

To: Health Care Providers
From: Office of Health Care Facilities
Date: April 3, 2020
Subject: Temporary Nurse Aide Certification

The Centers for Medicaid and Medicare (CMS) recently issued several waivers related to delivery of care to nursing home residents during the COVID19 pandemic. The information below is copied directly from the CMS website:

“Training and Certification of Nurse Aides. CMS is waiving the requirements at 42 CFR 483.35(d) (with the exception of 42 CFR 483.35(d)(1)(i)), which require that a SNF and NF may not employ anyone for longer than four months unless they met the training and certification requirements under § 483.35(d). CMS is waiving these requirements to assist in potential staffing shortages seen with the COVID-19 pandemic. To ensure the health and safety of nursing home residents, CMS is not waiving 42 CFR § 483.35(d)(1)(i), which requires facilities to not use any individual working as a nurse aide for more than four months, on a full-time basis, unless that individual is competent to provide nursing and nursing related services. We further note that we are not waiving § 483.35(c), which requires facilities to ensure that nurse aides are able to demonstrate competency in skills and techniques necessary to care for residents’ needs, as identified through resident assessments, and described in the plan of care.”

On Wednesday, April 1, 2020, the Board for Licensing Health Care Facilities also waived similar State regulatory requirements that will remain in effect until the June 2020 board meeting.

While the 4 month period that is allotted to nurse aides for completion of training and competency examination has been extended, CMS did not waive the responsibility to ensure competency. In an effort to assist you, a Temporary Nurse Aide Certification Program has been developed. The requirements of the program are as follows:

An 8-hour training course is offered by AHCA online at <https://educate.ahcancal.org/products/temporary-nurse-aide>

- There is no charge for the training.
- Candidates must pass an exam at the end of training.
- A certificate of completion can be printed after the exam is passed.
- The certificates should be scanned to the Nurse Aide Registry at Wanda.King@tn.gov
- The Nurse Aide Registry will maintain a spreadsheet listing all persons who have successfully completed the program and submitted a certificate to the Registry.

Please note, we will continue to offer training and testing for those who choose to pursue full status certification. Contact www.hdmaster.com for testing schedules.

If you have any questions or need additional information, please contact Wanda King at Wanda.King@tn.gov

NOTE: AT THE END OF THE WAIVER, TEMPORARY NURSE AIDES WILL HAVE TO COMPLETE TRAINING AND SUCCESSFULLY COMPLETE THE EXAMINATION FOR FULL STATUS CERTIFICATION.

Temporary Nurse Aide Skills Competency Checklist

To be used for new employees who complete AHCA/NCAL's Temporary Nurse Aide Training Program (www.TempNurseAide.com)

ADAPT AS NEEDED FOR FACILITY PROCESSES

CMS DEFINITION §483.35 "Competency" is a measurable pattern of knowledge, skills, abilities, behaviors, and other characteristics that an individual needs to perform work roles or occupational functions successfully.

Many factors must be considered when determining whether or not facility staff have the specific competencies and skill sets necessary to care for residents' needs, as identified through the facility assessment, resident-specific assessments, and described in their plan of care.

All nursing staff must also meet the specific competency requirements as part of their license and certification requirements defined under State law or regulations.

Demonstration of Competency - Competency may not be demonstrated simply by documenting that staff attended a training, listened to a lecture, or watched a video. A staff's ability to use and integrate the knowledge and skills that were the subject of the training, lecture or video must be assessed and evaluated by staff already determined to be competent in these skill areas.

Examples for evaluating competencies may include but are not limited to:

- Lecture with return demonstration for physical activities;
- A pre- and post-test for documentation issues;
- Demonstrated ability to use tools, devices, or equipment that were the subject of training and used to care for residents;
- Reviewing adverse events that occurred as an indication of gaps in competency; or
- Demonstrated ability to perform activities that is in the scope of practice an individual is licensed or certified to perform.

Preventing Infection While Providing Personal Care

| <u>Skill</u> | <u>Competency Date</u> | <u>Observed By</u> |
|--|-------------------------------|---------------------------|
| Standard Precautions | | |
| Handwashing | | |
| Using Barriers (Gloves, Gowns, Mask, etc.) | | |
| Isolation/Transmission Based Precautions | | |
| Cleaning, Disinfection, Sterilization | | |
| Personal Care Routines (bathing) | | |
| Shampooing | | |
| Oral Hygiene | | |
| Denture Care | | |
| Grooming | | |
| Shaving | | |
| Nail Care | | |

Temporary NA Name: _____

Date of Hire: _____

Personal Safety and Emergency Care

| <u>Skill</u> | <u>Competency Date</u> | <u>Observed By</u> |
|----------------------|-------------------------------|---------------------------|
| Dressing/Undressing | | |
| Bloodborne Pathogens | | |
| Body Mechanics | | |
| Choking | | |
| Injury Prevention | | |

Documentation and Core Nursing Skills

| <u>Skill</u> | <u>Competency Date</u> | <u>Observed By</u> |
|-------------------------|-------------------------------|---------------------------|
| Documentation | | |
| Bedmaking | | |
| Making an Occupied Bed | | |
| Transferring a Resident | | |

Positioning, Moving, and Restorative Care

| <u>Skill</u> | <u>Competency Date</u> | <u>Observed By</u> |
|---------------------------------------|-------------------------------|---------------------------|
| Positioning | | |
| Moving Up in Bed When Resident Unable | | |
| Moving a Resident | | |
| Stand, Pivot, Transfer | | |
| Assisting with Walking (ambulation) | | |

Nutrition and Elimination

| <u>Skill</u> | <u>Competency Date</u> | <u>Observed By</u> |
|--|-------------------------------|---------------------------|
| Assisting with Meals | | |
| Assisting with Elimination (toileting) | | |
| Assisting with Ostomy | | |

Advanced and Specialty Care Environments

| <u>Skill</u> | <u>Competency Date</u> | <u>Observed By</u> |
|-------------------------------------|-------------------------------|---------------------------|
| Oxygen Therapy | | |
| Motivate Resident/Stop when Resists | | |
| Specific Behavioral Symptoms | | |
| Specific Techniques for ADLs | | |

Temporary NA Name: _____

Date of Hire: _____

Comfort Care and End of Life

| <u>Skill</u> | <u>Competency Date</u> | <u>Observed By</u> |
|-----------------------------|-------------------------------|---------------------------|
| Pain Management | | |
| Promoting Comfort and Sleep | | |
| End of Life Care | | |

Ethics and the Law in LTC

| <u>Skill</u> | <u>Competency Date</u> | <u>Observed By</u> |
|-----------------------------------|-------------------------------|---------------------------|
| Physical Care of Body After Death | | |

Temporary NA Name: _____

Date of Hire: _____