OBJECTIVE OF NURSE AIDE TRAINING PROGRAMS (NATP):

To provide a basic level of both knowledge and demonstrable skills for individuals who provide nursing or nursing-related services to residents in a skilled nursing facility (SNF) or nursing facility (NF) and who are not licensed health professionals or volunteers who provide services without monetary compensation.

APPLICATION PROCESS:

1. The individual agency, through written correspondences to DHS expresses interest in becoming an approved NATP.

2. The Training Program Application Packet provided to the applicant includes the following:
   - Nurse Aide Training Program Application Checklist
   - Nurse Aide Training Program Application, F-62220
   - Nurse Aide Training Program Primary Instructor Application, F-62610
   - Nurse Aide Training Program Trainer Application, F-62687
   - Guidelines for Nurse Aide Training Program Approval
   - Recommended Class/Lab Equipment Supply List

3. The applicant returns the complete application and all supporting documentation to DHS for review.

4. The material is reviewed and the following determinations are made:
   - The completeness of the information received is determined and a notice of preliminary approval is mailed to the director/coordinator or owner of the program.
   - If the material is deemed incomplete, then additional information is requested.
   - When prerequisites are met, an on-site evaluation is scheduled during the clinical portion of a class.

5. The evaluation schedule is as follows:
   - Initial (on-site prior to approval)
   - Within 6 months of approval
   - Every two (2) years thereafter
   - As deemed necessary by DHS

DHS reserves the right to conduct unannounced evaluations of its certified NATPs. The State Operations Manual 02-92 states that the approval of an NATP may be withdrawn if the program refuses to permit unannounced state visits.
NURSE AIDE TRAINING PROGRAM REQUIREMENTS:

1. The Nurse Aide Training Program Application, F-62220 is to be completed and submitted to the Department of Health Services (DHS), Office of Caregiver Quality (OCQ).

2. All required materials outlined in the Training Program Packet must be submitted to DHS prior to the initial on-site evaluation of NATP.

3. The training of nurse aide students 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 the provision of services at a long-term care facility.
   - It is required that all potential instructors for classroom and clinical training be approved by DHS.
   - Resumes and a copy of current nursing licenses must be submitted for review. It is requested that the information contain inclusive dates of work and educational experience. It should be noted whether work experiences were full-time or part-time. If part-time, list the number of hours worked per week and the total number of weeks worked. A Nurse Aide Training Program Primary Instructor Application is provided within this packet for the use of potential instructors.
   - A licensed practical nurse (LPN) or licensed vocational nurse (LVN) under the supervision of the primary instructor may provide skills training instruction and supervision if he or she has one (1) year of experience in caring for the elderly and/or the chronically ill of any age. However he or she may not sign off on the skills checklist. The primary instructor must observe and provide the written verification.
   - Resource personnel from health-related fields with a minimum of one (1) year of current experience in caring for the elderly or the chronically ill of any age may be utilized upon approval from DHS.

4. Upon approval of an NATP, DHS must be informed of substantial changes made to the program. Substantial change means any change in the:
   - program designee
   - primary instructor
   - curriculum
   - program site

5. The coordinator or primary instructor and the nursing facility with which he or she has contracted are responsible for verifying that clinical facilities used in the training of nurse aide students are in good standing with DHS. This verification must be documented in the NATP’s 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.
6. The clinical contract must be renewed annually and/or upon any change of facility or school administration and submitted to DHS. Information pertaining to the development of the Clinical Contractual is included in this packet.

7. The specific focus of the evaluation process as it relates to the curriculum is the integration of a teaching format that emphasizes both teaching and evaluation of basic skills. These basic theory topics and skills are the minimal requirements mandated by federal regulations and are listed in the Federal Registry, September 26, 1991, Section 483.152.

8. Program policies are to be developed and submitted with the prerequisite items prior to an on-site evaluation. Additions and/or changes should be submitted to DHS, as applicable. Suggested policies are those for attendance, grading, uniforms, confidentiality, etc.

9. The area designated as the classroom/lab in a facility-based program must be an area that is not designated for resident care. The classroom and skills training facilities will provide adequate temperature controls, clean and safe conditions, adequate space to accommodate students. Adequate lighting, and all equipment needed including audiovisual equipment and any equipment needed for simulating resident care. A recommended list of supplies is included with the application packet.

10. 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 how the space is utilized.

11. Lab equipment must be in the skills lab at all times for demonstration, practice, and return student demonstration.

12. Competency with respect to all clinical lab skills is to be verified by the primary instructor prior to the beginning of the clinical rotation, and a record should be placed in the student’s file.

13. Students should be oriented to the various forms used to document resident information during classroom and lab instruction prior to clinical experiences. Documentation on the appropriate flow sheets/forms must be completed with instructor supervision during the clinical rotation.

14. Student records must be maintained on file for a minimum of three years. The records must include a record of attendance (dates and hours) for each trainee, the trainee’s name and Social Security Number, the dates and hours of attendance, quiz and test scores, course evaluations, and other relevant documentation.

15. The program must provide all students, upon successful completion, with a certificate of completion certifying the student’s successful completion of the program.

16. Wisconsin requires that a certified NATP consist of a minimum of one hundred twenty (120) hours. This is to include a minimum of thirty-two (32) hours of clinical experience in an appropriate clinical setting.

17. A program must utilize an application that informs the trainees of the policies of the program and must provide notification to trainees sponsored by Medicaid-certified nursing facilities.
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that they are not responsible for any costs associated with training, including deposits for
textbooks and/or supplies used.

18. Students may be employed after sixteen (16) hours of classroom training if the following
topics have been covered in class:
  • Communication and interpersonal skills
  • Infection control
  • Safety/emergency procedures, including the Heimlich maneuver
  • Promoting resident independence
  • Respecting resident rights

19. The program must provide the employer with verification that the program has provided the
above instruction.

20. A program that does not meet the requirements for certification after the second submission
of materials to assess the implementation of the program will not be certified and cannot
reapply to the Department for a period of one (1) year.
PRIMARY INSTRUCTOR REQUIREMENTS AT CLINICAL SITE:

1. The instructor/student ratio may not be greater than 1:8 in the clinical area.

2. Instructors must not be involved in more than one role while supervising students in the clinical area.

3. Clinical assignments are to be made by the primary instructor with the approval of the facility staff. A review of the residents’ charts to retrieve pertinent information needed by the students in providing care is to be completed also. Care plan information is to be reviewed at the beginning of each experience and should include new orders or changes in resident status.

4. Student assignments should be shared in advance of the arrival of the students. During at least one clinical experience it is recommended that students care for a minimum of two and not more than four residents during a specified clinical day. Students should be given individual assignments. Clinical assignments should provide the following:
   • Care of residents with varied levels of care needs
   • The opportunity to be evaluated on organizational skills and time management

5. The primary instructor is responsible for the supervision of the clinical performance of all LPN instructors.

CLINICAL SITE REQUIREMENTS:

1. Students may not give care to unassigned residents. Students are not to be assigned to or supervised by facility aides at any time during their clinical rotation. All clinical instruction must be with instructor supervision.

2. At all times students must maintain safe practice and infection control and respect resident rights. Students must demonstrate knowledge regarding the assigned residents’ diagnoses and identified needs.

3. Students and 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 NATP and the individual's status (i.e., student or instructor).

4. The scheduled clinical hours must provide experiences that meet expected outcomes outlined in DHS 129. It is suggested that the length of the clinical day not exceed eight (8) hours.

5. It is the responsibility of the instructor to inform the facility administrator/director of nurses of the date of the evaluation and the arrival of the DHS evaluator(s) both to perform the evaluation and to obtain clinical assignment/resident information.

6. OCQ evaluators request approximately 10 to 15 minutes during the preclinical conference to inform students of their role in the evaluation process. Observations of student performances will include, but will not be limited to, the expected outcomes of the curriculum.
CLINICAL CONTRACT SUGGESTIONS:

I. Nurse Aide Training Program (NATP)

1. The NATP will be responsible for all planned learning experiences as related to program objectives, and will provide appropriate faculty for this purpose.

2. The NATP is responsible for the initiation of the contract and the renewal of it annually.

3. The NATP shall provide the clinical facility with the schedule of the clinical rotation and the names of the students and instructor(s).

4. The selection of each student’s assigned residents is to be made by the primary instructor of the program in cooperation with the designated facility liaison.

5. The assignments are to be given to the appropriate facility designee at least 24 hours in advance of the student’s arrival.

6. The LTC facility is to be notified prior to each clinical rotation.

7. The LTC facility is to be notified prior to the arrival of the DHS evaluator(s) conducting the on-site evaluation.

8. The NATP will provide one (1) instructor for every eight (8) students.

9. The NATP will provide RN supervision for all LPN instructors assigned to supervise students in the clinical area.

10. Orientation to the LTC facility is to be the responsibility of the NATP instructor(s) and should include introductions to the appropriate clinical facility staff and input from them regarding specific rules and regulations for the students and instructor(s).

11. All student activities and care of residents is to be with approved instructor supervision.

12. Students are not to be assigned to facility staff to provide care or to receive instruction.

13. Instructors and students will wear uniform attire as designated by the NATP and will wear name tags that designate both their status as instructors or students and the name of the NATP.

14. The NATP is responsible for any and all accidents/incidents related to student activities.

15. The NATP will provide documentation of the required immunizations/tests and background checks for the instructor(s) and students.

16. The NATP will abide by all policies and procedures mandated by the facility.

17. The NATP is responsible for notifying the facility of any change in schedule and for notifying the charge nurse of the need to reassign resident care in the event of a student absence.
18. The provision of resident information to students is the responsibility of the instructor(s).

19. The NATP is responsible for the selection of resident care to comply with the experiences that the students require. The selection of the unit utilized is to be made with joint approval by the NATP and the LTC facility.

II. Long-Term Care Facility

1. The LTC facility will provide space for the instructor(s) and students to store personal effects before and after conferences.

2. The LTC facility will assign a liaison/contact person to assist the program coordinator/instructor in the coordination of the student’s clinical rotation.

3. The LTC facility is responsible for notifying the staff of the rotation of students and the arrival of the DHS evaluator(s).

4. The LTC facility will allow the DHS evaluator(s) to review the residents’ charts prior to the evaluation and to observe the students’ performance of resident care, with the residents’ approval.

5. Students are utilizing the LTC facility for a learning experience and should not be utilized or requested to render care to unassigned residents.

6. The LTC facility will specify limitations with regard to the conduct of the nurse aide students during clinical rotation (e.g., no access to resident charts).

7. The LTC facility will designate the appropriate forms/flow sheets used for documentation by students with instructor supervision.

8. The facility must maintain compliance with the mandates of regulatory agencies and the Wisconsin Department of Health Services, Office of Caregiver Quality, to qualify as a clinical training site for any state-approved NATP.

9. The LTC facility is to maintain responsibility for the overall care of residents during all clinical rotations.

9. The termination of the contractual agreement is to be initiated by either party with reasonable advanced notification in order to permit the NATP to seek a contract with another LTC facility.