



Nurse Aide Registry
PO Box 268816
Oklahoma City, OK 73126-8816

Long Term Care Nurse Aide Training Program RN Supervisor and Instructor Manual

Manual for Long Term Care Certified Nurse Aide Training
Program Operation

September 22, 2022



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PURPOSE

This handbook has been developed as a guide for Program Coordinators, RN Supervisors, and Instructors to provide instruction for the operation of a Certified Long Term Care Nurse Aide Training Program (LTC/NATP). This handbook includes information and resources for developing a new program and maintaining compliance after approval of the program.

It is recommended this handbook be reviewed on a regular basis as updates will be added when available. The handbook should be useful as new Program Coordinators, RN Supervisors, or Instructors are hired for the program.

DEFINITIONS

DEPARTMENT means the *State Department of Health*. [63 O.S. 1991, § 1-1902(7)].

DIRECT SUPERVISION means a licensed nurse or other qualified individual actually observes a trainee performing tasks.

EDUCATIONAL BASED PROGRAM means a nurse aide training and competency examination program sponsored by a State approved educational entity including, but not limited to, vocational technical schools, schools of higher learning or State certified educational facilities.

EMPLOYER BASED PROGRAM means a nurse aide training and competency examination program sponsored by, or offered in, a nursing facility, a residential care home, an adult day care center, a home care agency, or a specialized facility.

ENTITY means the provider of a Department-approved nurse aide training and competency evaluation program including but not limited to an employer based or an educational based program provider.

EXAMINATION means a competency examination that includes a written portion and/or a clinical skills portion.

HEALTH RELATED SERVICES means those services provided to patients, clients, or residents that include but are not limited to the following: personal hygiene, transferring, range of motion, supervision, or assistance in activities of daily living, basic nursing care such as taking temperature, pulse or respiration, positioning, incontinent care, identification of signs and symptoms of disease, and behavior management.

INSTRUCTOR means a qualified professional who teaches in an approved training program.

LICENSED HEALTH PROFESSIONAL means a physician, dentist, podiatrist, chiropractor, physician assistant, nurse practitioner, pharmacist, physical, speech, or occupational therapist, registered nurse, licensed practical nurse, licensed social worker, or licensed registered dietician.

LICENSED NURSE means a registered nurse or a licensed practical nurse that is currently licensed by the Oklahoma Board of Nursing.

MISAPPROPRIATION OF PROPERTY means the taking, 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 legal control of a resident or client without the effective consent of the resident or client or other appropriate legal authority, or the taking of any action contrary to any duty imposed by federal or state law prescribing conduct relating to the custody or disposition of a resident's/client's property.

MISTREATMENT means a negligent act or personal wrong against a resident or client which causes the resident or client actual physical pain, discomfort, or mental anguish. This type of personal wrong does not necessarily have to present external or visible signs of existence but does not include actions which are unavoidable.

NEGLECT means a failure to provide adequate medical or personal care or maintenance which results in physical or mental injury to a resident. [63 O.S. 1991, §1-1902.].

ORIENTATION means the training for a particular job activity given to a new employee.

PERFORMANCE RECORD means a list of the major duties and skills to be learned in a nurse aide training program and the trainee's performance of each.

QUALIFIED PROFESSIONAL means an individual qualified to perform training and skills testing in an approved nurse aide training and competency program.

SUPERVISED PRACTICAL TRAINING means training in a laboratory or other setting in which the trainee demonstrates knowledge while performing tasks on an individual.

TRAINEE/STUDENT means an individual who is enrolled in and has begun, but has not completed, a nurse aide training program.

TRAINER means a qualified person who teaches in a nurse aide training and competency examination program.

TRAINING AND COMPETENCY EVALUATION PROGRAM means a program approved by the Department to teach and test individuals to work as a nurse aide.

HELPFUL ACRONYMS

| | |
|--------|---|
| CAP | Corrective Action Plan |
| CEP | Competency Evaluation Program |
| CFR | Code of Federal Regulations |
| CMS | Centers for Medicare & Medicaid Services |
| LTC | Long Term Care |
| NAR | Nurse Aide Registry |
| NATP | Nurse Aide Training Program |
| NATCEP | Nurse Aide Training Competency and Evaluation Program |
| NF | Nursing Facility (Nursing Home) |
| OSDH | Oklahoma State Department of Health |
| POC | Plan of Correction |
| PSC | Performance Skills Checklist |
| HCP | Health Certification Projects/Testing Entity for Career Techs |
| TVF | Training Verification Form |
| SNF | Skilled Nursing Facility |
| SSN | Social Security Number |



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CONTACT INFORMATION

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TESTING ENTITIES

***careertech* | CareerTech Testing Center (CTTC)**

1500 West Seventh Avenue

Stillwater, OK 74074-4398

405.743-5427 tel

405.743-6885 fax

Headmaster LLP | D&S Diversified Technologies LLP

1-800-393-8664

hdmaster@hdmaster.com | www.hdmaster.com

Prometric

(443) 455- 6286 **PHONE**

PROGRAM COORDINATOR

The Program Coordinator may be the owner/operator and/or the RN Supervisor or may be the Program Coordinator over several areas within a Career Technology Center.

Examples of Program Coordinator responsibilities:

- Ensure submission of the application for the **Approval of Training Course** has required information for submission to the Nurse Aide Registry.
- Acts as liaison with the department related to the program's continuing compliance with the required elements of these regulations.
- Coordinate the classroom and clinical site to ensure the environment is conducive to teaching and learning; and will provide the opportunity for students to perform the skills taught in the curriculum. Supervise and verify RN supervisor and instructor/s meet the required qualifications of Federal Code and State Regulations for their position.
- Assess students' reaction to course content, instructional effectiveness, and other aspects of the learning experience
- Submit the Notice of Change Form when there is a change in RN Supervisor, curriculum change, change in location.

RN SUPERVISOR - OAC 310:677-11-3

There must be one (1) Registered Nurse (RN) who meets the qualification for each long-term care training program, whether in the role of RN supervisor or RN Instructor. The RN supervisor maintains the responsibility for the programs and is available to provide instruction in areas in which a licensed practical nurse may lack technical expertise.

The RN Supervisor shall have at least two (2) years of nursing experience with at least one (1) year experience as an RN in long term care facilities such as nursing homes or skilled nursing facilities. The RN must have completed a course in teaching adults or experience in teaching adults or supervising nurse aides.

Please have copies of the RN Supervisor's job description, RN license, resume' documenting required experience for program in the files or binder for the Health Facility Surveyor to review at the time of your onsite surveys. This will need to be updated anytime there is a change in the RN supervisor.

RN Supervisor's Responsibilities

The RN Supervisor shall provide general supervision of the nurse aide training course. The general supervision should include, but is not limited to oversight of instructors, curriculum, verification of student training, and signing of Verification Form after the student successfully completes the training program (attesting that all state and federal training requirements are met). The RN Supervisor is responsible for ensuring the program is meeting the requirements of Federal, and State statutes and regulations.

Examples of RN Supervisor responsibilities are:

- Acts as liaison with the department related to the program's continuing compliance with the required elements of these regulations
- Implement and maintain a nurse aide training program that complies with the department regulations
- Ensure submission of reports and program data upon requests of the department
- Coordinate the classroom and clinical site to ensure the environment is conducive to teaching and learning; and will provide the opportunity for students to perform the skills taught in the curriculum
- Ensure all instructors and persons conducting the skills competency checklist meet the required qualifications
- Provide or arrange for the orientation of the instructor to their role and responsibilities
- Supervise and verify instructors that do not have the long-term care experience receives the hours of professional continuing education on person-centered care required yearly
- Evaluate instructors ongoing and formally on an annual basis
- Ensure an instructor is available for direct supervision scheduled clinical instruction
- Ensure verification of completion of a student's training. The RN supervisor is to sign and date the Training Verification Forms (TVF) **after** the Instructor has filled in the training portion of the TVF and the instructor and student have signed and dated the TVF. The RN supervisor is to verify proper completion and submission of forms and documents related to the NAT/NATCEP operation.
- Verify the nursing home or long-term care unit of the hospital in which the training program is offered or utilized for the clinical experience is licensed by OSDH.
- Is in substantial compliance with all standards for licensure and has not been found within the preceding two years by the state survey and certification agency, using the currently applicable Center for Medicare and Medicaid Services regulations, categorized as providing substandard quality of care.

INSTRUCTOR – OAC 310:677-11-3

A licensed practical nurse may act as an instructor in an approved nurse aide training and competency program when a registered nurse maintains responsibility for the programs and is available to provide instruction in areas in which a licensed practical nurse may lack technical expertise.

Other personnel from the health professions may supplement the instructor for certain areas in the curriculum if desired. These persons shall be licensed by the State, if applicable, and shall have a least one (1) year experience in the practice of the profession.

Please have copies of the instructor(s) job description, license, resume' documenting required experience for program in the files or binder for the Health Facility Surveyor to review at the time of your onsite surveys. This will need to be updated anytime there is a change in the instructor(s).

RESPONSIBILITIES OF THE INSTRUCTOR

The instructor is responsible for ensuring the students receive the total number of hours the NATP was approved for. A student must make-up any absence for class, lab, or clinical time. *If the student does not make up the time, the required hours of training would not be met.*

Attendance should be documented daily to reflect the number of classroom, lab, and clinical hours the student has performed. These hours should match the curriculum guideline approved by the Department for the NATP. Attached is an attendance form which can be used for your convenience. The attendance sheet will be reviewed at the time of the program's onsite survey. If your school prefers a time clock or another method, please understand these will need to be reviewed at the time of the onsite review to ensure training hours match what has been approved.

The instructor should be always present and easily accessible to students during instruction whether it is in the classroom, lab, or during clinical skill training at a facility.

Student Records

Student records must be kept for three years. Student's records should be well organized and contain their application or copy of the application to the program, Attestation of 16 hours of Required Training, Skills Performance Checklist, performance records, Training Verification Form, and OSBI or Criminal Check if one is required of the school or clinical site. A signed copy of where the student has received and read the program's handout of required information is not mandatory, but highly suggested as it demonstrates the program has provided the required regulatory information.

Required Information for Students

Please note on your list of charges for the trainee "No nurse aide who is employed by, or who has received an offer of employment from a facility on the date on which the person begins a nurse aide training and competency evaluation program may be charged for any portion of the training or competency evaluation program including any fees for textbooks or other required course materials." **CRF 42, 483.152(C)**

Barrier Offenses for the Certified Nurse Aide Effective November 1, 2012 63 O.S. § 1-1950.1 (OSCN 2012)

Title 63, Section 1-1950.1(C) 1. If the results of a criminal history background check reveal that the subject person has been convicted of, pled guilty or no contest to, or received a deferred sentence for, a felony or misdemeanor offense for any of the following offenses in any state or federal jurisdiction, the employer shall not hire or contract with the person:

- a. abuse, neglect or financial exploitation of any person entrusted to the care or possession of such person,
- b. rape, incest, or sodomy,
- c. child abuse,
- d. murder or attempted murder,
- e. manslaughter,
- f. kidnapping,
- g. aggravated assault and battery,
- h. assault and battery with a dangerous weapon, or
- i. arson in the first degree.

2. If less than seven (7) years have elapsed since the **completion of sentence**¹, and the results of a criminal history check reveal that the subject person has been convicted of, or pled guilty or no contest to, a felony or misdemeanor offense for any of the following offenses, in any state or federal jurisdiction, the employer shall not hire or contract with the person:

- a. assault,
- b. battery,
- c. indecent exposure and indecent exhibition, except where such offense disqualifies the applicant as a registered sex offender,
- d. pandering,

- e. burglary in the first or second degree,
- f. robbery in the first or second degree,
- g. robbery or attempted robbery with a dangerous weapon, or imitation firearm,
- h. arson in the second degree,
- i. unlawful manufacture, distribution, prescription, or dispensing of a Schedule I through V drug as defined by the Uniform Controlled Dangerous Substances Act,
- j. grand larceny, or
- k. petit larceny or shoplifting.

**Text From HB2582, Section 63 O.S. § 1-1950.1
Pertaining to Nurse Aide Background Checks
63 O.S. § 1-1950.1 (OSCN 2012)**

A. For purposes of this section:

1. "Nurse aide" means any person who provides, for compensation, nursing care or health-related services to residents in a nursing facility, a specialized facility, a residential care home, continuum of care facility, assisted living center or an adult day care center and who is not a licensed health professional. Such term also means any person who provides such services to individuals in their own homes as an employee or contract provider of a home health or home care agency, or as a contract provider of the Medicaid State Plan Personal Care Program;

2. "Employer" means any of the following facilities, homes, agencies, or programs which are subject to the provision of this section:

- a. a nursing facility or specialized facility as such terms are defined in the Nursing Home Care Act,*
- b. a residential care home as such term is defined by the Residential Care Act,*
- c. an adult day care center as such term is defined in the Adult Day Care Act,*
- d. an assisted living center as such term is defined by the Continuum of Care and Assisted Living Act,*
- e. a continuum of care facility as such term is defined by the Continuum of Care and Assisted Living Act,*
- f. a home health or home care agency, and*
- g. the Department of Human Services, in its capacity as an operator of any hospital or health care institution or as a contractor with providers under the Medicaid State Plan Personal Care Program;*

Note: Possession of a Schedule I through V drug as defined by the Uniform Controlled Dangerous Substances Act is no longer a barrier offense.

After a Deferment is completed by the individual and their OSBI report states "Not guilty", Case Dismissed" there is no 7 year waiting period.

3. "Home health or home care agency" means any person, partnership, association, corporation, or other organization which administers, offers or provides health care services or supportive assistance for compensation to three or more ill, disabled, or infirm persons in the temporary or permanent residence

of such persons, and includes any subunits or branch offices of a parent home health or home care agency;

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.

Affidavit of Lawful Presence

The Oklahoma State Department of Health (OSDH) participates in the Systematic Alien Verification for Entitlements (SAVE) Program, which is an intergovernmental information-sharing initiative designed to aid in determining a non-citizen applicant's immigration status (lawful presence), and thereby ensuring only US Citizens and eligible non-citizens receive government benefits, such as licenses. OSDH may only issue licenses, certifications or permits to Qualified Aliens (non-U.S. citizens) who present valid documentary evidence of one (1) of the following:

Alien Lawfully Admitted for Permanent Residence:

- **INS Form I-551** (Alien Registration Receipt Card, commonly known as a "green card"); or
- **Unexpired Temporary I-551**(Stamp in foreign passport or on INS Form I-94).

Immigrant or Non-Immigrant Visa Status:

- **INS Form I-94**
- **INS Form I-688B**

Asylee:

- **INS Form I-94** annotated with stamp showing grant of asylum under §208 of the INA;
- **INS Form I-688B** (Employment Authorization Card) annotated "27a .12 (a) (5)";
- **INS Form I-766** (Employment Authorization Document) annotated "AS";

- **Grant letter** from the Asylum Office of INS; or
- **Order** of an immigration judge granting asylum.

Refugee:

- **INS Form I-94** annotated with stamp showing admission under §207 of the INA;
- **INS Form I-688B** (Employment Authorization Card) annotated “274 a.12 (a) (3)”;
- **INS Form I-766** (Employment Authorization Document) annotated “A3”; or
- **INS Form I-571** (Refugee Travel Document).

Alien Who Has Been Battered or Subjected to Extreme Cruelty:

INS petition and appropriate supporting documentation

Alien Paroled Into the U.S. for a least One Year:

- **INS Form I-94** with stamp showing admission for at least one year under §212 (d) (5) of the INA. (Applicant cannot aggregate periods of admission for less than one year to meet the one-year requirement.)

Alien Whose Deportation or Removal Was Withheld:

- **INS Form I-688B** (Employment Authorization Card) annotated “274 a.12 (a) (10)”;
- **INS Form I-766** (Employment Authorization Document) annotated “A10”; or
- **Order** from an immigration judge showing deportation withheld under §243 (h) of the INA as in effect prior to April 1, 1997, or removal withheld under §241 (b) (3) of the INA.

Alien Granted Conditional Entry:

- **INS Form I-94** with stamp showing admission under §203 (a) (7) of the INA;
- **INS Form I-688B** (Employment Authorization Card) annotated “274 a.12 (a) (3)”;
- **INS Form I-766** (Employment Authorization Document) annotated “A3”.

Cuban/Haitian Entrant:

- **INS Form I-551** (Alien Registration Receipt Card, commonly known as a “green card”) with the code CU6, CU7, or CH6;
- **Unexpired temporary I-551** stamp in foreign passport or on INS Form I-94 with the code CU6 or CU7; or
- **INS Form I-94** with stamp showing parole as “Cuba/Haitian Entrant” under § 212 (d) (5) of the INA.

Qualified Aliens: State law requires the Oklahoma State Department of Health to verify the immigration status (lawful presence) of all non-U.S. citizens upon initial license/certification and renewal.

QUALIFIED ALIENS MUST ATTACH A COPY OF THE DOCUMENTS that supports their status as shown ve with their Affidavit of Lawful Presence. A license, permit, or certification **will not be issued until the appropriate documentation is submitted. You must keep a copy of the appropriate document with their Affidavit of Lawful Presence in their training record.**

If the student is testing at a Career Tech, they are required to have their Alien documents with them and the Career Tech will have them sign Affidavit and get a copy of their documentation.

U.S. Citizens: After receipt of this Affidavit of Lawful Presence, U.S. Citizens are not required to attach an Affidavit of Lawful Presence every year.

310:677-5-2(d). Registry operation – Renewal of Certifications

(d) A home health aide, long term care aide, developmentally disabled direct care aide, residential care aide, and adult day care aide shall renew individual certification once every two (2) years. The individual certified as a home health aide, developmentally disabled direct care aide, residential care aide, or adult day care aide shall file a Recertification Application (ODH Form 717). The individual certified as a long-term care aide shall file a Recertification Application for Long Term Care Aide (ODH Form 840). Each recertification application requires:

- (1) Personal identifying and contact information for the applicant;
- (2) Documentation that the applicant has provided at least eight (8) hours of nursing or health related services for compensation during the preceding 24 months. On and after July 1, 2008, the documentation shall consist of one of the following:
 - (A) A statement signed by the administrator or the administrator's representative for the **licensed nursing facility, specialized facility, residential care home, home health or home care agency, adult day care center, assisted living center, continuum of care facility, Oklahoma Department of Veterans Affairs nursing facility, or Oklahoma correctional facility where the applicant provided services;**
 - (B) A statement signed by a physician or nurse under whose supervision the applicant provided services; or
 - (C) A check stub, IRS Form W-2 or similar proof of wages paid to the applicant by a **licensed nursing facility, specialized facility, residential care home, home health or home care agency, adult day care center, assisted living center, continuum of care facility, Oklahoma Department of Veterans Affairs nursing facility, or Oklahoma correctional facility;** and
- (3) An oath of truthfulness and completeness to be signed by the applicant.

(e) A home health aide, developmentally disabled direct care aide, residential care aide, or adult day care aide shall pay a ten-dollar (\$10.00) fee for the processing and renewal of certifications and for replacement of a wallet card for change of name or other reason.

[Source: Added at 12 Ok Reg 3087, eff 7-27-95; Amended at 19 Ok Reg 2106, eff 6-27-2002; Amended at 23 Ok Reg 3169, eff 7-26-2006(emergency); Amended at 24 Ok Reg 2045, eff 6-25-2007; Amended at 26 Ok Reg 2068, eff 6-25-2009]

IMPORTANT NOTICE REGARDING NEW LAW CHANGE

New law (HB1435) starting November 1, 2015, requires nurse aides and trainees to provide their current address to the State Department of Health's nurse aide registry and notify the registry of any change in address within ten days. Correspondence will be sent to the address on file with the registry, and if it is returned as not deliverable it will be considered legally served.

The new law permits the Department to suspend or revoke a nurse aide certification for cause, such as criminality revealed by a background check or any abuse, neglect, or exploitation of residents under the aide's care.

Below are the bullet points of the changes to [Title 63 O.S., Section 1-1951\(A\)\(7\), \(D\)\(3\)\(b\), and \(D\)\(8\)](#).

- Certified nurse aides and nurse aide trainees shall maintain with the registry current residential addresses and shall notify the registry, in writing, of any change of name. Notification of change of name shall require certified copies of any marriage license or other court document which reflects the change of name.

-
- Notice of change of address or telephone number shall be made within ten (10) days of the effected change. Notice shall not be accepted over the phone.
- In any proceeding in which the Department is required to serve notice or an order on an individual, the Department may send written correspondence to the address on file with the Registry. If the correspondence is returned and a notation of the United States Postal Service indicates “unclaimed” or “moved” or “refused” or any other non-delivery markings and the records of the Registry indicate that no change of address as required has been received by the Registry, the notice and any subsequent notices or orders shall be deemed by the court as having been legally served for all purposes.
- Basically, this means aides must mail a change of address or phone number to the registry a within 10 days of that change. There will be a form on our website for submitting address changes [<http://nar.health.ok.gov>]. If an aide is served a Petition for Hearing and it comes back to the Department and indicates “unclaimed” or “moved” or “refused” or any other non-delivery markings, it will still be considered legally delivered and any pending action can proceed. This may result in the individual’s certification being suspended or revoked and a finding of abuse, misappropriation, or neglect placed on the registry.

NAT/NATCEP TRAINING

Objective of Nurse Aide Training and Competency Evaluation Programs:

To provide a basic level of both knowledge and demonstrable skills for individuals who provide nursing or nursing-related service to residents in a skilled nursing facility (SNF) or Nursing Home (NH) and who are not licensed health professionals or volunteers who provide services without monetary compensation and to safeguard the health and welfare of residents. The basic theory topics and skills are the minimal requirements mandated by federal regulations 42 CFR § 483.152 and in 310:677-11-4.

§ 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.

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.*

A syllabus which provides the daily schedule of training, hours for theory topics, lab objectives and hours; and clinical objectives and hours for the entire course are the responsibility of the Program Coordinator or RN Supervisor. It is recommended for lab hours to be in the curriculum so the skill practice and demonstration may occur prior to the clinical setting. There may be skills which can only be taught and demonstrated at a facility, due to equipment needed. This is acceptable. Please ensure the students are able to perform all skills to complete their skills training.

Make-up time must be included in the training schedule, and any theory that has been missed must be made up by the student prior to clinical. Make-up time is made up hour for hour and must be overseen by the instructor. The make-up must cover the same content that was missed, following the lesson plan. This should also include clinicals. The training program must create a policy that limits the amount of absence and makeup that will be allowed.

Once the schedule is approved by the Department, this is the **only** schedule that the Training Program can use. If the Training Program desires to change the schedule (sequence of modules or provide the training at a different time (weekend vs. days), then the Training Program must submit the new training schedule to the Department for approval prior to implementing the change in the schedule. Once reviewed and approved, the updated schedule will be replaced with the previously approved schedule.

During any onsite visits, the Department will make a determination if the school is implementing the approved curriculum and training schedule. Only one (1) training schedule will be operational for a training code. The NATP Training Code Number can be verified by the Letter of Approval. This code is to be used for all correspondence with the Department.

Affirmation of sixteen (16 hours)

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**.

- (A) Communication and interpersonal skills.
- (B) Infection control.
- (C) Safety and emergency procedures, including the Heimlich maneuver.
- (D) Promoting resident's independence.
- (E) Respecting a resident's rights.

It is beneficial to the student to teach these hours the first two (2) to four (4) days of class. It is the responsibility of the instructor to fill out the Affirmation of Sixteen Hours as soon as the subjects have

been taught. The instructor shall sign and date along with the student. The instructor should give the student their copy as soon as they have completed the sixteen (16) hours.

A student, who has completed the required sixteen (16) hours of training mention above, may be employed by a SNF who has a temporary waiver in place. This allows the facility to hire a student while they are being trained. The student is only allowed to perform the skills they have been found to be proficient in. Therefore, it is very important for the instructor to give the students a copy of their Affirmation of 16 Hours.

Alzheimer's Training

Oklahoma law provides that nurse aide training programs must include ten (10) hours of training in the care of Alzheimer's patients.

63 O.S. fl 1-1951(A)(3) *The State Department of Health shall have the power and duty to determine curricula and standards for training and competency programs. The Department shall require such training to include a minimum of ten (10) hours of training in the care of Alzheimer's patients;*

The Code of Federal Regulations at **42 CFR fl 483.152(b)(5)**, requires the curriculum of the nurse aide training program to include under 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.*

The Oklahoma Chapter of the Alzheimer's Association endorses the Barbara Broyles Alzheimer and Dementia Training Program for Nursing Assistants for nurse aide training programs. This curriculum may be freely adopted and incorporated into your curriculum. Please provide appropriate credit.

Teaching Skills in the LAB

Learning the basic skills for a nurse aide in the lab is an essential part of the student's curriculum. The skills they learn in the lab will enable them to establish themselves in the clinical setting. The instructor must make sure that every skill is taught, and the student has been found proficient in the skill before the instructor and student date and sign the skill.

The Skills Performance Checklist (SPC) affirms the student has satisfactorily performed all skills on the nurse aide (SPC) and has been determined proficient in those skills. When the instructor is verifying the student has been found proficient in the skill, the instructor and the student sign off on the skill. It also should be dated when the student was demonstrated they were marked as proficient in the skill. If student cannot perform any skills satisfactorily, please note unsatisfactory and date. This can assist in the determination if a student is unable to perform with proficiency the skills needed to be a LTC CNA. The program is to keep the original and give the student a copy when completed.

The abbreviated SPC List is a sample which you may copy and use for each student in your Training Program. Using this form will ensure that your program will meet the requirements for documentation of clinical skills training; however, you may develop your own skills check list. In the event you do create your own check list, please ensure that your check list has the minimum skills that are contained on the abbreviated SPC.

This record serves as the **primary** documentation for the clinical skills and is the fundamental resource that the RN Supervisor uses to ensure that the skill performance has been met for each individual student. Failure of the school to keep accurate, complete, and ethical documents will result in program regulatory violations.

A note of importance: The RN Supervisor must sign the TVF to attest the student has met all classroom and clinical training requirements. If the RN Supervisor knowingly or unknowingly signs the TVF for a training program that fails to keep complete/accurate student records, the RN Supervisor will be referred to the Oklahoma Board of Nursing for fraudulent activity.

Lab Size and Equipment

The size of the classroom/lab is not specified; however, the classroom/lab will be evaluated for adequacy based on the number of students enrolled and the space is utilized.

Adequate lighting temperature controls, clean and safe conditions, adequate space to accommodate student, and all equipment needed including audiovisual equipment and any equipment needed for simulation resident care must be provided. A Class/Lab Equipment Guideline is provided below.

1. Long-term Care Bed with side rails, working bed brakes
2. Laundry Hamper, Bedpan
3. Bedside Stand – Over Bed Stand
4. Wheelchair with working brakes and footrest
5. Standard scale or Analog Scale
6. Hand Washing Sink with running water, Liquid Soap & Paper Towels
7. Wash Basin – Emesis Basin
8. Output Measurement Container/Graduate
9. Wastebasket, Wall Clock
10. Call Light – does not have to be a working call light
11. Gait belt/Transfer belt, Walker, Quad Cane
12. Gloves
13. Food Tray, Plate, Silverware
14. Linens including: pillows and top linens, pillowcases, flat & fitted sheets, bath blanket, towels and wash cloths, water proof pad, blanket, resident's gown
15. Dentures, Denture container
16. Mannequin (perineal area for female)

The layouts of the classroom, lab, and offices will be reviewed if onsite review has not be performed in the last two years.

Clinical Skills

A nursing home facility or a distinct licensed long term care unit of a hospital (SNF) is to be used as the location of the clinical portion of the curriculum for the students. The facility must be in good standing with the Centers for Medicare and Medicaid Services (CMS) and not have any training enforcement restrictions. If the facility is not in good standing, it cannot be used as a clinical site and therefore the clinical site agreement will be void. Therefore, programs should consider having more than one (1) clinical site training agreement; in the event the facility comes under sanctions by CMS they would have an alternate site available. If there is not a facility eligible to be used in the NATP area, the option of using an Assisted Living Center is available, but it must be approved by the Department.

As in **310:677-3-3(e)(f)** The NATP cannot not use a facility, which within the previous two years has been surveyed by the Long-Term Care, Oklahoma State Department of Health, and has

- (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 \$10,314;
- (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.

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.

The Program Coordinator, RN Supervisor or instructor are responsible for getting a clinical agreement contract with the SNF the NAT wants to use for clinical training. The clinical agreement contract must be renewed annually and/or upon any change of facility or school administration. The RN Supervisor or instructor is also responsible for verifying with the Department if the NF can be used in the clinical training of nurse aide students. This verification must be documented in the NATP administrative files and must be available during the evaluation process. This is to ensure that the status of the facility is current, and that the facility is in compliance with the mandates of appropriate regulatory agencies. A copy of the agreement will be reviewed during onsite surveys.

Students **are not** to be assigned to or supervised by facility aides at any time during their clinical rotation. The first time the student performs a skill during clinicals, the NAT instructor must observe and evaluate the proficiency of the student's skills. All clinical instruction must be with NAT instructor supervision.

Students under the general supervision of their NATP instructor may be paired with a facility aide during the student's clinical rotation, but the instructor is still required to be with students.

If a new skill is performed by the student during clinical, it must be documented on the skills performance check list at the time it is observed, not at the end of the day. The skills performance checklist should be kept with the instructor in the clinical setting. The instructor can make a copy of the skills checklist for the students to have with them if necessary.

Students and NAT instructors must wear the appropriate uniform for the performance of resident care and must be in compliance with school policy. The uniform must include a name tag that designates the name of the NAT and the individual's status (i.e., student or instructor).

The scheduled clinical hours must provide experiences that meet expected outcomes outlined in the NAT curriculum guideline. It is suggested that the length of the clinical day not exceed eight (8) hours and if need lengthen the number of days to perform the required sixteen (16) hours of clinical training.

It is the responsibility of the NAT instructor to inform the facility administrator/director of nurses of the dates of clinical training and the arrival of students. The clinical agreement contract must be renewed annually and/or upon any change of facility or school administration.

Some suggestions for contracts are found below:

A. Nurse Assistant Training Program (NATP) Responsibilities:

- 1) Prior to direct patient contact in the facility, the student must receive the federally mandated 16 hours of training regarding specific topics.
- 2) Provide all clinical training and will provide immediate and direct supervision of students.
- 3) Student to instructor ratio should not exceed ten (10) to one (1).
- 4) Provide facility with a list of names of all students along with the training schedule that will be followed.
- 5) Provide all clinical training in by the approved instructor and follow the approved clinical schedule.
- 7) Training will be provided from _____ a.m./p.m. to _____ a.m./p.m.
- 8) Training will provide sixteen (16) hours of clinical training in the facility.

B. Facility Responsibilities:

- 1) Facility staff may not be used to proctor, shadow, or teach the NATP students.
- 2) Facility DON is to notify Department if sixteen (16) hours of clinical training if not performed by the NATP; the NATP instructor is not supervising the students.

C. Both parties agree to:

- 1) Provision for adequate notice of termination.
- 2) Both entities must agree to comply with all local, state, and federal laws and regulations.
- 3) Names and addresses of both parties, including signatures and dates.

TRAINING VERIFICATION FORM

After training and clinicals have been completed, the training verification form (TVF) must be signed and dated by the instructor who taught the class. This should be done as quickly as possible and be given to the RN supervisor. The RN Supervisor is to sign and date the Training Verification Forms (TVF) *after* the Instructor has filled in the training portion of the TVF and the instructor and student have signed and dated the TVF. The RN supervisor is to verify proper completion and submission of forms and documents related to the NAT/NATCEP operation.

The training verification form should be given to the student as quickly as possible after training. The student will give this form to the testing entity to verify their training has been accomplished and they are ready to test. The student may

COMPETENCY AND SKILLS EXAMINATION

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.

Onsite Surveys

An unannounced onsite survey of your training program shall be conducted by Department staff as required in **310:677-3-5. Training program review and approval**. This survey must be done before the training program's two (2) year expiration date.

The on-site visit may include, but not be limited to:

- Observation of the theory/lab and clinical instructional areas;
- Evaluation of instructional methods in the theory, lab and/or clinical areas;
- Interviews with students, instructors and Program Coordinators;
- Assessment of the Program's documentation and documentation procedures as required in **310:677-3-8. Records and examination** and needed for program review .

This will include:

1. Review of application, correspondence with the Department, and Notice of Change.
 2. Policies for hiring RN Supervisor and Instructors, job descriptions, and resumes
 3. Curriculum, Student Handbook, and training program policies
 4. Current Clinical Agreements with Facilities.
 5. Student Files
 - a) Application (if Private Site) or Copy of Application (Career Techs)
 - b) OSBI Check
 - c) Affidavit of Lawful Presence
 - d) Copy of student's signing of reading Student Policies
 - e) Affirmation of 16 hours **310:677-11-4**
 - f) Skills Performance Check list
 - g) Copy of Training Verification Form
 6. Student Test Files
- Evaluation of Performance Skills as demonstrated by students and/or instructors;
 - Review and discussion of the Program's Test Scores
 - Discussion of Program Operation and Plan of Correction/s

Plan of Corrections

The Department may request that a NAT/NATCEP develop a plan of correction to address a finding of noncompliance during the onsite review. The Department will mail a letter requesting the plan of correction/s if needed. The NAT/NATCEP will have 10 days in which to respond. If the Plan of

Correction is approved, the Department may make an unannounced onsite review to determine if the Plan of Correction has been followed through.

Closing and Approved NAT/NATCEP

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.

[Source: Added at 12 Ok Reg 3087, eff 7-27-95; Amended at 19 Ok

Department Withdrawal of Approval of NAT/NATCEP

310:677-3-4. Program requirements

(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 15 June 25, 2009 (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 found proficient by an instructor.

Notice of Change

A Notice of Change is required by an approved NAT/NATCEP as per:

310:677-3-5. Training program review and approval

- (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.

[Source: Added at 12 Ok Reg 3087, eff 7-27-95; Amended at 19

It is not required to send a Notice of Change, when a new instructor is hired to the Department. When there is a change in the Program Coordinator or RN Supervisor please send a Notice of Change to the Department. This allows the Department to be aware of changes in the program and who to contact when needed.

New NATCEP Approval

Written approval from the Department is required prior to the start date of a class offering of a

new Long Term Care Nurse Aide Training and Competency Program. A program code will be assigned by the Department once approval has been granted. A Program Sponsor may have several program codes. Examples of when a separate program code is required:

- Sponsor is establishing an additional program Theory site at a new location.
- Program sponsor offering classes to high school/secondary students during regular high school hours and also offering classes to adult students.
- Offerings of same program sponsor such as day and evening classes.

Application Process:

An individual through phone call or e-mail expresses an interest in opening an approved NATCEP.

The Health Facility Surveyor (HFS) or Director of the Nurse Aide Registry (NAR) will contact the individual and orient them on the process and rules and regulations for LTC NATCEPs.

The Applicant should read OAC 310:677 before filling out the LTC NATCEP Application.

The HFS will mail or e-mail the individual the LTC NATCEP Training Packet which includes the following:

- OAC 310:677
- LTC NATCEP Guidelines for Application Approval
- LTC NATCEP Program Application Checklist
- LTC NATCEP Application, ODH#
- Required Information for Student Handout
- Model LTC NATCEP Skill Performance Checklist
- Model LTC NATCEP Curriculum Guideline
- Class/Lab Equipment Guideline
- Model Attendance Record Sheet
- Training Verification Form
- Master Schedule
- Master Daily Schedule
- Notice of Change

The applicant may mail the application to Nurse Aide Registry, Oklahoma State Department of Health, PO Box 268816 Oklahoma City, OK 73126-8816 or e-mail the application to NAR.ok.health.gov.

Applications are date stamped when received by NAR and are processed in date order by the HFS. Starting from the date an application is received, the Department will decide whether to approve or disapprove it within thirty (30) days.

The completeness of the information received is determined and an appointment is made to perform an onsite review of the facility, lab, and equipment (on-site prior to approval if applicant has no other program/programs at location and program/programs have not had an onsite within the last two years).



Nurse Aide Registry
PO Box 268816
Oklahoma City, OK 73126-8816

If facility meets requirements, a notice of approval is mailed to the director/coordinator/or owner of the program.

- If the application is determined to be incomplete, then a request for additional information will be mailed to the applicant. The applicant has 30 days mail in the requested information.
- When the Request for Additional Information is received, NAR has 30 days to review the information. Either NAR will find the application complete, or another Request for Additional Information letter will be mailed to the applicant. This process will continue until the Application is determined to be complete.

Be advised, pursuant to the Nurse Aide Training and Competency Examination Program:

OAC 310:677-3-2(c) *The Department's approval of a program shall not be transferable or assignable.*

OAC 310; 677-3-3(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*

OAC 310; 677-3-3(d) *The entity shall file an application for each program...*