OBJECTIVE OF THE NURSE AIDE TRAINING PROGRAM

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. A representative from an agency interested in becoming an approved nurse aide training program (NATP) contacts:
   
   DHS / Division of Quality Assurance  
   Office of Caregiver Quality (OCQ)  
   PO Box 2969  
   Madison WI 53701  
   608-261-8319

2. A Training Program Packet is provided to the applicant, which includes the following:
   - Nurse Aide Training Program – Guidelines for Approval (P-01814)
   - Nurse Aide Training Program – Application for Approval (F-62220 / 120-hour NATP)
   - Nurse Aide Bridge Training Program – Application for Approval (F-02219 / 45-hour Bridge NATP)
   - Nurse Aide Training Program – Application for Approval Checklist (F-02157)
   - Nurse Aide Training Program – Primary Instructor Application (F-62610)
   - Nurse Aide Training Program – Classroom/Laboratory Specifications (F-02119)
   - Nurse Aide Training Program – Basic Equipment List (F-01726)
   - Wis. Admin. Code ch. DHS 129 and Wis. Stat. § 146.40
   - Wisconsin Nurse Aide Training Program and Registry Manual, Chapter 1 and 2 (P-00118)
   - Wisconsin Caregiver Program Manual, Chapter 2 (P-00038)
   - Background Information Disclosure (BID) (F-82064)

3. The applicant returns the prerequisite items and application form to the OCQ Nurse Consultant for review.

4. The material is reviewed and the following determinations are made:
   - If the materials received are determined to be complete, a notice of preliminary approval is mailed to the director/coordinator or owner of the program.
   - If the material is deemed incomplete, additional information is requested.

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

The Division of Quality Assurance, Office of Caregiver Quality reserves the right to conduct unannounced evaluations of approved NATPs. Wis. Admin. Code § DHS 129.05(2)(d) states that the approval of an NATP may be withdrawn if the program refuses to permit unannounced state visits.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. DQA form F-62220, *Nurse Aide Training Program – Application for Approval*, or DQA form F-02219, *Nurse Aide Bridge Training Program – Application for Approval*, are to be completed and submitted to the Department of Health Services (DHS), Office of Caregiver Quality (OCQ).

2. All prerequisite materials contained in the Training Program Packet must be submitted to OCQ prior to the initial on-site evaluation of the 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 (2) years of nursing experience; at least one (1) year of which must be in the provision of services at a long-term care facility.
   - All potential instructors for classroom and clinical training must be approved by DHS.
   - Resumes and a copy of current nursing licenses for all potential instructors must be submitted for review. Information should 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. The *Nurse Aide Training Program – Primary Instructor Application* (DQA form F-62610), 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 of skills competency.
   - Resource personnel from health-related fields with a minimum of one year of current experience in caring for the elderly or the chronically ill of any age may be utilized as a program trainer upon approval from DHS.

4. Upon approval of an NATP, OCQ 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 complies 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 OCQ. Information pertaining to the development of the clinical contract 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, § 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 OCQ. 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, and adequate space to accommodate students. Adequate lighting and all required equipment, including audiovisual equipment and any equipment needed for simulating resident care, must be provided. The *Nurse Aide Training Program – Basic Equipment List* (F-01726) is included within the 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 of such must be placed in the student's file.

13. During classroom and lab instruction, students should be oriented to the various forms used to document resident information 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 (3) years. The records must include the trainee's name, social security number, dates, hours of attendance, quiz and test scores, course evaluations, and other relevant documentation.

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

16. Wisconsin requires that a certified, 120-hour NATP consist of a minimum of one hundred twenty (120) hours. This is to include eighty-eight (88) hours of classroom instruction and skills practicum and a minimum of thirty-two (32) hours of clinical experience in an appropriate clinical setting.

17. Wisconsin requires that a certified, 45-hour Bridge NATP consist of a minimum of 45 hours. This is to include a minimum of 16 hours of clinical experience in a clinical setting, approved by the department, working with residents with Alzheimer's disease or a related dementia.

18. 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 that they are not responsible for any costs associated with training, including deposits for textbooks and/or supplies used.

19. 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

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

21. 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 OCQ for a period of six (6) months.

**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. Students must review resident's charts to retrieve pertinent information needed by the students in providing care to the resident. 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 (1) clinical experience, it is recommended that students care for a minimum of two (2) and not more than four (4) 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 provide 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 practices and infection control and respect resident rights. Students must demonstrate knowledge regarding the assigned resident's diagnoses and identified needs.

3. Students and instructors must wear the appropriate uniform for the performance of resident care and must comply with school policy. The uniform must include a nametag 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 or 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 pre-clinical 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

Nurse Aide Training Program (NATP)

1. The NATP will be responsible for all planned learning experiences 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 annual renewal.

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 long-term care facility is to be the responsibility of the NATP instructor(s) and should include introductions to the appropriate clinical facility staff and input from each 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 nametags that designate both their status as instructors or students and the name of the NATP.

14. The NATP is responsible for 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.

**Long-Term Care (LTC) 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 OCQ evaluator(s).

4. The LTC facility will allow the OCQ 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 may 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 use of hand held devices).

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, Division of Quality Assurance 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.

10. 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.