

## Facility Declaration of Participation in Approved Training Programs (Adopt a Precertification Training Program or Demonstrate That it Only Hires Certified Nurse Assistants)

Facility Name		Facility Address		
Facility County		Training Site Address (if applicable)		
Facility Program ID Number	F-			
Facility Telephone Number				

**Required for Skilled Nursing Facilities (SNF) and Intermediate Care Facilities (ICF)**

Per California Health and Safety Code (HSC), §1337.1, a skilled nursing facility or intermediate care facility shall adopt an approved training program that meets standards established by the California Department of Public Health (Department). Please indicate below how the facility meets the requirement to provide precertification training for Nurse Assistant (NA) employees. The facility must choose *only* one option: 1, 2, 3 or 4. The licensed facility must resubmit this form whenever there are changes to the information provided and at the time of In-Service and Orientation Program renewal.

**Option 1** – Our licensed facility directly conducts a Nurse Assistant Training Program (NATP) for our NA employees. All NATP training is conducted by our licensed facility at the training site address listed above, or on-line as approved by the Department.

**Option 2** – Our licensed facility provides NATP training for our Nurse Assistant employees through a written agreement with the Department approved NATP listed below.

- Attach a copy of the written agreement, which has been signed and dated by the authorized representatives of each party, California Code of Regulations, Title 22 (22 CCR), §71835(b). **(See CDPH 278SC Sample Contract template)**

Name and Address of Department Approved Contracted NATP Provider (Option 2 only)	Program ID# (ID# begins with S or F)								
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**Option 3** – Our licensed facility *only* hires Certified Nurse Assistants with a valid certification, HSC, §1337.1(b)(6).

**Option 4** – Our facility is exempt from these requirements because we fall under one of these facility types: Intermediate care facility for the developmentally disabled habilitative, intermediate care facility for the developmentally disabled-nursing, and intermediate care facility for the developmentally disabled-continuous nursing.

**By signing below, the licensed facility verifies that the information above is true and correct. All signatures are required. This form must be updated whenever there are personnel changes that require new signatures. Incomplete forms will not be processed and will require resubmission upon the Department’s request.**

Facility Administrator Name (print)		Facility Administrator (Signature)		Date
Director of Nursing (DON) Name (print)		DON (Signature)		Date
Director of Staff Development (DSD) Name (print)		DSD (Signature)		Date
Facility Administrator Email Address	DON Email Address	DSD Email Address		
<b>FOR DEPARTMENT USE ONLY</b>				
Training Program Review Unit Representative Signature				Date

## For Options 1 and 2:

### Definition of Nurse Assistant:

"Nurse assistant" means any unlicensed aide, assistant, or orderly, who performs nursing services directly at the safety, comfort, personal hygiene, or protection of patients in a skilled nursing or intermediate care facility, California Health and Safety Code (HSC), §1337(d)(1). Per Title 42, Code of Federal Regulations (42 CFR), §483.5. A Nurse Assistant is not:

- A licensed health professional
- A registered dietitian
- Paid feeding assistants as defined in 42 CFR, §488.301
- Someone who volunteers to provide such services without pay

### Skilled Nursing Facility or Intermediate Care Facility requirements for each Nurse Assistant hired:

- The NA must be enrolled in an approved nurse assistant precertification training program (NATP) within three (3) months of hire, California Health and Safety Code (HSC), §1337.5(b)(2)-(3).
- The NATP training must be completed not more than six (6) months from the date of employment, unless the employing facility applies for and receives an extension from the Training Program Review Unit (TPRU), HSC, §1337.5(b)(3).
- Skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF) employees who are not eligible to be employed as an NA may be employed in another role (e.g. activities, dietary, laundry, housekeeping), but cannot work as an NA or in an NA capacity providing direct patient care, HSC, §1337.5.
- The NATP provider must send the Certified Nurse Assistant (CNA) Initial Application (CDPH 283B) and a copy of the Request for Live Scan Service (BCIA 8016) to the Department upon enrollment of an NA in the Department approved NATP, HSC, §1338.5(a)(2)(A).
- The NATP provider must send the enrollment information to the address, email or fax number listed in the top right-hand corner of the CDPH 283B form.

**SPECIAL NOTE:** No NA who is employed by or who has received an offer of employment from a facility on the date on which the NA begins NATP training may be charged for any portion of the training, 42 CFR, §483.152(c)(1).

### A Nurse Assistant shall complete the following requirements prior to providing any direct patient care:

- A health examination, including a test for tuberculosis with a negative test result, along with a report, signed by the physician, physician's assistant, or nurse practitioner, which indicates that the employee does not have any health condition that would create a hazard to himself, fellow employees, or patients, California Code of Regulations, Title 22 (22 CCR), §71835(f).
- Sixteen (16) hours of federally mandated training, 42 CFR, §483.152(b)(1).
- An additional sixteen (16) documented hours of orientation during the first (40) hours of employment (in addition to the 16 hours of federally-mandated training referenced above). The first eight (8) hours of orientation shall be conducted prior to providing direct patient care, 22 CCR, §71833(e).

**SPECIAL NOTE:** Documentation must be available for Department review upon request, 22 CCR, §71849(d).

**The NA shall not perform any skill in which he or she has not received "classroom training" and will not perform any skill until he or she has been deemed competent by the (DSD or a Department-approved) instructor, 42 CFR, §483.152(a)(4)(i).**

## For Option 2 only:

### What to Minimally Include in the Written Agreement (See CDPH 278SC Sample Contract template):

- The contractor who provides the NATP training to the facility employees is responsible for the program in its entirety and shall:
  - Furnish all staff to teach theory and supervise the clinical training, 22 CCR, §71835(c).
  - Include a minimum of 60 hours of theory training and 100 hours of clinical training, HSC, §1337.1(b).
  - Develop the training schedule in coordination with the (SNF or ICF) nursing facility, 22 CCR, §71835(b).
  - Provide the nursing facility with a copy of the student record for each student which includes the date and time of training and the name(s) of the qualified instructor(s), 22 CCR, §71835(b).
  - Retain all records for a period of four years from the date that each NATP training class begins, 22 CCR, §71835(b).
  - Make NATP records available for Department inspection for a period of four years, 22 CCR, §71835(l).
  - Comply with all state and federal NATP training regulations, 22 CCR, §71835(a).
- The SNF or ICF contracting with an NATP provider for NA training shall compensate the NA employees for their services.
- Both parties must:
  - Sign and date the written agreement by authorized representatives of each party to validate the contract
  - Ensure that no NAs will be charged for any portion of the NATP training including any fees for textbooks or other required course materials, 42 CFR, §483.152(c)(1).
  - The training program will be conducted during the normal working hours of the NA unless the NA receives at least the normal hourly wage for any additional time spent in the training program, HSC, §1337.5(a).