) Demonstrate to the department sufficient skill in the use of the English language to fully accomplish the objectives of the program and to comply with the requirements of this chapter;

(8) Have achieved an acceptable level of skills in first aid, nutrition, and cardiopulmonary resuscitation and appropriate nursing and behavior modification techniques as required for care of all residents admitted to the facility;

(9) Attend and successfully complete at least two training sessions per year as may be developed or recommended by the department;

(10) Have knowledge of the availability of community services which may be utilized by the residents and operator.

(b) The administrator of a Type II home in addition to the requirements in subsection (a), shall be able to demonstrate appropriate knowledge of:

(1) Administrative techniques;

(2) Business accounting;

(3) Large volume food purchasing and meal preparation;

(4) Supervisory personnel techniques;

(5) Large volume laundry handling techniques;

(6) Infectious disease control techniques.

§11-100-7 General staff requirements.

(h) All inservice training and other educational experiences for employees and operators shall be documented and kept current.

IDAHO

Downloaded January 2011

Idaho regulations do not include specific content for nurse aide training and competency.
Section 300.650 Personnel Policies

...d) The facility shall check the status of all applicants with the Nurse Aide Registry prior to hiring.

Section 300.660 Nursing Assistants

a) A facility shall not employ an individual as a nurse aide unless the facility has inquired of the Department as to information in the Registry concerning the individual. (Section 3-206.01 of the Act) The Department shall advise the inquirer if the individual is on the Registry, if the individual has findings of abuse, neglect, or misappropriation of property in accordance with Sections 3-206.01 and 3-206.02 of the Act, and if the individual has a current background check. (See Section 300.661 of this Part.)

b) The facility shall ensure that each nursing assistant complies with one of the following conditions:

1) Is approved on the Department’s Nurse Aide Registry. "Approved" means that the nurse aide has met the training or equivalency requirements of Section 300.663 of this Part and does not have a disqualifying criminal background check without a waiver.

2) Begins a Department approved Basic Nursing Assistant Training Program (see 77 Ill. Adm. Code 395) no later than 45 days after employment. The nursing assistant shall successfully complete the training program within 120 days after the date of initial employment. A nursing assistant enrolled in a program approved in accordance with 77 Ill. Adm. Code 395.150(a)(2) shall not be employed more than 120 days prior to successfully completing the program.

3) Within 120 days after initial employment, submits documentation to the Department in accordance with Section 300.663 of this Part to be registered on the Nurse Aide Registry.

c) Each person employed by the facility as a nursing assistant shall meet each of the following requirements:

1) Be at least sixteen years of age, of temperate habits and good moral character, honest, reliable and trustworthy (Section 3-206 (a)(1) of the Act);

2) Be able to speak and understand the English language or a language understood by a substantial percentage of the facility's residents (Section 3-206(a)(2) of the Act);

3) Provide evidence of prior employment or occupation, if any, and residence for two years prior to present employment as a nursing assistant (Section 3-206(a)(3) of the Act);

4) Have completed at least eight years of grade school or provide proof of equivalent knowledge (Section 3-206(a)(4) of the Act).
d) The facility shall certify that each nursing assistant employed by the facility meets the requirements of this Section. Such certification shall be retained by the facility as part of the employee's personnel record.

e) During inspections of the facility, the Department may require nursing assistants to demonstrate competency in the principles, techniques, and procedures covered by the basic nursing assistant training program curriculum described in 77 Ill. Adm. Code 395, when possible problems in the care provided by aides or other evidences of inadequate training are observed. The State approved manual skills evaluation testing format and forms will be used to determine competency of a nursing assistant when appropriate. Failure to demonstrate competency of the principles, techniques and procedures shall result in the provision of in-service training to the individual by the facility. The in-service training shall address the basic nursing assistant training principles and techniques relative to the procedures in which the nursing assistants are found to be deficient during inspection (see 77 Ill. Adm. Code 395).

(Source: Amended at 23 Ill. Reg. 8106, effective July 15, 1999)

Section 300.663 Registry of Certified Nursing Assistants

a) An individual will be placed on the Nurse Aide Registry when he/she has successfully completed a training program approved in accordance with the Long-Term Care Assistants and Aides Training Programs Code (77 Ill. Adm. Code 395) and has met background check information required in Section 300.661 of this Part, and when there are no findings of abuse, neglect, or misappropriation of property in accordance with Sections 3-206.01 and 3-206.02 of the Act.

b) An individual will be placed on the Nurse Aide Registry if he/she has met background check information required in Section 300.661 of this Part and submits documentation supporting one of the following equivalencies:

1) Documentation of current registration from another state indicating that the requirements of 42 CFR 483.151 – 483.156 (October 1, 1997, no further amendments or editions included) have been met and that there are no documented findings of abuse, neglect, or misappropriation of property.

2) Documentation of successful completion of a nursing arts course (e.g., Basics in Nursing, Fundamentals of Nursing, Nursing 101) with at least 40 hours of supervised clinical experience in an accredited nurse training program as evidenced by a diploma, certificate or other written verification from the school and, within 120 days after employment, successful completion of the written portion of the Department-established nursing assistant competency test.

3) Documentation of successful completion of a United States military training program that includes the content of the Basic Nursing Assistant Training Program (see 77 Ill. Adm. Code 395) and at least 40 hours of supervised clinical experience, as evidenced by a diploma, certification, DD-214, or other written verification, and, within 120 days after employment,
successful completion of the written portion of the Department established nursing assistant competency test.

4) Documentation of completion of a nursing program in a foreign country, including the following, and, within 120 days after employment, successful completion of the written portion of the Department-established nursing assistant competency test:

A) A copy of the license, diploma, registration or other proof of completion of the program;

B) A copy of the Social Security card; and

C) Visa or proof of citizenship.

c) An individual shall notify the Nurse Aide Registry of any change of address within 30 days and of any name change within 30 days and shall submit proof of any name change to the Department. (Section 3-206.01 of the Act)

Section 300.665 Student Interns

a) No person who meets the definition of student intern in Section 300.330 shall be required to complete a current course of training for nursing assistants.

b) The facility may utilize student interns to perform basic nursing assistant skills for which they have been evaluated and deemed competent by an approved evaluator using the State approved manual skills competency evaluation testing format and forms (see 77 Ill. Adm. Code 395.300), but shall not allow interns to provide rehabilitation nursing (see Section 300.1210(b), in-bed bathing, assistance with skin care, foot care, or to administer enemas, except under the direct, immediate supervision of a licensed nurse.

c) No facility shall have more than fifteen percent of its nursing assistant staff positions held by student interns.

(Source: Amended at 17 Ill. Reg. 19279, effective October 26, 1993)

Section 300.1220 Supervision of Nursing Services

Supervising and overseeing in-service education, embracing orientation, skill training, and on-going education for all personnel and covering all aspects of resident care and programming. The educational program shall include training and practice in activities and restorative/rehabilitative nursing techniques through out-of-facility or in-facility training programs. This person may conduct these programs personally or see that they are carried out.

Section 395.50 Definitions

Act – the Nursing Home Care Act [210 ILCS 45].
Approved evaluator – a registered nurse who has attended a Department-sponsored evaluator workshop, meets the Instructor Requirements in Section 395.160 of this Part, and has no fiduciary connection with the facility by which the candidate is employed or will be employed within 30 days of the evaluation.

Approved manual skills – the following tasks demonstrated by a candidate: washing hands, performing oral hygiene, hair care or nail care for a client, shaving a client’s face, taking a client’s oral temperature and pulse, measuring a client’s respiration and blood pressure, making an occupied and unoccupied bed, feeding and dressing a client, making a final room check prior to client occupancy, measuring a client’s weight and height, placing a client in a side-lying position, performing passive range of motion on a client, calculating a client’s intake and output of fluids, transferring a client to a wheelchair using a safety belt, and giving a client a partial bath.

Competency test – a comprehensive multiple choice test meeting the requirements of 42 CFR 483, administered by the Department or a school, agency or similar institution under agreement with the Department.

Clinical practice instruction – a teaching method used during the practical application of skill competencies (on-the-job training - OJT) in which the trainee explains and demonstrates skill competencies learned during the theory and OJT sections to an acceptable level in the presence of an OJT instructor.

Curriculum Coordinator – In each Developmental Disabilities Aide Training Program, a qualified mental retardation professional who is responsible for planning, organization, management, coordination with training staff, compliance, documentation, and linkage with the Department and the Department of Mental Health and Developmental Disabilities. The Curriculum Coordinator is not required to be an instructor.

Department – the Illinois Department of Public Health.

Developmental Disabilities (DD) Aide – any person who provides nursing, personal or rehabilitative care to residents of Intermediate Care Facilities for the Developmentally Disabled, regardless of title, and who is not otherwise licensed, certified or registered to render medical care. Other titles often used to refer to DD Aides include, but are not limited to, Program Aides, Program Technicians and Habilitation Aides. DD Aides must function under the supervision of a licensed nurse or a Qualified Mental Retardation Professional (QMRP).
Direct contact – the provision of any services to a client by an individual carrying out tasks usually done by nurse aides.

**Nurse** – A registered nurse or a licensed practical nurse as defined in the Illinois Nursing Act of 1987 [225 ILCS 65]. (Section 1-118 of the Act)

Qualified Mental Retardation Professional – a person who has at least one year of experience working directly with individuals with developmental disabilities and meets at least one of the following additional qualifications:

Be a physician as defined in this Section.

Be a registered nurse as defined in this Section.

Hold at least a bachelor’s degree in one of the following fields: occupational therapy, physical therapy, psychology, social work, speech or language pathology, recreation (or a recreation specialty area such as art, dance, music, or physical education), dietary services or dietetics, or a human services field (such as sociology, special education, or rehabilitation counseling).

**Physician** – any person licensed to practice medicine in all its branches as provided by the Medical Practice Act of 1987 [225 ILCS 60].

**Registered nurse (RN)** – a person with a valid license to practice as a registered professional nurse under the Illinois Nursing Act of 1987 [225 ILCS 65].

**Supervised laboratory** – a teaching method utilized during the theory section of the program requiring the trainee to demonstrate skill competencies that were taught by the instructor as part of the theory section of the program.

**Train The Trainer Workshop/Program** – a college based program, no less than 30 clock hours, designed to prepare a registered nurse to teach certified nurse aide (CNA)
Section 395.100 Program Sponsor

Training program sponsors may be any one of the following:

a) A community college or other public school operated by the state of Illinois or unit of local government.

b) A private vocational or business school as defined in the Private Business and Vocational Schools Act [105 ILCS 425], which holds a valid certificate of approval or certificate of exemption issued by the State Board of Education under rules entitled "Private Business and Vocational Schools" (23 Ill. Adm. Code 451).

c) A facility licensed by the Department under the Nursing Home Care Act, under the Hospital Licensing Act [210 ILCS 85] or under the Home Health Agency Licensing Act [210 ILCS 55].

Section 395.110 Application for Program Approval

a) The program sponsor shall submit a letter of application for program approval to each Department at least ninety days in advance of the scheduled beginning of the training program. The program sponsor shall not offer the training program prior to receipt of written approval from the Department. The Department will not grant retroactive approval of training programs.

b) The letter of application shall include at least the following information about the proposed program:
1) A statement of whether the training program being proposed is a:
   A) Basic Nursing Assistant Training Program,
   B) Developmental Disabilities Aide Training Program,
   C) Basic Child Care/Habilitation Aide Training Program,
   D) Psychiatric Rehabilitation Services Aide Training Program.

2) A copy of the sponsor's certificate of approval issued by the State Board of Education or the Board of Higher Education, as appropriate, if the sponsor is a private business, vocational school or college.

3) A statement of the program rationale, including the philosophy and purpose of the program.

4) A statement indicating that the Department's model program based on Section 395.300 of this Part is being used or an outline containing the methodology, content, and objectives for the training program.
   A) The outline shall indicate the number of hours that will be dedicated to each component of the training program. This outline shall not preclude the instructor from varying the order of presentation of the outlined course components.
   B) The outline shall address each of the required curricula content requirements contained in Section 395.300 (Basic Nursing Assistant Training Program), Section 395.310 (Developmental Disabilities Aides Training Program), or Section 395.320 (Basic Child Care/Habilitation Aide Training Program) or Section 395.330 (Psychiatric Rehabilitation Services Aide Training Program).

5) A master schedule for the training program, which includes at least the following:
   A) The location, classroom designation, and scheduled dates of the training program.
   B) The allocation of the daily and total hours of instruction between theory and clinical instruction.
   C) Identification of theory and clinical instructors and approved evaluator, and whether the instruction is theory or clinical.
   D) Curriculum Coordinator, for developmental disabilities aide training programs.

6) Resumes describing the education, experience, and qualifications of each program instructor including a copy of any valid Illinois licenses, as applicable.

7) Any clinical site agreements for the use of facilities and equipment that are not owned or operated by the program sponsor. Such agreements shall be signed by the owner or operator of the facilities or equipment and shall include the dates such facilities or equipment will be used, and a description of the classrooms, laboratory, clinical training equipment, and any other facilities or equipment that will be used in the program.
8) A copy or a description of the tools that will be used to evaluate the following aspects of the training program:

A) Training program objectives and instructors.

B) Training program content.

C) Clinical performance, encompassing all skills taught, and for a Basic Nursing Assistant Training Program, the State-approved manual skills evaluation developed from the curriculum outlined in Section 395.300.

9) A copy of the attendance policy.

c) The program sponsor for all programs except Developmental Disabilities Aide Training Programs shall submit the letter of application for approval of a training program to the Department at the following address:

Illinois Department of Public Health
Office of Health Care Regulation
Division of LTC Field Operations
525 West Jefferson Street
Springfield, Illinois 62761

d) No changes will be required in the program content of any training program, which was approved under rules in effect at the time of the adoption of amended rules, until a review by the Department indicates that revisions to the program content are needed to keep the program in compliance with the amended rules.

AGENCY NOTE: The Department has a Memorandum of Understanding with the Department of Human Services for that agency to administer the approval of the Developmental Disabilities Aide Training Programs in accordance with the requirements of this Part. Questions and correspondence should be directed to the Illinois Department of Human Services, Office of Developmental Disabilities, Bureau of Human Resource Development, 319 East Madison, Suite 4J, Springfield, Illinois 62701.

(Source: Amended at 26 Ill. Reg. 14837, effective October 15, 2002)

Section 395.120 Review Process and Program Approval

a) The Department will evaluate the application and proposed program for conformance to the program requirements contained in this Part. Based on this review, the Department will take one of the following actions regarding the application:

1) Grant approval of the proposed program.
2) Grant approval of the proposed program contingent on the receipt of additional materials, or revisions, needed to remedy any minor deficiencies in the application or proposed program, which would not prevent the program from being implemented, such as deficiencies in the number of hours assigned to cover different areas of content, which can be corrected by submitting a revised schedule or outline.

3) Deny approval of the proposed program based on major deficiencies in the application or proposed program, which would prevent the program from being implemented, such as deficiencies in the qualifications of instructors or missing areas of content.

b) When the Department finds that a proposed program fails to comply with the program requirements contained in this Part or 42 CFR 483.151(b)(2)(i-v) (October 1, 1994, no further editions or amendments included), the Department will notify the sponsor in writing of the nature of the deficiencies, and will request additional materials, or revisions, needed to remedy deficiencies in the application or proposed program.

c) When the Department finds that a proposed program, along with any additional materials and revisions which have been submitted, complies with the program requirements contained in this Part, the Department will issue a written notice of program approval to the program sponsor.

d) The Department will issue an identification number to each approved training program sponsor. The sponsor shall reference that number in any correspondence to the Department about the program.

(Source: Amended at 20 Ill. Reg. 10085, effective July 15, 1996)

Section 395.130 Review of Approved Training Program

a) The Department will review each approved training program for renewal at least every other year.

b) The program renewal review shall evaluate compliance with this Part and include, if necessary, an on-site monitoring visit.

c) The proportion of an approved training program's students who successfully complete the training program will be considered by the Department in determining the need for additional on-site visits and other monitoring activities.

(Source: Amended at 20 Ill. Reg. 10085, effective July 15, 1996)

Section 395.140 Inactive Status

a) The Department shall place an approved training program on inactive status upon receipt of a written request from the program sponsor for such action or if there has been no program activity during the last year.
b) To return an approved training program that has been on inactive status for one year or less to active status, the sponsor of the program shall submit a written request to the Department detailing any changes in the approved training program and a master schedule in accordance with Section 395.110(b)(5) of this Part.

c) An approved training program that has been on inactive status for more than one year shall submit a letter of application as required in Section 395.110 of this Part.

d) The request for return to active status must be submitted no fewer than 60 days prior to the scheduled beginning of the program.

(Source: Amended at 20 Ill. Reg. 10085, effective July 15, 1996)

Section 395.150 Minimum Hours of Instruction

a) Time frames for Basic Nursing Assistant Training Programs

1) Each program shall include a minimum of 120 hours of instruction, excluding breaks, lunch, and any orientation to the specific policies of the employing facility.

2) The basic program content shall be presented in a minimum time frame of three weeks, but cannot exceed 120 days, unless the training program is conducted by a community college or other educational institution on a term, semester, or trimester basis.

3) There shall be a ratio of two hours of theory, including supervised laboratory, to each hour of supervised clinical practice instruction (i.e., 80 hours of theory and 40 hours of clinical). This ratio applies only to the required 120 hours of instruction.

4) A minimum of 12 hours of theory instruction related to Alzheimer's disease and related dementias, as described in Section 395.300(r) through (z), shall be included in each program, excluding breaks, lunch, and any orientation to the specific policies of the employing facility.

5) A minimum of 16 hours of training in the following areas must be conducted prior to any direct contact with a resident (42 CFR 483.152(a)(3-6)):

A) Communication and interpersonal skills;

B) Infection control;

C) Safety/emergency procedures, including the Heimlich maneuver;

D) Promoting residents' independence; and

E) Promoting residents' rights.
Section 395.160  Instructor Requirements

a) Requirements for Instructors in a Basic Nursing Assistant Program or a Basic Child Care/Habilitation Aide Training Program

1) Each course instructor shall be a registered nurse with a minimum of two years nursing experience, who has no other duties while engaged in the training program. Instructors shall be required to have one year of experience as a registered nurse in one or both of the following areas:

A) Teaching an accredited nurse's training program.

B) Caring for the elderly or for the chronically ill of any age through employment in a nursing facility, extended care unit, geriatrics department, chronic care unit, hospice, swing bed unit of a hospital, or other long-term care setting.

2) Each theory course instructor shall also possess at least one of the following qualifications:

A) A valid Illinois teaching certificate or a provisional certificate.

B) A certificate indicating completion of a Department approved train the trainer workshop/program.

C) Evidence of at least one semester of formal teaching experience.

D) College course work during the previous six years, which includes at least one course in teaching/learning principles, curriculum development, teaching methods, or instructional techniques.

Section 395.170  Program Operation

a) An educational entity, other than a secondary school, conducting a Nurse Aide Training Program shall initiate a UCIA criminal history records check in accordance with the requirements of the Health Care Worker Background Check Act [225 ILCS 46] prior to entry of an individual into the training program. A secondary school may initiate a UCIA Criminal History Record Check prior to the entry of an individual into a training program. (Section 3-206(a-0.5) of the Act)

b) For the purpose of this Section, "initiate" means the obtaining of the authorization for a record check from a student. The educational entity shall transmit all necessary information and fees to the Illinois State Police within 10 working days after receipt of the authorization. (Section 15(3) of the Health Care Worker Background Check Act) Authorization shall be requested on the first day of class.

c) The results of the criminal history record check shall be attached to the student's competency test application. If the student does not complete a test application or takes the competency test prior to receiving the results of the criminal history record check, the
program shall submit the results to the Department. The program shall also provide the student with a copy of the results.

d) The program shall provide counseling to all individuals seeking admission to the program concerning the Health Care Worker Background Check Act. The counseling must include, at a minimum:

1) notification that a UCIA criminal history record check will be initiated in accordance with subsection (a) above;

2) a clear statement that a UCIA Criminal Background Check is required for the individual to work as a nursing assistant, developmental disabilities aide, or basic child care/habilitation aide in Illinois; and

3) a listing of those Sections of the Criminal Code of 1961 [720 ILCS 5], the Cannabis Control Act [720 ILCS 550], and the Illinois Controlled Substances Act [720 ILCS 570] for which a conviction would disqualify the individual from finding employment as a nursing assistant.

e) Ten working days prior to the start of the actual training program, an updated master schedule, in accordance with Section 395.110(b)(5) of this Part, shall be submitted to the Department.

f) Any change in program content, objectives, or instructors shall be submitted to the Department at least thirty days prior to program delivery.

g) In the Basic Nursing Assistant Training Program, the program shall require each student to show competency of Department approved manual skills by hands-on return demonstration. The manual skills evaluation shall be conducted by an approved evaluator. Approved evaluators employed by a facility may not evaluate students trained by the facility program. The facility shall assure that an approved evaluator who is not an approved instructor meets the requirements of Section 395.160 of this Part.

(Source: Amended at 22 Ill. Reg. 4057, effective February 13, 1998)

Section 395.173 Successful Completion of the Basic Nursing Assistant Training Program

a) A student shall be considered to have successfully completed the training program when all of the following are met: The student has

1) completed at least 80 hours of theory and 40 hours of clinical instruction;

2) demonstrated competence in the Department-approved manual skills.

b) A student must pass the Department established competency test.

(Source: Added at 20 Ill. Reg. 10085, effective July 15, 1996)
Section 395.300 Basic Nursing Assistant Training Program

The Basic Nursing Assistant Training Program shall include, at a minimum, the following:

a) Module I – Introduction to Health Care Systems

1) Functions of health care facilities. Objectives: Upon completion of this unit of instruction, the student will be able to:

   A) differentiate between the hospital, long term care facility, and home health aide programs as to their basic purposes and what each expects of the nursing assistant;

   B) define the functions of the nursing assistant and be aware of the ethical implications and the legal limitations; and

   C) develop a beginning understanding and appreciation of the responsibility of the nursing assistant as a member of the health care team.

2) Home Health Agencies and the health care professions.

   Objectives: Upon completion of this unit of instruction, the student will be able to:

   A) discuss the purpose and organization of a home health agency;

   B) identify the members of the home health care team and their respective tasks; and

   C) apply learned basic nursing procedures to the home setting making appropriate modifications.

3) Philosophy of patient care. Objectives: Upon completion of this unit of instruction, the student will be able to:

   A) understand the uniqueness and reward of caring for the geriatric patient;

   B) demonstrate an awareness of the ethics involved in the position; and

   C) develop an understanding of the patient-family relationship.

4) The role of the multidisciplinary health care team.

   Objectives: Upon completion of this unit of instruction, the student will be able to:

   A) define the role of the nursing assistant in the long-term care facility;

   B) identify and discuss roles of the multidisciplinary team and the integration of services for the total care of the patient; and

   C) identify the “chain of command” in the organizational structure of a long-term care facility.
5) Personal qualities of the nursing assistant. Objectives: Upon completion of this unit of instruction, the student will meet expectations of facilities by being able to:

A) meet standards of appearance and general behavior;
B) be aware of the importance of punctuality and confidentiality; and
C) demonstrate an awareness of the empathy and compassion, particularly to the elderly.

6) Duties of the nurse assistant. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) develop an understanding of nursing assistant duties;
B) develop an understanding of the why's of patient care, such as infection control, safety, and residents' rights; and
C) define the functions of the nursing assistant and be aware of legal implications.

7) Medical terminology. Objectives: Upon completion of this unit of instruction, the student will meet expectations of facilities by being able to:

A) develop an awareness of the very basic abbreviations and symbols utilized in medical terminology; and
B) meet the written standards for charting on the medical record.

8) Recording. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) demonstrate an awareness of the principles of accurate observation and recording; and
B) discuss the various forms utilized in the medical record system.

b) Module II -- Introduction to the patient.

1) Resident Rights. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) provide privacy and maintenance of confidentiality;
B) assist residents to make personal choices to accommodate their individual needs; and
C) maintain reasonable care of the personal possessions of residents.

2) Communication and interpersonal relationships with patients, families and others. Objectives: Upon completion of this unit of instruction, the student will be able to:
A) develop an awareness of appropriate communication between staff/patients, staff/families, families/patient, staff/staff;

B) develop communication techniques; and

C) demonstrate the ability to understand verbal and nonverbal communication.

3) Psychological needs of patient and family. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) develop an awareness of sensitivity to the patient's need for feelings of self-worth;

B) demonstrate the ability to listen; and

C) understand the necessity to develop and maintain harmony between patient and family.

4) Normal growth and development. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) list and describe various priorities of need of residents;

B) describe the continuum of life cycle; and

C) develop an awareness of normalcy and deviations.

c) Module III – Your working environment.

1) Cleanliness in the health care setting and patient homes.

   Objectives: Upon completion of this unit of instruction, the student will be able to:

   A) define the principles of medical asepsis;

   B) demonstrate an awareness of the importance of cleanliness in health care institutions; and

   C) demonstrate the ability to modify medical asepsis technique for the home setting.

2) Principles of handwashing. Objectives: Upon completion of this unit of instruction, the student will be able to:

   A) discuss the need for handwashing before and after each task and before and after direct patient contact;

   B) demonstrate that an understanding of a good handwashing technique will prevent the spread of disease; and

   C) demonstrate the ability to wash hands using the learned technique.
3) Principles of disinfection. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) List the methods of disinfection;
B) demonstrate an awareness of handling disinfected articles; and
C) differentiate between "clean" and "dirty."

4) Principles of sterilization. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) explain the relationship between microorganisms and infection control;
B) list the conditions necessary for microorganism growth; and
C) develop an awareness of the process of killing all bacteria.

5) Techniques of disinfection. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) discuss the various methods of disinfecting;
B) develop an awareness of relevant time necessary for disinfection; and
C) list articles that can be safely disinfected.

6) Maintaining equipment and supplies. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) develop an understanding of the proper usage of equipment used in the personal/nursing care of residents;
B) demonstrate proper usage, cleaning and storing of equipment; and
C) develop an awareness of the reporting system relevant to proper maintenance of equipment.

d) Module IV – Safety.

1) Body mechanics. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) discuss techniques of proper body mechanics;
B) demonstrate good body mechanics for the benefit of the patient and nursing assistant; and
C) relate use of body mechanics to basic musculo-skeletal anatomy.

2) Fire safety. Objectives: Upon completion of this unit of instruction, the student will be able to:
A) identify potential fire hazards;
B) identify and apply facility's procedures for safety, fire and disaster; and
C) state his/her role in facility's fire and disaster plan.

3) Disaster. Objectives: Upon completion of this unit of instruction, the student will be able to:
A) identify designated supervisory personnel in the event of disaster;
B) develop an understanding of the disaster manual; and
C) state his/her role in facility's safety, fire and disaster plan.

4) Heimlich maneuver. Objectives: Upon completion of this unit of instruction, the student will be able to:
A) list signs of choking; and
B) demonstrate the Heimlich maneuver.

e) Module V – The patient's unit. Bedmaking procedures (unoccupied and occupied). Objectives: Upon completion of this unit of instruction, the student will be able to:
   1) identify the patient's need for a clean and comfortable environment;
   2) identify the purpose of the procedure for making the unoccupied and occupied bed; and
   3) demonstrate proper bedmaking procedure.

f) Module VI -- Lifting, moving and transporting patients.
   1) In bed. Objectives: Upon completion of this unit of instruction, the student will be able to:
      A) describe briefly the musculo-skeletal system;
      B) realize needs for motion in joints and muscle activity; and
      C) maintain correct body alignment.
   2) Ambulatory. Objectives: Upon completion of this unit of instruction, the student will be able to:
      A) safely ambulate patients;
      B) demonstrate proper body mechanics; and
      C) develop an awareness of the physical ability of each patient.
3) **Wheelchair.** Objectives: Upon completion of this unit of instruction, the student will be able to:

A) apply safety principles involved in transporting patient in wheelchair;
B) demonstrate proper body mechanics; and
C) provide for privacy when transferring the patient from bed to wheelchair.

4) **Stretcher.** Objectives: Upon completion of this unit of instruction, the student will be able to:

A) identify and apply rules for safety for patient transfer;
B) demonstrate good body mechanics; and
C) provide for privacy when transferring the patient from bed to stretcher.

g) **Module VII – Basic Anatomy.**

1) Contents:

A) Anatomy of the Skeletal System;
B) Anatomy of the Circulatory System;
C) Anatomy of the Digestive System;
D) Anatomy of the Respiratory System;
E) Anatomy of the Urinary System;
F) Anatomy of the Muscular System; and
G) Functioning of the human body as related to the disease process.

2) Objectives: Upon completion of this unit of instruction, the student will be able to:

A) develop an understanding of human anatomy and its relationship to normal function;
B) identify and discuss simple disease processes; and
C) explain how body systems work together.

h) **Module VIII – Personal care of the patient.**

1) Contents:

A) Oral hygiene;
B) Bathing procedures;
C) Care of the back feet and skin; and
D) Observing and reporting.

2) Objectives: Upon completion of this unit of instruction, the student will be able to:

A) identify basic human needs (physical, emotional, social and religious) of the patient;
B) demonstrate the ability to recognize basic human needs in patient behavior;
C) demonstrate proper medical asepsis technique;
D) demonstrate methods to detect incipient or manifest decubitis ulcers;
E) demonstrate measures to prevent decubitis ulcers, such as proper positioning and turning;
F) identify the patient’s need for a clean environment; and
G) observe and report care given.


1) Diets and therapeutic diets. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) describe briefly the use of basic nutrients and fluids by the body;
B) list the basic four groups and name daily requirements of each; and
C) identify modified diets and understand the reasons for modification.

2) Feeding techniques. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) describe briefly the anatomy of digestion;
B) develop an awareness of the patient's eating limitations; and
C) serve and assist patient with feeding.

3) Nourishments. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) develop an understanding of intermittent nourishments and dietary supplements;
B) demonstrate the ability to properly distribute nourishments; and
C) accurately report and record diet and fluid intake.

j) Module X – Fluid balance.

1) Measuring fluid intake and output. Objectives: Upon completion of this unit of instruction, the student will be able to:

A) describe briefly the anatomy of elimination;
B) demonstrate the ability to measure intake and output; and
C) accurately report and record intake and output.

2) Forcing and restricting fluids. Objectives: Upon completion of this unit of instruction, the student will be able to:
   A) identify problems associated with bowel and bladder management;
   B) develop an understanding of fluid balance in the body; and
   C) accurately report and record patient’s fluid intake.

3) Specimen collection. Objectives: Upon completion of this unit of instruction, the student will be able to:
   A) describe briefly the anatomy related to body discharge and elimination;
   B) demonstrate how to collect stool, urine, and other specimens; and
   C) accurately report and record urinary, fecal, and other output.

k) Module XI – Observing and recording vital signs.
   1) Contents:
      A) Taking the temperature;
      B) Taking pulse;
      C) Taking respirations;
      D) Taking blood pressure;
      E) Recording vital signs; and
      F) Measuring height and weight.
   2) Objectives: Upon completion of this unit of instruction, the student will be able to:
      A) state the meaning and importance of temperature, pulse, respirations, and blood pressure;
      B) demonstrate how to properly measure temperature, pulse, respirations, and blood pressure;
      C) accurately report and record temperature, pulse, respirations, and blood pressure; and
      D) Demonstrate how to accurately measure and record height and weight.

l) Module XII – Supportive care.
1) Heat applications. Objectives: Upon completion of this unit of instruction, the student will be able to:
   A) describe the various methods of heat application;
   B) demonstrate the use of safety measures involved in applying hot applications; and
   C) report and record treatment given.
2) Cold applications. Objectives: Upon completion of this unit of instruction, the student will be able to:
   A) describe the various methods of cold application;
   B) demonstrate the use and safety measures involved in applying cold applications; and
   C) report and record treatment given.
3) Enemas. Objectives: Upon completion of this unit of instruction, the student will be able to:
   A) describe briefly the anatomy of elimination;
   B) demonstrate how to administer an enema; and
   C) accurately report and record the procedures and results.
4) The vaginal douche - external and internal. Objectives: Upon completion of this unit of instruction, the student will be able to:
   A) describe briefly the anatomy of the reproductive system;
   B) demonstrate the procedure of administering an external and internal douche; and
   C) accurately report and record the procedure.
5) Catheters and tubing. Objectives: Upon completion of this unit of instruction, the student will be able to:
   A) develop a basic understanding of the use of catheters and tubing;
   B) discuss the use of specific catheters and tubing; and
   C) develop an understanding of the maintenance and storage of catheters and tubing.

Module XIII – Fundamentals of Rehabilitation Nursing.
1) Philosophy of rehabilitation nursing. Objectives: Upon completion of this unit of instruction, the student will be able to:
   A) discuss the intrinsic worth of affected persons;
   B) develop a beginning understanding of the fundamentals of rehabilitation; and
C) identify methods of treating the whole patient for restoration of function.

2) Principles of rehabilitation nursing. Objectives: Upon completion of this unit of instruction, the student will be able to:
   A) demonstrate an understanding of the concepts of rehabilitation nursing;
   B) identify the four cardinal principles of rehabilitation nursing; and
   C) develop an awareness of the treatment process of rehabilitation as well as the legal implications.

3) Concepts of activities of daily living. Objectives: Upon completion of this unit of instruction, the student will be able to:
   A) describe and discuss the use of adaptive tools for the disabled person;
   B) develop an awareness of sensitivity to the patient’s need for feelings of self-esteem; and
   C) motivate the patient to work toward independence and self-care.

n) Module XIV – Patient care planning.
   1) Contents:
      A) Patient admission;
      B) Patient transfer; and
      C) Patient discharge.
   2) Objectives: Upon completion of this unit of instruction, the student will be able to:
      A) be aware of the emotional implications of admission, transfer, and discharge;
      B) demonstrate the procedures for admission, transfer, and discharge; and
      C) observe, report, and record accurately.

o) Module XV – The patient in isolation.
   1) Isolation techniques. Objectives: Upon completion of this unit of instruction, the student will be able to:
      A) discuss communicable diseases and the nature of isolation techniques;
      B) differentiate between "clean" and "dirty"; and
      C) discuss the difference between regular and reverse isolation procedures.
   2) Physiological aspects of isolation. Objectives: Upon completion of this unit of instruction, the student will be able to:
A) demonstrate isolation precautions and procedures;
B) demonstrate isolation procedures including handwashing, masking, gowning, food and elimination precautions; and
C) accurately report and record isolation procedures.

3) Psychological aspects of isolation. Objectives: Upon completion of this unit of instruction, the student will be able to:
A) be aware and empathetic to the patient's fear and loneliness;
B) identify untoward behavior of the isolated patient; and
C) accurately observe and record patient's emotional reaction to the isolation process.

4) Isolation in the home. Objectives: Upon completion of this unit of instruction, the student will be able to:
A) apply learned isolation techniques making necessary modifications for home care;
B) communicate effectively with the patient and family relevant to the isolation process; and
C) accurately observe, report, and record the isolation techniques.

p) Module XVI – Care of the terminally ill patient.
1) Contents:
A) Psychological needs of the patient; and
B) Psychological needs of the family.
2) Objectives: Upon completion of this unit of instruction, the student will be able to:
A) identify and describe the rights of the dying patient and his/her family;
B) discuss attitudes and feelings about death and dying;
C) describe the physical and psychological changes in the patient as death approaches; and
D) discuss the grieving process of the patient and family.

q) Module XVII – Care of the body (postmortem care). Objectives: Upon completion of this unit of instruction, the student will be able to:
1) develop an awareness for respect for the body after death occurs;
2) develop an understanding for good body alignment after death; and
3) demonstrate nursing care after death.

r) Module XVIII – Aging and Dementia. Objectives: Upon completion of this unit of instruction, the student will be able to:

1) Identify the differences between the normal aging process and cognitive dysfunction disease processes;

2) Define dementia and pseudo-dementia:
   A) Reversible; and
   B) Non-reversible;

3) List the common terminology used to describe different types of dementia:
   A) Alzheimer's disease (AD);
   B) Senile Dementia of the Alzheimer's Type (SDAT);
   C) Multi Infarct Dementia (MID); and
   D) Organic Brain Syndrome (OBS);

4) Discuss how dementias are currently diagnosed.

s) Module XIX – Alzheimer's Disease and Related Disorders (RD).
   Objectives: Upon completion of this unit of instruction, the student will be able to:

1) Identify the potential health, social and economic impacts of AD and RD:
   A) Society;
   B) Family; and
   C) Individual.

2) List the primary signs, symptoms and associated features of AD and RD.

3) Discuss memory loss, sensory impairments, perceptual dysfunction, and cognitive and physical changes normally associated with AD and RD.

 t) Module XX – Communications. Objectives: Upon completion of this unit of instruction, the student will be able to:

1) Identify the elements of verbal/nonverbal communication between staff/resident;

2) Discuss the expected language and communication changes in AD and RD residents;

3) Identify effective techniques for enhancing communications; and
4) Discuss the importance of touch and companionship to the AD and RD resident.

u) Module XXI – Care and Treatment Modalities. Objective: Upon completion of this unit of instruction, the student will be able to:

1) Discuss the inter-disciplinary nature of treatment in the care of AD and RD residents;

2) Identify the importance of observation and ways to monitor the behavior and safety of the AD and RD resident;

3) Identify the importance of: consistency in approach; focusing on ability; task breakdown techniques; clueing and distraction techniques;

4) Discuss the difference in approaching activities of daily living (ADL), such as dressing, bathing, grooming, oral hygiene, bowel, bladder, and skin care;

5) List the physical changes and their effects on the AD resident.

v) Module XXII – Behavior Issues and Management Techniques. Objectives: Upon completion of this unit of instruction, the student will be able to:

1) Discuss the common mood and behavioral disturbances of residents with a progressive dementing disorder:

   A) Agitation;
   B) Anxiety;
   C) Catastrophic Reactions;
   D) Clinging;
   E) Combativeness;
   F) Delusions/hallucinations;
   G) Inappropriate sexual behaviors;
   H) Rummaging/hoarding;
   I) Sleep disturbance;
   J) Sundowning (increasing intensity of symptoms during evening hours);
   K) Suspiciousness; and
   L) Wandering/pacing.

2) Identify specific techniques or approaches used to support residents ability:

   A) Behavior;
   B) Cause;
C) Staff intervention/response; and
D) Environment.

w) Module XXIII – Activities. Objectives: Upon completion of this unit of instruction, the student will be able to:
1) Identify appropriate activities based on the individual’s mood and behavioral needs:
   A) Individual;
   B) Small group; and
   C) Large group.
2) Discuss the importance, significance, and types of familiar tasks to support normalization.

x) Module XXIV – Nutrition and Dietary Factors. Objectives: Upon completion of this unit of instruction, the student will be able to:
1) Identify cognitive and physiological changes of AD and RD residents that affect nutrition and feeding patterns;
2) Discuss potential feeding problems, complications, and eating behaviors; and
3) List approaches for maintaining good nutrition and enhancing mealtime.

y) Module XXV – Family Role and Community Resources. Objectives: Upon completion of this unit of instruction, the student will be able to:
1) Define family, significant other, and the sandwich generation (individuals caring for both their children and their elderly parents);
2) Identify role changes and role reversal;
3) Discuss the extent of family caregiving prior to Nursing Home placement;
4) Discuss the impact of chronic stress on family systems;
5) Discuss the impact of caring for the AD and RD family member or resident on the primary caregiver;
6) Identify interventions appropriate for assisting family caregivers to cope with their stress;
7) Identify the different community resources available and their role in the care and treatment of AD and RD residents both inside and outside the facility setting; and
8) Discuss how local chapter of the Alzheimer’s Disease and Related Disorders Association (ADRDA) can assist the resident, the family caregiver, and the facility.
Module XXVI – Staff Support. Objectives: Upon completion of this unit of instruction, the student will be able to:

1) Identify stress factors involved in caring for persons with irreversible cognitive decline;

2) Identify coping mechanisms used by the individual resident to compensate for irreversible cognitive decline; and

3) Identify coping mechanisms that are used during the death, dying and bereavement process by the family and facility staff.

Module XXVII – Cardiopulmonary Resuscitation. Objective: Upon completion of this unit of instruction, the student will be able to initiate basic cardiopulmonary resuscitation. After the training, certification in the provision of basic life support by an American Heart Association or American Red Cross certified training program may be offered as an option for this unit, but such certification is not a pre-requisite for the student’s satisfactory completion of this unit of instruction.

(Source: Amended at 17 Ill. Reg. 2984, effective February 22, 1993)

410 IAC 16.2-3.1-14 Personnel

Sec. 14.

... (b) A facility must not use any individual working in the facility as a nurse aide for more than four (4) months on a full-time, part-time, temporary, per diem, or other basis unless that individual:

(1) is competent to provide nursing and nursing-related services; and

(2) has completed a:

(A) training and competency evaluation program; or

(B) competency evaluation program approved by the division.

(c) Each nurse aide who is hired to work in a facility shall have successfully completed a nurse aide training program approved by the division or shall enroll in the first available approved training program scheduled to commence within sixty (60) days of the date of the nurse aide’s employment. The program may be established by the facility, an organization, or an institution. The training program shall consist of at least the following:

(1) Thirty (30) hours of classroom instruction within one hundred twenty (120) days of employment. At least sixteen (16) of those hours shall be in the following areas prior to any direct contact with a resident:
(A) Communication and interpersonal skills.

(B) Infection control.

(C) Safety/emergency procedures, including the Heimlich maneuver.

(D) Promoting residents’ independence.

(E) Respecting residents’ rights.

(2) The remainder of the thirty (30) hours of instruction shall include the following:

(A) Basic nursing skills as follows:

(i) Taking and recording vital signs.

(ii) Measuring and recording height and weight.

(iii) Caring for residents’ environment.

(iv) Recognizing abnormal changes in body functioning and the importance of reporting such changes to a supervisor.

(v) Caring for residents when death is imminent.

(B) Personal care skills, including, but not limited to, the following:

(i) Bathing.

(ii) Grooming, including mouth care.

(iii) Dressing.

(iv) Toileting.

(v) Assisting with eating and hydration.

(vi) Proper feeding techniques.

(vii) Skin care.

(viii) Transfers, positioning, and turning.

(C) Mental health and social service needs as follows:

(i) Modifying aides’ behavior in response to residents’ behavior.

(ii) Awareness of developmental tasks associated with the aging process.

(iii) How to respond to residents’ behavior.

(iv) Allowing the resident to make personal choices, providing and reinforcing other behavior consistent with the resident’s dignity.
(v) Using the resident’s family as a source of emotional support.

(D) Care of cognitively impaired residents as follows:

(i) Techniques for addressing the unique needs and behaviors of individuals 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.

(v) Methods of reducing the effects of cognitive impairments.

(E) Basic restorative services as follows:

(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.

(vi) Care and use of prosthetic and orthotic devices.

(F) Residents’ rights as follows:

(i) Providing privacy and maintenance of confidentiality.

(ii) Promoting 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 residents’ 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.

(3) Seventy-five (75) hours of supervised clinical experience, at least sixteen (16) hours of which must be in directly supervised practical training. As used in this subdivision, “directly supervised practical training” means training in a laboratory or other setting in which the trainee demonstrates knowledge while performing tasks on an individual under direct supervision of a registered nurse or a licensed practical nurse. These hours shall consist of normal employment as a nurse aide under the supervision of a licensed nurse.
(4) Training that ensures the following:

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

(B) Students who are providing services to residents are under the general supervision of a licensed nurse.

(d) A facility must arrange for individuals used as nurse aides, as of the effective date of this rule, to participate in a competency evaluation program approved by the division and preparation necessary for the individual to complete the program.

(e) Before allowing an individual to serve as a nurse aide, a facility must receive registry verification that the individual has met competency evaluation requirements unless the individual:

(1) is a full-time employee in a training and competency evaluation program approved by the division; or

(2) can prove that he or she has recently successfully completed a training and competency evaluation program approved by the division and has not yet been included in the registry. Facilities must follow up to ensure that such individual actually becomes registered.

(f) A facility must check with all state nurse aide registries it has reason to believe contain information on an individual before using that individual as a nurse aide.

(g) If, since an individual’s most recent completion of a training and competency evaluation program, there has been a continuous period of twenty-four (24) consecutive months during none of which the individual provided nursing or nursing-related services for monetary compensation, the individual must complete a new:

(1) training and competency evaluation program; or

(2) competency evaluation program.

(h) The facility must complete a performance review of every nurse aide at least once every twelve (12) months and must provide regular in-service education based on the outcome of these reviews. The in-service training must be as follows:

(1) Sufficient to ensure the continuing competence of nurse aides but must be no less than twelve (12) hours per year.

(2) Address areas of weakness as determined in nurse aides’ performance reviews and may address the special needs of residents as determined by the facility staff.

(3) For nurse aides providing services to individuals with cognitive impairments, also address the care of the cognitively impaired.

(i) The facility must ensure that nurse aides and qualified medication aides are able to demonstrate competency in skills and techniques necessary to care for residents’ needs as identified through resident assessments and described in the care plan.
(j) Medication shall be administered by licensed nursing personnel or qualified medication aides. If medication aides handle or administer drugs or perform treatments requiring medications, the facility shall ensure that the persons have been properly qualified in medication administration by a state-approved course. Injectable medications shall be given only by licensed personnel.

(k) There shall be an organized ongoing inservice education and training program planned in advance for all personnel. This training shall include, but not be limited to, the following:

1. Residents’ rights.
2. Prevention and control of infection.
3. Fire prevention.
4. Safety and accident prevention.
5. Needs of specialized populations served.
6. Care of cognitively impaired residents.

(l) The frequency and content of inservice education and training programs shall be in accordance with the skills and knowledge of the facility personnel as follows. For nursing personnel, this shall include at least twelve (12) hours of inservice per calendar year and six (6) hours of inservice per calendar year for nonnursing personnel.

(m) Inservice programs for items required under subsection (k) shall contain a means to assess learning by participants.

(n) The administrator may approve attendance at outside workshops and continuing education programs related to that individual’s responsibilities in the facility. Documented attendance at these workshops and programs meets the requirements for inservice training.

(o) Inservice records shall be maintained and shall indicate the following:

1. The time, date, and location.
2. The name of the instructor.
3. The title of the instructor.
4. The names of the participants.
5. The program content of inservice. The employee will acknowledge attendance by written signature.
481—58.11(135C) Personnel. 58.11(1) General qualifications.

...i. Those persons employed as nurse’s aides, orderlies, or attendants in a nursing facility who havenot completed the state-approved 75-hour nurse’s aide program shall be required to participate in a structured on-the-job training program of 20 hours’ duration to be conducted prior to any resident contact, except that contact required by the training program. This educational program shall be in addition to facility orientation. Each individual shall demonstrate competencies covered by the curriculum. This shall be observed and documented by an R.N. and maintained in the personnel file. No aide shall work independently until this is accomplished, nor shall the aide’s hours count toward meeting the minimum hours of nursing care required by the department. The curriculum shall be approved by the department. An aide who has completed the state-approved 75-hour course may model skills to be learned. Further, such personnel shall be enrolled in a state-approved 75-hour nurse’s aide program to be completed no later than six months from the date of employment. If the state-approved 75-hour program has been completed prior to employment, the on-the-job training program requirement is waived. The 20-hour course is in addition to the 75-hour course and is not a substitute in whole or in part. The 75-hour program, approved by the department, may be provided by the facility or academic institution. Newly hired aides who have completed the state-approved 75-hour course shall demonstrate competencies taught in the 20-hour course upon hire. This shall be observed and documented by an R.N. and maintained in the personnel file. All personnel administering medications must have completed the state-approved training program in medication administration. (II)

...k. Nurse aides, orderlies or attendants in a nursing facility who have received training other than the Iowa state-approved program, must pass a challenge examination approved by the department of inspections and appeals. Evidence of prior formal training in a nursing aide, orderly, attendant, or other comparable program must be presented to the facility or institution conducting the challenge examination before the examination is given. The approved facility or institution, following department of inspections and appeals guidelines, shall make the determination of who is qualified to take the examination. Documentation of the challenge examinations administered shall be maintained.

481—58.54 (73GA,ch 1016) Special unit or facility dedicated to the care of persons with chronic confusion or a dementing illness (CCDI unit or facility).

58.54(6) All staff working in a CCDI unit or facility shall have training appropriate to the needs of the residents. (II, III)

a. Upon assignment to the unit or facility, everyone working in the unit or facility shall be oriented
to the needs of people with chronic confusion or dementing illnesses. They shall have special training appropriate to their job description within 30 days of assignment to the unit or facility. (II, III) The orientation shall be at least six hours. The following topics shall be covered:

(1) Explanation of the disease or disorder; (II, III)
(2) Symptoms and behaviors of memory-impaired people; (II, III)
(3) Progression of the disease; (II, III)
(4) Communication with CCDI residents; (II, III)
(5) Adjustment to care facility residency by the CCDI unit or facility residents and their families; (II, III)
(6) Inappropriate and problem behavior of CCDI unit or facility residents and how to deal with it; (II, III)
(7) Activities of daily living for CCDI residents; (II, III)
(8) Handling combative behavior; (II, III) and
(9) Stress reduction for staff and residents. (II, III)

KANSAS

28-39-160. Other resident services.
(a) Special care section. A nursing facility may develop a special care section within the nursing facility to serve the needs of a specific group of residents.

...(6) The facility shall provide a training program for each staff member before the member's assignment to the section. Evidence of completion of the training shall be on file in the employee's personnel records.

(a) Requirements. Unlicensed employees who provide direct individual care to residents shall be required to perform the following:

(1) Successfully complete at least a 90-hour nurse aide course that has been approved by the secretary; and

(2) pass a state test as specified in K.A.R. 28-39-168.
(b) Certification. Each person shall be issued a nurse aide certificate by the secretary and shall be listed on a public registry upon completion of the requirements specified in subsection (a).

(c) Employment as a trainee.

(1) Each nurse aide trainee I in an approved 90-hour course shall be required to successfully complete part I of the course to demonstrate initial competency before being employed or used as a nurse aide trainee II. A nurse aide trainee II may provide direct care to residents only under the direct supervision of a registered nurse or licensed practical nurse.

(2) Each nurse aide trainee II in an approved 90-hour course shall be issued a nurse aide certificate by the secretary, upon completion of the requirements specified in subsection (a), within four months from the beginning date of the initial course in order to continue employment providing direct care. Nurse aide trainee II status for employment shall be for one four-month period only.

(d) 90-hour nurse aide course.

(1) Each nurse aide course shall be prepared and administered in accordance with the guidelines established by the department in the "Kansas certified nurse aide curriculum guidelines (90 hours)," including the appendices, dated May 2008, and the "Kansas 90-hour certified nurse aide sponsor and instructor manual," pages 1 through 20 and the appendices, dated May 2008, which are hereby adopted by reference.

(2) Each nurse aide course shall consist of a combination of didactic and clinical instruction. At least 50 percent of part I and part II of the course curriculum shall be provided as clinical instruction.

(3) Each nurse aide course shall be sponsored by one of the following:

(A) An adult care home;

(B) a long-term care unit of a hospital; or

(C) a postsecondary school under the jurisdiction of the state board of regents.

(4) Clinical instruction shall be conducted in one or a combination of the following locations:

(A) An adult care home;

(B) a long-term care unit of a hospital; or

(C) a simulated laboratory.

(5) An adult care home shall not sponsor or provide clinical instruction for a 90-hour nurse aide course if that adult care home has been subject to any of the sanctions under the medicare certification regulations listed in 42 C.F.R. 483.151(b)(2), as in effect on October 1, 2007.
(e) Correspondence courses. No correspondence course shall be approved as a nurse aide course.

(f) Other offerings. Distance-learning offerings and computer-based educational offerings shall meet the standards specified in subsection (d).


(a) Approval and qualifications.

(1) Each person who intends to be a course instructor shall submit a completed instructor approval application form to the department at least three weeks before offering an initial course and shall receive approval as an instructor before the first day of an initial course.

(2) Each course instructor shall be a registered nurse with a minimum of two years of licensed nursing experience, with at least 1,750 hours of experience in either or a combination of an adult care home or long-term care unit of a hospital. Each course instructor shall have completed a course in teaching adults, shall have completed a professional continuing education offering on supervision or adult education, or shall have experience in teaching adults or supervising nurse aides.

(b) Course instructor and course sponsor responsibilities.

(1) Each course instructor and course sponsor shall be responsible for ensuring that the following requirements are met:

(A) A completed course approval application form shall be submitted to the department at least three weeks before offering a course. Approval shall be obtained from the secretary at the beginning of each course whether the course is being offered initially or after a previous approval. Each change in course location, schedule, or instructor shall require approval by the secretary.

(B) All course objectives shall be accomplished.

(C) Only persons in health professions having the appropriate skills and knowledge shall be selected to conduct any part of the training. Each person shall have at least one year of experience in the subject area in which that person is providing training.

(D) Each person providing a part of the training shall do so only under the direct supervision of the course instructor.

(E) The provision of direct care to residents by a nurse aide trainee II during clinical instruction shall be limited to clinical experiences that are for the purpose of learning nursing skills under the direct supervision of the course instructor.

(F) When providing clinical instruction, the course instructor shall perform no other duties but the direct supervision of the nurse aide trainees.
(G) Each nurse aide trainee in the 90-hour nurse aide course shall demonstrate competency in all skills identified on the part I task checklist before the checklist is signed and dated by the course instructor as evidence of successful completion of part I of the course.

(H) The course shall be prepared and administered in accordance with the guidelines in the “Kansas certified nurse aide curriculum guidelines (90 hours)” and the “Kansas 90-hour certified nurse aide sponsor and instructor manual,” as adopted in K.A.R. 28-39-165.

(2) Any course instructor or course sponsor who does not meet the requirements of this regulation may be subject to withdrawal of approval to serve as a course instructor or a course sponsor.


(a) Each person whom the secretary has determined to have successfully completed training or passed a test, or both, that is equivalent to the training or test required by this state may be employed without taking this state’s test.

(b) Each person whom the secretary has determined not to be exempt from examination pursuant to subsection (a) but who meets any one of the following requirements shall be deemed to have met the requirements specified in K.A.R. 28-39-165 if that person passes a state test as specified in K.A.R. 28-39-168:

(1) Each person who has received nurse aide training in another state, is listed on another state’s registry as a nurse aide, and is eligible for employment as a nurse aide shall be deemed eligible to take the state test as specified in K.A.R. 28-39-168. Each person whose training in another state is endorsed and who has passed the state test shall be issued a nurse aide certificate.

(2) Each person who meets any of the following criteria shall be deemed eligible to take the state test as specified in K.A.R. 28-39-168:

(A) Has completed training deemed equivalent to the requirements specified in K.A.R. 28-39-165;

(B) is currently licensed in Kansas or another state to practice as a registered nurse, licensed practical nurse, or licensed mental health technician, with a license that has not been suspended or revoked; or

(C) has a license to practice as a registered nurse, licensed practical nurse, or licensed mental health technician that has expired within the 24-month period before applying for equivalency, but has not been suspended or revoked.

(3) Each person who has received training from an accredited nursing or mental health technician training program within the 24-month period before applying for equivalency and whose training included a basic skills component comprised of personal hygiene, nutrition and feeding, safe transfer and ambulation techniques, normal range of motion and positioning, and a supervised clinical experience in geriatrics shall be deemed eligible to take the state test as specified in K.A.R. 28-39-168.
(c) Each person qualified under subsection (a) shall receive written notification from the department of exemption from the requirement to take this state's test and the fact that the person is eligible for employment.

(d) Each person qualified under subsection (b) shall receive written approval from the department or its designated agent to take the state test. Upon receiving written approval from the department or its designated agent to take the state test, that person may be employed by an adult care home as a nurse aide trainee II to provide direct care under the direct supervision of a registered nurse or licensed practical nurse. Each person employed as a nurse aide trainee II shall be issued a nurse aide certificate by the secretary, upon completion of the requirements specified in K.A.R. 28-39-165, within one four-month period starting from the date of approval, in order to continue employment providing direct care.


(a) Composition of state nurse aide test. The state test shall be comprised of 100 multiple-choice questions. A score of 75 percent or higher shall constitute a passing score.

(b) State nurse aide test eligibility.

(1) Only persons who have successfully completed an approved 90-hour nurse aide course or completed education or training that has been endorsed or deemed equivalent as specified in K.A.R. 28-39-167 shall be allowed to take the state test.

(2) Each person shall have a maximum of three attempts within 12 months from the beginning date of the course to pass the state test after completing an approved 90-hour course as specified in K.A.R. 28-39-165.

(3) If the person does not pass the state test within 12 months after the starting date of taking an approved 90-hour course, the person shall retake the entire course.

(4) If a person whose education or training has been endorsed or deemed equivalent as specified in K.A.R. 28-39-167 and the person does not pass the state test on the first attempt, the person shall successfully complete an approved 90-hour nurse aide course as specified in K.A.R. 28-39-165 to retake the state test. Each person whose training was endorsed or deemed equivalent, who failed the state test, and who has successfully completed an approved nurse aide course shall be eligible to take the test three times within a year after the beginning date of the course.

(c) Application fee.

(1) Each nurse aide trainee shall pay a nonrefundable application fee of $20.00 before taking the state test. A nonrefundable application fee shall be required each time the test is scheduled to be taken. Each person who is scheduled to take the state test, but fails to take the state test, shall submit another fee before being scheduled for another opportunity to take the test.
(2) Each course instructor shall collect the application fee for each nurse aide candidate eligible to take the state test and shall submit the fees, class roster, application forms, and accommodation request forms to the department or its designated agent.

(d) Each person who is eligible to take the state test and who has submitted the application fee and application form shall be issued written approval, which shall be proof of eligibility to sit for the test.

(e) Test accommodation.

(1) Any reasonable test accommodation or auxiliary aid to address a disability may be requested by any person who is eligible to take the state test. Each request for reasonable accommodation or auxiliary aid shall be submitted each time a candidate is scheduled to take the test.

(2) Each person requesting a test accommodation shall submit an accommodation request form along with an application form to the instructor. The instructor shall forward these forms to the department or its designated agent at least three weeks before the desired test date. Each instructor shall verify the need for the accommodation by signing the accommodation request form.

(3) Each person whose second language is English shall be allowed to use a bilingual dictionary while taking the state test. Limited English proficiency shall not constitute a disability with regard to accommodations. An extended testing period of up to two additional hours may be offered to persons with limited English proficiency.

(f) This regulation shall not apply to any person who meets the requirement of K.A.R. 28-39-167(a).

KENTUCKY

Section 15. Administration. [nursing facilities.]

...(3) Required training of nurse aides.

(a) General rules. A facility shall not use any individual working in the facility as a nurse aide for more than four(4) months, on a full-time, temporary, per diem, or other basis, unless:

1. That individual is listed on the Kentucky Nurse Aide Registry; and

2. That individual is competent to provide nursing and nursing related services.

(b) Competency. A facility shall permit an individual to serve as a nurse aide or provide services of a type for which the individual has not demonstrated competence only when:
1. The individual is currently enrolled and participating in the Kentucky Medicaid Nurse Aide Training Program; or

2. The facility has asked and not yet received a reply from the Kentucky Nurse Aide Registry for information concerning the individual.

(c) Regular in-service education. The facility shall provide regular performance review and regular in-service education to ensure that individuals used as nurse aides are competent to perform services as nurse aides. In-service education must include training for individuals providing nursing and nursing related services to residents with cognitive impairments.

(4) Proficiency of nurse aides. The facility shall ensure that nurse aides are able to demonstrate competency in skills and techniques necessary to care for residents' needs, as identified through resident assessments, and described in the plan of care.

LOUISIANA

Downloaded January 2011

Subchapter B. Nursing Services

§9811. Nursing Service Personnel

...D. There shall be on duty, at all times, at least one licensed nurse to serve as charge nurse responsible for the supervision of the total nursing activities in the nursing home or assigned nursing unit.

E. Nurse aides shall be assigned duties consistent with their training and successful demonstration of competencies.

MAINE

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8.C.1. Nursing Staff

...b. Certified Nursing Assistant

1. A facility must not employ anyone as a nursing assistant for more than four (4) months, on a full-time, temporary, per diem, or other basis, unless that individual has completed a training and/or competency evaluation program that is based upon the standard curriculum established by the Maine State Board of Nursing and approved by the Department of Education, or has been granted reciprocity or has been deemed competent under Maine State Board of Nursing rules.

2. When an individual has not performed paid nursing services for a continuous period of twenty-four (24) consecutive months since the most recent completion of a training and
competency evaluation program, the individual must meet qualifications for competency established by the Maine State Board of Nursing.

3. A facility may not use staff of outside agencies to perform nursing assistant duties, unless that person is a CNA.

4. The facility must check with the State of Maine Registry of Certified Nursing Assistants to assure that the prospective CNA is listed on the Registry and has no record of a conviction or a substantiated complaint of resident abuse, neglect or misappropriation of residents’ funds or property.

8.C.7. Age Requirement

No person under the age of sixteen (16) shall fulfill the staffing requirements for CNAs.

9.B.2. Certified Nursing Assistants

The nursing tasks assigned to a CNA shall only be those for which the CNA has been trained and which are within the scope of the duties, as defined by the Maine State Board of Nursing rules and regulations.

9.B.3 Nursing Assistant

a. Prior to the initial assignment of a nursing task to a nursing assistant, the Registered Professional Nurse shall determine if the individual is enrolled in a course preparing nursing assistants. The Registered Professional Nurse may assign to that individual only those tasks for which the individual has been satisfactorily prepared as documented by the instructional staff. Such training program or course must be satisfactorily completed within four (4) months from the date of employment.

b. When a nursing assistant is waiting for a training program to start, he/she may participate in non-direct care activities, such as making unoccupied beds and passing trays, and water and linens.

10.07.02.39 Geriatric Nursing Assistant Program.

A. Facility Responsibilities.

(1) Each facility shall conduct or arrange a nurses’ aide training program for unlicensed personnel assigned direct patient care duties. This requirement does not extend to physical or occupational therapy assistants or to other employees performing delegated, non-
nursing functions. The facility may use an outside program if it has been reviewed and approved by the Department.

(2) Each facility shall submit a written proposal to the Department for satisfying the developmental training program requirement.

(3) A nurse aide is deemed to satisfy the requirements of this chapter if that individual has successfully completed a training program approved by the State before July 1, 1990, or has been "grandfathered" under previous regulations.

(4) Other persons hired as nurse aides after July 1, 1990 shall complete an approved program within 120 days of employment.

(5) The facility shall record the satisfactory completion of the program in each employee's personnel record. A certificate evidencing completion of the program shall be issued to the employee. The signature of the program's teacher or trainer shall be required for authentication.

B. Course Structure.

(1) Effective with employees hired on or after July 1, 1990, the training program course shall consist of 75 hours or more, and include at least 37.5 hours of classroom instruction and not less than 37.5 hours of supervised clinical experience in long-term care.

(2) The course content shall adhere to the Geriatric Nursing Assistant Program curriculum in Regulation .40 of this chapter.

(3) The course instructor shall have overall supervisory responsibility for the operation of the program, and shall:

(a) Be a registered nurse licensed in Maryland;

(b) Have at least 2 years of nursing experience, at least 1 year of which shall have been in caring for the elderly or chronically ill in the past 5 years; and

(c) Have attended a program of instruction in training methodologies approved by the Department.

(4) Supplementary instructors shall be drawn from qualified resource personnel such as registered nurses, licensed practical/vocational nurses, pharmacists, dieticians, social workers, sanitarians, fire safety experts, nursing home administrators, gerontologists, psychologists, physicians, physical and occupational therapists, activities specialists, speech/language/hearing therapists, and residents' rights experts, as well as persons with relevant experience, such as residents or experienced aides.

(5) Adequate numbers of instructors are required to ensure that each trainee is provided effective assistance and supervision which does not endanger the safety of residents.

(6) Each training program shall have behaviorally stated objectives for each unit of instruction, stating measurable performance criteria.
(7) Each trainee shall be clearly identified as a trainee during all skills training portions of the training.

(8) During training, a trainee may provide only that care for which the trainee has demonstrated competency to the satisfaction of the appropriate program instructor.

(9) An orientation program shall be provided to trainees for a nursing facility in which training is to occur. This program shall consist of:

(a) An explanation of organizational structure, policies, and procedures;

(b) Discussion of the philosophy of care;

(c) Description of the resident population; and

(d) Employee rules.

(10) The orientation may not be included in the required 75 hours of the training course.

(11) A training program shall provide at least 16 hours of training prior to a trainee’s direct assignment to resident care. This instruction shall include the following topics:

(a) Infection control;

(b) Safety and emergency procedures;

(c) Promoting residents’ independence;

(d) Respecting residents’ rights; and

(e) Communication and interpersonal skills.

10.07.02.40 Curriculum for the Geriatric Nursing Assistant Program.

A. Introduction.

(1) Role of nursing assistant;

(2) Relationships of nursing assistant to health care team;

(3) Purpose of long-term care;

(4) Patient’s rights.

B. Approaches of Caring for the Aging Patient.

(1) Observation/reporting:

(a) Changing function and behavior--normal vs. abnormal,

(b) Confidentiality;
(2) Communication:
   (a) Forms (examples, body language, verbal and nonverbal),
   (b) Patient, family and staff;

(3) Cultural and social needs:
   (a) Background—past/present views,
   (b) Social myths and prejudice;

(4) Spiritual needs;
(5) Family's needs and reaction.

C. Patient Environment.

   (1) Safety:
   (a) Protective devices/restraints,
   (b) Fire and disaster;

   (2) Infection control:
   (a) Handwashing;
   (b) Signs and symptoms of common communicable disease;
   (c) Basics in isolation techniques;

   (3) Maintaining the patient room:
   (a) General environmental cleanliness;
   (b) Age-related consideration (for example, temperature, glare, noise);

   (4) Equipment:
   (a) Storage,
   (b) Use,
   (c) Preventive maintenance.

D. Basic Skills. These skills will require instruction, demonstration, and return demonstration by each student.

   (1) Bedmaking:
   (a) Supplies,
   (b) Occupied/unoccupied,
(c) Method,
(d) Handling of linens (clean and dirty);

(2) Personal grooming:
(a) Baths:
   (i) Types,
   (ii) Supplies,
   (iii) Nail care,
   (iv) Foot care,
   (v) Hair care;
(b) Oral hygiene:
   (i) Importance,
   (ii) Equipment,
   (iii) Procedure,
   (iv) Special care;

(3) Feedings:
(a) Types,
(b) Assisting,
(c) Independent,
(d) Complete;

(4) Bedpans and urinals:
(a) Precautions,
(b) Positioning;

(5) Body mechanics:
(a) Transfer:
   (i) Equipment,
   (ii) Principles,
   (iii) Types;
(b) Positioning:

(i) Bed,

(ii) Chair.

E. Intermediate Skills. These abilities will require instruction, demonstration, and return demonstration by each student.

(1) Ambulation:

(a) Walker,

(b) Cane;

(2) Enemas:

(a) Types,

(b) Positioning;

(3) Collection and types of specimens (urine, stool, and sputum);

(4) Intake and output—observation and recording;

(5) Vital Signs:

(a) Temperature,

(b) Pulse,

(c) Respirations,

(d) Height,

(e) Weight,

(f) Blood pressure;

(6) Terminal care:

(a) Dying vs. death,

(b) Family—present and past,

(c) Personal possessions,

(d) Cultural benefits,

(e) Postmortem care.

F. Advance Skills. These skills will require instruction, demonstration, and return demonstration by each student.
(1) Bowel and bladder training;
(2) Range of motion;
(3) Reality orientation;
(4) Patient care planning implementation;
(5) Oxygen;
(6) Emergency procedures;
(7) Decubitus care and prevention;
(8) Feeding tube care;
(9) Catheter care and positioning of tube for drainage;
*(10). Impactions—observation and removal;
*(11) Colostomy/ileostomy/ileo-conduit;
(12) Hot and cold applications;
*(13) Sitz baths, -----------
* Optional procedures.

G. Principles of Body Systems. Objectives of this unit will be to present a basic overview of each system as it relates to patient limitation/condition/disease.

(1) Circulatory;
(2) Respiratory;
(3) Muscular and skeletal;
(4) Sensory/neurological;
(5) Metabolic/endocrine;
(6) Urinary;
(7) Gastrointestinal;
(8) Skin.

H. Dementia. Objectives of this unit will be to enable students to identify and describe behavior and symptoms of dementia, to recognize and report changes in behavior to supervisors, to assist cognitively impaired patients with activities of daily living including personal care and ambulation with the least possible behavior disruptions, to maintain a
safe environment for patients with dementia, and to intervene appropriately in behavioral manifestations of dementia.

(1) Introduction.
(a) Definition of dementia disease process;
(b) Misconceptions;
(c) Causes:
   (i) Irreversible,
   (ii) Reversible;
(d) Delirium:
   (i) Recognizing delirium to differentiate delirium from dementia;
   (ii) Causes.
(2) Behaviors and Symptoms.
(a) Specific behaviors:
   (i) Aggressiveness,
   (ii) Agitation/screaming,
   (iii) Catastrophic,
   (iv) Hallucinations/delusions,
   (v) Inappropriate sexual behavior,
   (vi) Limited attention span,
   (vii) Resistive behavior,
   (viii) Rummaging and hoarding,
   (ix) Suspiciousness,
   (x) Wandering;
(b) Related behaviors:
   (i) Anxiety,
   (ii) Demanding,
   (iii) Depression/withdrawal,
   (iv) Irritability,
(v) Sleep changes.

(3) Psychosocial Aspects.

(a) Impact on family;

(b) Impact on other residents;

(c) Coping with losses;

(d) Staff stress and its management.

(4) Responses to Behaviors. Each behavior shall include a description of the behavior, what to report and when to report, to whom to report, and management aspects (environment, communication, social/activities, physical management).

10.07.02.42 Geriatric Nursing Assistant Program — Competency Evaluation and Registry.

A. Geriatric Nursing Assistant Competency Evaluation.

(1) The Department shall provide for the evaluation and certification of the competency of geriatric nursing assistants.

(2) The Department will approve one or more competency evaluation programs meeting the criteria set forth by the Health Care Financing Administration of the United States Department of Health and Human Services for registration of nursing aides under Titles XVIII (Medicare) and XIX (Medicaid) of the Social Security Act.

(3) On or after October 1, 1990, a comprehensive care facility may not employ an individual in the capacity of geriatric nursing assistant unless the individual has successfully completed a competency evaluation approved by the Department, except as provided in Regulations .39A(1) and (3) and .41B of this chapter. The competency evaluation shall consist of two parts, which are a written evaluation and a clinical skills evaluation.

(4) On or after October 1, 1990, an individual shall be reregistered as a geriatric nursing assistant if there has been a continuous period of 24 months during which the individual did not provide nursing assistant duties for monetary compensation since the individual’s last registration.

B. Geriatric Nursing Assistant Registry.

(1) The Department shall establish and maintain a registry of geriatric nursing assistants properly certified to work in that capacity in comprehensive care facilities or extended care facilities in Maryland.

(2) Individuals possessing proof of out-of-State registration as a geriatric nursing assistant as provided under Regulation .41B of this chapter shall submit proof of that registration to the Department in order to be listed in the geriatric nursing assistant registry in Maryland.
(3) Except as provided in Regulation .39A(3) of this chapter, after the establishment of a registry, a nursing facility may not employ an individual as a geriatric nursing assistant who is not listed in the registry.

(4) The registry shall include the following information concerning individuals listed:

(a) Full name, including maiden name and other surnames used;
(b) Address at the time the competency evaluation is passed;
(c) Date of birth;
(d) Social Security number;
(e) Name of training program and date of completion;
(f) An individual's last known employer and the date of hiring and termination by the employer;
(g) Date or dates of competency evaluation and date of successful completion of competency evaluation;
(h) Any findings documented by the Department of resident neglect or abuse, or misappropriation of resident property involving an individual listed in the registry; and
(i) A brief statement disputing the findings in §B(4)(h), of this regulation, by an individual, if the individual makes a statement.

(5) Before any finding is included in the registry, the Department shall notify the individual involved, and permit the individual to appeal the finding. The appeal shall be filed within 30 days of the notification by the Department. If an appeal is filed in a timely manner, the finding may not be included until a decision by the Secretary that the inclusion of the findings is appropriate.

(6) A person participating in good faith in these activities is not civilly liable under the provisions of Health-General Article, §19-347(g), Annotated Code of Maryland.

(7) Information contained in the registry shall be considered public information under the Maryland Public Information Act and in accordance with federal law.

(8) Renewal and updating of a geriatric aide's registration is required every 2 years on a schedule set by the State.

(9) Registration fees may be charged to the individual to be listed in the registry.

MASSACHUSETTS

150.007: Nursing Services

...(C) Qualifications and Duties
...(6) At no time shall direct patient care be provided by individuals under 16 years of age, housekeeping staff or kitchen workers.

105 CMR 155.000: PATIENT AND RESIDENT ABUSE PREVENTION

155.010: Responsibilities of the Facility

...(E) Responsibility to Contact Registry.

(1) All facilities...shall contact the registry prior to hiring a nurse aide in order to determine whether the prospective employee has met the federal requirements for competency contained in 42 USC s.1396r and has been certified as a nurse aide for employment in a facility.

(2) All facilities shall contact the registry prior to hiring any employee to ascertain if there is any sanction, finding or adjudicated finding of patient or resident abuse, neglect, mistreatment or misappropriation of patient or resident property against the prospective employee.

155.016: Establishment and Content of the Registry for Nurse Aides

(A) The Department shall establish and maintain a registry of all individuals who have met the federal requirements for competency contained in 42 USC §1396r and have been certified as nurse aides for employment in a facility.

(B) A facility…must not hire or employ on a paid, unpaid, temporary or permanent basis, any individual working as a nurse aide for more than four months, unless that individual is listed in the registry as having demonstrated competency in accordance with 105 CMR 155.016

(C) The registry shall also contain the following:

(1) specific, documented findings or adjudicated findings of patient or resident abuse, neglect, mistreatment or misappropriation of patient or resident property by nurse aides...

The documentation must include:

(a) the name, address, telephone number and social security number of such individual;

(b) the nature of the allegation and the record number identifying the documents on which the Department’s conclusion were based; and

(c) the date of the hearing if such individual chose to have one, and its outcome.

(2) a brief statement by the accused nurse aide…disputing the findings, if such individual chooses to provide such statement;
(3) if the Department imposed any suspension or probationary period on the nurse aide...the dates for which such suspension or probation is in effect; and

(4) if known to the Department, any guilty findings made against such individual by a court of law, or any guilty pleas, nolo contendere pleas, or admission to facts sufficient to support a guilty finding made in a court of law by such individual accused of patient or resident abuse, neglect, mistreatment, or misappropriation of patient or resident property.

(D) Disclosure of information on the registry:

(1) the Department must disclose information regarding findings and adjudicated findings of patient or resident abuse, neglect, mistreatment or misappropriation of patient or resident property, other sanctions imposed against any nurse aide... as well as any information regarding guilty findings, guilty pleas, nolo contendere pleas or admitted to sufficient facts to support a guilty finding made by such individual in a court of law.

(2) when disclosing such information regarding any nurse aide... the Department shall also disclose any statement made by such individual disputing the findings.

105 CMR 156.000: THE TRAINING OF NURSES' AIDES IN LONG-TERM CARE FACILITIES

105 CMR 156.000 sets forth standards for the training of nurses' aides who assist nurses in providing nursing care in level II/III long-term care facilities... The following are available in Department of Public Health guidelines: curriculum specifications; evaluation form to be used by all instructors; course application form and blank document of completion.

156.010: Scope and Applicability

105 CMR 156.000 applies to all licensed level II and III long-term care facilities and those level IV units which employ nurses' aides as defined below.

156.100: Responsibilities of the Facility

(A) Any facility which hires a nurses’ aide, except as described in 105 CMR 156.100(D), shall provide, or arrange to provide, training for said nurses’ aide in accordance with 105 CMR 156.000 except as provided for in 105 CMR 156.130. Such training shall be completed within 90 days of commencement of employment, as provided for in 105 CMR 156.140(C).

(B) The facility shall be responsible for documenting that all nurses’ aides employed by the facility are in conformity with the training requirements as set forth in 105 CMR 156.000.

(C) The documentation shall include but is not limited to:
(1) For each nurses' aide:

(a) Document of Completion; or

(b) Evidence of enrollment in a training course, or participation in the evaluation process in accordance with timeframes set forth in 105 CMR 156.120, 105 CMR 156.130, and 105 CMR 156.140; and

(2) If the licensee/facility served as a training provider, the documentation specified in 105 CMR 156.200: Responsibilities of Training Providers.

(D) The facility shall ensure that all nurses' aides employed through temporary help agencies have successfully completed a nurses' aide training course in accordance with 105 CMR 156.120, are enrolled in a nurses' aides training course with planned completion in accordance with 105 CMR 156.120, or are currently being evaluated with planned completion in accordance with 105 CMR 156.130.

(1) The facility shall have a written agreement with the temporary help agency that the agency will provide only nurses' aides trained in conformity with 105 CMR 156.100(D).

(2) For nurses' aides employed through temporary help agencies, the facility shall verify, prior to employment by the facility, that such nurses' aides have been trained in conformity with 105 CMR 156.000 as specified in 105 CMR 156.100(D).

(E) The facility shall not continue to employ any nurses' aides who has not:

(1) Successfully completed both of the following:

(a) Training in accordance with these regulations, 105 CMR 156.120 within 90 days of commencement of employment as provided for in 105 CMR 156.140(C); and

(b) Evaluation as specified in 105 CMR 156.400 and a Document of Completion received within 180 days of commencement of employment as provided for in 105 CMR 156.140(C); or

(2) Successfully completed the equivalency evaluation in accordance with the timeframes set forth in 105 CMR 156.130 and 156.140(C).

(F) The facility shall ensure that nurses' aides perform only those tasks for which they have been trained and for which they have successfully demonstrated their ability to correctly perform these tasks. Such demonstrations shall be documented on the evaluation form as specified in 105 CMR 156.400.

156.120: Nurses' Aides Required to Take Training Course

(A) All nurses' aides employed by a long-term care facility must be trained in accordance with 105 CMR 156.000 except as provided for in 105 CMR 156.130.

(B) A nurses' aide who has completed training and received a Document of Completion in accordance with 105 CMR 156.000: The Nurses' Aides Training, but who has not been
employed as a nurses' aide by a long-term care facility or temporary help agency for long-term care facilities for two or more consecutive years subsequent to such completion, shall be considered a new employee and is required to repeat training as specified in 105 CMR 156.120.

(C) Each nurses' aide must complete training within 90 days of the commencement of employment, as provided for in 105 CMR 156.140(C).

(D) Each nurses' aide must successfully complete evaluation as specified in 105 CMR 156.400 within 180 days of the commencement of employment, as provided for in 105 CMR 156.140(C).

156.130: Nurses’ Aides Who May Substitute Equivalency Evaluation for Training Course

The following individuals are eligible for equivalency evaluation in lieu of completion of a training course to satisfy the requirements of 105 CMR 156.000. If such individuals choose not to take the equivalency evaluation in lieu of the training course, they shall be considered new employees subject to the requirements set forth in 105 CMR 156.120.

(A) Individuals who have completed training equivalent to the minimum standard curriculum.

(1) Such individuals shall have completed one of the following within the two years preceding the commencement of employment to be eligible for the equivalency evaluation:

(a) Documented successful completion of long-term care nurses' aides training programs regulated by other states;

(b) Documented successful completion of a clinical course in an approved school of nursing, in accordance with 244 CMR 6.00, which included hands-on care skills as specified in the minimum standard curriculum.

(2) Such nurses' aides shall successfully complete an equivalency evaluation in accordance with 105 CMR 156.400 as follows:

(a) Nurses' aides, described in 105 CMR 156.130(A)(1), whose employment in a Massachusetts long-term care facility commenced prior to the date of promulgation of these regulations shall successfully complete an equivalency evaluation on or before June 30, 1989;

(b) Nurses' aides, described in 105 CMR 156.130(A)(1), who are hired on or after the date of promulgation and prior to January 1, 1989 shall successfully complete equivalency evaluation on or before March 31, 1989;

(c) Nurses' aides, described in 105 CMR 156.130(A)(1), hired on or after January 1, 1989 shall successfully complete evaluation within 90 days subsequent to the commencement of employment.
(B) Nurses' aides whose employment by a licensed long-term care facility or temporary help agency commenced prior to the promulgation of 105 CMR 156.000.

(1) Such nurses' aides shall meet the following eligibility requirements:

(a) Have completed a nurses' aide training course within the preceding two years; or

(b) Have been employed as a nurses' aide by a long-term care facility or by a temporary help agency and assigned to long-term care facilities one year out of the past three years on a full-time basis or at least 100 days in the year prior to promulgation with no interruption in employment greater than ten weeks.

(2) Such nurses' aides shall successfully complete an equivalency evaluation in accordance with 105 CMR 156.400 on or before June 30, 1989.

(C) The Commissioner or his or her designee may waive the qualifications for individuals permitted to take the equivalency evaluation in lieu of the training course imposed by 105 CMR 156.130(A) and (B) upon finding that:

(1) The individual has had the following experience:

(a) Employment as a nurses' aide for one year out of the past three years on a full-time basis or at least 100 in the year prior to proposed evaluation with no interruption in employment greater than ten weeks; and

(b) Provision of direct care services to the elderly including but not limited to bathing, grooming, and feeding during the employment period specified above in 105 CMR 156.130(C)(1)(a); and

(c) Provision of such direct care services in an institutional setting including a chronic or acute care hospital.

(2) The proposed waiver does not jeopardize the health or safety of the facility's residents and does not limit the facility's capacity to give adequate care.

(3) The facility provides to the Commissioner or his or her designee written documentation supporting its request for a waiver.

(4) Such nurses' aides shall successfully complete an equivalency evaluation in accordance with 105 CMR 156.400 as follows:

(a) Nurses' aides, for whom a waiver has been obtained pursuant to 105 CMR 156.130(C), whose employment in a long-term care facility commenced prior to January 1, 1989 shall successfully complete equivalency evaluation on or before March 31, 1989;

(b) Nurses' aides, for whom a waiver has been obtained pursuant to 105 CMR 156.130(C) and who are hired on or after January 1, 1989 shall successfully complete evaluation within 90 days subsequent to the commencement of employment.

(D) A facility shall not continue to employ an individual as a nurses' aide who does not successfully complete an evaluation as pursuant to the provisions of 105 CMR 156.130.
156.140: Implementation Schedule

(A) Upon promulgation of these regulations, 105 CMR 156.000, training providers may:

(1) submit training courses for approval according to procedures set forth in 105 CMR 156.330;

(2) begin training courses upon notification of course approval by the Department.

(B) For courses which began prior to date of promulgation, but which will be completed subsequent to promulgation of 105 CMR 156.000, training providers shall:

(1) modify courses as necessary to include the minimum standard curriculum as specified in 105 CMR 156.330;

(2) submit such courses for approval according to procedures set forth in 105 CMR 156.330;

(3) include evaluation as specified in 105 CMR 156.400 in such training courses.

(C) While training may begin upon promulgation of 105 CMR 156.000 as specified in 105 CMR 156.140(A), all nurses' aides, who do not qualify for equivalency evaluation under 105 CMR 156.130, and who are hired on or after January 1, 1989 shall complete training within 90 days subsequent to the commencement of employment and shall successfully complete evaluation within 180 days subsequent to the commencement of employment, as specified in 105 CMR 156.310. Nurses' aides hired on or after the date of promulgation and prior to January 1, 1989 shall complete training on or before March 31, 1989 and shall successfully complete evaluation on or before June 30, 1989.

156.200: Responsibilities of Training Providers

(A) Nurses' aides training providers shall:

(1) employ, or have written arrangements with, an instructor who meets the qualifications as specified in 105 CMR 156.210: Qualifications of the Instructor;

(2) provide, or have written arrangements to provide, facilities for classroom and clinical instruction in a level II or III long-term care facility; and

(3) offer a curriculum that has been approved by the Department.

(B) Level IV facilities shall not serve as training providers.

(C) Examples of training providers include but are not limited to: vocational high schools, community colleges, long-term care facilities, and temporary help agencies.
(D) The training provider shall submit a curriculum proposal for approval by the Department as specified in 105 CMR 156.330: Curriculum Approval Mechanism.

(E) The following documentation for each course offered shall be maintained by the training provider and available for inspection by the Department:

1. curriculum outline and record of dates on which courses were taught;
2. notification of approval by the Department;
3. daily attendance roster;
4. name and resume of instructors showing that each one meets the requirements as specified in 105 CMR 156.210: Qualifications of Instructor;
5. copies of all Documents of Completion issued by that training provider and
6. copies of all evaluation forms completed by that training provider.

156.210: Qualifications of the Instructor

(A) Instructors for nurses' aides training courses shall meet these qualifications:

1. Be a registered nurse with current licensure; and

2. (a) 1. Have at least one year's experience in lesson planning, lesson delivery, student evaluation and remediation in a health care setting with this experience gained in such positions as inservice coordinator, staff educator, or other health personnel instructor; or
2. Have attended the equivalent of twenty-four contact hours in programs which meet continuing education standards currently set forth in regulations governing the Board of Registration in Nursing 244 CMR 5.00 and which provide instruction in curriculum development, use of teaching strategies for adult learners and student evaluation; or

(b) Meet all of the following qualifications:

- Have a written agreement for consultation with a registered nurse who has the qualifications set forth in 105 CMR 156.210(A)(1) and (2)(a);

- Obtain such consultation prior to each course, midway through the course and at the end of the course prior to final evaluation. This consultation shall include lesson plans, teaching strategies, resource materials, evaluation procedures, and remediation methods;

- Document the dates and recommendation of the consultations; and

- Attend program(s) which meets continuing education standards set forth in the regulations governing the Board of Registration in Nursing 244 CMR 5.00 consisting of not less than 24 contact hours of adult education within the first year as instructor.
(3) The Commissioner or his or her designee may waive the qualifications of the instructor imposed by 105 CMR 156.210(A)(1) and (2) upon finding that:

(a) The proposed instructor has obtained sufficient experience in the care of long-term care residents and teaching adults how to provide such health care to ensure that he or she may train nurses' aids to perform the objectives outlined in the minimum standard curriculum described in 105 CMR 156.320, and

(b) The training provider provides to the Commissioner or his or her designee written documentation supporting its request for a waiver.

(B) Other health care professionals such as dieticians, social workers, physical therapists, occupational therapists, and others may teach lessons or modules of a nurses' aides training course.

156.220: Responsibilities of the Instructor

(A) The instructor shall prepare the curriculum that he or she will teach as specified in 105 CMR 156.320: Minimum Curriculum Standards and as prescribed in curriculum specifications as prescribed by and available in guidelines from the Department and shall participate in the planning of each lesson, even if he or she does not teach that specific lesson.

(B) The instructor shall evaluate each student to determine whether he or she has satisfactorily completed each module of nurses' aides training and shall offer remediation for each student as needed.

(C) The instructor shall sign and issue a Document of Completion for each student upon satisfactory completion of the evaluation which is a part of a nurses' aides training course as specified in 105 CMR 156.410: Completed Training/Experience.

(D) The instructor who serves as an evaluator for equivalency evaluation in accordance with the provisions of 105 CMR 156.400: Administration of Evaluation shall sign and issue a Document of Completion for each nurses' aide who successfully completes such an evaluation.

(E) The instructor shall assure that there is a minimum of one instructor for every 25 students in a classroom and a minimum of one instructor for every ten students in practice/clinical sessions.

156.310: Timing of Nurses' Aides Training

(A) Training conducted on site of employment at long-term care facility. Each nurses' aide shall begin training after orientation and shall complete such training within 90 days of the start of employment and shall also successfully complete evaluation within 180 days of the start of employment as provided for in 105 CMR 156.140(C). During the training period, nurses' aides may perform tasks for which they have been trained and for which they have
successfully demonstrated their ability to correctly perform these tasks. Such demonstrations shall be documented on the evaluation form as specified in 105 CMR 156.400.

(B) Training conducted at temporary help agencies. Each nurses’ aide shall complete training within 90 days of the start of employment with a temporary help agency as provided for in 105 CMR 156.140(C). Each such nurses’ aide shall also successfully complete evaluation within one hundred eighty days of the start of employment with a temporary help agency as provided for in 105 CMR 156.140(C). The facility shall provide orientation to each nurses’ aide employed through a temporary help agency.

(C) Training conducted at educational facilities. Each nurses’ aide who has been trained at an educational institution outside of the facility shall complete such training prior to employment or within 90 days of the start of employment by a long-term care facility as provided for in 105 CMR 156.140(C). Each such nurses’ aide shall also successfully complete evaluation within 180 days of the start of employment as provided for in 105 CMR 156.140(C).

156.320: Minimum Curriculum Standards

(A) Each nurses’ aides training course shall be a minimum of 60 hours and shall include all modules of the minimum standard curriculum as prescribed in the curriculum specifications prescribed by and available in guidelines from the Department.

(B) Nurses’ aides training courses which begin on or after October 1, 1989 shall be a minimum of 75 hours and shall include all modules of the minimum standard curriculum for 75 hours prescribed by and available in guidelines from the Department. Nurses’ aides who have successfully completed an evaluation as specified in 105 CMR 156.400 prior to October 1, 1989 shall be deemed to have met the federal requirements for nurses’ aides training specified above.

(C) Curriculum organization and teaching strategies are at the discretion of the instructor.

(D) Facilities that require nurses’ aides to perform tasks not included in the minimum standard curriculum shall ensure that nurses’ aides are trained to perform these tasks and have successfully demonstrated their ability to perform these tasks. Training for these tasks, including training for tasks related to special resident populations, shall be in addition to the minimum standard curriculum.

(E) Facilities with special resident populations shall use the minimum standard curriculum for nurses’ aide training but may adapt content and clinical applications to the facility’s specific resident population. However, such adaptations shall continue to require that nurses’ aides master all objectives in the minimum standard curriculum. For example, all nurses’ aides must learn how to give bed baths and transfer residents from beds to wheelchairs. However, these skills may be taught with attention to geriatric or pediatric considerations as the resident population dictates.
156.330: Curriculum Approval Mechanism

(A) The training provider shall submit a proposed curriculum to the Department of Public Health, Division of Health Care Quality.

(1) The curriculum shall be submitted eight weeks prior to the start of the first course and every two years thereafter.

(2) If the curriculum is modified, it must be resubmitted to the Department for approval prior to start of the course.

(B) The training provider shall submit the curriculum proposal on the curriculum application form prescribed by and available from the Department.

(C) The Department will review the curriculum proposal to determine whether or not it is in compliance with 105 CMR 156.000 and the curriculum specifications prescribed by and available in guidelines from the Department.

(1) If the curriculum proposal is approved, the Department will issue an approval number and notify the training provider. A copy of the approval will be kept on file at the Department.

(2) If the curriculum proposal is not approved, the Department will return the curriculum to the training provider noting the reason that the course was not approved. The training provider may not begin a nurses’ aides training course until the associated curriculum has been approved by the Department.

156.400: Administration of Evaluation

(A) All nurses’ aides shall undergo evaluation either in conjunction with the training specified in 105 CMR 156.320 or as an evaluation of equivalent training pursuant to 105 CMR 156.130.

(B) All nurses’ aides shall successfully demonstrate all skills on the evaluation form specified in guidelines prescribed by and available from the Department. Such evaluation shall be conducted in conformance with the timeframes set forth in 105 CMR 156.120, 105 CMR 156.130, and 105 CMR 156.140.

(C) Any individual who meets the qualifications specified in Qualifications of the Instructor 105 CMR 156.210 may administer an evaluation as prescribed by and available in guidelines from the Department.

(1) Remedial instruction shall be available from the instructor through a course approved by the Department or shall be available through an approved course specified by the instructor. The course number shall be entered on all Documents of Completion issued as documentation of successful evaluation.

(2) Additional registered nurses may assist the instructor in evaluating nurses’ aides provided that an individual who meets instructor qualifications is available on site.
(D) Instructors shall use the evaluation form as prescribed by and available in guidelines from the Department.

(1) Instructors shall give nurses’ aides the opportunity to read the evaluation, ask questions, and receive remedial instruction prior to administration of the evaluation.

(2) The instructor who observes and evaluates each skill demonstration must sign his or her name in the spaces indicated.

(3) Instructors shall give nurses’ aides the option of responding to the verbal section of the evaluation either orally or in writing.

(a) When the verbal section of the evaluation is administered orally, the instructor shall simplify the language, if necessary, to assist comprehension by the nurses’ aide.

(b) The instructor who evaluates the responses to the verbal section must sign his or her name in the spaces indicated.

(4) Successful completion of the evaluation shall mean that the nurses’ aide is able to correctly demonstrate all clinical skills and answer all questions listed in the evaluation form prescribed by and available in guidelines from the Department. The demonstrations and answers shall be judged complete and correct by the instructor. Remediation and reevaluation shall be provided by the instructor within the timeframes set forth in 105 CMR 156.120, 105 CMR 156.130, and 105 CMR 156.140.

(5) Upon successful completion of the evaluation, the instructor shall sign and issue to the nurses’ aide:

(a) A signed copy of the evaluation form as prescribed by and available in guidelines from the Department, and;

(b) A signed Document of Completion prescribed by and available from the Department.

156.410: Documentation of Completed Training/Experience

(A) Upon successful completion of evaluation in accordance with 105 CMR 156.400: Evaluation of Training/Experience, each nurses’ aide shall receive a Documentation of Completion, (prescribed by and available from the Department) which has been completed, signed and issued by the instructor.

(B) As proof of meeting the training requirements set forth in 105 CMR 156.000: The Nurses’ Aides Training, a nurses’ aide shall show the Document of Completion to any facility administrator upon request.

(C) A nurses’ aide who has successfully completed evaluation as specified in 105 CMR 156.400 and received a Document of Completion in accordance with 105 CMR 156.410(A) shall not be required to repeat nurses’ aide training unless employment has been interrupted for two or more years as described in 105 CMR 156.120(D).
PART 4. ADMINISTRATIVE MANAGEMENT OF HOMES

R 325.20509 Training for unlicensed nursing personnel.

Rule 509. For purposes of interpreting section 21795(1) of the code, the "buddy system" method of instruction for unlicensed nursing personnel shall not be permitted as the only method of such instruction.

R 325.20703 Nursing personnel.

Rule 703. (2) A person employed in the home to give nursing care shall be not less than 17 years of age, except that a student in a board of education-approved cooperative educational program may provide nursing care under supervision of a licensed nurse.

(3) A person employed in the home to give nursing care on the nightshift shall be not less than 18 years of age.

PART 20. EDUCATION AND TRAINING OF UNLICENSED NURSING PERSONNEL

R 325.22001 Minimum criteria for education and training of unlicensed nursing personnel.

Rule 22001.

(1) Each facility shall adopt and implement an education and training program that shall specify minimum competencies, performance objectives, and methods of evaluation which cover at least the content listed in subrule (2) of this rule. If the facility, by policy, does not permit unlicensed nursing personnel to perform a specific procedure covered in subrule (2) of this rule, training in that specific procedure may be excluded.

(2) The following content shall be presented, except as noted in subrule (1) of this rule:

(a) Personnel policies, including the facility’s personnel policies, job responsibilities, legal and ethical responsibilities, and the importance of the individual’s position as a member of the health care team.

(b) Concepts of care, including physical, psychological, cultural, and social components of care; the impact on the patient of physical and psychological changes that occur with trauma, the aging process, and developmental disabilities; the legal rights and privileges of patients; and communication techniques necessary to provide care.

(c) Environment, including what constitutes a safe and comfortable environment for giving care; safety and fire prevention; emergency procedures, including cardiopulmonary
resuscitation, the Heimlich maneuver, and fire and disaster procedures; bed-making and when bed linen should be changed; restraint procedures, including protecting the safety and dignity of the patient; prevention and control of infections; and information necessary to assist the new patient to become aware of the facility’s routines and available services.

(d) Collecting and sharing information, including observation of the individual patient and how to recognize changes from normal; vital signs; reporting and documenting observations; and medical terms and abbreviations necessary for the tasks performed.

(e) Personal care, including bathing a patient in a safe and dignified manner while encouraging independence; skin care, including preventive and supportive care; routine morning and evening mouth care, hair and nail care; shaving; dressing and undressing, with emphasis on encouraging and maintaining independence; and prosthetic devices used in providing care.

(f) Nutrition, including the importance of a balanced diet and how to help bring this about; the importance of making meal times a pleasant experience; measuring and recording the patient’s food and fluid intake; how to carry out orders to increase or reduce fluid intake, and techniques to assist a patient to eat, with emphasis on encouraging and maintaining independence and dignity.

(g) Elimination, including encouraging and maintaining independence in toileting; the use of the bed pan and urinal; catheter care; preventing incontinence; prevention of constipation; observation, reporting, and recording of significant information about a patient’s urine and stool; perineal care; measuring and recording output; urine testing; and bowel and bladder training.

(h) Rehabilitation, including principles of rehabilitation; complications of immobility and their prevention; techniques of turning a patient; maintaining proper body alignment; range of motion exercises; the use of ambulation aids, including wheelchairs, walkers, canes, and crutches; transfer techniques; proper body mechanics involved in lifting patients or objects; and use of bed boards, footboards, foot stools, trochanter rolls, pillows for positioning, bed cradles, slings, splints, lifting equipment, and trapezes.

R 325.22002 Verification of competency.

Rule 2002. (1) The director of nursing, or a registered nurse designee, shall verify that each unlicensed employee providing nursing care is competent to perform all assigned tasks prior to the time the employee is assigned to perform them, unless the employee is under supervision, as defined in section 16109 of the code, for training purposes.

(2) Verification of competency shall be indicated by an appropriate entry in the employee’s personnel record which is signed by the director of nursing or other registered nurse and which specifies the date and method by which each competency was verified. This information shall be maintained in each employee’s personnel file for the duration of his or her employment in the facility.
(3) Personnel files shall also include the number of classroom hours and the hours of planned clinical experience supervised by a licensed nurse.

R 325.22003 Class outline and lesson plans.

Rule 2003. Class outlines and lesson plans shall be retained in the facility for not less than 2 years.

R 325.22003a Testing for competency.

Rule 2003a. The department shall test the competency of unlicensed nursing personnel by observation of care given and may interview unlicensed nursing personnel to evaluate the adequacy of the training program.

R 325.22004 Plan of correction.

Rule 2004. If a violation of R 325.22001 to R 325.22003 is cited, within 30 days the facility shall submit a written plan to assess and revise the training program to correct the deficiency. Staff of the department shall assist with this process and shall reevaluate the program within 120 days of the date of the citation of the violation to assure compliance.

R 333.21795 Education and training for unlicensed nursing personnel; criteria; competency examinations; rules.

Sec. 21795.

(1) The department, in consultation with the advice of the Michigan board of nursing and appropriate consumer and professional organizations, shall develop by rule minimum criteria for the education and training for unlicensed nursing personnel in facilities designated in this part.

(2) This section shall not be construed to be a prerequisite for employment of unlicensed nursing personnel in a nursing home.

(3) During the annual licensing inspection the department shall, and during other inspections the department may, conduct random competency examinations to determine whether the requirements of this section are being met. The department shall promulgate rules to administer this subsection.
Minnesota regulations do not include specific content for nurse’s aide training and competency.

MISSISSIPPI

Mississippi regulations do not include specific content for nurse’s aide training and competency.

MISSOURI

Chapter 84—Training Program for Nursing Assistants 19 CSR 30-84

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES Division 30—Division of Regulation and Licensure Chapter 84—Training Program for Nursing Assistants

19 CSR 30-84.010 Nurse Assistant Training Program

PURPOSE: The Omnibus Nursing Home Act mandates in section 198.082, RSMo that nursing assistants employed in skilled nursing and intermediate care facilities complete an approved training program. This rule gives information regarding the purpose of the training program, required objectives and curriculum content, designates what is the approved course curriculum and indicates the training locations and testing which are required for a program to be considered approved.

(1) Definitions.

(A) Basic course shall mean the seventy-five (75) hours of classroom training, the one hundred (100) hours of on-the-job supervised training and the final examination of the approved Nurse Assistant Training course.

(B) Certifying agency shall mean a long-term care (LTC) association or other entity approved by the division under subsection (11)(B) to issue certificates to nursing assistants.

(C) Challenge the final examination shall mean taking the final examination of the basic course without taking the entire basic course.

(D) Division shall mean the Missouri Division of Aging.

(E) Long-term care association shall mean the Missouri Health Care Association, the Missouri Association of Homes for the Aged, the League of Nursing Home Administrators or the Missouri Assisted Living Association.
(F) Nursing service shall mean an agency or organization, such as a Nursing Pool Agency or Hospice, which employs nurses and nursing assistants for temporary or intermittent placement in LTC facilities.

(G) Training agency shall mean the organization which sponsors the approved training program. An approved training agency is approved by the Division of Aging under section (7) of this rule.

(H) Program shall mean the Nurse Assistance Training Program as required by the Omnibus Nursing Home Act and section 198.082, RSMo 1994.

(2) The purpose of the Nurse Assistant Training Program shall be to prepare individuals for employment in a LTC facility. The program shall be designed to teach skills in resident care which will qualify students to perform uncomplicated nursing procedures and to assist licensed practical nurses or registered professional nurses in direct resident care.

(3) All aspects of the Nurse Assistant Training Program included in this rule (that is, qualified instructor, clinical supervisor, examiner, approved course curriculum, approved training agency, supervised on-the-job training, testing and student qualifications) shall be met in order for a program to be considered as approved.

(4) The program shall consist of a basic course consisting of a minimum of seventy-five (75) classroom hours of training on basic nursing skills, fire safety and disaster training, resident safety and rights, social and psychological problems of residents, and the methods of handling and caring for mentally confused residents such as those with Alzheimer’s disease and related disorders; one hundred (100) hours of supervised on-the-job training (clinical practice); a final examination; and, following the basic course, continuing in-service training as provided for in 13 CSR 15-14.042(19) through (24).

(5) Curriculum content of the program shall include procedures and instructions on basic nursing skills in the following areas: basic hygiene techniques; bedmaking; personal care of residents; food service; charting; safety measures (including fire/safety and disaster preparedness, and infection control); basic preventative and restorative care and procedures; basic observation procedures, such as weighing and measuring; communication skills; methods of handling and caring for mentally confused residents; residents’ rights; ethical and legal responsibilities; death and dying; and mental health and social needs.

(A) The course curriculum as outlined in the manual entitled The Nurse Assistant in a Long-Term Care Facility, produced by the Instructional Materials Laboratory, University of Missouri-Columbia, 1987, catalogue number 50-5061-S shall be considered an approved course curriculum. Other manuals and course material may be used to supplement the curriculum. Instructors shall use the companion instructor’s guide, catalogue number 50-5061-I.

(B) An orientation module consisting of certain topics identified as such in the approved course curriculum shall be the first material covered in the course unless the course is taught in its entirety before nursing assistants have resident contact. All students must complete the nurse assistant orientation module prior to providing direct care to any
resident. For those students already employed by an intermediate care or skilled nursing facility, the orientation module shall be taught at the beginning of the course and before the nursing assistant is allowed to provide direct care to residents independently.

1. The orientation module shall include, as a minimum, the following topics: hand-washing, gloving and infection control; emergency procedures and Heimlich Maneuver; residents’ rights; abuse and neglect reporting; safety (fire and accident); lifting; moving and ambulation; answering signal lights; bedpan, urinal, commode and toilet; preparing residents for and serving meals; feeding the helpless; bathing; dressing and grooming; mouth care; bedmaking (occupied and unoccupied); promoting residents’ independence; communication and interpersonal skills.

2. Students shall complete the orientation module taught by a qualified instructor even though they may be employed in a facility that uses the approved course material for orientation as required by 13 CSR 1514.042(20). The instructor, in that instance, may adjust the time required to cover the material or may integrate the material into the basic course content.

(C) The suggested time schedule included for each curriculum topic in the approved course cited in subsection (5)(A) may be adjusted by the instructor to meet the particular learning abilities of the students providing that the orientation module shall be taught in at least sixteen (16) hours for Medicare-or Medicaid-certified facilities. Licensed-only facilities shall provide at least twelve (12) hours of basic orientation approved by the division.

(D) The on-the-job supervised component of one hundred (100) hours shall start after the student has enrolled and started the course curriculum and shall precede the final examination.

(E) Continuing in-service education shall be offered in the intermediate care or skilled-nursing facility (ICF/SNF) to nursing assistants on a regular basis following their successful completion of the basic course as required in 13 CSR 15-14.042(20) through (23).

(6) Student Enrollment and Qualifications.

(A) Any individual who is employable by an ICF/SNF to be involved in direct resident care shall be eligible to enroll in an approved training agency course if—

1. The individual is at least eighteen (18) years of age and employable. Employable shall mean that the individual is not listed on the Missouri Division of Aging Employee Disqualified List; who has not been found guilty of, pled guilty to, been convicted of, or nolo contendere to, a Class A or B felony under Chapters 565, 566 or 569, a Class D felony under section 568.020, RSMo 1994 or any violation of section 198.070.3, RSMo 1994, unless a good cause waiver has been granted by the division; and who meets requirements under 13 CSR 15-14.042(32); or

2. The individual is at least sixteen (16) years of age providing he or she is—

A. Currently enrolled in a secondary school health services occupation program or a cooperative work education program of an area vocational-technical school or comprehensive high school;
B. Placed for work experience in an ICF/SNF by that program; and

C. Under the direct supervision of the instructor or licensed nursing staff of the facility, or both, while completing the clinical portion of the course. A certified facility may not employ a student in the facility who is not certified within four (4) months of date of hire. A licensed-only facility may only employ a student in that facility for up to one (1) year from the date of hire prior to certification.

(B) All full or part-time employees of an ICF/SNF who are involved with direct resident care, and hired in that capacity after January 1, 1980, shall have completed the approved Nurse Assistant Training Program or shall enroll in and begin study in the approved training program within ninety (90) days of employment, except that the following persons shall be permitted to challenge the final examination:

1. Persons who were enrolled in a professional (RN) or practical (LPN) nursing education program for at least four (4) months or who are enrolled in this program and who have successfully completed the Fundamentals of Nursing Course, including clinical hours within the last five (5) years, may challenge the final examination of the course, as this training is deemed equivalent to the required classroom hours and on-the-job training;

2. Professional nursing or practical nursing licensure candidates who have failed state licensure examinations may challenge the final examination, as their training is deemed equivalent to the required classroom hours and on-the-job training;

3. Persons from other states who are approved to work as a nurse assistance in the other states may challenge the final examination, as their training is deemed equivalent to the required classroom hours and on-the-job training;

4. Students who have completed a nursing program outside the United States and who are awaiting the licensure examination in this country shall be required to apply to the division to take the challenge examination. In addition to a completed application, the student must also include: a copy of the out of country license or certificate; a copy of the school transcript translated to English; a copy of the out of country criminal background check translated to English. Students shall be required to complete the orientation module of the course as given in subsection (5)(B) of this rule and then may challenge the final examination, as their training is deemed equivalent to the other required classroom hours and on-the-job training;

5. Persons trained in acute care sections of hospitals as nursing assistants or persons trained as psychiatric aides shall complete the orientation module with special emphasis on the geriatric residents' needs, residents' rights and orientation to the facility and shall complete the one hundred (100) hours of on-the-job training in an LTC facility or LTC unit of a hospital and then they may challenge the final examination, as their training is deemed equivalent to the other required classroom hours and on-the-job training;

6. Persons trained in an LTC unit of a hospital and who have been employed in the LTC unit of the hospital for at least twelve (12) months and who submit a letter of recommendation from the administrator or director of nursing documenting their training may challenge the final examination after completing the units on residents' rights and care of the confused resident. Such training shall be deemed equivalent to the other required classroom hours and on-the-job training; and
7. Any other persons whose background, education and training in gerontology and health occupations includes the components of the approved training curriculum may be allowed to challenge the final examination after taking those portions of the course as determined to be necessary based on evaluation of their credentials by the supervisor of health education of the Division of Aging.

(C) Those persons designated in paragraphs (6)(B)1.–7., who want to challenge the final examination shall submit a request in writing to the division enclosing any applicable documentation. The division will respond, in writing, either approving or denying the request to challenge the final examination and, if approved, the letter from the division may be presented to an approved training agency to challenge the examination or complete the course or portions of the course as required and then challenge the examination.

(D) Those persons permitted to challenge the final examination shall have made arrangements to do so within sixty (60) days of employment as a nursing assistant and shall have successfully challenged the final examination prior to or within one hundred twenty (120) days of employment. Permission letters not utilized within the one hundred twenty (120)-day period shall be considered invalid and reapplication for permission to challenge shall be made to the division.

(E) Nursing assistants who are employed by a nursing service, or who are working on a private duty basis providing direct resident care shall have completed the approved basic course, shall have a current certificate from an approved certifying agency and shall be listed on the Division of Aging Certified Nurse Assistant Registry prior to functioning in an ICF/SNF.

(F) Allied health care personnel, such as emergency medical technicians, medical laboratory technicians, surgical technicians, central supply technicians and dental auxiliaries, shall not be considered qualified and shall not be allowed to challenge the final examination. Individuals, if employed by an ICF/SNF to provide direct patient care shall enroll in and successfully complete an approved program.

(G) If a student drops the course due to illness or incapacity, the student may reenroll in a course within six (6) months and make up the course material missed without retaking the entire course upon presenting proof of attendance and materials covered in the original class.

(H) A student shall complete the entire basic course (including passing the final examination) within one (1) year of employment as a nursing assistant in an SNF/ICF, except that a nursing assistant employed by a facility certified under Title XVIII or Title XIX shall complete the course and be certified within four (4) months.

(I) A full or part-time employee of an ICF/SNF who is employed as a nursing assistant after January 1, 1989 who has not completed at least the classroom portion of the basic course shall not provide direct resident care until he or she has completed the sixteen (16)-hour orientation module and the twelve (12) hours of supervised practical orientation required in 13 CSR 15-14.042(20).
(J) All nursing assistants trained prior to January 1, 1989 who were not trained using the course curriculum referenced in subsection (5)(A) of this rule with at least seventy-five (75) hours of classroom instruction shall have attended a special four (4)-hour retraining program which used the manual entitled Long-Term Care Nurse Assistant Update produced by the Instructional Materials Laboratory, University of Missouri-Columbia, 1989, catalogue number 50-50621 or 50-5062-S. Any nursing assistant who did not attend this retraining program by August 31, 1989 shall no longer be considered a trained nursing assistant and all previous credentials issued by any source shall be considered invalid. To be certified as required by the provisions of this rule, a person shall successfully complete the entire Nursing Assistant Training Program.

(7) Training Agencies.

(A) The following entities are eligible to apply to the division to be an approved training agency:

1. Area vocational technical schools and comprehensive high schools offering health service occupation programs which have a practice classroom and equipment used in delivering health care and a written agreement of cooperation with one (1) or more SNFs/ICFs or an LTC unit of a hospital in their vicinity for the one hundred (100)-hour on-the-job training component of the course;

2. Community junior colleges or private agencies approved by the Missouri Department of Elementary and Secondary Education or accredited by a nationally recognized accrediting agency or association on the list published by the secretary of the Department of Education, pursuant to the Higher Education Act (20 USC Sections 2954(2)(D), 42 USC Section 298(b)(6)) and the Veterans’ Readjustment Assistance Act (38 USC Section 1775(a)) which have a practice laboratory with one (1) or more bed units and equipment used in delivering health care and have a written agreement of cooperation with one (1) or more SNFs/ICFs, or LTC units of a hospital in their vicinity for the on-the-job training component of the course; or

3. A licensed hospital, licensed SNF/ICF which has designated space sufficient to accommodate the classroom teaching portion of the course, and if the one hundred (100) hours of on-the-job training is not provided on-site, has a written agreement of cooperation with an LTC unit of a hospital or SNF/ICF to provide that portion.

(B) A school, agency, hospital or nursing facility which wants to be approved by the division to teach the Nursing Assistant Training Program shall file an application with the division giving the name(s) of the instructor(s) and clinical supervisor(s); and, if clinical training is not being done on-site, a copy of an agreement with a nursing facility for the clinical portion of the course.

(C) In order to be approved, the applicant shall have an area which will be designated during training sessions as a classroom with sufficient space to allow fifteen (15) students to be seated with room for note-taking, appropriate equipment as needed for teaching the course, approved instructors and clinical supervisors, and shall assure that the instructor
and each student has a manual for the state-approved course. Any ICF/SNF which has received a Notice of Noncompliance related to administration and resident care from the division in the two (2)-year period prior to application for approval shall not be eligible for approval and if this Notice is issued after approval, approval shall be withdrawn by the division within ninety (90) days and the certifying agencies shall be notified of the withdrawal of approval. Students already enrolled in a class in this facility, however, may complete their course if a Notice is issued after a course has begun. However, a noncompliant facility where an extended or partially extended survey has been completed may apply in writing to the division requesting permission for approval to train and test nurse assistants for certification. The approval for each separate class may be granted to teach and test in the facility but not by the facility staff. If approval is granted for a waiver for a certified facility or exception for a licensed-only facility, the division shall require certain criteria to be met, depending on the issues such as time and distance to other training agencies in the area.

(D) The division shall make an on-site inspection of each approved training agency's premises within two (2) years of approval to determine the adequacy of space; equipment and supplies; and, if clinical training is not done on-site, verify that there is a current copy of an agreement with a nursing facility for the clinical portion of the course.

(E) Upon receipt of a fully completed application form, the division shall notify the applicant in writing within ninety (90) days of approval or disapproval. If disapproved, the reasons why shall be given.

(F) Training agencies shall be approved for a two (2)-year period and shall submit a new application for approval thirty (30) days prior to the expiration of approval.

(8) Instructor/student ratio shall be a maximum of one to fifteen (1:15) and it is recommended that the ratio be one to ten (1:10) or less.

(9) Qualifications of Instructors, Clinical Supervisors and Examiners.

(A) Instructor.

1. An instructor shall be a registered professional nurse currently licensed in Missouri or shall have a temporary permit from the Missouri State Board of Nursing. The licensee shall not be subject of current disciplinary action, such as censure, probation, suspension or revocation.

2. An instructor shall have had, at a minimum, two (2) years of nursing experience and at least one (1) year of experience in the provision of LTC facility services in the last five (5) years. Other personnel from the health professions may assist the instructor; however, they must have at least one (1) year of experience in their field.

3. An applicant to be an instructor, shall submit credentials (resume) and a copy of his/her current license renewal card or temporary permit to the Division of Aging. A letter shall be provided by the division to the applicant indicating the status of the applicant's qualifications and, if not qualified, the reasons and what additional requirements are needed.
4. An applicant to be an instructor shall attend a seminar approved by the Division of Aging to learn the methodology of teaching the course but only after his/her credentials have been reviewed and approved by the Division of Aging. The Division of Aging shall issue a final letter of approval to be a qualified instructor after the person has satisfactorily completed the seminar. The seminar shall be conducted either by an LTC association or the Missouri Department of Elementary and Secondary Education using qualified teacher educators approved by the Missouri Department of Elementary and Secondary Education and the Division of Aging.

5. Any registered nurse approved by the division or the Department of Elementary and Secondary Education as an instructor or examiner prior to January 1, 1990, except those involved in nurse assistant curriculum development with the division or who are employed by a certifying agency, shall attend a training seminar on teaching the nurse assistant course conducted by a LTC association or the Department of Elementary and Secondary Education by July 1, 1993 in order to maintain status as an approved instructor. Instructors approved prior to January 1, 1990 who are exempt from attending the training seminar shall write the Division of Aging submitting documentation of classes and students taught. The division will issue those instructors letters of approval so they will not have to attend the new training seminar. After July 1, 1993 all credentials issued prior to January 1, 1990 shall be void. Nurses who attend the approved seminar shall be issued new certificates and the division shall maintain a list of all approved instructors, including those issued letters of approval.

(B) Clinical Supervisor (On-the-Job Supervisor). The clinical supervisor shall be a currently licensed registered professional nurse or licensed practical nurse, whose license is not currently subject to disciplinary action such as censure, probation, suspension or revocation. The clinical supervisor shall be licensed in Missouri or shall have a temporary permit from the Missouri State Board of Nursing. The clinical supervisor shall be currently employed by the facility where the students are performing their duties or by the agency conducting the course and shall have attended a seminar approved by the Division of Aging to learn methodology of supervising the on-the-job training. Upon successful completion of the training seminar, the clinical supervisor shall be issued a certificate and the division shall maintain a list of approved clinical supervisors. The clinical supervisor shall be on the facility premises in which the students are performing their duties while the students are completing the on-the-job component of their training and shall directly assist the students in their training and observe their skills when checking their competencies. The clinical supervisor shall have at least one (1) year of experience in LTC if not currently employed by an LTC facility.

(C) Examiner.

1. The examiner shall be a registered professional nurse currently licensed in Missouri or shall have a temporary permit from the Missouri State Board of Nursing, and shall not be currently subject of disciplinary action such as censure, probation, suspension or revocation.

2. The examiner shall have taught a similar course or shall be qualified to teach a similar course; but shall not have been the instructor of the students being examined; and shall not be employed by the operator whose students are being examined. The examiner shall be
specifically approved by the Division of Aging to administer final examinations of the state-approved nurse assistant training curriculum and shall have signed an agreement with the division to protect and keep secure the final examinations.

3. The examiner shall have attended an examiner’s seminar given by the Division of Aging to learn the methodology and sign an agreement.

(D) Causes for Disqualification. A person shall not be allowed to be an instructor, clinical supervisor or examiner if it is found that he or she—

1. Knowingly acted or omitted any duty in a manner which would materially or adversely affect the health, safety, welfare or property of a resident;

2. Defrauded a training agency or student by taking payment and not completing a course, not administering the final examination as required, or not being on-site while students are being trained;

3. Failed to teach, examine or clinically supervise in accordance with 13 CSR 15-13.010, or taught students from the state test, changed answers on the state test, lost test booklets, or recorded false information on test materials or test booklets of the program; or

4. Failed to send documentation of a completed course to a certifying agency within thirty (30) days.

(E) Notification of Disqualification.

1. The division shall notify the individual that he or she is no longer eligible to be an instructor, clinical supervisor or examiner.

2. The division shall notify all approved training and certifying agencies if it has been determined that an individual is no longer considered an approved instructor, clinical supervisor or examiner and that person’s name shall be removed from the lists maintained by the division of approved instructors, clinical supervisors or examiners.

3. To be reinstated as a state-approved instructor, clinical supervisor or examiner the individual shall submit a request in writing to the division director stating the reasons why reinstatement is warranted. The division director or the director’s designee shall respond in writing to the request.

(10) Testing.

(A) In order to be eligible for testing, a student shall have either completed the state-approved training curriculum offered by an approved training agency or shall have a letter from the Division of Aging granting approval to challenge the final examination.

(B) A student shall pass a minimum of three (3) written or oral tests throughout the course with an eighty (80) score or better on each test in order to be eligible to take the final examination.

(C) The final examination shall be conducted by an approved examiner who may be assisted by the instructor using the following procedures:
1. The instructor will select an LTC resident to participate in the testing process and obtain approval for this activity from the resident;

2. The examiner shall verify the eligibility of the students by reviewing records to establish that the student has completed the approved training program or possesses an approval letter from the division granting approval to challenge the final examination. In the event that a qualified instructor for the nurse assistant LTC program did not sign records of a student who successfully completed the program, without justification or due to resignation from his/her position, the administrator of the approved training agency may validate the training by signature. Evidence of successful completion of the basic course (that is, test scores, class schedules and the like) shall be documented prior to a student taking the final examination;

3. The student shall successfully complete at least nine (9) procedures under the observation of the instructor or a facility licensed nurse and examiner.

A. The nine (9) procedures shall always include a type of bath, vital signs (temperature, pulse, respirations and blood pressure), transfer techniques, feeding techniques, dressing and grooming, skin care, active or passive, range of motion to upper and lower extremities (unless contraindicated by a physician’s order) and handwashing and gloving from the standardized curriculum.

B. The remainder shall be selected according to the resident’s care needs at the time of day that testing occurs.

C. The evaluation of the student shall include communication and interaction with the resident, provision of privacy, work habits, appearance, conduct and reporting and recording skills;

1. The student shall successfully answer forty (40) out of fifty (50) oral or written questions presented by the examiner based on the standardized curriculum and selected from a specific test pool of questions which are safeguarded by the Division of Aging;

2. Any person who fails the final examination, except those who have been permitted to challenge the examination, shall have the opportunity to retake the examination twice within ninety (90) days. The examiner shall notify the division and obtain different examinations to be administered each time. If it is failed a third time, the entire course or selected sections, as determined by the examiner, must be retaken before another examination can be given; and

3. Any person who is required by section 198.082, RSMo to enroll in the Nurse Assistant Program, but who has been permitted to challenge the final examination and who fails the examination, must immediately reenroll in and begin study in the next available course and shall complete the basic course within one (1) year of employment.

(11) Records and Certification.

(A) Records.
1. The examiner shall complete and sign the competency record sheet and the final examination score sheet which shall include scores and comments. The examiner shall advise the individual that successful completion of the evaluation will result in the addition of his/her name to the State Nursing Assistant Register.

2. After scoring, the examiner shall return all test materials, test booklets, answer sheets, and any appendices to the division. The examiner shall also provide the training agency with documentation of the student’s test scores.

3. A copy of the student’s final record sheets shall be provided to the student (except for the answer sheets). If the course is not completed, records and documentation regarding the portions completed shall be provided to the student, if requested, and to the training agency.

4. The training agency shall maintain the records of students trained. Records shall be maintained for at least two (2) years.

(B) Certification and Entry of Names on State Register.

1. The training agency shall submit within thirty (30) days, the student’s final record sheets to any one of the long-term care associations or any other agency which is specifically approved by the division to issue nursing assistant certificates and provide names to the division for entry on the nurse assistant register.

2. Each student shall obtain a certificate from a state-approved association or agency validating successful completion of the training program.

3. The Division of Aging shall maintain a list of long-term care associations or other agencies approved to handle the issuance of certificates for the Nurse Assistant Training Program. In order for a long-term care association or agency to be approved by the Division of Aging, it shall enter into an agreement of cooperation with the Missouri Division of Aging which shall be renewable annually and shall effectively carry out the following responsibilities:

   A. Issue certificates to individuals who have successfully completed the course;

   B. Provide the Division of Aging with the names and other identifying data of those receiving certificates on at least a monthly basis; and

   C. Maintain accurate and complete records for a period of at least two (2) years.

4. The certificate of any nurse assistant who has not performed nursing services for monetary compensation for at least one (1) day in a twenty-four (24)-consecutive month period shall be invalid and the person’s name shall be removed from the Missouri nursing assistant register. This individual, however, may submit his/her credentials to the Division of Aging at any time and if unemployed for less than five (5) years, s/he may be authorized to challenge the final examination. If s/he passes the examination, the examiner shall submit the individual’s records to a training agency so that s/he can be issued a new certificate and his/her name can be placed on the nurse assistant register again. If unemployed longer than five (5) years, the individual must successfully complete the entire
course before s/he can be recertified and s/he is not eligible to challenge the final examination.

**CSR 30-85.042 Administration and Resident Care Requirements for New and Existing Intermediate Care and Skilled Nursing Facilities**

...(21) Nursing assistants who have not successfully completed the state-approved training program shall complete a comprehensive orientation program within sixty (60) days of employment. This may be part of a nursing assistant training program taught by an approved instructor in the facility. It shall include, at a minimum, information on communicable disease, handwashing and infection control procedures, resident rights, emergency protocols, job responsibilities and lines of authority.

...(32) Nursing personnel shall be at least eighteen (18) years of age except that a person between the ages of seventeen (17) years of age and eighteen (18) years of age may provide direct resident care if he/she has successfully completed the state-approved nursing assistant course and has been certified with his/her name on the state nursing assistant register. He/she must work under the direct supervision of a licensed nurse and will never be left responsible for a nursing unit.

...(39) Nursing assistants employed after January 1, 1980, shall have completed mandatory training as required by section 198.082, RSMo, or be enrolled in the course and functioning under the supervision of a state approved instructor of clinical supervisor as part of the one hundred (100) hours of on-the-job training. The person enrolled shall have successfully completed the course and become certified within one (1) year of employment with a licensed-only facility or within four (4) months of employment with a facility certified under Title XVIII or Title XIX if he or she is to remain employed in the facility as a nursing assistant.

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**STATE PLAN for the NURSE AIDE TRAINING AND COMPETENCY TESTING PROGRAM**

*State Guidelines*

(e) Required training of nurse aides.

(1) Definitions:

Licensed health professional means a physician, physician assistant, nurse practitioner; physical, speech or occupational therapist; licensed occupational therapy assistant; licensed physical therapy assistant; registered professional nurse; licensed practical nurse; licensed or certified social worker, and licensed nutritionist/registered dietitian. A registered diettian, to practice as a professional dietitian/nutritionist, must be licensed by the state.
Nurse aide (nurse assistant) means any individual providing nursing or nursing related services to residents in a facility who is not a licensed health professional or someone who volunteers to provide such services without pay.

(2) General rule. Full time employees. An individual who has not completed a nurse aide training and/or competency testing program approved by the State Survey and Certification Agency (SA) within four months of the date of hire to a position providing nursing and nursing related services for residents may not perform any such services for residents once the four-month period has expired. Such individuals must complete a SA approved training and/or competency testing program prior to being hired by another facility or rehired/reassigned by the same facility to perform nursing and nursing related functions. [For rules regarding temporary, part-time or pool employees, refer to (3) Nonpermanent employee.] An individual enrolled in a training and competency program may not perform any nursing or nursing related task that is not directly supervised by the licensed nurse instructor until that individual has satisfactorily passed a skills evaluation of the task(s) by the nurse instructor. Documentation of the evaluation(s) is to be made on the official Montana Nurse Aide Skills Competency Checklist (MNASCC). The original of the MNASCC is to be filed in the individual’s personnel or training file once it is complete. A copy of the MNASCC must be given to the individual. Once the individual has satisfactorily passed a skill(s), accompanied by such documentation on the MNASCC, s/he may perform the skill under the general supervision of a licensed nurse until successful completion of the training and competency evaluation program. All skills listed in the MNASCC must be satisfactorily passed prior to eligibility to complete the State Competency Evaluation Program (SCEP). For individuals with limited handicaps which preclude satisfactory completion of all skills listed on the checklist, a waiver may be approved by the SA. Waiver requests are to be in writing and list the skills, and the reasons, the individual is unable to physically perform the skill. (Example: an individual is hearing impaired and not able to accurately take a blood pressure). Nurse aides may not perform any skill which is waived. Waivers will be reviewed, evaluated and approved on an individual basis. Waivers, if any, will be recorded on the individual’s official Certification of Competency notice provided by the SA. Individuals who believe they have sufficient experience or training to pass the SCEP without completing a SA approved training program may request to complete the SCEP without proof of training. Such individuals will be allowed one attempt to successfully complete the SCEP. If the individual fails the SCEP, s/he will be required to complete the SA’s Nurse Aide Training and Competency Evaluation Program (NATCEP) prior to retaking the examination. To insure that individuals who successfully complete only the SCEP are competent to practice all skills required by the state approved curriculum, such individuals will be required to be evaluated for all skills listed on the MNASCC by a licensed nurse for the facility or agency that hires him/her. The individual may not perform unsupervised any skill for which s/he has not received a satisfactory score. An individual who has previously completed a training program in another state may provide, in lieu of the MNASCC, a duplicate of any official skills evaluation that is the equivalent of the MNASCC. The original of the completed MNASCC or duplicate of another official skills evaluation is to be filed in the individual’s personnel or training file, with a copy provided to that individual.
Titles. Because it is common practice, the SA will allow individuals who successfully complete the SCEP to use the title CNA (Certified Nurse Assistant), referencing that the individual has met the SA’s competency requirements to practice as a nurse aide and is entered on the Montana Nurse Aide Registry (State Registry). Individuals who have not successfully completed the SCEP may not use this title or in any way suggest they are certified by the SA as competent to practice as a nurse aide.

(3) Non-permanent employees. Definition: Non-permanent employee: Any individual hired to work for a temporary period that is less than four consecutive months. Non-permanent employees include temporary workers hired from "nursing pools" or other agencies who are not regular employees of the facility; intermittent employees filling in for vacation, holiday or other relief purposes; persons providing other part-time non-skilled nursing or nursing related services for pay. Non-permanent employees must meet all certification of competency requirements, that is, have either successfully completed a NATCEP or a SCEP prior to being hired in any position as defined in the above paragraph.

(4) Competency.(i) Upon hiring an individual who has not met the SA’s competency requirements and is not listed in the State Registry, the facility must immediately place that individual in a training and competency testing program. The individual must complete the NATCEP and be listed in the State Registry no later than 4 months from the date of hire. In-state applicants: (ii) A facility may hire any individual who has completed a SA approved NATCEP or SCEP and is listed in the State Registry. For such an individual, no retraining or retesting is required. The facility should provide appropriate orientation to facility policies and procedures and any other information needed to insure the individual performs assigned duties effectively. The hiree must provide to the facility a copy of a completed MNASCC at the time of hire. If the hiree no longer has a copy of his/her original MNASCC, the hiring facility must reevaluate the individual’s skills using the MNASCC, provide a copy to the hiree and maintain a copy in the individual’s personnel or training file. Out-of-state applicants: An individual who has met another state’s training and competency evaluation program is eligible for entry to the State Registry only if that individual is currently registered in the other state. A facility wishing to hire a currently registered out-of-state individual is required to:

1. Verify, either in writing or by telephone, with the out of- state registry that the applicant is currently registered in the other state and has no record of resident abuse, neglect or misappropriation of resident property. Document and retain the results of the inquiry with the individual’s employment application.

2. Instruct the applicant to complete a Nurse Aide Registry Application form and attach a copy of his/her current registration card, letter or other notice from the other state. (Note: A copy of certification of completion of a program from a facility or other training agency located in another state is not acceptable.) These documents are to be mailed to the SA, who will officially verify the applicant’s out-of-state status in writing. The applicant may be hired and allowed to work pending the response from the out-of-state registry if the following is done:
a) obtain from the applicant a copy of the skills evaluation completed by his/her training program instructor to verify competency in the skills required as part of the SA approved curriculum or complete a skills evaluation using the MNASCC. A copy of either skills evaluation must be filed in the applicant’s personnel or training file prior to assigning the individual to resident care.

b) provide appropriate orientation to facility policies and procedures. Provide any further training to meet curriculum requirements (example: Montana resident rights and abuse laws or skills that were found to be unsatisfactory during the skills evaluation) prior to assigning the individual to resident care. If an out-of-state applicant is found not to be currently registered in the other state, s/he must complete a State approved NATCEP or SCEP as will any other individual hired by the facility. (Note: If the facility has provided the training and skills evaluation as described in 2, a and b, the clock hours attributed to this training, less facility orientation, may be deducted from the required total of 75 hours.)

(5) Registry verification. (i) and (ii) Prior to or immediately upon hiring an individual who claims to be listed in the State Registry, the facility must verify that the individual has met the competency evaluation requirements by one of the following:

1. Reviewing the original copy of the individual’s unexpired Certification of Competency notice from the SA.

2. Making an inquiry directly to the State Registry through the Montana Nurse Aide Registry web site, in writing, or by telephone. If the inquiry is from the web site or by telephone, documentation of the verification is be entered into the individual’s personnel file; if by writing, the original or photocopy of the correspondence from the SA is placed in the individual’s personnel file.

3. Reviewing the original copy of the individual’s test results from the SA approved test vendor showing the individual has successfully completed all parts of the test(s). Either a copy of the unexpired certification of competency notice, a hard copy of the web verification, or a copy of test results is to be obtained by the facility and filed in the personnel file of each individual hired, as soon as possible, for any of the above listed verification procedures.

(6) Multi-State registry verification.

A facility must determine, at the time of application, if an applicant has worked as a nurse aide in other states. Prior to hiring or assigning such an individual to perform any nursing or nursing related duties, the facility must inquire of the registries of any and all states the applicant has so indicated, to determine if there is any information contained in the registries about the applicant that is related to resident abuse, neglect or misappropriation of property. Documentation of the results of any and all inquiries to other states is to be maintained in the individual’s personnel file.
(7) Required retraining.

An individual must complete anew NATCEP or SCEP if s/he has not been employed to provide nursing or nursing-related services for at least 8 hours within the previous consecutive 24 months (2 years) of the date of expiration of certification of competency. To meet this requirement, the nursing or nursing related services may be provided in any type of health care setting, including private home care and physicians’ offices or clinics. Proof of employment is to be submitted with the individual’s certification of competency renewal application. Recertification. Nurse aide certification is renewed every two years from the last date an individual has worked 8 hours providing nursing and/or nursing related services, as verified in writing by the employer. Renewal notices are mailed to each nurse aide at least 60 days prior to the expiration date of his/her certification. It is the responsibility of the individual to apply for certification renewal in a timely fashion to avoid certification expiration. Nursing facilities are required to ensure each nurse aide employed by them meets certification of competency requirements. They should implement some method of tracking to ensure certifications of nurse aides they employ are current. A nurse aide who does not renew his/her certification on time will no longer be registered and his/her name will be removed from the State Registry. To be reentered in the State Registry, individuals who have allowed certifications to expire will be required to complete either a NATCEP or a SCEP.

(8) Regular in-service education. Performance review. The annual performance review is to be completed no later than 12 months from the date of hire and at least every 12 months thereafter. The review should include ongoing observations during the individual’s daily routine. The evaluation is not an additional competency test. The purpose of the review is to determine if the individual continues to competently practice nursing and nursing related skills and behaviors. Skills and behaviors that should be included in the evaluation are: communication and interaction skills, basic nursing procedures, infection control, safety, and other procedures the individual may practice. The performance areas reviewed are to be documented and include a statement noting whether or not the individual satisfactorily performed each area reviewed. If performance is not satisfactory, the documentation should include any remedy taken. Facilities may use any format they choose to document this information. It is permissible to use the MNASC or other skills checklist, if desired. In-service training. Facility responsibility: (i) The facility must provide each nurse aide with the opportunity to accumulate a minimum of 12 hours of appropriate continuing education (in-service training) each year. (Note: staff meetings and care plan meetings will not be accepted for continuing education credit, unless they meet Parts (ii) and (iii) of this paragraph.)

(ii) and (iii) Continuing education may be provided in any appropriate educational format. Video and audio tape presentations and reading or research assignments are acceptable. Appropriate subjects for continuing education are any that enhance nurse aides’ job related knowledge and skills. These include, but are not limited to the following:

1) remedial training in skills not performed satisfactorily as a result of the annual reevaluation.
2) nursing and nursing related information to improve knowledge and/or skills, including skills working with individuals with cognitive impairments.

3) meeting mental, physical and psychological needs of residents.

4) recertification in CPR (4-hour limit).

5) self-growth (management of stress, time management, interpersonal skills etc.)

6) written/oral communication, observation and documentation.

7) promotion of resident rights and dignity, including the prohibition of mistreatment, abuse, neglect and misappropriation of resident property. Each facility/agency is to maintain an individual inservice record for each nurse aide that contains the following information:

1. Date of in-service

2. Title of in-service

3. Length (time) of inservice

4. Signature of instructor(s)

A copy of this record is to be filed in each nurse aide's personnel or training file to insure the information is easily retrievable.

**STATE GUIDELINES for SUBPART D**

(a) Program approval.

1) (i) Only programs which meet the SA's core curriculum requirements will be approved. The SA has designated and approved HEADMASTER, a Montana based non profit educational research and development firm, as vendor for the State's competency evaluation program.

(ii) The SA does not directly provide nurse aide training and/or competency evaluation programs. A SA approved competency evaluation program, developed by HEADMASTER and SA staff, will be administered for the State by HEADMASTER.

(2) Facilities, other agencies or vendors wishing to seek approval of self-developed programs or programs not contained in the approved programs list (Appendix C) must submit a copy of their complete curriculum, teacher guide and student workbook/ learning materials to the SA for review. Following review, the SA will notify the facility, agency or vendor of its findings by letter, along with a copy of the SA's written evaluation. Any recommendations for additions and/or changes to the submitted materials will be documented in the Comments section on page 4 of the evaluation form. If any additions or changes are required, the facility, agency or vendor must submit documentation of how
these additions and/or changes will be incorporated into their program. Facilities or other agencies must notify the SA of the date of planned implementation prior to final approval. Final approval of any program submitted will be by letter from the SA. Facilities or agencies wishing approval to adopt a program listed in Appendix C must submit a letter to the SA requesting approval to implement the program. This letter must contain the following:

a. Name of approved curriculum, textbook and/or other training materials;

b. Total program hours (must be a minimum of 75 hours excluding facility orientation);

c. Number of classroom hours (acceptable range is 45-50 hours);

d. Number of clinical hours (acceptable range is 25-30 hours);

e. Training schedule that includes an outline of modules (including clinical practice) to be taught and the number of hours devoted to each module of the program; and

f. Expected date of implementation.

(3) The SA will complete the survey protocols for CFR 483.75(e) for each extended survey as directed by the State Operations Manual, Appendix P, Standard and Extended surveys. Complete

NATCEP surveys will be conducted every 2 years.

(b) Requirements for program approval.

(1) (i) Requirements for approval of nurse aide training programs are contained in Section (a)(2) of this plan.

(ii) The SA has provided guidance and assistance in the development of the SA approved competency evaluation program which meets the requirements of 483.154. (See Section(a)(2) of this plan.)

(iii) Initial approval of nurse aide training programs will be conducted as described in (a)(2) of this section. Onsite reviews of all approved programs will be conducted no later than one year after the initial review and approval, and every two years thereafter, to determine compliance to 483.75(e), 483.151 (e)(1) through (3), 483.152, and 483.154 (c)(2). These reviews will be conducted utilizing established survey protocols. Upon approval, the SA will send the entity providing the NATCEP a letter of approval that contains an expiration date. Approximately 60 to 90 days prior to that expiration date, the SA will send a notice and an Application to Renew the NATCEP to the entity to determine if the entity has and will continue to provide a NATCEP. This application must be returned to the SA no later than 30 days from the date of the notice. Failure to return the renewal application will result in the automatic termination of the NATCEP. A termination notice will be sent to any entity which has not provided a NATCEP within the previous two years and to any entity that does not return a completed renewal form within the required timeframe. To reinstate a NATCEP, the entity will be required to follow all steps required in 483.152.
(2) and (3) The SA will not approve any nurse aide training or competency evaluation programs offered in or by a facility which, in the previous two years, has been under a waiver of licensed nurses or has had penalties assessed as described in these sections.

(i) Skilled nursing facilities who have been granted a waiver under this section, (i.e., allowing coverage by a registered nurse for less than 8 consecutive hours a day, 7 days a week), at any time within the two years previous to application for approval of a program, will have their application denied. A facility who already is operating a program will have the program approval withdrawn for a period of two years from the date the waiver expired.

(ii) Nursing facilities who have been granted a waiver under this section, (i.e., allowing coverage by a registered nurse for less than 8 consecutive hours a day, 7 days a week or allowing coverage by a licensed nurse for less than 24 hours a day), at any time within the two years previous to application for approval of a program will have the application denied. For a skilled nursing facility, or a nursing facility, which is operating a program at the time the waiver is approved, the program approval will be withdrawn for a period of two years from the date the waiver expired. Facilities who have been subject to:

(iii) extended or partial extended surveys;

(iv) civil money penalties of not less than $5,000;

(v) operation by temporary management appointed to oversee the operation of the facility or closure and transfer of its residents, will:

(3) --in the case of a facility which has an existing program, have the nurse aide training and competency program withdrawn for a period of 24 consecutive months (2 years) from the date that any of these penalties were imposed.

--in the case of a facility which applies for program approval, be denied approval of the nurse aide training and competency evaluation program for 24 consecutive months (2 years) from the date that any of these penalties were imposed.

--before being allowed to conduct a program, be required to resubmit a request for approval of a new program or re-approval of a previous program at such time any of these penalties have expired.

Waiver of prohibition of nurse aide training and competency evaluation programs in nursing facilities.

Nursing facilities which have been subjected to any remedy described in 483.151(b)(2) may apply to the SA, in writing, for a waiver of the prohibition of providing nurse aide training and competency evaluation in a facility if the facility meets the following:

1. There are no other nurse aide training and competency evaluation programs in, or within a reasonable distance from, the community in which the nursing facility is located.
2. The facility arranges for both classroom and clinical instruction and evaluation to be conducted by a licensed nurse who is not an employee of the facility.

(c) Time frame for approval.

The SA will, within 90 days of a request for an approval of a NATCEP,--

(1) Advise the requester that approval is or is not granted; or

(2) Request additional information from the requesting entity.

(d) Duration of approval.

The SA may grant NATCEP approvals for any time period deemed appropriate by the SA but not to exceed two years. Any substantive change in a training program must be submitted to the SA in writing. Substantive changes include changes in curriculum, textbooks, schedules and coordinator and instructors. The SA will review the changes submitted and will respond to the provider in writing.

(e) Withdrawal of approval.

(1) The SA will withdraw approval of, for 24 consecutive months, a NATCEP or SCEP offered by or in a facility who has operated under a licensed nurse waiver or has been assessed a penalty described in paragraph (b)(2) of this section.

(2) The SA may withdraw approval of a NATCEP or SCEP offered by or in a facility who does not meet the SA’s Guidelines for meeting the requirements 483.152 or 483.154. The time limits for withdrawal of approval will be determined by the SA, but will not exceed 24 consecutive months.

(3) The SA will withdraw approval of a NATCEP or SCEP by or in a facility who refuses to permit unannounced visits by the SA.

(4) If the SA withdraws approval of a NATCEP, the entity will be:

(i) notified in writing, with reasons, for the withdrawal of approval of the program.

(ii) allowed to complete a NATCEP or SCEP that is already in progress at the time the withdrawal is made. The facility will notify the SA immediately upon receipt of the notice of withdrawal, in writing, of the following:

1. the date the class began;

2. names of all students in the class;

3. expected date of completion.

State NATCEP curriculum requirements.

a) The SA requires that at a minimum the NATCEP must--
(1) consist of a minimum of 75 clock hours of training, excluding facility orientation (i.e., orientation to personnel policies and procedures, completing employment papers, building tour and other facility-specific information);

(2) Include the subjects specified in paragraph (b) of this section.

(3) Include at least 25 hours of directly supervised practical training by an approved licensed nurse instructor. Practical training may be conducted

--in a laboratory setting, utilizing nurse aide trainees or other volunteers as subjects; or

--in a clinical setting, utilizing resident volunteers as subjects. Direct supervision means in the presence of the licensed nurse instructor. [Note: Student nurse aides may not be trained or evaluated by other nurse aides. Student nurse aides may not be assigned to work with experienced nurse aides until the students have demonstrated competence in assigned skills as required by section (4)(i) below and 483.75(e)(2) (State Plan, page 2).]

(4) A facility which is approved to provide a NATCEP may--

(i) not assign student nurse aides to perform any services for which they have not demonstrated competence. Direct supervision of a student nurse aide is not required once they have successfully passed a skills evaluation by the nurse instructor that has been dated and signed as "passed" on the MNASCC

(ii) allow a student nurse aide to perform services under the general supervision of a licensed practical nurse or a registered nurse once the provisions described in the previous paragraph (i) are met. General supervision means on the premises during a trainee's assigned tour of duty.

(5) Any entity which provides training of nurse aides must apply to the SA for approval of a program coordinator (PC), clinical instructor(s) (CI) and supplemental instructor(s) (SI). Only one individual may serve as program coordinator. Applications for approval as PC, CI, or SI are to be made to the SA by completing the SA application form accompanied by a resume. The resume must contain the individual’s professional education and experience, any teaching experience or training, and any experience supervising nurse aides.

(i) The training of nurse aides must be performed by or under the general supervision of a registered nurse who coordinates the training program. The program coordinator (PC) and clinical instructors (CI) must have at least 2 years of nursing experience, one of which has been in the provision of long term care services. Long term care services include those provided in nursing homes and geriatric or long term care units of another facility, or other entities that provide services to the aged, chronically ill and/or disabled.

(ii) All instructors must have--

1. experience in teaching adults;

2. experience in supervising nurse aides, with demonstrated competence in teaching; or

3. have equivalent education. Equivalent education includes college/university education courses, a degree in education, or a train-the-trainer course approved by the SA.
(iii) In a facility-based program, the director of nursing also may be the program coordinator. As program coordinator, the director of nurses may provide general supervision of the program and instructors but may not provide direct training.

(iv) Qualified health care personnel, who have at least one year of experience in their respective fields, may provide training in their specialties under the general supervision of the program coordinator. Such personnel include additional registered or licensed practical nurses; occupational, physical and speech/language/hearing therapists; physicians; psychologists; dentists; social workers; recreation therapists; activities specialists; administrators; medical records specialists; dietitians/dietary managers; fire safety experts; ombudspersons; pharmacists; sanitarians or others as approved by the SA.

(6) Competency evaluation procedures are specified by the test vendor and approved by the SA.

(b) The SA approved curriculum requirements include--

(1) a minimum of 16 hours of training, excluding facility orientation, in the following subjects prior to any direct contact with residents:

(i) communication and interpersonal skills

(ii) infection control

(iii) safety and emergency procedures, including Heimlich maneuver;

(iv) promoting residents' independence, i.e. principles of restorative care; and

(v) respecting residents' rights.

(2) Basic nursing skills:

(i) taking and recording temperature, pulse, respiration and blood pressure;

(ii) measuring and recording height and weight;

(iii) caring for the resident's environment;

(iv) recognizing physical and emotional changes of aging; and

(v) caring for residents when death is imminent.

(3) Personal care skills, including--

(i) through (viii). Bathing, grooming, oral care, dressing, toileting, eating/feeding, skin care, transfers, positioning and turning.

(4) Mental health and social service needs:

(i) care of residents with personality and/or behavior disorders;

(ii) recognizing the physical and emotional changes of aging; understanding of caregiver’s, resident's and family's attitudes toward the aging process;
(iii) communicating with residents who have specific problems (sensory and cognitive deficits) and care of residents with personality and/or behavior disorders;

(iv) allowing resident to make personal choices and promoting respect and dignity, basic rights and needs);

(v) promoting support of family, i.e. understanding the family's attitude toward the aging process and communicating with family.

(5) Care of cognitively impaired residents:

(i) through (v) care of residents who have personality and behavior disorders and meeting the needs of special residents.

(6) Basic restorative services:

(i) promoting independence and self care;

(ii) prevention of injury and falls through proper body mechanics and promotion of safe transfers and ambulation; assistance with eating; assistance with dressing;

(iii) maintenance of range of motion;

(iv) proper turning and positioning;

(v) bowel and bladder retraining; and

(vi) care and use of prosthetic devices and orthotic devices, care of residents' personal possessions, helping the sensory impaired, and basic restorative.

(7) Residents' rights:

(i) through (vii) promoting residents' rights, including Montana Residents' Rights Act; confidentiality; legal and ethical issues; resident abuse, including the Montana Elder Abuse Act; care of residents' clothing and personal possessions; and proper use of restraints.

(c) Prohibition of charges.

(1) Nurse aides who are employed, or who have received an offer of employment, at the time he/she begins a NATCEP or SCEP may not be charged any fees, including charges for textbooks or other course materials.

(2) Questions regarding any repayment to qualifying nurse aides are to be directed to the Senior and Long Term Care Division of the Department of Public Health and Human Services, Helena, Montana.

(a) The SA approved test vendor must provide a procedure to notify any individual who applies to complete the approved competency evaluation program that a record of his/her successful completion of the competency evaluation will be forwarded to the SA for placement in the nurse aide registry. To ensure that nurse aides who apply to take the test are eligible under 483.156(c)(5)(iv) (findings of abuse, neglect or misappropriation of property), the test vendor shall require that each nurse aide must present at least two forms
of identification prior to taking the test. These must include at least one form of photo identification and the aide’s social security card. The identification information must be checked against the abuse file contained in the State Registry. Any nurse aide who has been found to have committed abuse, neglect or misappropriation of property and whose name is found in the abuse file of the State Registry may not take the test and must be reported immediately to the State Registry.

(b) Content of the competency evaluation program.

(1) The SA approved test vendor must provide--

(i) a choice of a written or oral examination to all SCEP applicants;
(ii) a competency evaluation that addresses all of the core curriculum requirements;
(iii) a sufficient pool of test questions so that different forms of the examination may be used;
(iv) a system that protects the security of the pool of test questions; and
(v) an oral version of the test which is given from a prepared text in a neutral manner, and provide appropriate training to test proctors/administrators in proper the administration of oral tests. Audiotapes prepared for this purpose are acceptable.

(2) The SA approved testing entity must provide a skills demonstration test that evaluates at least 5 randomly selected skills (5 subtests) from a pool of skills. No less than 2 of the randomly selected skills must be chosen from the list of personal care skills listed in Appendix C, Core Curriculum Requirements, section 5. The remaining skills must be chosen from skills listed in Appendix C, Core Curriculum Requirements, sections 4, 6, 8, and 9. Each skill demonstration must incorporate as part of its task analysis the evaluation of the examinee’s communication and interpersonal skills (Appendix C, Core Curriculum Requirements, section 1-d and 3 and recognition of resident’s right to privacy and respect.

(c) Administration of the competency evaluation program.

(1) The competency evaluation program will be administered by-

(ii) a SA approved entity which is neither a skilled facility nor a nursing facility participating in Medicare and/or Medicaid programs.

(2) Nurse aides who are employed by, or have received an offer of employment from, a skilled facility or nursing facility participating in the Medicare and/or Medicaid programs on the date the competency program began may not be personally charged any fees for completion of the competency evaluation program, including repeating the test due to unsuccessful completion at previous attempts.

(3) See State Plan for 483.152(c)(2).

(3) Reimbursement is the responsibility of the state Medicaid agency. See 483.152(c)(2).
(4) The test vendor must insure that the skills demonstration part of the SCEP be--

(i) performed in a facility or a laboratory setting which simulates the setting in which the skill(s) will be routinely practiced; and

(ii) administered and evaluated by a registered nurse with at least one year's experience providing care for persons who are elderly and/or chronically ill or disabled of any age. Such experience includes nursing facilities, long term care units of another facility (swing beds, rehabilitation units, geriatric units, etc.), and home health/hospice agencies.

(d) Facility proctoring of the SCEP.

(1) The test vendor must provide for testing individuals, at their request, in the facility for which they work except a facility whose NATCEP or SCEP has been revoked as specified in 483.151(b)(2).

(2) The SA will allow proctoring of the SCEP by a qualified registered nurse employed by a facility provided the test vendor insures that--

(a) only one registered nurse for each facility is approved to proctor the SCEP, and

(b) each approved proctor receives appropriate training in proctoring both the written and skills portions of the SCEP.

The test also may be administered by registered nurse instructors of units of higher education (vocational-technical schools, colleges, universities) who have at least one year's experience instructing and testing students in nursing and nursing-related subjects. The test vendor must insure that the SCEP--

(i) is secure from tampering;

(ii) is standardized and scored only by the vendor;

(iii) requires no scoring by the facility proctor or other facility personnel.

(3) The SA will revoke approval to proctor the SCEP for any facility whose staff have been found to have engaged in impropriety and/or tampering of the SCEP.

(e) Successful completion of the competency evaluation program.

(1) For a candidate to successfully complete the SCEP, he/she must pass--

- the written (or oral) test with a score of no less than 75% correct responses.

- each skills subtest with a score of no less than 80% correct responses. The skills subtests must incorporate a system to insure that key points (those affecting the overall outcome of a subtest) must be satisfactorily passed in order to pass the skill tested.

(2) No later than 30 days following completion of the SCEP, the test vendor must provide to the State Registry a record for each individual who is successful in passing the SCEP.
Information to be provided to the registry must include, at minimum, the information required by the State Plan described in 483.156.

(f) Unsuccessful completion of the competency evaluation program.

(1) The test vendor must inform individuals who have failed the written (or oral) and/or skills portions of the SCEP--

(i) of the general subject area(s) (e.g., resident rights, making an unoccupied bed, post mortem care, etc.) of the test which he/she did not pass;

(ii) that the individual will have three opportunities to repeat part or all of the SCEP. Individuals who fail to score at least 75% correct responses on the written (or oral) test or who fail three or more of the skills subtests are required to repeat the entire test that was not satisfactorily completed. Individuals who fail up to two of the skills subtests are required to repeat only the subtests that he/she failed. For partial retesting of skills, the test vendor will randomly select the same number of skill(s) from the same category(ies) that were failed.

(2) Individuals who have completed an approved nurse aide training program of at least 75 hours will be allowed to repeat the SCEP a maximum of three times. If, after three attempts, the individual does not successfully complete the SCEP, he/she will be required to complete another approved nurse aide training program of at least 75 hours before being eligible to again attempt the SCEP. An individual who has not completed an approved nurse aide training program of at least 75 hours will be allowed one attempt to successfully complete the SCEP. If the individual fails the SCEP, he/she will be required to complete an approved nurse aide training program of at least 75 hours to be eligible to repeat the SCEP.

Following completion of the approved training program, the individual will be given three opportunities to successfully complete the SCEP.

Nurse aide registry.

(a) Establishment of registry. The SA will maintain a registry of nurse aides that--

(1) includes the identifying information described in paragraph (c) of this section;

(2) is accessible during the operating hours of the SA;

(3) includes home health aides who meet the NATCEP or SCEP requirements for nurse aide certification of competency and the additional home health training competency evaluation program.

(4) provides information from nurse aides who dispute any finding against them of abuse, neglect, or misappropriation of property, should they choose to provide such information. Should an aide choose to dispute any finding of abuse, neglect, or misappropriation of funds, he/she must respond to the State’s written request for such information within 30 calendar days from the date of written notification of the SA’s findings. Failure to respond to the SA’s request within 30 days will result in the permanent placement of the findings as public record in the registry.
(b) Registry operation.

(1) The operation of the registry will remain with the SA.

(2) Only the State survey and certification agency will be responsible to place on the registry any findings of abuse, neglect, or misappropriation of property.

(3) Individuals who are placed in the registry are those who have met the SA’s NATCEP and SCEP and include:

(i) individuals who have successfully completed a NATCEP or SCEP;

(ii) were deemed as meeting the requirements under 483.150 by March 31, 1990; or

(iii) have met waiver requirements under 483.150(b)(1). The SA will provide for certification and recertification of nurse aides and home health aides for periods not to exceed 24 consecutive months. Individuals who have not worked at least 8 hours within the 24 consecutive months preceding the expiration date of his/her certification or recertification period will be removed from the State Registry.

(4) The SA will not charge any fees related to the State Registry.

(5) The SA will respond to requests for State Registry information as follows:

- inquiries to the State Registry by telephone will be answered when State Registry staff is available or within 3 days of the inquiry.

- inquiries by mail will be answered within 5 working days of the date the inquiry is received.

- inquiries to the State Registry are available on the SA’s web site [http://161.7.8.64/QAD/nurseaideregistry.jsp](http://161.7.8.64/QAD/nurseaideregistry.jsp) 24 hours a day, 7 days a week.

(c) State Registry content.

(1) The State Registry will contain the following information on all individuals who meet the requirements for nurse aide/home health aide certification of competency:

(i) the individual’s first, middle and last names, including maiden name and any previous names used;

(ii) identifying information including the individual’s

- mailing address,

- social security number,

- identification number assigned by the State; and

- date of birth;
(iii) the date of certification of competency; date the certification period expires; name of approved NATCEP completed, including hours of training, or SCEP. The SA will maintain an Abuse File as part of the State Registry which contains the following information:

(iv) substantiated findings, by either the SA or as adjudicated by a court of law, of abuse, neglect, or misappropriation of property, including—

(A) the SA's written reports of the investigation to include information about the nature of the allegation and supporting evidence;

(B) the date and results of hearing, if any; and

(C) the statement by the individual disputing the allegation(s), if any.

(D) Information will be entered in the State Registry within 10 working days of a substantiated finding by the SA, either by default or by hearing, or within 10 days of the receipt of written notification of a verdict of guilty by a court of law. State Registry information will remain a permanent SA record unless otherwise found in error or upon notification of the individual's death.

(2) Individuals who are no longer eligible to remain in the State Registry will,--

- in the case of an individual who has not performed nursing or nursing-related services for a period of 24 consecutive months, have his/her name removed from the active State Registry.

- in the case of substantiated abuse, neglect, or misappropriation of property, be subject to loss of his/her certification of competency by the SA.

(a) Disclosure of information.

The SA will:

(1) Disclose all of the information in 483.156(c)(1)(iii) and (iv) to any requester.

(2) Information in 483.156(c)(1)(iv) will be disclosed to any requester only if a finding of abuse, neglect, or misappropriation of property has been verified and the information has been placed in the Abuse File of the State Registry.

State FFP.

The provisions of this section are administered by the state Medicaid agency at Department of Public Health and Human Services, Senior and Long Term Care Division.

NEBRASKA
12-006.04C7a The facility must ensure personnel who provide direct resident care but are not required to be licensed or registered, including Nursing Assistants and Medication Aides, meet the following requirements:

12-006.04C7a(1) Nursing Assistants must be at least 16 years of age and must have completed a training course approved by the Department in accordance with 175 NAC 13.

NEVADA

NAC 449.74519 Nursing assistants and nursing assistant trainees. (NRS 449.037)

1. A facility for skilled nursing shall not employ a person as a nursing assistant trainee, full time, temporarily or under contract:

(a) Until the facility obtains from the training program required for certification as a nursing assistant in which the person is enrolled, verification that the person has completed 16 hours of instruction in the classroom or is awaiting the results of a certification examination.

(b) For more than 4 months.

2. A facility for skilled nursing shall ensure that each nursing assistant employed by the facility is able to demonstrate competency in skills and techniques that are necessary to care for the patients in the facility in accordance with each patient’s plan of care.

3. A performance review must be completed for each nursing assistant employed by a facility for skilled nursing at least annually. Based on the results of the review, a facility shall provide training to a nursing assistant to ensure his competency. The training must:

(a) Comply with any requirements for training adopted by the State Board of Nursing pursuant to chapter 632 of NRS;

(b) Be at least 12 hours per year;

(c) Address any areas of weakness indicated in the review and may address the special needs of the patients in the facility as determined by the personnel of the facility; and

(d) If the nursing assistant provides services to patients with cognitive impairments, address the care of such patients.

4. A facility for skilled nursing shall not employ a nursing assistant if, for a period of 24 consecutive months after his completion of the training program required for certification
as a nursing assistant, he has not provided nursing services or services related to nursing for monetary compensation.

5. As used in this section:

(a) "Nursing assistant" has the meaning ascribed to it in NRS 632.0166.

(b) "Nursing assistant trainee" has the meaning ascribed to it in NRS 632.0168.

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**NEW HAMPSHIRE**

Downloaded January 2011

New Hampshire regulations do not include specific content for nurse’s aide training and competency.

**NEW JERSEY**

Downloaded January 2011

**SUBCHAPTER 25. MANDATORY NURSE STAFFING**

8:39-25.1 Mandatory policies and procedures for nurse staffing

...(g) The nurse aide component of the facility's total hourly nurse staffing requirement, as specified in (b) above, shall be met by nurse aides who have completed a nurse aide training course approved by the New Jersey State Department of Health and Senior Services and have passed the New Jersey Nurse Aide Certification Examination, in accordance with N.J.A.C. 8:39-43 and/or by newly hired individuals who have worked in the facility for less than four months and who are enrolled in a nurse aide training program.

**SUBCHAPTER 43. CERTIFICATION OF NURSE AIDES IN LONG-TERM CARE FACILITIES**

8:39-43.1 Nurse aide competency

(a) An individual who meets any of the following criteria shall be considered by the Department to be competent to work as a nurse aide in a licensed long-term care facility in New Jersey:

1. Has a currently valid nurse aide in long-term care facilities certificate and is registered in good standing on the New Jersey Nurse Aide Registry; or
2. Has been employed for less than 120 days and is currently enrolled in an approved nurse aide in long term care facilities training course and scheduled to complete the competency evaluation program (skills and written/oral examination) within 120 days of employment; or

3. Has been employed for no more than 120 days, has completed the required training specified in (a) 2, above, and has been granted a conditional certificate by the Department while awaiting clearance from the criminal background investigation conducted in accordance with N.J.A.C. 8:43I.

8:39-43.2 Requirements for nurse aide certification

(a) An applicant for certification as a nurse aide in long-term care facilities shall:

1. Successfully complete a nurse aide in long-term care facilities training program that has been approved by the Department; and

2. Provide evidence that he or she is of good moral character, including, but not limited to, compliance with the requirements of the Criminal Background Investigation Program in accordance with N.J.A.C. 8:43I; and

3. Pass both the Department's clinical skills competency exam and written/oral exam.

(b) An applicant shall fulfill the requirements in (a) above in order to be listed on the New Jersey Nurse Aide Registry.

8:39-43.3 Exceptions

(a) The following persons may take the Department's written/oral examination without first completing a nurse aide training course and clinical skills evaluation approved in accordance with N.J.A.C. 8:39-43.10:

1. Students, graduate nurses, or foreign licensed nurses, pending licensure, who submit evidence of successful completion of a course in the fundamentals of nursing;

2. Persons who submit evidence of the successful completion of a course in the fundamentals of nursing within the 12 months immediately preceding application to take the written/oral competency examination, including:

   i. Persons certified as a nurse aide in long term care facilities in another state by a state governmental agency and listed on that state's nurse aide registry, who do not meet the requirements for equivalency specified at N.J.A.C. 8:39-43.3 (a) 1, above; and

   ii. Persons who have had training and experience as a nurse aide in a military service, equivalent to that of a nurse aide; and

3. Persons who are certified as homemaker-home health aides by the New Jersey Board of Nursing, in accordance with N.J.A.C. 13:37-14, as amended and supplemented, and who
4. Persons who successfully complete the Core Curriculum for Unlicensed Assistive Personnel approved by the Department and the New Jersey Board of Nursing, and the Long-Term Care Module of the Core Curriculum for Unlicensed Assistive Personnel approved by the Department.

8:39-43.4 Certificates

(a) A nurse aide in long term care facilities certificate shall be valid for a period of two years from the date of issue.

(b) A nurse aide certificate shall not be retained by an employer for any reason.

(c) A nurse aide certificate is not transferable by sale, gift, duplication, or other means and shall not be forged or altered.

8:39-43.5 Revocation and suspension of certificates

(a) A certificate issued to a nurse aide in accordance with this subchapter shall be revoked in the following cases:

1. Finding of abuse, neglect or misappropriation of property of a resident of a long-term care facility or assisted living residence, or of a patient, resident, or client of any other facility or agency licensed by the Department;

2. Conviction or guilty plea as specified at N.J.A.C. 8:39-9.3(b) or other crime or offense as specified at N.J.A.C. 8:43I –2.1(b); or

3. Sale, purchase, or alteration of a certificate; use of fraudulent means to secure the certificate, including filing false information on the application; or forgery, imposture, dishonesty, or cheating on an examination.

(b) The Commissioner or his or her designee may summarily suspend the certificate of a nurse aide when the continued certification of an individual poses an immediate threat to the health, safety or welfare of the public, including residents and patients of long term care facilities, assisted living facilities and other licensed health care facilities or agencies. An individual whose certificate is summarily suspended shall have the right to appeal to the Commissioner for an expedited hearing at the Office of Administrative Law, which shall be conducted pursuant to the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq., and N.J.S.A. 52:14F-1 et seq., and the Uniform Administrative Procedure Rules, N.J.A.C. 1:1. If the summary suspension is upheld at the Office of Administrative Law, the individual whose certificate has been summarily suspended shall have the right to apply for injunctive relief in the Superior Court of New Jersey. Nothing in this subsection shall be construed to
prevent the Commissioner from thereafter revoking the license in accordance with (a) above.

8:39-43.6 Recertification

(a) The Department shall require the renewal and updating of a nurse aide listing on the registry at least once every two years on a schedule established by the Department.

(b) In order to be recertified, an individual shall have a currently valid nurse aide in long term care facilities certificate and shall have been employed performing nursing or nursing-related services for at least seven hours for pay, in a licensed health care facility or for an agency licensed by the Department, within the past 24 months from the date of expiration as specified on the nurse aide certificate, and shall not have had his or her certificate revoked in accordance with N.J.A.C. 8:39-43.5 (a), and shall not have his or her certificate suspended in accordance with N.J.A.C. 8:39-43.5 (b).

(c) The designated facility representative shall verify such employment by signing the individual’s recertification data mailer upon request of the individual.

(d) Any individual who does not meet the recertification requirement listed in (b) above and who wishes to be recertified, shall repeat the requirements for certification at N.J.A.C. 8:39-43.2, unless the original date of issue of the certificate is within the five years prior to the expiration date listed on the certificate and the nurse aide successfully completes the skills evaluation and written/oral examination.

1. Any individual who has allowed his or her certificate to expire must undergo a criminal background investigation as required by N.J.A.C. 8:43I, regardless of whether the person must complete a training program.

8:39-43.7 Nurse aide registries

(a) The Department shall establish and maintain a nurse aide registry in accordance with 42 CFR 483.156, as supplemented and amended.

(b) The Department shall establish and maintain a nurse aide abuse registry in accordance with 42 CFR 483.156, as supplemented and amended.

1. The nurse aide abuse registry shall include the names of individuals who are found to have abused, neglected or misappropriated the property of any resident while working in a long-term care facility as an uncertified nurse aide.

8:39-43.8 Hearings for resident abuse, resident neglect, or misappropriation of resident property
(a) Prior to entering a finding on the nurse aide abuse registry, the Department shall provide an opportunity of at least 30 days notice to the certified nurse aide or uncertified nurse aide, identifying the intended action, the factual basis and source of the finding, and the individual’s right to a hearing.

(b) If a hearing is requested, it shall be conducted by the Office of Administrative Law or by a hearing officer of the Department in accordance with hearing procedures established by the Administrative Procedure Act., N.J.S.A. 52:14B-1 et seq., and 52:14F-1 et seq., and the Uniform Administrative Procedure Rules, N.J.A.C. 1:1.

(c) No further right to an administrative hearing shall be offered to a certified nurse aide or uncertified nurse aide who has been afforded a hearing before a state or local administrative agency or other neutral party, or in a court of law, at which time the nurse aide received adequate notice and an opportunity to testify and to confront witnesses, and where there was an impartial hearing officer who issued a written decision verifying the findings of abuse, neglect, or misappropriation of property of a resident. The individual shall have a right to enter a statement to be included in the registry contesting such findings.

8:39-43.9 Equivalency for nurse aides registered in other states

(a) A nurse aide certificate received in another state or territory of the United States may be entered on the registry, provided that the following conditions are satisfied:

1. The Department receives documentation from the state’s or U.S. territory’s registry that such nurse aide has completed a training and competency evaluation program at least equal to that required in New Jersey;

2. The nurse aide has not been convicted of any crimes and has no documented findings of abuse, neglect, or misappropriation of resident property on the registry; and

3. The nurse aide complies with the requirements for a criminal background investigation as required by N.J.A.C. 8:43I.

8:39-43.10 Approval of a nurse aide in long term care facilities training program

(a) Written approval of the Department is required prior to enrollment of students and the commencement of a training program in an educational institution, a facility, or a proprietary program. Training program approval, when granted, shall be granted for a 24-month period.

(b) An approved training program for nurse aides shall consist of 90 hours of training. This shall include 50 hours of classroom instruction and 40 hours of clinical experience in a New Jersey licensed long-term care facility. All training programs shall use the curriculum approved by the Department, in accordance with (c) below.
(c) The New Jersey Curriculum for Nurse Aide Personnel in Long Term Care Facilities ("the curriculum"), which has been approved by the Department, shall be the approved curriculum for a 90 hour training program. The entire content of the curriculum shall be taught. A copy of the curriculum and the form needed to apply for approval of a training course may be obtained by contacting the following office: Certification Program; New Jersey Department of Health and Senior Services; P.O. Box 367; Trenton, NJ 08625-0367

(d) The New Jersey competency evaluation shall consist of both a skills examination and a written/oral examination.

(e) A facility-based approved training program and the New Jersey competency evaluation shall be scheduled so as to be completed within 120 days of the starting date of employment for a nurse aide.

(f) A training program offered in an educational institution to train and test certified nurse aides shall be approved by the Department.

(g) No resident care unit shall serve as the site of clinical instruction for more than one training program at a time.

(h) The training program for nurse aides shall not be used as a substitute for staff orientation or staff education programs.

(i) Classroom and clinical instruction for particular tasks or procedures shall be scheduled concurrently to the extent practicable.

(j) The Department may request submission of additional information or require the redesign and/or revision of the program materials. Redesign or revision of the program application does not ensure that approval will be granted.

(k) Any changes in a training program, such as changes in location, dates, times or instructors, shall be reported in writing, to the Certification Program at least 30 working days prior to the planned change. No change shall be implemented without the written approval of the Certification Program.

(l) The facility or educational institution conducting a training program shall maintain on file a copy of the lesson plans for the course. Each lesson plan shall state, at a minimum, the following:

1. The objective(s) of the lesson;

2. The content of the lesson;

3. A description of clinical activities for each lesson, consistent with the objectives in the curriculum;

4. The hours of instruction;

5. Methods of presentation and teacher strategies; and
6. Methods for evaluation of students with respect to their classroom and clinical performance in the facility.

(m) Each nurse aide training program instructor/evaluator shall:

1. Be currently licensed in New Jersey as a registered professional nurse;

2. Possess at least three years of full-time or full-time equivalent experience in a licensed health care facility;

3. Possess at least one year of full-time or full-time equivalent experience as a registered professional nurse in a licensed long term care facility, within the five years immediately preceding submission of the instructor/evaluator resume to the Certification Program of the Department for approval; and

4. Have successfully completed a training workshop offered by the Department for instructors/evaluators.

(n) The student-to-instructor ratio for classroom instruction shall not exceed a ratio of 20 students to one instructor.

(o) The student-to-instructor ratio for clinical instruction shall not exceed a ratio of 10 students to one instructor.

(p) Each student shall be under the supervision of the registered professional nurse instructor at all times when providing resident care as part of the student’s clinical experience in the facility. The registered professional nurse instructor shall be responsible for evaluating the student’s classroom and clinical performance.

(q) The resume of each nurse instructor/evaluator currently teaching the training program shall be available in the facility or educational institution.

8:39-43.11 Evaluation of training programs

(a) The facility or educational institution conducting a training program shall develop, implement, and document a process for evaluating the effectiveness of the training program. The evaluation process shall include, at a minimum, the following:

1. Assignment of responsibility for the evaluation process;

2. An annual written evaluation report, including findings, conclusions, and recommendations;

3. A written evaluation by the facility or educational institution of the performance of instructors/evaluators;

4. Written evaluations, by students, of the training program; and

5. Statistical data that shall be maintained on file in the facility or educational institution. The statistical data shall include, at a minimum, the following for each course:
i. The beginning and ending dates;

ii. The number of students enrolled;

iii. The number and percentage of students who satisfactorily completed the course;

iv. The number and percentage of students who failed the course;

v. The number and percentage of students who passed the New Jersey Nurse Aide Competency Evaluation Program, including written/oral examination and skills; and

vi. The number and percentage of students who failed the New Jersey Nurse Aide Competency Evaluation Program, including written/oral examination and skills.

(b) The facility or training program shall retain all evaluation reports for at least three years and shall submit a report to the Department upon request.

8:39-43.12 Student records

(a) Each facility or educational institution that conducts a training program shall establish a student record for each student. The student record shall include, at a minimum, the following:

1. The beginning and ending dates of the training program;

2. An attendance record;

3. A signed skills competency task form; and

4. An evaluation of the student's classroom and clinical performance, completed by the student's instructor.

(b) The facility shall retain the records specified at (a) above for at least four years.

(c) The facility or educational institution conducting a training program shall ensure that a student who is absent receives a reasonable and timely opportunity to obtain the classroom and/or clinical instruction missed, as documented in the student's record.

8:39-43.13 Denial or termination of a nurse aide in long-term care facilities training program

(a) The Department shall conduct unannounced site visits of a nurse aide in long-term care facilities training program.

(b) The Department may deny, suspend, or withdraw approval if it determines that a nurse aide training program fails to follow the application as submitted to, and approved by, the Department.
(c) Approval of a nurse aide training program offered by or in a facility that participates in the Medicare or Medicaid Programs shall be denied in accordance with 42 CFR 483.151 (b).

(d) Suspension or withdrawal of training program approval shall not affect currently enrolled students, who shall be permitted to complete the training program unless the Department determines that continuation of the program would jeopardize the health or safety of residents in any long-term care facility.

(e) If a nurse aide training program is discontinued for any reason, but the facility or educational institution continues to operate, the facility or educational institution shall be responsible for maintaining the records of students and graduates.

(f) If a nurse aide training program is discontinued for any reason and the facility or educational institution ceases to operate, the records of students and graduates shall be transferred to an agency acceptable to the Department. The Department shall be advised, in writing, of the arrangements made to safeguard the records.

(g) If a nurse aide training program is discontinued for any reason, the facility or educational institution shall:

1. Assist in the transfer of students to other approved nurse aide training programs;

2. Provide the Department with a list of the students who have transferred to another training program, and the dates on which the students were transferred; and

3. Notify the Department that the requirements for closing have been fulfilled and provide notice of final closing.

(h) If a facility or educational institution plans to voluntarily discontinue a nurse aide training program, the facility or educational institution shall:

1. Provide the Department with a written statement of the rationale and plan for the intended closing;

2. Continue the program until the class established for currently enrolled students has been completed; and

3. Notify the Department, in writing, of the closing date of the program at least 90 days prior to that date.

8:39-43.14 Responsibilities of Administrator

(a) The licensed nursing home administrator or administrator of the educational institution conducting the training program shall be responsible for implementation of the training program in accordance with the rules in this subchapter. This responsibility shall include, but not be limited to, ensuring that:

1. The curriculum is implemented in accordance with the application as submitted and approved by the Certification Program of the Department;
2. Resident care provided by the student does not exceed the tasks and procedures that the student has satisfactorily demonstrated, as documented by the registered professional nurse on a skills competency task form; and

3. Job descriptions are established indicating the responsibilities of each nurse instructor/evaluator.

8:39-43.15 Employment of a nurse aide

(a) No licensed long term care facility shall employ a person as a nurse aide without making inquiry to the New Jersey nurse aide registry at 1-800-274-8970, and to any other state where the facility believes the nurse aide is registered.

(b) The facility shall have a system in place to document compliance with (a) above.

(c) The facility shall maintain records sufficient to verify the previous employment of nurse aides who are not currently working but whose employment at the facility makes him or her eligible for recertification in accordance with N.J.A.C. 8:39-43.6(c).
8:39-43.16 Nurse aide functions

The nurse aide shall function under the supervision and direction of a registered professional nurse and shall perform tasks that are delegated in accordance with the provisions of N.J.A.C. 13:37-6.2.

8:39-43.17 Mandatory nurse aide education and training

(a) A program of individualized orientation of each nurse aide shall be conducted by a registered professional nurse. The orientation program shall include resident care training and demonstrations in basic nursing skills, followed by an internship of two to five days, depending on experience.

(b) Each nurse aide shall receive, at a minimum, 12 hours of regular in-service education per year, the content of which shall be based on the outcome of performance reviews of every nurse aide, which are completed at least once every 12 months. (The 12 hours may include topics that are covered under OBRA requirements, Pub. L. 100-239 (1989) which overlap or are duplicative of those required at N.J.A.C. 8:39-13.4 (b), up to a maximum of six hours of in-service training per year.)

8:39-43.18 Fees

(a) In accordance with 42 CFR 483.154, as amended and supplemented, fees may be charged by the testing agency for the following:

1. Clinical skills and written examination;
2. Clinical skills and oral examination;
3. Clinical skills and Spanish oral examination;
4. Written examination only;
5. Clinical skills examination only;
6. Oral examination only;
7. Spanish oral examination only;
8. Duplicate or updated certificate, which shall be charged to the individual; and
9. Recertification certificate, which shall be charged to the individual if the individual is neither currently employed nor has been offered employment by a long-term care facility.

(b) The fee charged by the Department for a two-year approval of a training program shall be $75.00.
(c) The Department shall provide timely notice of any changes in fees specified in (a) above in the Public Notices section of the New Jersey Register.

(d) A 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 not be charged for any portion of the program identified in (a) above, including tuition and testing, and fees for textbooks or other required course materials.

(e) If a nurse aide 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 licensed long term care facility not later than 12 months after completing a nurse aide training and competency evaluation program, the facility shall provide for the reimbursement of reasonable costs incurred in completing the program. Such costs include, but are not limited to, tuition, testing, and fees for textbooks or other required course materials.

(f) A nurse aide shall be reimbursed the costs of certification within one year of the successful completion of a reasonable probationary period established by the long-term care facility.

(g) No nurse aide shall be required, as a condition of employment, to pay the cost of the training program in the event of voluntary or involuntary termination of employment.

(h) All fees referenced at (a) and (b) above are non-refundable.

NEW MEXICO

Downloaded January 2011

New Mexico regulations do not include specific content for nurse's aide training and competency.

NEW YORK

Downloaded January 2011

Section 415.13 Nursing Services

...(c) Nurse aide.

(1) For the purpose of this section and section 415.26(d) of this Part, nurse aide shall mean any person who provides direct personal resident care and services including, but not limited to, safety, comfort, personal hygiene or resident protection services, for compensation, under the supervision of a registered professional nurse or licensed practical nurse in the facility, except for those individuals who furnish services to residents only as feeding assistants as defined in Section 415.13(d) of this Part. Certification of such nurse aide shall be in accordance
with the provisions of section 415.26(d) of this Part.

(2) Only individuals who meet the following qualifications may be assigned to perform nurse aide functions, as defined in paragraph (1) of this subdivision:

(i) a person who, as verified by the facility, is listed in the New York State RHCF Nurse Aide Registry developed and maintained as set forth in Section 2803-j of the Public Health Law and as described in Section 415.31 of this Part;

(ii) a graduate of a nursing program approved by the New York State Commissioner of Education or by the licensing authority in another state, territory or possession of the United States as preparation for practice as a licensed nurse who has taken and passed the New York State competency examination.

(iii) a nurse aide trainee who has successfully completed a State approved RHCF nurse aide training program as described in subdivision (d) of section 415.26 of this Part or a program designed for such purpose and approved by the State Commissioner of Education and who is waiting to take the RHCF clinical skills and written or oral nurse aide competency examinations at the next scheduled opportunity, such competency examination to be passed within three consecutive attempts within 4 months of the date of the initial RHCF nurse aide trainee employment or of the completion of the State approved RHCF nurse aide training program, whichever occurs first;

(iv) a nurse aide trainee who has taken the competency examinations and is waiting for the official results of the examination;

(v) a certified nurse aide who is currently listed in another state's nursing home nurse aide registry, as verified by the facility, and who has applied to the Department to obtain State certification and has not been denied; and

(vi) a nurse aide trainee provided the individual is concurrently enrolled in a State approved residential health care facility nurse aide training program which meets all requirements set forth in this section and completes such training program and competency examinations within one hundred twenty (120) days of employment, in accordance with the following:

(a) the nurse aide trainee may assume specific duties involving direct resident care and services as training and successful demonstration of competencies in the specific duties/skills are completed, but not before completing at least sixteen (16) hours of classroom instructions in the following areas:

(1) communication and interpersonal skills; (2) infection control;

(3) safety/emergency procedures, including the Heimlich maneuver;

(4) promoting residents’ independence;
(5) respecting residents' rights; and

(6) resident abuse, mistreatment and neglect reporting requirements as set forth in **Section 2803-d of the Public Health Law; and**

(b) the nurse aide trainee shall be under the direct supervision of a nurse when the trainee is providing direct resident care or services and identifiable as a nurse aide trainee.

(vii) If the facility has reason to believe that the individual has worked as a nurse aide in any state(s) other than New York, the facility must request information from the nurse aide registry of such other state(s) before permitting the individual to serve as a nurse aide.

**Section 415.26 Organization and administration.**

...(d) Nurse aide certification and training.

(1) Definitions. The following terms used in this section shall be defined as follows:

(i) Nurse aide training program coordinator shall mean a person who is assigned the administrative responsibility and accountability for the RHCF nurse aide training program. The program coordinator (PC) shall be a registered professional nurse with at least two years experience in a nursing home and demonstrated competency to teach adult learners as evidenced and documented by at least one of the following:

(a) completion of a professionally recognized course in teaching adult learners or New York State Education Department teacher certification;

(b) two years of experience teaching nursing or nursing related programs to adults in an academic setting approved by the State Education Department or other recognized accrediting body; or

(c) two years of experience teaching nurse aides in a residential health care facility.

(ii) Instructor shall mean the person who is assigned the educational responsibility for the nursing home nurse aide training program. This person shall have the day to day responsibility for implementing the facility’s training program in accordance with the facility’s policies and procedures and State and federal requirements. The instructor shall be a registered professional nurse with at least one year of experience in a nursing home who has demonstrated ability to teach adult learners as evidenced and documented by at least one of the following:

(a) completion of a professionally recognized course in teaching adult learners or New York State Education Department teacher certification;
(b) two years of experience teaching nursing or nursing related programs to adults in an academic setting approved by the State Education Department or other recognized accrediting body; or

(c) two years of experience teaching nurse aides in a residential health care facility.

(iii) Clinical skills evaluator or Nurse Aide Evaluator shall mean a person who administers part or all of the state authorized residential health care facility nurse aide competency examinations. This person shall be a registered professional nurse who has one year of nursing home experience and has successfully completed the State approved clinical evaluator or nurse aide evaluator program. Effective July 1, 1992, only individuals possessing nurse aide evaluator designation may administer the State RHCF nurse aide competency examinations.

(2) Nurse aide certification. In order to obtain nurse aide certification and be listed in the New York State RHCF Nurse Aide Registry as described in Section 415.31 of this Part, an individual must successfully complete a State approved residential health care facility nurse aide training program as described in paragraph (2) of this subdivision and pass the State authorized clinical skills competency examination and written or oral competency examination as described in paragraph (3) of this subdivision.

(i) The residential health care facility nurse aide training program shall be reviewed and approved by the Department prior to implementation as to the requirements contained in this section.

(ii) The facility shall be notified by the Department within 90 days of the submission of the program whether the program has been approved, disapproved or additional information is required.

(iii) Program approval will be granted for a term not to exceed 2 years and is subject to on-site review for the purpose of determining compliance with applicable State and federal requirements during the course of all facility surveys.

(iv) Approved programs must notify the Department, in the form and manner described by the Department, and may be subject to review, whenever substantive changes are made to the program.

(v) Approval to provide training by or in the facility will be withdrawn by the Department for up to two years each time the facility:

(a) fails to permit unannounced visits;

(b) fails to meet all of the applicable federal and State requirements for nurse aide training and competency evaluation;

(c) is subjected to an extended or partial extended survey;

(d) is assessed a civil monetary penalty of $5,000.00 or more;
(e) has a temporary manager, receiver or caretaker appointed;

(f) is subjected to a ban on admissions or a denial of payment under either the Title XVIII or Title XIX programs.

(3) Nurse aide training program. The training program shall be supervised by a Program Coordinator who meets the definition specified in subparagraph (i) of paragraph (1) of this subdivision and conducted by the Primary Instructor who meets the definition specified in subparagraph (ii) of paragraph (1) of this subdivision. The program coordinator may be the director of nursing services provided that the director of nursing services does not perform the actual training. Additional health care personnel may supplement the instructor to provide specialized training provided that such supplemental trainers have at least one year of experience in their field of expertise.

(i) The nurse aide training program shall include classroom and clinical training which enhances both skills and knowledge and, when combined, shall be of at least 100 hours’ duration. The clinical training shall as a minimum include at least 30 hours of supervised practical experience in a nursing home. The nurse aide training program shall include stated goals, objectives, and measurable performance criteria specific to the curriculum subject material, the resident population and the purpose of the facility, and shall be consistent with the curriculum outlined below. This curriculum shall be taught at a fourth (4th) to sixth (6th) grade English literacy level. Facilities with special populations shall supplement the curriculum to address the needs of such populations accordingly. The curriculum shall otherwise include but not be limited to the following:

(a) Normal aging:

(1) anatomical changes;

(2) physiological changes;

(3) psychosocial aspects:

(i) role changes;

(ii) cultural changes;

(iii) spiritual needs; and

(iv) psychological and cognitive changes; and

(4) concept of wellness and rehabilitation.

(b) Psychological needs of the resident:
(1) adjustment to institutional living;
(2) working with resident and family during admission/transfer/discharge;
(3) residents' rights:
(i) respect and dignity;
(ii) confidentiality;
(iii) privacy; and
(iv) self-determination; and
(4) sexual adjustments in relation to illness, physical handicaps and institutional living.

(c) Communication in health care facilities:
(1) relating to residents, families, visitors, and staff;
(2) methods of communication in overcoming the barriers of language and cultural differences; and
(3) communicating with residents who have sensory loss, memory, cognitive or perceptual impairment.

(d) Personal care needs:
(1) care of the skin, mouth, hair, ears and nails; and
(2) dressing and grooming.

(e) Resident unit and equipment:
(1) bed-making; and
(2) care of personal belongings such as clothing, dentures, eyeglasses, hearing aids and prostheses.

(f) Nutritional needs:
(1) basic nutritional requirements for foods and fluids;
(2) special diets;
(3) meal services;
(4) assistance with eating:
(i) use of adaptive equipment; and
(ii) feeding the resident who needs assistance; and
(5) measuring and recording fluid and food intake.

(g) Elimination needs:
(1) physiology of bowel and bladder continence:
   (i) maintaining bowel regularity; and
   (ii) physical, psychosocial and environmental causes of incontinence;
(2) nursing care for the resident with urinary and/or bowel incontinence:
   (i) toileting programs;
   (ii) care of urinary drainage equipment;
   (iii) use of protective clothing; and
   (iv) enemas;
(3) measuring urinary output;
(4) bowel and bladder training programs; and
(5) care of ostomies, including but not limited to colostomy and ileostomy.

(h) Mobility needs:
(1) effects of immobility; and
(2) ambulation and transfer techniques:
   (i) use of assistive devices;
   (ii) use of wheelchairs; and
   (iii) use of mechanical lifters.

(i) Sleep and rest needs:
(1) activity, exercise and rest; and
(2) sleep patterns and disturbances.

(j) Nursing care programs for the prevention of contractures and decubitus ulcers (pressure sores);
   (1) body alignment, turning and positioning;
   (2) individualized exercise programs;
(3) special skin care procedures;
(4) use of special aids; and
(5) maintenance of individualized range of motion.

(k) Observing and reporting signs and symptoms of disability and illness:

(1) physical signs and symptoms:
   (i) determination of temperature, pulse, respiration;
   (ii) testing urine;
   (iii) measuring height and weight;

(2) behavioral changes; and

(3) recognizing and reporting abnormal signs and symptoms of common diseases and conditions, including but not limited to:
   (i) shortness of breath;
   (ii) rapid respirations;
   (iii) coughs;
   (iv) chills;
   (v) pain and pains in chest or abdomen;
   (vi) blue color to lips;
   (vii) nausea;
   (viii) vomiting;
   (ix) drowsiness;
   (x) excessive thirst;
   (xi) sweating;
   (xii) pus;
   (xiii) blood or sediment in urine;
   (xiv) difficult or painful urination;
   (xv) foul-smelling or concentrated urine; and
   (xvi) urinary frequency.
Infection control:
(1) medical asepsis;
(2) handwashing; and
(3) care of residents in isolation.

Resident safety:
(1) environmental hazards;
(2) smoking;
(3) oxygen safety; and
(4) use of restraints.

Nursing care needs of resident with special needs due to medical conditions such as but not limited to:
(1) stroke;
(2) respiratory problems;
(3) seizure disorders;
(4) cardiovascular disorders;
(5) sensory loss and deficits;
(6) pain management;
(7) mentally impairing conditions:
   (i) associated behavior disorders; and
   (ii) characteristics of residents such as wandering, agitation, physical and verbal abuse, sleep disorders, and appetite changes.

Mental health and social service needs:
(1) self care according to the resident's capabilities;
(2) modifying behavior in response to the behavior of others;
(3) developmental tasks associated with the aging process; and
(4) utilizing the resident's family as a source of emotional support.

Resident rights;
(q) Care of the dying resident including care of the body and personal effects after death; and

(r) Care of cognitively impaired residents:

(1) techniques for addressing the unique needs and behaviors of individuals with dementia;

(2) communicating with cognitively impaired residents;

(3) understanding the behaviors of cognitively impaired residents;

(4) appropriate responses to the behaviors of cognitively impaired residents; and

(5) methods of reducing the effects of cognitive impairments.

(ii) The training program shall maintain a performance record of the major duties and skills taught each nurse aide trainee. At the end of the training program, a copy of the performance record shall be given to the trainee and the trainee’s employer, if different from the training facility. As a minimum, the performance record shall include the following:

(a) a listing of the measurable performance criteria for each duty and skill expected to be learned in the program;

(b) an entry showing satisfactory or unsatisfactory performance;

(c) the date of the performance; and

(d) the name of the instructor supervising the performance.

(4) Nurse aide competency evaluation. Subsequent to the completion of the nurse aide training program including the satisfactory performance of all duties and skills listed in the performance record, the facility shall arrange for the nurse aide trainee to take and pass the State authorized residential health care facility nurse aide clinical skills competency examination and the written or oral competency examination as follows:

(i) The clinical skills competency examination shall be given by a licensed registered nurse, who meets the definition of the Clinical Skills Evaluator until June 30, 1992 and effective July 1, 1992 the Nurse Aide Evaluator specified in subparagraph (iii) of paragraph (1) of this subdivision and who is not otherwise associated with the facility employing and/or training the nurse aide trainee. The trainee shall have three opportunities to pass the clinical skills examination; and

(ii) After passing the clinical skills examination, the trainee shall have three opportunities to pass the written or oral competency examination. The nurse aide trainee will obtain certification and be listed in the Registry upon passing the
(5) The operator shall not charge a fee to any individual for the costs of training, including textbooks and materials, or for the costs of the competency examinations.

(i) If within 12 months of completing a State approved RHCF nurse aide training program, an individual is employed or is given an offer of employment by a facility, the facility must arrange, in a form and manner indicated by the Department, for the individual to receive reimbursement from the State for the amount of the costs, up to the CAP established by the State, incurred by the individual for the training. Such reimbursement shall be on a pro rata basis based on the length of subsequent employment as an RHCF nurse aide in the RHCF.

(ii) If within 12 months of completing the State approved RHCF nurse aide competency evaluation program, an individual is employed or is given an offer of employment by a facility, the facility must arrange, in a form and manner indicated by the Department, for the individual to receive reimbursement from the State for the acceptable amount of the costs, up to the CAP established by the State, incurred by the individual for the examinations. Such reimbursement shall be on a pro rata basis based on the length of subsequent employment as an RHCF nurse aide in the RHCF.

(6) Nurse aide recertification. The certified nurse aide shall be recertified every two years no later than the last day of the month in which certification was received. To obtain recertification the certified nurse aide shall demonstrate in the form indicated by the Department that he/she has worked at least 7 hours for compensation as a health care nurse aide during the previous 24 month period. The operator shall implement nurse aide recertification in accordance with the following:

(i) The required documentation shall be provided in the form indicated by the Department to each nurse aide who either currently works for or last worked for compensation as a nurse aide in the facility;

(ii) A fee shall not be charged by the operator to any nurse aide for any cost associated with recertification;

(iii) The recertification fee for each nurse aide who either currently works for or last worked for compensation as a nurse aide in the facility shall be paid by the operator except that the nurse aide staffing agency or employment organization which currently employs the nurse aide may pay this fee; and

(iv) After any period of 24 consecutive months during which the certified nurse aide did not provide nurse aide care for compensation in a residential health care facility,
such nurse aide shall be required to requalify as specified in the following subparagraphs (a) or (b) to be listed in the New York State RHCF Nurse Aide Registry:

(a) Nurse aides who, on or after July 1, 1989, successfully completed a State approved nurse aide training program in accordance with applicable federal and State requirements, must pass the State authorized residential health care facility nurse aide clinical skills competency examination and the written or oral competency examination;

(b) All other nurse aides must successfully complete a State approved nurse aide training program and pass the State authorized residential health care facility nurse aide clinical skills competency examination and the written or oral competency examination.

(7) The operator shall complete a performance review of each nurse aide at least once every 12 months.

(8) The operator shall ensure that the certified nurse aide regularly attends inservice education programs provided for all personnel and that the programs shall include the following:

(i) A portion of each individual’s annual inservice education as required by subparagraph (iv) of this paragraph shall be based upon the outcome of the individual’s annual performance review as specified in paragraph (7) of this section, and address the areas of weakness in the individual’s performance;

(ii) Inservice education must also address the special needs of the residents in the facility, including the care of the cognitively impaired;

(iii) Written records shall be maintained which indicate the content of and attendance at each inservice training program and the outcomes of the performance review; and

(iv) Each certified nurse aide shall attend and be compensated for inservice education sufficient to ensure the continuing competence of the nurse aide of not less than six hours of inservice education in every six month period.

Section 415.31 - New York State RHCF nurse aide registry

a) Content. The New York State RHCF Nurse Aide Registry shall include but not be limited to the following information concerning each certified nurse aide as applicable/appropriate:

(1) full name of nurse aide, including maiden name and/or other surnames used;

(2) address of nurse aide when certified/recertified;
(3) date of birth;

(4) social security number;

(5) name and date of state approved training and competency program(s) successfully completed;

(6) certification number of nurse aide with a descriptive modifier indicating how the nurse aide obtained certification;

(7) most recent recertification date of nurse aide;

(8) final findings of instances of resident abuse, mistreatment or neglect against a nurse aide with date of hearing or finding;

(9) the nursing home employer at the time of certification/recertification and date of employment by that employer;

(10) a record of criminal conviction for resident abuse, mistreatment, neglect or misappropriation of resident property against a nurse aide and the date of conviction; and

(11) a statement by the nurse aide disputing the findings or conviction that may not exceed 150 words, nor contain information which identifies other persons.

(b) Fees. The New York State RHCF Nurse Aide Registry shall be supported and maintained by charging fees in accordance with Public Health Law Section 2803-j.

(c) Access. The New York State RHCF Nurse Aide Registry shall be accessible by telephone, during the hours established by the Department, or in writing.

(d) Obtaining information by telephone. The New York State RHCF Nurse Aide Registry shall provide the following information upon request to residential health care facilities, nurse aide agencies/employment organizations and nurse aide registries maintained by other states in response to a telephone inquiry;

(1) Telephone verification that the individual is a certified nurse aide;

(2) an indication of findings of resident abuse, mistreatment or neglect or criminal convictions of resident abuse, mistreatment, neglect or misappropriation of resident property by a nurse aide; and

(3) follow-up documentation as described in subdivision (e) of this section.

(e) Obtaining written information. New York State RHCF Nurse Aide Registry shall provide the following information upon the receipt of a written request, in accordance with the provisions of the Freedom of Information Law:

(1) verification that the individual is a certified nurse aide, the certification number
and date of certification/recertification;

(2) copies of final findings of resident abuse, mistreatment or neglect by a nurse aide and a statement from the nurse aide disputing the findings, if any; and

(3) a report of a criminal conviction for resident abuse, mistreatment, neglect or misappropriation of resident property and the date of the conviction.

NORTH CAROLINA

10A NCAC 13D .2304 NURSE AIDES

(a) The facility shall employ or contract individuals as nurse aides in compliance with 42 CFR Part 483 which is incorporated by reference, including subsequent amendments. Copies of the Code of Federal Regulations may be purchased from the Superintendent of Documents, U.S. Government Printing Office, P.O. Box 371954, Pittsburgh, PA 15202-7954 for thirty eight dollars ($38.00) and may be purchased with a credit card by a direct telephone call to the G.P.O. at (202) 512-1800.

(b) The facility shall provide to the Department, upon request, verification of in-service training and of past or present employment of any nurse aide employed by the facility.

NORTH DAKOTA

CHAPTER 33-07-06 NURSE AIDE TRAINING, COMPETENCY EVALUATION, AND REGISTRY

33-07-06-02. Nurse aide training.

1. Any nurse aide employed by a nursing facility or pursuing nurse aide certification and entry on the nurse aid registry must successfully complete a department-approved training program consisting of a minimum of seventy-five hours and a department-approved competency evaluation or a department-approved competency evaluation.

2. Nurse aides employed by nursing facilities pursuing nurse aide certification must complete a minimum of sixteen hours of classroom training in the following areas from a department-approved nurse aide training program prior to any hands-on contact with residents or patients. The areas are:

a. Communication and interpersonal skills;

b. Infection control;

c. Safety and emergency procedures, including the Heimlich maneuver;
d. Promoting residents' independence; and

e. Respecting residents’ rights.

3. The remainder of the seventy-five hour approved training and competency evaluation program must be completed within four months of the date of first employment in the facility as a nurse aide and must include at least sixteen hours of supervised practical training.

4. Nurse aides may not perform tasks for which competence has not been determined unless under the direct supervision of a licensed nurse.

5. Nurses aides trained and determined proficient by the instructor to provide specific services to residents who have not completed the competency evaluation program shall provide these services under the general supervision of a licensed or registered nurse.

6. The nurse aide training program must ensure that nurse aides employed by or having an offer of employment from a nursing facility are not charged for any portion of the nurse aide training program including fees for textbooks or other required course materials.

33-07-06-03. Nurse aide competency evaluation programs.

1. The department-approved competency evaluation program must allow a nurse aide the option of establishing competency through written or oral and manual skills examination.

2. The written or oral examination must address all areas required in the department-approved training program.

3. The written or oral examination must be developed from a pool of test questions, only a portion of which may be utilized in any one examination.

4. The competency evaluation program must include a demonstration of the randomly selected tasks the individual will be expected to perform as part of the individual’s function as a nurse aide.

5. The competency evaluation program must provide for a system that prevents disclosure of both pool questions and the individual competency evaluations.

6. The competency evaluation program must ensure that nurse aides employed by or having an offer of employment from a facility are not charged for any portion of the competency evaluation program.

33-07-06-04. Administration of competency evaluation.

1. The competency evaluation must be administered and evaluated by the department or a department-approved entity that is neither a skilled nursing facility or a nursing facility licensed by the department.
2. The entity that administers the competency evaluation must advise the nurse aide in advance that a record of the successful completion of the evaluation will be included on the department’s nurse aide registry.

3. The skills demonstration portion of the test must be administered in the facility or laboratory setting comparable to the setting in which the nurse aide will function.

4. The skills demonstration portion of the test must be administered and evaluated by a registered nurse with at least one year of experience in providing care for the elderly or chronically ill of any age.

5. The department may permit the written or oral examination to be proctored by facility personnel if the department determines that the procedure adopted assures the competency evaluation is:
   a. Secure from tampering.
   b. Standardized and scored by a testing, educational, or other organization approved by the department.
   c. Exempt from any scoring by facility personnel.

6. The department shall retract the right to proctor nurse aide competency evaluations from facilities in which the department finds any evidence of impropriety, including tampering by facility personnel.

33-07-06-05. Withdrawal and approval of training program status.

1. The department shall withdraw approval of a facility based program when a determination has been made that the facility has been found to be out of compliance with significant federal certification or state licensure requirements. The facility may apply for reinstatement after providing evidence of remaining in compliance with significant requirements for a period of twenty-four consecutive months.

2. The department shall withdraw approval of a nurse aide training and competency evaluation program if the entity providing the program refuses to permit unannounced visits by the department to ascertain compliance with program requirements.

3. Approval of a nurse aide training and competency evaluation program shall be granted by the department for a period not to exceed two years.

4. The department may approve only nurse aide training and competency evaluation programs meeting at least the following criteria:
   a. Consists of no less than seventy-five hours of training.
   b. Includes training in at least the following subject areas:
      (1) Infection control.
(2) Safety and emergency procedures.
(3) Promoting resident or patient independence.
(4) Respecting resident rights.
(5) Basic nursing skills.
(6) Personal care skills.
(7) Mental health and social service needs.
(8) Care of cognitively impaired residents or patients.
(9) Basic restorative services.
(10) Resident or patient rights.
(11) Communication and interpersonal skills.

33-07-06-06. Completion of the competency evaluation program.

1. To complete the competency evaluation successfully the individual shall, at a minimum, successfully demonstrate written or oral competence in the areas listed under subdivision b of subsection 4 of section 33-07-06-05 and successfully demonstrate competence in performing a random selection of personal care skills.

2. A record of successful completion of the competency evaluation for nurse aides seeking certification must be included in the nurse aide registry within thirty days of the date the individual was found to be competent.

3. If the individual fails to complete the evaluation satisfactorily, the competency evaluation program must advise the individual of the areas in which the individual was adequate, and that the individual has not more than three opportunities to take the examination.

4. If the individual seeking certification fails the examination on the third attempt, the individual must enroll in and complete a department approved training program prior to taking the competency evaluation again.

33-07-06-09. Registry renewal.

1. Registry status is limited to twenty-four months. Upon receipt of a completed renewal application, and verification of employment within the immediate past twenty-four months, the certified nurse aide will be issued a renewal certificate indicating current status.

2. An individual who has not performed at least eight hours of nursing or nursing-related services for pay within a continuous twenty-four month period, shall complete a
department-approved training and competency evaluation program or a department-approved competency evaluation to obtain current registry status.

OHIO

3701-17-07.1 Required training and competency evaluation for nurse aides working in long-term care facilities.

(A) For the purposes of this rule:

(1) "Licensed health professional" means all of the following:

(a) An occupational therapist or occupational therapy assistant licensed under Chapter 4755. of the Revised Code;

(b) A physical therapist or physical therapy assistant licensed under Chapter 4755. of the Revised Code;

(c) A physician as defined in section 4730.01 of the Revised Code;

(d) A physician's assistant for whom a physician holds a valid certificate of registration issued under section 4730.04 of the Revised Code;

(e) A registered nurse, including those authorized to practice in an advance practice role, or a licensed practical nurse licensed under Chapter 4723. of the Revised Code;

(f) A social worker or independent social worker licensed, or social work assistant certified under Chapter 4757. of the Revised Code;

(g) A speech pathologist or audiologist licensed under Chapter 4753. of the Revised Code;

(h) A dentist or a dental hygienist licensed under Chapter 4715. of the Revised Code;

(i) An optometrist licensed under Chapter 4725. of the Revised Code;

(j) A pharmacist licensed under Chapter 4729. of the Revised Code;

(k) A psychologist licensed under Chapter 4732. of the Revised Code;

(l) A chiropractor licensed under Chapter 4734. of the Revised Code;

(m) A nursing home administrator licensed or temporarily licensed under Chapter 4751. of the Revised Code;

(n) A dietitian licensed under Chapter 4759. of the Revised Code;

(o) A respiratory care professional licensed under Chapter 4761. of the Revised Code; and
(p) A massage therapist licensed under section 4731.17 of the Revised Code.

(2) "Long-term care facility" or "facility" means either of the following:

(a) A nursing home as defined in section 3721.01 of the Revised Code, other than a nursing home or part of a nursing home certified as an intermediate care facility for the mentally retarded under Title XIX of the Social Security Act, 49 Stat. 620 (1935), 42 U.S.C. 301, as amended; or

(b) A facility or part of a facility that is certified as a skilled nursing facility or a nursing facility under Title XVIII or XIX of the Social Security Act.

(3) "Nurse aide" means an individual who provides nursing and nursing-related services to residents in a long-term care facility, other than a licensed health professional practicing within the scope of his or her license or an individual who provides nursing or nursing-related services as a volunteer without monetary compensation.

(4) "Nursing and nursing-related services" when performed by a nurse aide in a long term care facility, means activities including attending to the personal care needs of residents, and providing personal care services and activities delegated by a nurse which may include implementation of portions of the nursing regimen, as defined in section 4723.01 of the Revised Code, for residents whose care does not require nursing assessment or the judgment of a nurse during the performance of the delegated activity. Nursing and nursing-related services does not include activities that are part of the nursing regimen which require the specialized knowledge, judgment, and skill of a registered nurse or the application of the basic knowledge and skill required of a licensed practical nurse licensed under Chapter 4723. of the Revised Code or any other activities that are required to be performed by a licensed nurse under Chapter 4723. of the Revised Code. Nursing and nursing-related services" does not include assisting residents with feeding when performed by a dining assistant pursuant to rule 3701-17-07.2 of the Administrative Code.

(5) To "use an individual as a nurse aide" means to engage the individual to perform nursing and nursing-related services in and on behalf of a long-term care facility.

(B) No long-term care facility shall use an individual as a nurse aide for more than four months unless the individual is competent to provide the services he or she is to provide; the facility has received from the nurse aide registry, established under section 3721.32 of the Revised Code, the information concerning the individual provided through the registry; and one of the following is the case:

(1) The individual was used by a facility as a nurse aide on a full-time, temporary, per diem, or other basis at any time during the period commencing July 1, 1989, and ending January 1, 1990, and successfully completed, not later than October 1, 1990, a competency evaluation program conducted by the director under division (C) of section 3721.31 of the Revised Code, and former rule 3701-18-07 of the Administrative Code, in effect prior to October 1, 1990;
(2) The individual either has successfully completed a training and competency evaluation program approved by the director under division (A) of section 3721.31 of the Revised Code and Chapter 3701-18 of the Administrative Code or has satisfied the requirements of paragraph (B)(2)(a) and (B)(2)(b) of this rule and, in either case, also has completed successfully the competency evaluation program conducted by the director under division (C) of section 3721.31 of the Revised Code and the applicable rules of Chapter 3701-18 of the Administrative Code. An individual shall be considered to have satisfied the requirement of having successfully completed a training and competency evaluation program approved by the director if the individual meets both of the following:

(a) The individual, as of July 1, 1989, completed at least sixty hours divided between skills training and classroom instruction in the topic areas described in divisions (B)(1) to (B)(8) of section 3721.30 of the Revised Code; and

(b) The individual received, as of that date, at least the difference between seventy-five hours and the number of hours actually spent in training and competency evaluation in supervised practical nurse aide training or regular in-service nurse aide education. For an individual to satisfy the requirements of this paragraph, the combination of skills training, classroom instruction, supervised practical nurse aide training and in-service nurse aide education shall have addressed the topic areas and subject matter components prescribed by former rule 3701-18-07 of the Administrative Code and its appendix in effect at the time of the determination.

(3) Prior to July 1, 1989, if the long-term care facility is certified as a skilled nursing facility or a nursing facility under Title XVIII or XIX of the Social Security Act, 49 Stat. 620 (1935), 42 U.S.C. 301, as amended, or prior to January 1, 1990, if the facility is not so certified, the individual completed a program that the director determines included a competency evaluation component no less stringent than the competency evaluation program conducted by the director under division (C) of section 3721.31 of the Revised Code and former rule 3701-18-07 of the Administrative Code in effect at the time of the determination and was otherwise comparable to the training and competency evaluation programs being approved by the director under division (A) of section 3721.31 of the Revised Code and Chapter 3701-18 of the Administrative Code;

(4) The individual is listed in a nurse aide registry maintained by another state and that state certifies that its program for training and evaluation of competency of nurse aides complies with Titles XVIII and XIX of the Social Security Act, 49 Stat. 620 (1935), 42 U.S.C. 301, as amended, and regulations adopted thereunder;

(5) Prior to July 1, 1989, the individual was found competent to serve as a nurse aide after the completion of a course of nurse aide training of at least one hundred hours’ duration. The determination of competency shall have been made by the director or by an instructor of the course of nurse aide training;

(6) The individual is enrolled in a prelicensure program of nursing education approved by the board of nursing or by an agency of another state that regulates nursing
education, has provided the long-term care facility with a certificate from the program indicating that the individual has successfully completed the courses that teach basic nursing skills including infection control, safety and emergency procedures and personal care, and has successfully completed the competency evaluation program conducted by the director under division (C) of section 3721.31 of the Revised Code and the applicable rules of Chapter 3701-18 of the Administrative Code; or

(7) The individual has the equivalent of twelve months or more of full-time employment in the preceding five years as a hospital aide or orderly and has successfully completed a competency evaluation program conducted by the director under division (C) of section 3721.31 of the Revised Code and the applicable rules of Chapter 3701-18 of the Administrative Code. Before allowing an individual to serve as a nurse aide for more than four months in accordance with this paragraph, a facility shall receive registry verification that the individual has met the competency requirements under this paragraph unless the individual can prove that he or she has recently met the requirements and has not yet been listed on the registry. In the event that an individual has not yet been listed on the registry, facilities shall follow up by contacting the nurse aide registry to ensure that such an individual actually becomes listed on the registry. Once the facility receives written registry verification, it shall maintain such verification on file.

(C) During the four month period provided for in paragraph (B) of this rule, during which a long-term care facility may, subject to paragraph (H) of this rule, use as a nurse aide an individual who does not have the qualifications specified in paragraphs (B)(1) to (B)(7) of this rule, a facility shall require the individual to participate in one of the following:

(1) If the individual has successfully completed a training and competency evaluation program approved by the director under division (A) of section 3721.31 of the Revised Code and Chapter 3701-18 of the Administrative Code, a competency evaluation program conducted by the director;

(2) If the individual is enrolled in a prelicensure program of nursing education described in paragraph (B)(6) of this rule, and has completed or is working toward completion of the courses described in that paragraph, or the individual has the experience described in paragraph (B)(7) of this rule, a competency evaluation program conducted by the director; or

(3) A training and competency evaluation program approved by the director under division (A) of section 3721.31 of the Revised Code and, in addition, the competency evaluation program conducted by the director under division (D) of section 3721.31 of the Revised Code and the applicable rules of Chapter 3701-18 of the Administrative Code.

(D) No long-term care facility shall continue for longer than four months to use as a nurse aide an individual who previously met the requirements of paragraph (B) of this rule but since most recently doing so has not performed nursing and nursing-related
services for monetary compensation for twenty-four consecutive months, unless the individual successfully completes additional training and competency evaluation by complying with paragraphs (D)(1) and (D)(2) of this rule:

(1) Doing one of the following:

(a) Successfully completing a training and competency evaluation program approved by the director under division (A) of section 3721.31 of the Revised Code and Chapter 3701-18 of the Administrative Code;

(b) Successfully completing a training and competency evaluation program described in paragraph (B)(4) of this rule; or

(c) Meeting the requirements specified in paragraph (B)(6) or (B)(7) of this rule; and

(2) In the case of an individual who is described in paragraph (D)(1)(a) or (D)(1)(c) of this rule, successfully completing the competency evaluation program conducted by the director under division (D) of section 3721.31 of the Revised Code and the applicable rules under Chapter 3701-18 of the Administrative Code.

(E) During the four-month period provided for in paragraph (D) of this rule during which a long-term care facility may, subject to paragraph (H) of this rule, use as a nurse aide an individual who does not have the qualifications specified in paragraphs (D)(1) and (D)(2) of this rule, a facility shall require the individual to participate in one of the following:

(1) If the individual has successfully completed a training and competency evaluation program approved by the director under division (A) of section 3721.31 of the Revised Code and Chapter 3701-18 of the Administrative Code, a competency evaluation program conducted by the director;

(2) If the individual is enrolled in a prelicensure program of nursing education described in paragraph (B)(6) of this rule and has completed or is working toward completion of the courses described in that paragraph or the individual has the experience described in paragraph (B)(7) of this rule, a competency evaluation program conducted by the director; or

(3) A training and competency evaluation program approved by the director under division (A) of section 3721.31 of the Revised Code and Chapter 3701-18 of the Administrative Code and, in addition, the competency evaluation program conducted by the director under division (C) of section 3721.31 of the Revised Code and the applicable rules of Chapter 3701-18 of the Administrative Code.

(F) For the purposes of paragraphs (C) and (E) of this rule, an individual shall be considered to be participating in a training and competency evaluation program or a competency evaluation program, as applicable, if, at minimum, the individual has a document signed by a representative of the program attesting that the individual is scheduled to attend the program.
(G) The four month periods provided for in paragraphs (B) and (D) of this rule include any time, on or after June 1, 1990, that an individual is used as a nurse aide on a full time, temporary, per diem or other basis by the facility or any other long-term care facility.

(H) A long-term care facility shall not permit an individual used by the facility as a nurse aide while participating in a training and competency evaluation program to provide nursing and nursing-related services unless both of the following are the case:

1. The individual has completed the number of hours of training that he or she must complete prior to providing services to residents as prescribed by paragraph (A)(4) of rule 3701-18-05 of the Administrative Code through the program in which the individual is enrolled; and

2. The individual is under the personal supervision of a registered or licensed practical nurse licensed under Chapter 4723. of the Revised Code. An individual used by a long-term care facility as a nurse aide while participating in a training and competency evaluation program shall wear a name pin at all times that clearly indicates that the individual is a trainee. As used in this paragraph, "personal supervision" means being present physically on the floor where the individual is providing services, being available at all times to respond to requests for assistance from the individual, and being within a distance which allows the nurse periodically to observe the individual providing services.

(I) No long-term care facility shall impose on a nurse aide any charge for participation in any competency evaluation program or training and competency evaluation program approved by the director under division (A) of section 3721.31 of the Revised Code and Chapter 3701-18 of the Administrative Code or conducted by the director under division (C) of section 3721.31 of the Revised Code and the applicable rules of Chapter 3701-18 of the Administrative Code, including any charge for textbooks, other required course materials or a competency evaluation.

(J) No long-term care facility shall require that an individual used by the facility as a nurse aide or seeking employment as a nurse aide pay or repay, either before or while the individual is employed by the facility or when the individual leaves the facility’s employ, any costs associated with the individual's participation in a competency evaluation program or training and competency evaluation program approved or conducted by the director.

(K) In addition to competency evaluation programs and training and competency evaluation programs required by this rule, each long-term care facility shall provide all of the following to each nurse aide it uses:

1. An orientation program that includes at least an explanation of the organizational structure of the facility, its policies and procedures, its philosophy of care, a description of its resident population, and an enumeration of its employee rules. The orientation program shall be of sufficient duration to cover the topics enumerated in this paragraph
adequately in light of the size and nature of the facility, its resident population, and the anticipated length of employment of the nurse aide. The orientation program for nurse aides permanently employed by the long-term care facility shall be at least three hundred and sixty minutes in length to occur during the first forty hours worked, with one hundred and eighty minutes occurring before the nurse aide has any resident contact;

(2) Regular performance review to assure that individuals working in the facility as nurse aides are competent to perform the nursing and nursing-related services they perform. Performance reviews shall be conducted at least ninety days after the nurse aide completes successfully the competency evaluation program conducted by the director under division (C) of section 3721.31 of the Revised Code and the applicable rules of Chapter 3701-18 of the Administrative Code or commences work in the facility and annually thereafter. The performance review shall consist, at minimum, of an evaluation of the nurse aide's working knowledge and clinical performance and shall be conducted by the aide's immediate supervisor or a nurse designated by the facility to conduct the performance evaluations. The facility shall maintain a written record of each performance review; and

(3) Regular in-service education, both in groups and, as necessary in specific situations, on a one-to-one basis, based on the outcome of performance reviews required by paragraph (K)(2)(a) of this rule. For the purposes of this provision, "specialty unit" means a discrete part of the nursing home that houses residents who have common specialized care needs, including, but not limited to, dementia care, hospice care, and mental health care units.

(a) Formal in-service education shall include an instructional presentation and may include skills demonstration with return demonstration and inservice training. In-service training may be provided on the unit as long as it is directed toward skills improvement, is provided by trained individuals and is documented.

(b) In-service education shall be sufficient to ensure the continuing competence of nurse aides and address areas of weakness as determined in nurse aides' performance reviews and shall address the special needs of residents as determined by the facility staff. It also shall include, but is not limited to, training for nurse aides providing nursing and nursing-related services to residents with cognitive impairment. The in-service education for nurse aides working in specialty units shall address the special needs of the residents in the unit.

(c) The facility shall assure that each nurse aide receives at least twelve hours of formal in-service education each year and that each nurse aide who works in a specialty unit receives sufficient additional hours of training each year to meet the special needs of the residents of that specialty unit. In-service education may be obtained through web-based training programs. For purposes of this paragraph, the year within which a nurse aide must receive continuing education is calculated based on the commencement of employment.
(d) The facility shall maintain a written record of each formal in-service session which shall include a description of the subject matter, the identity of the individual or individuals providing the in-service education, a list of the nurse aides and other individuals attending the session that is signed by each attendee and the duration of the session.

3701-17-07.3 Nurse aide registry.

(A) The director shall maintain a nurse aide registry listing all individuals who have met the competency requirements of division (A) of section 3721.32 of the Revised Code. The registry also shall include both of the following:

(1) The statement required by section 3721.23 of the Revised Code detailing findings by the director under that section regarding alleged abuse or neglect of a resident or misappropriation of resident property;

(2) Any statement provided by an individual under section 3721.23 of the Revised Code disputing the director's findings.

(B) The department may not continue to list an individual on the registry as eligible to work in a long-term care facility unless the department has received verification in accordance with paragraph (C) of this rule that the individual provided at least seven and one-half consecutive hours or eight hours in a forty-eight-hour period of nursing and nursing-related services for compensation during the twenty-four month period immediately following either the date that the individual was placed on the registry or the most recent date of verified work. As used in this rule, "nursing and nursing-related services" means:

(1) Attending to the personal care needs of individuals;

(2) Providing personal care services as defined at divisions (A)(5)(a)(i) to (A)(5)(a)(iii) of section 3721.01 of the Revised Code; and

(3) Performing activities delegated by a nurse which may include implementation of portions of the nursing regimen, as defined by section 4723.01 of the Revised Code, for individuals whose care does not require nursing assessment or the judgment of a nurse during the performance of the delegated activity, but does not include activities that are part of the nursing regimen which require the specialized knowledge, judgment, and skill of a registered nurse or the application of the basic knowledge and skill required of a licensed practical nurse licensed under Chapter 4723. of the Revised Code or any other activities that are required to be performed by a licensed nurse under Chapter 4723. of the Revised Code.

(C) If an individual desires to remain on the registry as eligible to work as a nurse aide but is not eligible because more than twenty-four consecutive months have passed since the last date of verified work, the individual must do one of the following:
(1) Submit documentation showing that he or she has provided at least seven and one-half consecutive hours or eight hours in a forty-eight-hour period of nursing and nursing-related services for compensation during that twenty-four month period; or

(2) Successfully complete additional training and competency evaluation by complying with paragraphs (D)(1) and (D)(2) of rule 3701-17-07.1 of the Administrative Code.

(D) The documentation required in paragraph (C)(1) of this rule shall include either of the following:

(1) In the case of a facility, agency, or any other health care provider that is authorized under applicable law to provide services that include implementation of portions of a nursing regimen, as defined by section 4723.01 of the Revised Code, a statement verifying the dates that the individual performed nursing and nursing-related services for compensation; or

(2) A statement by a physician or nurse verifying that he or she has personal knowledge that the individual provided nursing and nursing-related services to a patient under the physician’s or nurse’s care. The statement shall further verify:

(a) The name of the individual that provided nursing and nursing-related services for such patient;

(b) The nature of the nursing and nursing-related services and the date or dates the individual last provided seven and one-half consecutive hours or eight hours in a forty-eight-hour period of nursing and nursing related services;

(c) That the individual received compensation for the services specified in paragraph (D)(2)(b) of this rule. If the physician or nurse is unable to verify that the individual was compensated for those services, the individual must provide further proof that he or she received compensation for the specified services.

(E) No long-term care facility shall continue for longer than four months to use as a nurse aide an individual who previously met the requirements of paragraph (B) of rule 3701-17-07.1 of the Administrative Code but is not able to verify in accordance with this rule that he or she is currently eligible to work in a long term care facility, unless the individual successfully completes additional training and competency evaluation by complying with paragraphs (D)(1) and (D)(2) of rule 3701-17-07.1 of the Administrative Code.

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310:675-7-8.1. Administrative records

...(d) Administrative records of the facility shall include the following information:

...(15) A record of all nurse aide competency and certification records and contacts to Oklahoma and other state’s nurse aide registries.
310:675-13. Nursing service

...(g) Nurse aide

(1) No facility shall use, on a full-time basis, any person as a nurse aide for more than 120 days unless that person is enrolled in a training program.

(2) No facility shall use, on a temporary, per diem, or other basis, any person as a nurse aide unless the individual is listed on the Department's nurse aide registry.

(3) The facility shall contact the Department's nurse aide registry prior to employing a nurse aide to determine if the person is listed on the registry, and if there is any record of abuse, neglect, or misappropriation of resident property.

(h) Nursing students. Facilities participating in a state approved nursing education program may allow nursing students to administer medications to residents. The facility shall have a written agreement with the nursing education program. The agreement shall specify the scope of activities, education level, and required supervision. The facility shall maintain a current roster of nursing students in the program. Details about the program and its operation within the facility shall be included in the facility's policy and procedure manual.

(i) Inservice. The facility shall provide all direct care staff with two hours of inservice training specific to their job assignment per month. This training shall include, at least,

...(6) Each certified nurse aide shall be provided training in pain screening at the time of orientation

SUBCHAPTER 3 – NURSE AIDE TRAINING AND COMPETENCY EXAMINATION PROGRAM

310:677-3-1. Categories of training programs

The Department shall approve training and competency evaluation programs including, but not limited to, educational-based programs and employer-based programs.

310:677-3-2. Approved programs
(a) The Department shall approve a nurse aide training and/or competency examination program that meets the criteria for a State approved program.

(b) An entity seeking approval of a nurse aide training and/or competency examination program shall file the appropriate application form (ODH-743) and, for training programs other than long term care aide, a non-refundable application fee of one hundred dollars ($100.00). There is no application fee for long-term care aide training, or long-term care aide competency evaluation, programs.

(c) The Department’s approval of a program shall not be transferable or assignable.

310:677-3-3. Application

(a) An entity which desires to sponsor a nurse aide training and competency examination program shall file an application for approval on the forms prescribed by the Department.

(b) No nurse aide training and competency examination program shall be operated, and no trainee shall be solicited or enrolled, until the Department has approved the program.

(c) The application requires the following information:

1. Name and address for the entity sponsoring the program and for the contact person for the program;

2. The location of the administrative office of the program and the location where records are maintained;

3. A program plan that follows the curriculum established by the Department including, but not limited to:

   A. Program objectives;

   B. A breakdown of the curriculum into clock hours of classroom/lecture, laboratory and supervised clinical instruction;

4. A Skills Performance Checklist, documenting the date the nurse aide trainee successfully demonstrated all those basic nursing skills and personal care skills that are generally performed by nurse aides and the signature of the instructor that observed the successful demonstration of the skills. The skills must include the basic nursing skills and personal care skills listed in 42 Code of Federal Regulations (CFR) 483.152 (b)(2) and (3);

5. A Training Verification Form;

6. A description of the program's standards for classroom and skills training facilities including, but not limited to:

   A. Heat and cooling systems;

   B. Clean and safe conditions;
(C) Adequate space to accommodate all trainees;

(D) Adequate lighting;

(E) Proper equipment and furnishings;

(F) The specific location of the classroom and lab if known at the time of the application; and

(7) Position descriptions and education and experience requirements for training supervisors and instructors, and the program's procedure for ensuring that supervisors and instructors satisfy such descriptions and requirements.

(d) The entity shall file an application for each program with a non-refundable application fee.

(e) A training and competency examination program shall not be offered by or in a facility which, within the previous two years:

(1) has operated under a registered nurse staffing waiver under Section 1819(b)(4)(C)(ii)(II) or Section 1919(b)(4)(C)(ii) of the Social Security Act; or

(2) has been assessed a penalty that has been determined, after opportunity for hearing, to be due and payable in an amount of not less than $5,000;

(3) had a license revoked, a Medicare or Medicaid certification terminated, a denial of payment for new admissions imposed, a temporary manager appointed, or was closed or had residents transferred pursuant to an emergency action by the Department; or

(4) was found to have provided substandard quality of care. For the purpose of this Section, "substandard quality of care" means one or more deficiencies related to participation requirements under 42 CFR 483.13, Resident Behavior and Facility Practices, 42 CFR 483.15, Quality of Life, or 42 CFR 483.25, Quality of Care. The deficient practice must constitute immediate jeopardy which has caused or is likely to cause serious injury, harm, impairment, or death to an individual resident or a very limited number of residents receiving care in a facility; or deficient practice that results in actual harm to residents' physical, mental and psychosocial well-being and occurs as a pattern affecting more than a very limited number of residents or widespread affecting a large number or all of the facility's residents; or deficient practice that results in potential for more than minimal physical, mental and/or psychosocial harm to residents' that is widespread and affects the entire facility population.

(f) The Department may waive for a period not to exceed two years the imposition of (e) of this Section and allow the offering of a training and competency evaluation program in, but not by, a facility upon the written request of the facility if:

(1) The Department determines that no other such program is offered within a round-trip travel time of one hour from the facility;
(2) The facility has no deficiencies that constitute substandard quality of care at the time of
the request and has no deterioration in care that results in substandard quality of care
during the waiver period; and

(3) The Department provides notice of such determination and assurances to the Oklahoma
Long Term Care Ombudsman.

(g) The Department may waive for a period not to exceed two years the imposition of (e)(2)
and (e)(3) of this Section and allow the offering of a training and competency evaluation
program in, but not by, a facility upon the written request of the facility if the penalty or
remedy was not related to the quality of care provided to residents.

310:677-3-4. Program requirements

(a) Before the Department approves a nurse aide training and competency examination
program or a competency examination program, the Department shall determine whether
the nurse aide training and competency examination program or the competency
examination program meets the minimum requirements.

(b) The Department shall not approve, or shall withdraw approval, of an employer based
program when the employer has been assessed the following penalties or actions by the
Department:

(1) License suspended or revoked or had a conditional license issued.

(2) An administrative money penalty of five thousand dollars ($5,000) or more for
deficiencies cited under state licensure.

(3) Closed or had its residents or clients transferred pursuant to the Department’s action.

(4) Enforcement actions based on the Department’s authority under Medicare and Medicaid
certification programs, except for facilities certified as Intermediate Care Facilities for the
Mentally Retarded.

(5) For Intermediate Care Facilities for the Mentally Retarded, repeated enforcement
actions based on the Department’s authority.

(c) The Department may withdraw approval of a nurse aide training and competency
examination program sponsored by an entity when the following occurs:

(1) The entity has been determined by the Department to have a competency examination
failure rate greater than fifty (50) per cent during a calendar year.

(2) The entity no longer meets, at a minimum, the following requirements to be a certified
program:

(A) The training program falls below the required clock hours of training;

(B) The curriculum does not include at least the subjects specified under 310:677-9-4 Home
Health Aides, 310:677-11-4 Long Term Care Aides, 310:677-13-4 Certified Medication
Aides, 310:677-15-3 Developmentally Disabled Direct Care Aides, 310:677-17-3 Residential Care Aides, and or 310:677-19-3 Adult Day Care Aides;

(C) A minimum of 16 hours of specified training for Long Term Care Aides is not provided prior to direct contact with residents;

(D) At least sixteen (16) hours of supervised practical training under the direct supervision of a registered nurse or a licensed practical nurse. The sixteen (16) hours does not include the administration of the skills examination.

(3) The entity uses an uncertified individual as a nurse aide for longer than four months. To use an uncertified individual as a nurse aide for four months or less, an entity must have a temporary emergency waiver approved pursuant to 63 O.S. Section 1-1950.3.

(4) The onsite review determines the training program is out of compliance with the requirements of 63 O.S. Section 1-1950.1, 1-1950.3 or 1-1951, or OAC 310:677.

(d) The Department shall withdraw approval of a nurse aide training and competency evaluation program if:

(1) The entity refuses to permit the Department to make unannounced visits; or

(2) The entity falsifies records of competency or training.

(e) Withdrawal of approval shall be for a period of two (2) years or until the Department is assured through review that the entity complies with the requirements.

(f) If the Department withdraws approval of a nurse aide training and competency examination program, the Department shall:

(1) Notify the entity in writing, indicating the reason for withdrawal of approval.

(2) Allow the trainees who have started a training and competency examination program to complete the program or allow the trainees who have started the program to transfer to another approved program.

(g) A program entity may request reconsideration of the Department’s decision in accordance to Chapter 2 of this Title and appealed according to the Administrative Procedures Act.

(h) The entity shall notify the trainee in writing, that successful completion of the nurse aide training and competency examination program shall result in the individual being listed in the Department’s nurse aide registry and shall retain a copy of such notice, signed by the trainee, in the trainee’s file.

(i) A trainee shall not perform any services for which the trainee has not been trained and found proficient by an instructor.

310:677-3-5. Training program review and approval
(a) Within 30 days after receipt of an application for a program that is not currently approved, the Department shall determine if the application is complete and consistent. If the application is incomplete or inconsistent, the Department shall advise the applicant in writing and offer an opportunity to submit additional information. Within 30 days after completeness, the Department shall approve or disapprove the application. If the action is to disapprove, the Department shall advise the applicant in writing of the specific reasons for the disapproval, and shall offer the applicant an opportunity to demonstrate compliance.

(b) Each program is subject to site visits by the Department. Approved programs shall be evaluated by the Department every two years.

(c) An approved program shall notify the Department in writing before making substantive changes to the program. Substantive changes shall include but not be limited to:

(1) A change in location of the administrative offices of the training program;

(2) A change in the requirements or procedures for selection of instructors;

(3) A change in the curriculum;

(4) A different legal entity sponsoring the program; or

(5) A change in location of the class, clinical training site, or laboratory.

310:677-3-6. Closing an approved nurse aide training and competency examination program

(a) When an entity decides to close a nurse aide training and competency examination program, it shall:

(1) Notify the Department at least sixty (60) days in advance, in writing, stating the reason, plan, and date of intended closing.

(2) Continue the program until the classes for currently enrolled trainees are completed.

(b) The entity shall notify the Department of its plan to safeguard the program records.

310:677-3-7. Criminal arrest checks

(a) An employer based program shall complete the State required criminal arrest check. The record of the finding shall be maintained by the employer. *These records shall be destroyed after one (1) year from the end of employment of the person to whom such records relate.* [63:1-1950.3(H)]
(b) A non-employer based program shall notify trainees that if a criminal arrest check reveals a cause which bars employment in a health care entity, then the trainee shall be withdrawn from the training program.

(c) If a non-employer based training program does not require an OSBI criminal arrest check as part of the admission requirements to the training program, the training program shall provide the trainee with written notification of 63:1-1950.1 as part of the training program application.

310:677-3-8. Records and examination

(a) A program shall use a performance record/Skills Performance Checklist which shall include:

(1) A record of when the trainee performs the duties and skills and the determination of satisfactory or unsatisfactory performance.

(2) The name of the instructor supervising the performance.

(b) Upon request from the nurse aide trainee, the training program shall provide the trainee with a copy of the Training Verification Form upon completion of training.

(c) Upon request from the nurse aide trainee, the training program shall provide the trainee a copy of the completed classroom/lecture training and the training performance record/Skills Performance Checklist with the skills that have been demonstrated if the trainee has to withdraw from the training program prior to completion of the training program.

(d) The program shall retain the following records for each trainee for at least three (3) years:

(1) The Trainee's Application for the training program.

(2) Performance records, the Skills Performance Checklist and Training Verification Form.

(3) Nurse aide competency and examination results.

(e) The training program shall provide copies to the nurse aide registry of any individual nurse aide training records that may be requested by the Department.

310:677-3-9. Requirements for administration of the competency examination

(a) The competency examination shall be administered and evaluated only by a Department approved entity which shall be periodically monitored by the Department.
(b) Each approved examination entity must provide the Department with the following:

(1) Written job analysis studies to determine the pool of test questions.

(2) Test question validation studies.

(3) Capabilities of providing competency results in the proper format for compatibility with the Department's nurse aide registry within thirty (30) days of scoring.

(4) Assurances that the written and skills testing process are not compromised.

(c) Each approved examination entity shall provide the examinee with the following:

(1) The notice showing pass/fail results.

(2) The notice shall specify the areas of failure to the nurse aide.

(d) The Department shall withdraw approval of a testing entity when it allows one or more of the following:

(1) Disclosure of the competency examination.

(2) Allowing another entity not approved by the Department to score the competency examination.

(3) Tampering with the competency examination.

(4) The competency examination was administered by a non-qualified individual.

(e) If the competency examination is proctored by facility personnel:

(1) The test results must be transmitted to the scoring entity immediately after completion of the written or oral and skills examination.

(2) A record of successful completion of the competency examination must be included in the nurse aide registry within 30 days of the date the individual is found to be competent. Competency is determined by a passing score on the written or oral examination and skills examination.

(3) If the competency evaluation is to be proctored by facility personnel and the entity chooses to delay the administration of the written or oral examination and/or skills examination after completion of the training which will delay certification, this information shall be provided in writing in the training program application and signed by the trainee.

(f) The trainee may sit for the written or oral examination and skills examination at a different location than where training was completed if the testing entity is provided with a Training Verification Form.

310:677-3-10. Content of the competency examination
(a) The competency examination shall include a written or oral portion, in English, which shall:

(1) Allow a nurse aide to choose between a written and an oral examination.

(2) Address each requirement specified in the minimum curriculum prescribed by the Department.

(3) Be developed from a pool of test questions, only a portion of which is used in any one (1) examination.

(4) Use a system that prevents disclosure of both the pool of test questions and the individual competency examination results.

(5) If oral, the examination portion shall be read from a prepared text in a neutral manner.

(b) The skills examination portion of the competency examination shall:

(1) Consist of randomly selected items drawn from a pool of tasks generally performed by nurse aides except as provided in section 9-5 (b).

(2) Be performed in an entity in which the individual will function as a nurse aide or a similar laboratory setting.

(3) Be administered and evaluated by a qualified clinical skills observer.

(c) The Department shall permit the skills examination to be proctored by qualified entity personnel if the Department finds that the procedure adopted by the testing entity ensures that the competency examination:

(1) Is secure from tampering.

(2) Is standardized and scored by a testing, educational, or other organization approved by the Department.

(3) Is transmitted to the scoring entity immediately after completion of the skills examination. A record of successful completion of the skills examination must be included in the Nurse Aide Registry within 30 days of the date the individual is found to be competent or has passed the skills examination.

(d) The Department shall revoke the approval of any entity to proctor the nurse aide competency examination if the Department finds evidence of impropriety, including evidence of tampering by facility staff.

310:677-3-11. Successful completion of the competency examination

(a) An individual shall pass both the written or oral examination and the skills examination to complete the competency examination successfully.
(b) An individual shall score at least seventy (70) percent on the written or oral examination.

(c) An individual shall demonstrate at least eighty (80) percent accuracy for the skills examination.

(d) The Department shall include in the nurse aide registry a record of successful completion of the competency examination within thirty (30) days of the date the individual is found to be competent.

### 310:677-3-12. Failure to complete the competency examination

If an individual does not complete the competency examination successfully, the individual shall be notified by the testing entity of, at least, the following:

1. The areas which the individual did not pass.
2. That the individual may retake the examination a total of three times without further training.

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**SUBCHAPTER 11. LONG TERM CARE AIDES**

### 310:677-11-1. General requirements

(a) The facility shall:

1. Complete a performance review of every nurse aide at least once every twelve (12) months and provide two (2) hours of inservice training specific to their job assignment each month.

2. Have in-service education generally supervised by a registered nurse who has at least two (2) years nursing experience with at least one (1) year of which shall be in the provision of long term care services.

3. Ensure that each nurse aide certification is current and not expired.

(b) An individual may apply for listing in the nurse aide registry by reciprocity from another State and the Department may approve such application if the individual is listed in another State registry as a certified long term care aide and does not have a notation of abuse, neglect, mistreatment, or misappropriation of property.

(c) The training program shall inform the trainee that a long term care aide shall complete a new nurse aide training and competency examination program or competency examination if, upon applying for renewal of certification, the nurse aide has not provided at least eight (8) hours of nursing or health related services for compensation during the previous twenty-four (24) months.
The training program shall inform a trainee that the trainee shall not perform any resident services until the trainee has completed the required sixteen (16) hours of training identified in 310:677-11-4 and the aide shall not perform services for which they have not trained and been found proficient by the instructor.

310:677-11-2. Deemed to meet state certification requirements

(a) The Department shall deem a certified long term care aide to meet the nurse aide certification requirements for the following employers after successful completion of at least sixteen (16) hours of orientation specific to the employer’s population. Documentation of the sixteen (16) hours shall be submitted to the Department and the certified nurse aides name will be entered in the registry as being certified in that category. This requirement shall apply to the following employers:

(1) Residential care.

(2) Adult day care.

(3) Specialized facility.

(b) A home care aide may be employed by a long term care facility following at least sixteen (16) hours of training in the following areas:

(1) Resident rights.

(2) Caring for the resident when death is imminent.

(3) Care of the cognitively impaired resident.

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

(5) The minimum data set, care plans and the interdisciplinary team.

(c) Documentation of the sixteen (16) hours of training shall indicate time spent in each area, be signed by the nurse aide and the instructor and be kept in the nurse aide’s personnel file. Documentation shall also be submitted to the Department to place the certified home care aide on the registry as a certified long term care aide.

310:677-11-3. Instructor qualifications

(a) The training of long term care aides shall be done by, or under the general supervision of, a registered nurse who has:

(1) At least two (2) years of nursing experience with at least one (1) year in long term care facility services.
(2) Completed a course in teaching adults or experience in teaching adults or supervising nurse aides.

(b) The nurse aide training and competency examination may be supervised by the registered nurse who serves as the director of nursing, provided that the director of nursing shall not perform the actual training.

(c) There must be one (1) Registered Nurse who meets the qualifications for each long term care training program, whether in the role of RN Supervisor or RN instructor.

(d) A licensed practical nurse may act as an instructor in an approved nurse aide training and competency examination program when a registered nurse maintains responsibility for the program and is available to provide instruction in areas in which a licensed practical nurse may lack technical expertise.

(e) Other personnel from the health professions may supplement the instructor. These persons shall be licensed by the State, if applicable, and shall have at least one (1) year experience in the practice of the profession.

310:677-11-4. Curriculum

(a) The training program for long term care aides shall include:

1. At least, seventy-five (75) hours of training or the equivalent.

2. At least sixteen (16) hours of training in the following areas prior to any direct contact with a resident that is documented and signed by the nurse aide trainee:
   (A) Communication and interpersonal skills.
   (B) Infection control.
   (C) Safety and emergency procedures, including the Heimlich maneuver.
   (D) Promoting a resident’s independence.
   (E) Respecting a resident’s rights.

3. At least sixteen (16) hours of supervised practical training that is documented and signed by the nurse aide trainee.

(b) The long term care aide training program shall include the subjects specified in paragraphs (b)(2) through (7) of 42 CFR 483.152(b).

(c) Pursuant to 63 O.S. 1-1951(A)(3), the long term care aide training program shall include a minimum of ten (10) hours of training in the care of Alzheimer’s patients.

310:677-11-5. Competency and skills examination
(a) The competency examination must comply with 42 CFR 483.154. and is addressed under 310:677-3-9 and 310:677-3-10.

(b) The skills examination shall:

(1) Consist of a demonstration of randomly selected items drawn from a pool of tasks generally performed by long term care aides. This pool shall include all of the personal care skills.

(2) Be performed in a facility or laboratory setting comparable to the setting in which the individual shall function as a long term care aide.

(3) Be administered and evaluated by a registered nurse with at least one (1) year experience in providing care for the elderly or the chronically ill of any age and a qualified clinical skills observer.

OREGON

Downloaded January 2011

411-070-0470 Nursing Assistant Training and Competency Evaluation Programs Cost Reports

(1) COST REPORT REQUIRED. Medicaid certified nursing facilities must file a Nursing Assistant Training and Competency Evaluation Program (NATCEP) cost report (Form SDS 451) quarterly with SPD’s Financial Audit Unit that meets the following standards:

(a) A NATCEP cost report is due and must be postmarked by the last day of the calendar quarter subsequent to the quarter that it covers (or postmarked the first business day after the quarter if the last day of the quarter is a Sunday or holiday). The cost report must identify all costs incurred and related revenues (not including NATCEP payments from SPD) received during the reporting period. If a facility fails to file a report postmarked as described, NATCEP reimbursement must be reduced by 3 percent for each business day the report is past due until received.

(b) A cost report must:

(A) Be submitted on a form provided by SPD.

(B) Include actual costs incurred and paid by the facility. SPD may not reimburse a facility prospectively.

(C) Include all revenue (not including NATCEP payments from SPD) received by the facility for conducting nurse aide training. All revenue must be used to offset the costs incurred and paid in the period.

(D) Include appropriate documentation to support each specific area identified for payment by the state. For example, invoices for equipment purchases or to reimburse contract trainers, time sheets for qualified facility training staff, evidence an aide paid for NATCEP...
and was reimbursed by the facility as specified in section (2) of this rule. Failure to provide required documentation shall result in the form being rejected and returned to the facility.

(E) Include all appropriate NATCEP costs and revenues only. NATCEP costs, including costs disallowed, must not be reimbursed as part of the facility's bundled rate. However, NATCEP costs, revenues, and reimbursement must be included on the facility's annual NFFS.

(F) Include only true and accurate information. If a facility knowingly or with reason to know files a report containing false information, such action must constitute cause for termination of the facility's provider agreement with SPD. Providers filing false reports may be referred for prosecution under applicable statutes.

(2) CHARGING OF FEES PROHIBITED. The nursing facility must not charge a trainee any fee for participation in NATCEP or for any textbooks or other materials required for NATCEP if the trainee is employed by or has an offer of employment from a nursing facility on the date on which the NATCEP begins.

(3) FEES PAID BY EMPLOYER.

(a) All charges and materials required for NATCEP and fees for nursing assistant certification must be paid by the nursing facility if it offered employment at the facility on the date training began.

(b) If a nursing assistant who is not employed by a Medicaid certified facility and does not have an offer of employment by a Medicaid nursing facility on the date on which the NATCEP began becomes employed by, or receives an offer for employment from, a nursing facility within twelve months after completing a NATCEP, the employing facility must reimburse the nursing assistant on a monthly basis for any NATCEP fees paid (including any fees for textbooks or other required course materials) by the nursing assistant. Evidence the nursing assistant paid for training must include the graduation certificate from the school and receipt of payment.

(c) Such reimbursement must be calculated on a pro rata basis. The reimbursement must be determined by dividing the cost paid by the nursing assistant by 12 and multiplying by the number of months during this 12-month period in which the aide worked for the facility. The facility must claim the appropriate pro rata amount on each report it submits not to exceed the lesser of 12 months or the total number of months the nursing assistant was employed at that facility. The facility must submit evidence provided by the nursing assistant of the training costs incurred at an approved training facility.

(4) REIMBURSEMENT BY SPD. SPD shall reimburse the facility for the Medicaid portion of the costs described in this section unless limited by the application of section (5). This portion is calculated by multiplying the eligible costs paid by the facility by the percentage of resident days that are attributable to Medicaid residents during the reporting period. SPD’s payment to the facility for the NATCEP cost is in addition to payments based upon the facility’s bundled rate.

(a) Employee Compensation. Reimbursement for trainer hours must not exceed 1 1/3 times the number of hours required for certification. A facility may claim reimbursement for the portion of an employee’s compensation attributable to nurse aide training if:
(A) The employee meets the qualifications of 42 CFR 483.152 and OAR chapter 851, division 061;

(B) The employee directly conducts training or testing in a certified program;

(C) The employee's compensation, including benefits, is commensurate with other RN compensation paid by the facility;

(D) The employee's total compensated hours do not exceed 40 in any week during which NATCEP reimbursement is claimed;

(E) No portion of the claimed reimbursement is for providing direct care services while assisting in the training of nurse aides if providing direct care services is within the normal duties of the employee; and

(F) The facility provides SPD with satisfactory documentation to support the methodology for allocating costs between facility operation and NATCEP.

(b) Training Space and Utilities. Costs associated with space and utilities are eligible only if the space and utilities are devoted 100 percent to the NATCEP. The facility must provide documentation satisfactory to SPD to support the need for, and use of, the space and utilities.

(c) Textbooks and Course Materials. A portion of the cost of textbooks and materials is eligible if textbooks and materials are used primarily for NATCEP. The portion reimbursable is equal to the percentage of use attributable to NATCEP. "Primarily" means more than 50 percent. The facility must provide satisfactory documentation supporting the NATCEP need for and percentage of use of textbooks and materials.

(d) Equipment. A portion of the cost of equipment is eligible if used primarily for NATCEP. However, equipment purchased for $500 or more per item must be prior approved by SPD to qualify for reimbursement. The portion reimbursable is equal to the percentage of use attributable to NATCEP. "Primarily" means more than 50 percent. The facility must provide satisfactory documentation supporting the NATCEP need for and percentage of use of the equipment. Disposition of equipment and software purchased in whole or in part under the Title XIX Medicaid Program must meet the requirements of the facility's provider agreement.

(e) Certification Fees. Nursing assistant certification and recertification fees paid to the Oregon State Board of Nursing for facility employees are eligible.

(f) Reimbursement for CNAs. Reimbursement provided to nursing assistants pursuant to section (3) of this rule is eligible. The training must have occurred at an approved training center, including nursing facilities in Oregon or other states.

(g) Contract Trainers. Payment for nurse aide certification classes provided under contract by persons who meet the qualifications of 42 CFR 483.152 is eligible for reimbursement. For this purpose, either the facility or the contractor must be certified for NATCEP.
(h) Ineligible Costs -- Trainee Wages. Wages paid to nursing assistants in training are not eligible for NATCEP reimbursement, but may be claimed as part of the daily reimbursement costs.

(i) Reimbursement for Combined Classes. If two or more Medicaid certified facilities cooperate to conduct nurse aide training, SPD shall not reimburse any participating facility for the combined training class until all participating facilities have filed a cost report. For a combined class, SPD shall apportion reimbursement to participating facilities pro rata based on the number of students enrolled at the completion of the first 30 hours of classroom training or in any other equitable manner agreed to by the participating facilities. However, when cooperating facilities file separate NATCEP cost reports, nothing in this section authorizes SPD to deny or limit reimbursement to a facility based on a failure to file or a delay in filing by a cooperating facility.

(5) Notwithstanding section (4) of this rule, SPD shall calculate the 80th percentile of the Medicaid portion of reported NATCEP costs per trainee completing the training. If a facility's Medicaid portion exceeds the 80th percentile of costs, SPD shall evaluate the facility's NATCEP costs to determine whether its costs are necessary due to compelling circumstances including but not limited to:

(a) Rural or isolated location of the training facility;

(b) Critical individual care need;

(c) Shortage of nursing assistants available in the local labor market; or

(d) Absence or inadequacy of other training facilities or alternative training programs, e.g., community college certification programs.

(6) If, under the analysis in section (5) of this rule, SPD finds that a facility's NATCEP costs are justified, SPD shall reimburse the reported costs pursuant to section (4) of this rule. However, if, under the analysis in section (5) of this rule, SPD finds that a facility's NATCEP costs are not justified, SPD shall reimburse the reported costs pursuant to section (4) of this rule but limited by the cost plateau.

(7) RECORDKEEPING, AUDIT, AND APPEAL.

(a) The facility must maintain supportive documentation for a period of not less than three years following the date of submission of the NATCEP cost report. This documentation must include records in sufficient detail to substantiate the data reported. If there are unresolved audit questions at the end of the three-year period, the records must be maintained until the questions are resolved. The records must be maintained in a condition that can be audited.

(b) SPD shall analyze by desk review each timely filed and properly completed NATCEP cost report. All cost reports are also subject to field audit at the discretion of SPD. The facility shall be notified in writing of the amount to be reimbursed and of any adjustments to the cost statement. Settlement of any amounts due to SPD must be made within 30 days of the date of notification to the facility.
(c) A facility is entitled to an informal conference and contested case hearing pursuant to ORS 183.413 through 183.470, as described in OAR 411-070-0435, to protest the reimbursement amount or the adjustment. If no request for an informal conference or contested case hearing is made within 30 days, the decision becomes final.

NURSES; NURSING HOME ADMINISTRATORS OCCUPATIONS AND PROFESSIONS

678.440 Nursing assistants; training; effect of employing untrained assistant; civil penalties.

(1) It is the intent of the Legislative Assembly to require that nursing assistants be adequately trained.

(2) The Oregon State Board of Nursing shall prepare curricula and standards for training programs for nursing assistants. Such curricula and standards shall provide for additional training for nursing assistants to administer noninjectable medications.

(3) The Department of Human Services may impose civil penalties or revoke the license of any long term care facility that employs any untrained nursing assistant for a period of more than eight weeks without providing for the training prescribed by the board. Any license which is revoked shall be revoked as provided in ORS 441.030.

(4) The Oregon Health Authority may impose civil penalties or revoke the license of any health care facility that employs any untrained nursing assistant for a period of more than eight weeks without providing for the training prescribed by the board. Any license which is revoked shall be revoked as provided in ORS 441.030.

(5) As used in this section, “nursing assistant” means a person who assists licensed nursing personnel in the provision of nursing care.

678.442 Certification of nursing assistants; rules.

(1) The Oregon State Board of Nursing shall establish standards for certifying and shall certify as a nursing assistant any person who applies therefor, shows completion of an approved training program for nursing assistants and passes a board approved examination.

(2) In the manner prescribed in ORS chapter 183, the board may revoke or suspend a certificate issued under this section or may reprimand a nursing assistant for the following reasons:

(a) Conviction of the certificate holder of a crime where such crime bears demonstrable relationship to the duties of a nursing assistant. A copy of the record of such conviction, certified to by the clerk of the court entering the conviction, shall be conclusive evidence of the conviction.
(b) Any willful fraud or misrepresentation in applying for or procuring a certificate or renewal thereof.

(c) Impairment as defined in ORS 676.303.

(d) Violation of any provisions of ORS 678.010 to 678.445 or rules adopted thereunder.

(e) Physical condition that makes the certificate holder unable to perform safely the duties of a nursing assistant.

(f) Conduct unbecoming a nursing assistant in the performance of duties.

(3) The board shall establish by rule a procedure for the biennial renewal of nursing assistant certificates. The certificate renewal procedure shall be substantially like the procedure established for the licensing of nurses under ORS 678.101.

678.444 Standards for training programs for nursing assistants.

The Oregon State Board of Nursing shall establish standards for training programs for nursing assistants. Upon application therefor, the board shall review and approve programs that meet board standards. The board by means of a contested case proceeding under ORS chapter 183 may revoke approval of any training program that ceases to meet board standards.

678.445 Authority of nursing assistants to administer noninjectable medication; authority of nurse to report questions about continuation of medication.

(1) It is the intent of the Legislative Assembly that the Oregon State Board of Nursing not adopt any standard the practical effect of which is to prohibit a nursing assistant in a long term care facility from administering noninjectable medication except under direct supervision of a registered nurse.

(2) Where a nurse employed by the long term care facility questions the efficacy, need or safety of continuation of medications being dispensed by that nurse or by another employee of the facility to a patient therein, the nurse shall report that question to the physician or a nurse practitioner, if authorized to do so, ordering or authorizing the medication and shall seek further instructions concerning the continuation of the medication.

PENNSYLVANIA

Downloaded January 2011
Pennsylvania regulations do not include specific content for nurse aide training and competency.

RHODE ISLAND
Rhode Island regulations do not include specific content for nurse aide training and competency.

**SOUTH CAROLINA**

604. Direct Care Staff

...C. Within eighteen (18) months of the effective date of this regulation, persons working in the facility as nurse aides shall be certified in South Carolina. As an exception, facility nonlicensed/noncertified staff who are enrolled in a nurse aide training and competency evaluation program approved by the S.C. Department of Health and Human Services and who have been working in the facility four (4) months or less are exempt from Section 604.C. Licensed nurses or applicants for such licensure who have been granted a permit to practice nursing in accordance with rules adopted by the South Carolina Board of Nursing are exempt from Section 604.C.

**SOUTH DAKOTA**

44:04:18:02. Employment of qualified nurse aides required.

Nurse aides employed by a nursing facility must meet the following minimum qualifications of training, competency evaluation, registry status, and performance:

1. Successful completion of a training program and a competency evaluation program approved by the department pursuant to §§ 44:04:18:07 and 44:04:18:17;

2. Verification from the department of current registry status or eligibility for inclusion on the registry;

3. Acceptable employment performance as a nurse aide as documented by the aide's supervisor; and

4. Annual attendance at a minimum of 12 hours of in-service education related to results of performance review and of special resident needs.

44:04:18:03. Exception for employment of unqualified nurse aides.

A nursing facility may employ for a maximum of four months an individual to provide nurse aide duties who has not met the qualifications of § 44:04:18:02 if the individual is enrolled
in a training and competency evaluation program approved by the department pursuant to §§ 44:04:18:07 and 44:04:18:17 or if the individual can prove that approved training and competency evaluation has been completed and the individual has not yet been included on the registry. The nursing facility must ensure that such an individual actually obtains registry status within the four-month period.

44:04:18:04. Multistate registry verification required.

A nursing facility must seek information from every state registry that the facility has reason to believe has information on the individual before allowing the individual to work as a nurse aide.

44:04:18:05. Nursing facility required to maintain records.

A nursing facility must maintain employment records that verify the qualifications of the nurse aides as outlined in § 44:04:18:02.

44:04:18:06. Nursing facility required to pay costs of training and competency evaluation.

A nursing facility must pay all costs of nurse aide training and competency evaluation or reimburse the nurse aide for the cost incurred in completing the program if the facility employs the aide within twelve months following completion of the training program. Reimbursement may be made during the first twelve months of employment by installments.

44:04:18:07. Approval and reapproval of nurse aide training programs.

The department must approve nurse aide training programs. To obtain approval, the entity providing the nurse aide training program must submit to the department an application on a form provided by the department that contains information demonstrating compliance with requirements specified in this chapter. The department shall respond within 90 days after receipt of the application. The department may grant approval for a maximum of two years. At the end of the approval period, the entity must apply for reapproval. As part of the reapproval process, the department shall conduct an unannounced on-site visit to determine compliance with the requirements.

44:04:18:08. Notice of change in approved training program.

The entity offering an approved nurse aide training program must submit to the department, within 30 days after the change, any substantive changes made to the program
during the two-year approval period. The department shall notify the entity of its approval within 90 days after receipt of the information.

44:04:18:09. Denial or withdrawal of approval of training program.

The department may deny or withdraw approval of a nurse aide training program if one of the following conditions applies to the nursing facility within the 24 months preceding the current survey:

(1) The facility has been found to be out of compliance with the provision of care requirements in chapter 44:04:04 or the nursing service requirements in chapter 44:04:06;
(2) The facility has been issued a probationary license;
(3) The facility refuses to permit an unannounced visit by the department;
(4) The facility fails to maintain a 75 percent pass rate on the competency evaluation for the two-year approval period;
(5) There is evidence that the facility has charged the nurse aide a fee for a portion of the training or competency evaluation. The department shall notify the entity in writing of the reason for withdrawal or denial of approval. Nurse aides currently enrolled in a program whose approval is withdrawn may complete the program with that entity.


The program coordinator of a nurse aide training program must be a registered nurse. The program coordinator is responsible for the general supervision of the program. General supervision means providing guidance for the program and maintaining ultimate responsibility for the course. The program coordinator must have a minimum of two years of nursing experience, at least one year of which is in the provision of long-term care services. The director of nursing of a facility may serve simultaneously as the program coordinator but may not perform training while serving as the director of nursing.

44:04:18:11. Qualifications of primary instructor.

The primary instructor of a nurse aide training program must be a licensed nurse. The primary instructor is the actual teacher of course material. The primary instructor must have a minimum of two years of nursing experience, at least one year of which is in the provision of long-term care services. The primary instructor must have completed a course of instruction in teaching adults or must have experience in teaching adults within the past five years.

Supplemental personnel may assist with the instruction of nurse aides. One year of experience in the individual's respective field of practice is required.

Students in a nurse aide training program may not perform any services unless they have been trained and found to be proficient by the instructor. Students in a training program may perform services only under the supervision of a licensed nurse.


Classrooms, conference rooms, laboratories, and equipment must be available in the number and size to accommodate the number of nurse aides enrolled in the training program. Programs must provide temperature control, lighting, and clean, safe conditions for instruction.


The curriculum of the nurse aide training program must address the medical, psychosocial, physical, and environmental needs of the patients or residents served by the nursing facility. Each unit of instruction must include behaviorally stated objectives with measurable performance criteria. The nurse aide training program must consist of at least 75 hours of classroom and clinical instruction, including the following:

(1) Sixteen hours of training in the following areas before the nurse aide has any direct contact with a patient or resident:

(a) Communication and interpersonal skills;

(b) Infection control;

(c) Safety/emergency procedures, including the Heimlich maneuver;

(d) Promoting patients' and residents' independence; and

(e) Respecting patients' and residents' rights;

(2) Sixteen hours of supervised practical training, with enough instructors to ensure that nursing care is provided with effective assistance and supervision. The ratio may not be less than one instructor for each eight students in the clinical setting;

(3) Instruction in each of the following content areas:

(a) Basic nursing skills:

(i) Taking and recording vital signs;

(ii) Measuring and recording height and weight;

(iii) Caring for the patients' or residents' environment;
(iv) Recognizing abnormal changes in body functioning and the importance of reporting such changes to a supervisor; and

(v) Caring for patients or residents when death is imminent;

(b) Personal care skills, including the following:

(i) Bathing;

(ii) Grooming, including mouth care;

(iii) Dressing;

(iv) Toileting;

(v) Assisting with eating and hydration;

(vi) Feeding techniques;

(vii) Skin care; and

(viii) Transfers, positioning, and turning;

(c) Mental health and social services:

(i) Modifying aides' behavior in response to patients' or residents' behavior;

(ii) Awareness of developmental tasks associated with the aging process;

(iii) How to respond to patients' or residents' behavior;

(iv) Allowing the patient or resident to make personal choices, providing and reinforcing other behavior consistent with the patient's or resident's dignity; and

(v) Using the patient's or resident's family as a source of emotional support;

(d) Care of cognitively impaired patients or residents, including the following:

(i) Techniques for addressing the unique needs and behaviors of individuals with dementia;

(ii) Communicating with cognitively impaired patients or residents;

(iii) Understanding the behavior of cognitively impaired patients or residents;

(iv) Appropriate responses to the behavior of cognitively impaired patients or residents; and

(v) Methods of reducing the effects of cognitive impairments;

(e) Basic restorative nursing services, including the following:

(i) Training the patient or resident in self-care according to the patient's or 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 control care training; and
(vi) Care and use of prosthetic and orthotic devices;
(f) Residents' rights, including the following:
(i) Providing privacy and maintaining confidentiality;
(ii) Promoting the patients' or residents' right to make personal choices to accommodate their needs;
(iii) Giving assistance in reporting 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 patients' or residents' personal possessions;
(vi) Promoting the patient's or resident's right to be free from abuse, mistreatment, and neglect and understanding the need to report any instances of such treatment to appropriate facility staff;
(vii) Avoiding the need for restraints.


An individual may meet the 75-hour training requirement by equivalency of education. A nursing facility shall make a request to the department in writing for an equivalency determination, including proof of training with the request.


A nurse aide competency evaluation program must meet the following standards:

(1) The nurse aide must be informed by the facility that a record of successful completion of the evaluation will be included in the registry;

(2) The evaluation must consist of two elements:

(a) The competency evaluation component may be offered as either a written or oral examination. This component of the evaluation must:

(i) Include each curriculum requirement specified in § 44:04:18:15;
(ii) Be developed from a pool of test questions, with no more than 20 percent of prior questions used on a succeeding examination;

(iii) Use a system that prevents disclosure of the content of the examination; and

(iv) If oral, be read from a prepared text in a neutral manner;

(b) The skills demonstration component must consist of a minimum of five tasks randomly selected from a pool of tasks generally performed by nurse aides. The pool of skills must include all of the personal care skills listed in subdivision 44:04:18:15(3)(b). The skills demonstration tasks must be performed on a live person.


The competency evaluation may be administered by a nursing facility. The entity that administers competency evaluations must meet the requirements of this section and must have the approval of the department:

(1) The written or oral examination must be administered by an individual with previous group testing experience;

(2) The skills demonstration must be administered by a registered nurse who has at least one year’s experience in providing care for the elderly or the chronically ill and who has taken a skills demonstration rater training course;

(3) The skills demonstration must be conducted in a nursing facility or laboratory setting comparable to the setting in which the nurse aide functions and must accommodate the number of nurse aides enrolled in the competency evaluation program.


The written, oral, or skills demonstration examination may be conducted in a nursing facility and proctored by facility personnel if the facility obtains department approval before giving the examinations. The nursing facility must ensure that the examination is secure from tampering. Department approval may be withdrawn if there is evidence of tampering. Scoring of the examination must be done by the professional testing company under contract with the department to administer the examination.

44:04:18:20. Notification to individual regarding successful or unsuccessful completion of the competency evaluation program.

The facility offering the examination must advise in advance any individual who takes a competency evaluation that a record of the successful completion of the evaluation will be included in the registry. To be listed in the registry, a nurse aide must pass the written or oral portion and the skills demonstration portion of the competency evaluation with a score
of at least 75 percent. If the nurse aide does not achieve a score of 75 percent, the facility must advise the nurse aide of the areas failed. The nurse aide may have two additional opportunities to complete evaluation successfully.

The department is accountable for the operation of the nurse aide registry and may designate an entity to maintain the registry. A nurse aide is listed on the registry through application or by endorsement. The department shall provide a copy of all information contained in the registry on an individual upon request. The public may contact the department at South Dakota Department of Health Office of Licensure and Certification 615 East 4th Street Pierre, South Dakota 57501 or by calling 605-773-3356 obtain information from the registry between the hours of 8:00 a.m. and 5:00 p.m. central time, Monday through Friday, except for state and federal holidays.

44:04:18:22. Registry status by application.

A nurse aide seeking registry status must submit to the department an application, completed by the program coordinator or primary instructor, documenting successful completion of an approved training program. The entity responsible for scoring the nurse aide competency evaluation program must submit documentation of successful completion of the written or oral examination and the skills demonstration of the competency evaluation to the department within 30 days after the administration of the evaluation.


A nurse aide seeking registry status by endorsement from another state registry must submit to the department the following information:

(1) A completed application;

(2) Written documentation indicating successful completion of another state's approved nurse aide training and competency evaluation program;

(3) Verification of initial listing on the nurse aide registry in another state;

(4) Verification of listing on a nurse aide registry from the state of most recent employment; And

(5) Documentation of employment as a nurse aide within the last 24 consecutive months.


The registry contains the following information for each nurse aide who has gained registry status:

(1) The full name of the nurse aide, including maiden name and any surnames used;

(2) The last known home address;
(3) The registration number;

(4) The date the registry status expires;

(5) The date of birth;

(6) The most recent employment;

(7) The date of successful completion of the examination and skills demonstration components of the competency evaluation;

(8) The name and address of the professional testing service that scored the competency evaluations taken by the nurse aide; and

(9) Any disciplinary proceedings against the nurse aide, including findings of abuse, neglect, or misappropriation of patient or resident property as specified in § 44:04:18:30.


Registry status expires two years from the date of initial registration. To renew registry status, the nurse aide must submit to the department a verification of employment for a minimum of eight hours during the preceding 24 months. An individual who has not performed any nursing or nursing-related services for monetary compensation during the preceding 24 consecutive months must complete a new competency evaluation program.


The department may revoke a nurse aide’s current registry status if the department determines after a contested case hearing pursuant to SDCL chapter 1-26 that the nurse aide has violated the meaning of abuse or neglect as those terms are defined in § 44:04:01:01. The department may deny registry status to a nurse aide applying for registration if the nurse aide was convicted of criminal charges related to abuse or neglect of an individual. Registry status may be suspended by the department during the investigation of an allegation of abuse or neglect by a nurse aide following due process as outlined in § 44:04:18:29.


A nursing facility must notify the department in writing, within 48 hours, of any alleged misconduct by a nurse aide related to abuse or neglect of an individual or to misappropriation of a patient’s or resident’s property.

After an allegation of abuse or neglect, the facility must take steps to prevent further incidents of abuse or neglect from occurring, investigate allegations thoroughly, and take any corrective action necessary. The facility must report its findings to the department within five working days. The department, or another agency of state government, may conduct its own investigation in addition to the facility's investigation.


The department shall follow the contested case procedure found in SDCL chapter 1-26 if a hearing is conducted:

(1) To determine if a nurse aide has engaged in abuse or neglect of an individual; or

(2) When the department denies a petition to remove a finding of neglect from the registry.

If the department has determined abuse or neglect of an individual has occurred, a notice of the right to a hearing will be sent to the nurse aide. The notice shall state the aide has 10 days from receipt of the notice to respond. The notice shall include a waiver of hearing. Failure to return the waiver or failure to request a hearing within 10 days waives the right to a hearing.

44:04:18:30. Documentation of substantiated allegations on registry.

If, after a hearing on the matter, the nurse aide is found to have committed abuse or neglect of an individual, the department shall update the registry with documentation within 60 days from the date of the ruling. If a waiver of hearing is received, the department shall update the registry by flagging the nurse aide’s name on the registry. The documentation remains on the registry permanently and includes the following:

(1) A summary of the allegation;

(2) A summary of the department's investigative report;

(3) The statement by the nurse aide, if one is provided;

(4) The department's decision;

(5) The waiver of the hearing, if any; and

(6) A date of the hearing, findings of fact, and conclusions of law, and the outcome, if a hearing is held.

44:04:18:31. Procedure to remove of a finding of neglect from registry.
A certified nurse aide may petition for a removal of a finding of neglect after one year beginning on the date on which the finding was placed on the certified nurse aide registry. If the department determines the employment and personal history of the certified nurse aide does not reflect a pattern of abusive behavior or neglect and the neglect in the original finding was a singular occurrence, the department may remove the finding from the registry. The department may deny the petition if the employment and personal history of the certified nurse aide reflects a pattern of abusive behavior or neglect and the neglect involved in the original finding was not a singular occurrence. The department shall follow the procedure as provided in § 44:04:18:29.

TENNESSEE

1200-08-06-.15 NURSE AIDE TRAINING AND COMPETENCY EVALUATION.

All nurse aide training programs must comply with the federal nurse aide training and competency regulations, promulgated pursuant to the Omnibus Budget Reconciliation Act of 1987, and with federal labor laws, including but not limited to minimum age requirements. Copies of these regulations may be obtained from the department.

(1) Testing service.

(a) The Department shall provide or contract for the provision of nurse aide testing services as follows:

1. Annual publication of testing schedules and sites.

2. Test sites shall be located so that no individual is required to drive farther than thirty (30) miles to reach a test site.

3. Scheduled tests shall be administered, except when no individual is scheduled to test at a particular test site.

4. The number of individuals passing and failing shall be published following each test.

5. The minimum passing grade for each test shall be seventy-five percent (75%) for the written or oral component. The performance demonstration portion of the test shall consist, at minimum, of five performance tasks, which shall be selected randomly for each registrant from a pool of skills evaluation tasks ranked according to degree of difficulty, with at least one task selected from each degree of difficulty. Registrants are required to pass a minimum of five (5) performance tasks.

6. Individuals who fail any portion of the test three (3) consecutive times shall repeat training prior to taking the test again.

(b) Applications to take the test shall be sent by the program coordinator to the appropriate testing agency postmarked no later than thirty (30) days prior to the test date. Requests for special testing needs shall be made to the testing agency at this time.
(c) The department shall provide the board with quarterly reports on the number of individuals passing and failing each test.

(d) A practical and written test will be developed to reflect that a trainee has acquired the minimum competency skills necessary to become a competent and qualified nurse aide. The Nurse Aide Advisory Committee, composed of twelve (12) members with at least three (3) members nominated by the Tennessee Health Care Association, will periodically review testing materials and set criteria for survey visits of the nurse aide programs.

(e) The test will be developed from a pool of questions, only a portion of which is to be used for grading purposes in any one test, not to exceed one hundred (100) questions. A system must be developed which prevents the disclosure of the pool of questions and of the performance demonstration portion of the test.

(2) Training program.

(a) Requests for approval of a nurse aide training program shall be submitted to the department and shall include the following:

1. Name, address and telephone number of the facility, institution or agency offering the program;

2. The program coordinator’s name, address, license number and verification of a minimum of two (2) years nursing experience, at least one of which must be in the provision of long-term care facility services;

3. Statement of course objectives;

4. Description of course content specifying the number of hours to be spent in the classroom and in clinical settings; and,

5. In lieu of (3) and (4) above, the fact that the curriculum is previously department-approved.

(b) Notification of any change to any one of the above five (5) items or termination of the program must be submitted to the department within 30 days.

(c) Each training program shall have a pass rate on both written and performance exams of at least 70%. Annual reviews of Nurse Aide Training Programs shall include:

1. Letter of commendation for exceptional pass rate as evaluated by the department;

2. Letter of concern for programs having one year of test pass rates below 70%;

3. Request for plan of program improvement for programs with two consecutive years of test pass rates below 70%;

4. Request to appear before the Board for programs with two consecutive years of test pass rates below 70%; and 5. Program is subject to closure after demonstration of a consistent pattern of poor test performance.
(d) Each program coordinator shall be responsible for ensuring that the following requirements are met:

1. Course objectives are accomplished;

2. Only persons having appropriate skills and knowledge are selected to conduct any part of the training;

3. The provision of direct individual care to residents by a trainee is limited to appropriately supervised clinical experiences; a program instructor must be present or readily available on-site during all clinical training hours including direct patient care for the seventy-five (75) hour training program. All activities of daily living (ADL) skills, including but not limited to bathing, feeding, toileting, grooming, oral care, and perineal care, must be taught prior to student performing direct patient care;

4. The area used for training is well-lighted, well-ventilated and provides for privacy for instruction. Such requirements are not to exceed the requirements for physical space in a nursing facility;

5. Each trainee demonstrates competence in clinical skills and fundamental principles of resident care;

6. Records are kept to verify the participation and performance of each trainee in each phase of the training program. The satisfactory completion of the training program by each trainee shall be attested to on each trainee’s record;

7. Each trainee is issued a certificate of completion which includes at least the name of the program, the date of issuance, the trainee’s name and the signature of the program coordinator.

8. The program coordinator shall be responsible for the completion, signing and submission to the department of all required documentation.

(e) Student to teacher ratio must be as follows: 25:1 in classroom and 15:1 for direct patient care training.

(3) Nurse Aide Registry. A nursing home must not use any individual working in a facility as a nurse aide for more than four (4) months unless that individual’s name is included on the Nurse Aide Registry. A facility must not use on a temporary, per diem, leased or any basis other than permanent, any individual who does not meet the requirements of training and competency testing.

(a) The nurse aide registry shall include:

1. The individual’s full name, including a maiden name and any other surnames used;

2. The individual’s last known home address;

3. The individual’s date of birth; and,
4. The date that the individual passed the competency test and the expiration date of the individual’s current registration.

(b) The name of any individual who has not performed nursing or nursing related services for a period of twenty-four (24) consecutive months shall be removed from the Nurse Aide Registry.

(4) Continued Competency. The facility must complete a performance review of each nurse aide employee at least once every 12 months and must provide regular in-service education based on the outcome of these reviews.

Texas

Rule §19.1903 Required Training of Nurse Aides

See also §19.1929 of this title (relating to Staff Development).

(1) Definitions. The following words and terms, when used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise.

(A) Licensed health professional--A physician; physician assistant; nurse practitioner; physical, speech, or occupational therapist; physical or occupational therapy assistant; registered professional nurse; licensed practical nurse; or licensed or certified social worker.

(B) Nurse aide--An individual providing nursing or nursing-related services to residents in a facility under the supervision of a licensed nurse. This definition does not include an individual who is a licensed health professional or a registered dietitian or someone who volunteers such services without monetary compensation.

(2) General rule. A facility must not use any individual working in the facility as a nurse aide for more than four months, on a full-time basis, unless:

that individual is competent to provide nursing and nursing related services; and

that individual:

(i) has completed a training and competency evaluation program, or a competency evaluation program approved by the state as meeting the requirements of 42 Code of Federal Regulations §§483.151-493.154; or

(ii) has been deemed or determined competent as provided in 42 Code of Federal Regulations §483.150(a) and (b).

(3) Nonpermanent employees. A facility must not use on a temporary, per diem, leased, or any basis other than a permanent employee any individual who does not meet the requirements in paragraphs (2)(A) and (B) of this section.
(4) Competency. A facility must not use any individual who has worked less than four months as a nurse aide in that facility unless the individual:

(A) is a full-time employee in a state-approved training and competency evaluation program;

(B) has demonstrated competence through satisfactory participation in a state-approved nurse aide training and competency evaluation program, or competency evaluation program; or

(C) has been deemed or determined competent as provided in 42 Code of Federal Regulations §483.150(a) and (b).

(5) Registry verification. Before allowing an individual to serve as a nurse aide, a facility must receive registry verification that the individual has met competency evaluation requirements and is not designated in the registry as having a finding concerning abuse, neglect or mistreatment of a resident, or misappropriation of a resident’s property, unless:

(A) the individual is a full-time employee in a training and competency evaluation program approved by the state; or

(B) the individual can prove that he has recently successfully completed a training and competency evaluation program, or competency evaluation program approved by the state and has not yet been included in the registry. Facilities must follow up to ensure that such an individual actually becomes registered.

(6) Multi-state registry verification. Before allowing an individual to serve as a nurse aide, a facility must seek information from every state registry, established under §1819(e)(2)(A) or §1919(e)(2)(A) of the Social Security Act, that the facility believes will include information about the individual.

(7) Required retraining. If, since an individual’s most recent completion of a training and competency evaluation program, there has been a continuous period of 24 consecutive months during none of which the individual provided nursing or nursing-related services for monetary compensation, the individual must complete a new training and competency evaluation program or a new competency evaluation program.

(8) Regular in-service education. The facility must complete a performance review of every nurse aide at least once every 12 months, and must provide regular in-service education based on the outcome of these reviews. The in-service training must:

(A) be sufficient to ensure the continuing competence of nurse aides, but must be no less than 12 hours per year;

(B) address areas of weakness as determined in nurse aides' performance reviews and may address the special needs of residents as determined by the facility staff; and

(C) for nurse aides providing services to individuals with cognitive impairments, also address the care of the cognitively impaired.
(9) The facility must comply with the nurse aide training and registry rules found in Chapter 94 of this title (relating to Nurse Aides).

**RULE §19.1904 Proficiency of Nurse Aides**

The facility must ensure that nurse aides are able to demonstrate competency in skills and techniques necessary to care for residents’ needs, as identified through resident assessments, and described in the plan of care.

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**UTAH**

Downloaded January 2011

**R432-150-10. Staff and Personnel.**

...(6) Any person who provides nursing care, including nurse aides and orderlies, must work under the supervision of an RN or LPN and shall demonstrate competency and dependability in resident care.

(a) A facility may not have an employee working in the facility as a nurse aide for more than four months, on full-time, temporary, per diem, or other basis, unless that individual has successfully completed a State Department of Education-approved training and testing program.

(b) The facility shall verify through the nurse aide registry prior to employment that nurse aide applicants do not have a verified report of abuse, neglect, or exploitation. If such a verified report exists, the facility may not hire the applicant.

(c) If an individual has not performed paid nursing or nursing related services for a continuous period of 24 consecutive months since the most recent completion of a training and competency evaluation program, the facility shall require the individual to complete a new training and competency evaluation program.

(d) The facility shall conduct regular performance reviews and regular in-service education to ensure that individuals used as nurse aides are competent to perform services as nurse aides.

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**VERMONT**

Downloaded January 2011

**10. NURSE AIDE TRAINING**

10.1 Nurse Aide Registration
General Rule. A facility must not use an individual working in the facility as a nurse aide for more than 4 months, on a full time basis, unless that individual:

(a) is included on the Vermont State Nurse Assistants Registry; and

(b) is competent to provide nursing and nursing related services.

10.2 Non-Permanent Employees

A facility must not use on a temporary, per diem, leased or any basis other than a permanent employee any individual who does not meet the requirements in subsection 10.1.

10.3 Competency

A facility must not use any individual who has worked less than 4 months as a nurse aide in that facility unless the individual:

(a) is a full-time employee enrolled in a state approved training and competency evaluation program;

(b) has demonstrated competence through satisfactory participation in a state-approved nurse aide training and competency evaluation program; or

(c) is included on the Vermont State Nurse Assistants Registry.

10.4 Registry Verification

(a) Before allowing an individual to serve as a nurse aide, a facility must receive verification from the Vermont State Nurse Assistants Registry that the individual has met competency evaluation requirement unless:

(1) the individual is a full time employee in a training and competency evaluation program approved by the state; or

(2) the individual can prove that he or she has recently successfully completed a training and competency evaluation program or competency evaluation program approved by the state and has not yet been included in the registry. Facilities must follow up to ensure that such an individual actually becomes registered.

(b) Multi-State Registry Verification. Before allowing an individual to serve as a nurse aide, a facility must seek information from every State registry, established under 42 U.S.C. §§1395i-3(e)(2)(A) or 1396r(e)(2)(A), which the facility believes will include information on the individual.

10.5 Required Retraining

If, since an individual's most recent completion of a training and competency evaluation program, there has been a continuous period of 24 consecutive months during none of which the individual provided nursing or nursing-related services for monetary
compensation, the individual must complete a new training and competency evaluation program or a new competency evaluation program.

10.6 Regular In-Service Education

(a) Performance reviews. The facility must complete a performance review of every nurse aide at least once every 12 months, and must provide regular in-service education based on the outcome of these reviews.

(b) In-service training. The in-service training must:

(1) be sufficient to ensure the continuing competence of nurse aides, but must be no less than 12 hours per year.

(2) address areas of weakness as determined in nurse aide's performance reviews and may address special needs of residents as determined by the facility staff; and

(3) for nurse aides providing services to individuals with cognitive impairments, also address the care of the cognitively impaired.

10.7 Proficiency of Nurse Aides

The facility must ensure that nurse aides are able to demonstrate competency in skills and techniques necessary to care for residents’ needs, as identified through resident assessments and described in the plan of care.

10.8 Developmental Services

Individuals providing specialized services to residents with development disabilities do not meet the definition of a nurse aide.

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**VIRGINIA**

Downloaded January 2011


...F. Before allowing a nurse aide to perform resident care duties, the nursing facility shall verify that the individual is:

1. A certified nurse aide in good standing;

2. Enrolled full-time in a nurse aide education program approved by the Virginia Board of Nursing; or

3. Has completed a nurse aide education program or competency testing, but has not yet been placed on the nurse aide registry.

G. Any person employed to perform the duties of a nurse aide on a permanent full-time, part-time, hourly, or contractual basis must be registered as a certified nurse aide within 120 days of employment.
H. Nurse aides employed or provided by a temporary personnel agency shall be certified to deliver nurse aide services.

12VAC5-371-260. Staff development and inservice training.

...E. The nursing facility shall provide inservice programs, based on the outcome of annual performance evaluations, for nurse aides.

F. Nurse aide inservice training shall consist of at least 12 hours per anniversary year.

388-97-1660 Staff and equipment.

...(2) The nursing home must ensure that any employee giving direct resident care, excluding professionally licensed nursing staff:

(a) Has successfully completed or is a student in a DSHS-approved nursing assistant training program; and

(b) Meets other requirements applicable to individuals performing nursing related duties in a nursing home, including those which apply to minors.

(3) The nursing home must ensure:

(a) Students in an DSHS-approved nursing assistant training program:

(i) Complete training and competency evaluation within four months of beginning work as a nursing assistant;

(ii) Complete at least sixteen hours of training in communication and interpersonal skills, infection control, safety/emergency procedures including the Heimlich maneuver, promoting residents’ independence, and respecting residents' rights before any direct contact with a resident; and

(iii) Wear name tags which clearly identify student or trainee status at all times in all interactions with residents and visitors in all nursing homes, including the nursing homes in which the student completes clinical training requirements and in which the student is employed.

(b) Residents and visitors have sufficient information to distinguish between the varying qualifications of nursing assistants; and

(c) Each employee hired as a nursing assistant applies for registration with the department of health within three days of employment in accordance with chapter 18.88A RCW.
WEST VIRGINIA

West Virginia regulations do not include specific content for nurse aide training and competency.

WISCONSIN

HFS 132.42 Employees.

...(2) QUALIFICATIONS AND RESTRICTIONS. No person under 16 years of age shall be employed to provide direct care to residents. An employee less than 18 years of age who provides direct care to residents must work under the direct supervision of a nurse.

WYOMING

Wyoming regulations do not include specific content for nurse’s aide training and competency.

FEDERAL REGULATIONS

§ 483.75 Administration.

(e) Required training of nursing aides —

(1) Definitions.

Licensed health professional means a physician; physician assistant; nurse practitioner; physical, speech, or occupational therapist; physical or occupational therapy assistant; registered professional nurse; licensed practical nurse; or licensed or certified social worker.

Nurse aide means any individual providing nursing or nursing-related services to residents in a facility who is not a licensed health professional, a registered dietitian, or someone who volunteers to provide such services without pay. Nurse aides do not include those
individuals who furnish services to residents only as paid feeding assistants as defined in §488.301 of this chapter.

(2) General rule. A facility must not use any individual working in the facility as a nurse aide for more than 4 months, on a full-time basis, unless:

(i) That individual is competent to provide nursing and nursing related services; and

(ii)(A) That individual has completed a training and competency evaluation program, or a competency evaluation program approved by the State as meeting the requirements of §§483.151–483.154 of this part; or

(B) That individual has been deemed or determined competent as provided in §483.150 (a) and (b).

(3) Non-permanent employees. A facility must not use on a temporary, per diem, leased, or any basis other than a permanent employee any individual who does not meet the requirements in paragraphs (e)(2) (i) and (ii) of this section.

(4) Competency. A facility must not use any individual who has worked less than 4 months as a nurse aide in that facility unless the individual—

(i) Is a full-time employee in a State-approved training and competency evaluation program;

(ii) Has demonstrated competence through satisfactory participation in a State-approved nurse aide training and competency evaluation program or competency evaluation program; or

(iii) Has been deemed or determined competent as provided in §483.150 (a) and (b).

(5) Registry verification. Before allowing an individual to serve as a nurse aide, a facility must receive registry verification that the individual has met competency evaluation requirements unless—

(i) The individual is a full-time employee in a training and competency evaluation program approved by the State; or

(ii) The individual can prove that he or she has recently successfully completed a training and competency evaluation program or competency evaluation program approved by the State and has not yet been included in the registry. Facilities must follow up to ensure that such an individual actually becomes registered.

(6) Multi-State registry verification. Before allowing an individual to serve as a nurse aide, a facility must seek information from every State registry established under sections 1819(e)(2)(A) or 1919(e)(2)(A) of the Act the facility believes will include information on the individual.

(7) Required retraining. If, since an individual's most recent completion of a training and competency evaluation program, there has been a continuous period of 24 consecutive months during none of which the individual provided nursing or nursing-related services
for monetary compensation, the individual must complete a new training and competency evaluation program or a new competency evaluation program.

(f) Proficiency of Nurse aides. The facility must ensure that nurse aides are able to demonstrate competency in skills and techniques necessary to care for residents' needs, as identified through resident assessments, and described in the plan of care.

Subpart D—Requirements That Must Be Met by States and State Agencies: Nurse Aide Training and Competency Evaluation, and Paid Feeding Assistants

Source: 56 FR 48919, Sept. 26, 1991, unless otherwise noted.

§ 483.150 Statutory basis; Deemed meeting or waiver of requirements.

(a) Statutory basis. This subpart is based on sections 1819(b)(5) and 1919(b)(5) of the Act, which establish standards for training nurse-aides and for evaluating their competency.

(b) Deemed meeting of requirements. A nurse aide is deemed to satisfy the requirement of completing a training and competency evaluation approved by the State if he or she successfully completed a training and competency evaluation program before July 1, 1989 if—

(1) The aide would have satisfied this requirement if—

(i) At least 60 hours were substituted for 75 hours in sections 1819(f)(2) and 1919(f)(2) of the Act, and

(ii) The individual has made up at least the difference in the number of hours in the program he or she completed and 75 hours in supervised practical nurse aide training or in regular in-service nurse aide education;

or

(2) The individual was found to be competent (whether or not by the State) after the completion of nurse aide training of at least 100 hours duration.

(c) Waiver of requirements. A State may—
(1) Waive the requirement for an individual to complete a competency evaluation program approved by the State for any individual who can demonstrate to the satisfaction of the State that he or she has served as a nurse aide at one or more facilities of the same employer in the state for at least 24 consecutive months before December 19, 1989; or
(2) Deem an individual to have completed a nurse aide training and competency evaluation program approved by the State if the individual completed, before July 1, 1989, such a program that the State determines would have met the requirements for approval at the time it was offered.


§ 483.151 State review and approval of nurse aide training and competency evaluation programs and competency evaluation programs.

(a) State review and administration. (1) The State—
   (i) Must specify any nurse aide training and competency evaluation programs that the State approves as meeting the requirements of §483.152 and/or competency evaluations programs that the State approves as meeting the requirements of §483.154; and
   (ii) May choose to offer a nurse aide training and competency evaluation program that meets the requirements of §483.152 and/or a competency evaluation program that meets the requirements of §483.154.

(2) If the State does not choose to offer a nurse aide training and competency evaluation program or competency evaluation program, the State must review and approve or disapprove nurse aide training and competency evaluation programs and nurse aide competency evaluation programs upon request.

(3) The State survey agency must in the course of all surveys, determine whether the nurse aide training and competency evaluation requirements of §483.75(e) are met.

(b) Requirements for approval of programs.

(1) Before the State approves a nurse aide training and competency evaluation program
or competency evaluation program, the State must—

(i) Determine whether the nurse aide training and competency evaluation program meets the course requirements of §§483.152:

(ii) Determine whether the nurse aide competency evaluation program meets the requirements of §483.154; and

(iii) In all reviews other than the initial review, visit the entity providing the program.

(2) The State may not approve a nurse aide training and competency evaluation program or competency evaluation program offered by or in a facility which, in the previous two years—

(i) In the case of a skilled nursing facility, has operated under a waiver under section 1819(b)(4)(C)(ii)(II) of the Act;

(ii) In the case of a nursing facility, has operated under a waiver under section 1919(b)(4)(C)(ii) of the Act that was granted on the basis of a demonstration that the facility is unable to provide nursing care required under section 1919(b)(4)(C)(i) of the Act for a period in excess of 48 hours per week;

(iii) Has been subject to an extended (or partial extended) survey under sections 1819(g)(2)(B)(i) or 1919(g)(2)(B)(i) of the Act;

(iv) Has been assessed a civil money penalty described in section 1819(h)(2)(B)(ii) of 1919(h)(2)(A)(ii) of the Act of not less than $5,000; or

(v) Has been subject to a remedy described in sections 1819(h)(2)(B) (i) or (iii), 1819(h)(4), 1919(h)(1)(B)(i), or 1919(h)(2)(A) (i), (iii) or (iv) of the Act.

(3) A State may not, until two years since the assessment of the penalty (or penalties) has elapsed, approve a nurse aide training and competency evaluation program or competency evaluation program offered by or in a facility that, within the two-year period beginning October 1, 1988—

(i) Had its participation terminated under title XVIII of the Act or under the State plan under title XIX of the Act;
(ii) Was subject to a denial of payment under title XVIII or title XIX;
(iii) Was assessed a civil money penalty of not less than $5,000 for deficiencies in nursing facility standards;
(iv) Operated under temporary management appointed to oversee the operation of the facility and to ensure the health and safety of its residents; or
(v) Pursuant to State action, was closed or had its residents transferred.

(c) Time frame for acting on a request for approval. The State must, within 90 days of the date of a request under paragraph (a)(3) of this section or receipt of additional information from the requester—

(1) Advise the requester whether or not the program has been approved; or
(2) Request additional information from the requesting entity.

(d) Duration of approval. The State may not grant approval of a nurse aide training and competency evaluation program for a period longer than 2 years. A program must notify the State and the State must review that program when there are substantive changes made to that program within the 2-year period.

(e) Withdrawal of approval. (1) The State must withdraw approval of a nurse aide training and competency evaluation program or nurse aide competency evaluation program offered by or in a facility described in paragraph (b)(2) of this section.
(2) The State may withdraw approval of a nurse aide training and competency evaluation program or nurse aide competency evaluation program if the State determines that any of the applicable requirements of §§483.152 or 483.154 are not met by the program.
(3) The State must withdraw approval of a nurse aide training and competency evaluation program or a nurse aide competency evaluation program if the entity providing the program refuses to permit unannounced visits by the State.
(4) If a State withdraws approval of a nurse aide training and competency evaluation program or competency evaluation program—

(i) The State must notify the program in writing, indicating the reason(s) for withdrawal
of approval of the program.

(ii) Students who have started a training and competency evaluation program from which approval has been withdrawn must be allowed to complete the course.

§ 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.

§ 483.154 Nurse aide competency evaluation.
(a) Notification to Individual. The State must advise in advance any individual who takes
    the competency evaluation that a record of the successful completion of the evaluation
    will be included in the State's nurse aid registry.
(b) Content of the competency evaluation program—
(1) Written or oral examinations. The competency evaluation must—
(i) Allow an aide to choose between a written and an oral examination;
(ii) Address each course requirement specified in §483.152(b);

(iii) Be developed from a pool of test questions, only a portion of which is used in any one examination;

(iv) Use a system that prevents disclosure of both the pool of questions and the individual competency evaluations; and

(v) If oral, must be read from a prepared text in a neutral manner.

(2) Demonstration of skills. The skills demonstration must consist of a demonstration of randomly selected items drawn from a pool consisting of the tasks generally performed by nurse aides. This pool of skills must include all of the personal care skills listed in §483.152(b)(3).

(c) Administration of the competency evaluation.

(1) The competency examination must be administered and evaluated only by—

(i) The State directly; or

(ii) A State approved entity which is neither a skilled nursing facility that participates in Medicare nor a nursing facility that participates in Medicaid.

(2) 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 competency evaluation program may be charged for any portion of the program.

(3) 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 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.

(4) The skills demonstration part of the evaluation must be—

(i) Performed in a facility or laboratory setting comparable to the setting in which the individual will function as a nurse aide; and

(ii) Administered and evaluated by a registered nurse with at least one year's experience
in providing care for the elderly or the chronically ill of any age.

(d) Facility proctoring of the competency evaluation.

(1) The competency evaluation may, at the nurse aide's option, be conducted at the facility in which the nurse aide is or will be employed unless the facility is described in §483.151(b)(2).

(2) The State may permit the competency evaluation to be proctored by facility personnel if the State finds that the procedure adopted by the facility assures that the competency evaluation program—

(i) Is secure from tampering;

(ii) Is standardized and scored by a testing, educational, or other organization approved by the State; and

(iii) Requires no scoring by facility personnel.

(3) The State must retract the right to proctor nurse aide competency evaluations from facilities in which the State finds any evidence of impropriety, including evidence of tampering by facility staff.

(e) Successful completion of the competency evaluation program.

(1) The State must establish a standard for satisfactory completion of the competency evaluation. To complete the competency evaluation successfully an individual must pass both the written or oral examination and the skills demonstration.

(2) A record of successful completion of the competency evaluation must be included in the nurse aide registry provided in §483.156 within 30 days of the date if the individual is found to be competent.

(f) Unsuccessful completion of the competency evaluation program. (1) If the individual does not complete the evaluation satisfactorily, the individual must be advised—

(i) Of the areas which he or she; did not pass; and

(ii) That he or she has at least three opportunities to take the evaluation.

(2) The State may impose a maximum upon the number of times an individual upon the
number of times an individual may attempt to complete the competency evaluation successfully, but the maximum may be no less than three.

§ 483.156 Registry of nurse aides.

(a) Establishment of registry. The State must establish and maintain a registry of nurse aides that meets the requirement of this section. The registry—

(1) Must include as a minimum the information contained in paragraph (c) of this section:

(2) Must be sufficiently accessible to meet the needs of the public and health care providers promptly;

(3) May include home health aides who have successfully completed a home health aide competency evaluation program approved by the State if home health aides are differentiated from nurse aides; and

(4) Must provide that any response to an inquiry that includes a finding of abuse, neglect, or misappropriation of property also include any statement disputing the finding made by the nurse aide, as provided under paragraph (c)(1)(ix) of this section.

(b) Registry operation.

(1) The State may contract the daily operation and maintenance of the registry to a non-State entity. However, the State must maintain accountability for overall operation of the registry and compliance with these regulations.

(2) Only the State survey and certification agency may place on the registry findings of abuse, neglect, or misappropriation of property.

(3) The State must determine which individuals who

(i) have successfully completed a nurse aide training and competency evaluation program or nurse aide competency evaluation program;

(ii) have been deemed as meeting these requirements; or

(iii) have had these requirements waived by the State do not qualify to remain on the registry because they have performed no nursing or nursing-related services for a period of 24 consecutive months.
(4) The State may not impose any charges related to registration on individuals listed in the registry.

(5) The State must provide information on the registry promptly.

(c) Registry Content.

(1) The registry must contain at least the following information on each individual who has successfully completed a nurse aide training and competency evaluation program which meets the requirements of §483.152 or a competency evaluation which meets the requirements of §483.154 and has been found by the State to be competent to function as a nurse aide or who may function as a nurse aide because of meeting criteria in §483.150:

(i) The individual’s full name.

(ii) Information necessary to identify each individual;

(iii) The date the individual became eligible for placement in the registry through successfully completing a nurse aide training and competency evaluation program or competency evaluation program or by meeting the requirements of §483.150; and

(iv) The following information on any finding by the State survey agency of abuse, neglect, or misappropriation of property by the individual:

(A) Documentation of the State’s investigation, including the nature of the allegation and the evidence that led the State to conclude that the allegation was valid;

(B) The date of the hearing, if the individual chose to have one, and its outcome; and

(C) A statement by the individual disputing the allegation, if he or she chooses to make one; and

(D) This information must be included in the registry within 10 working days of the finding and must remain in the registry permanently, unless the finding was made in error, the individual was found not guilty in a court of law, or the State is notified of the individual’s death.

(2) The registry must remove entries for individuals who have performed no nursing or nursing-related services for a period of 24 consecutive months, unless the individual’s
registry entry includes documented findings of abuse, neglect, or misappropriation of property.

(d) Disclosure of information. The State must—

(1) Disclose all of the information in §483.156(c)(1) (iii) and (iv) to all requesters and may disclose additional information it deems necessary; and

(2) Promptly provide individuals with all information contained in the registry on them when adverse findings are placed on the registry and upon request. Individuals on the registry must have sufficient opportunity to correct any misstatements or inaccuracies contained in the registry.


§ 483.158 FFP for nurse aide training and competency evaluation.

(a) State expenditures for nurse aide training and competency evaluation programs and competency evaluation programs are administrative costs. They are matched as indicated in §433.15(b)(8) of this chapter.

(b) FFP is available for State expenditures associated with nurse aide training and competency evaluation programs and competency evaluation programs only for—

(1) Nurse aides employed by a facility;

(2) Nurse aides who have an offer of employment from a facility;

(3) Nurse aides who become employed by a facility not later than 12 months after completing a nurse aide training and competency evaluation program or competency evaluation program; or

(4) Nurse aides who receive an offer of employment from a facility not later than 12 months after completing a nurse aide training and competency evaluation program or competency evaluation program.