

**State Nurse Aide Training:
Program Information And Data**

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SUMMARY

This report contains information about the State nurse aide training programs. Today more than 1.6 million elderly and disabled persons reside in nursing homes. The Federal Government and the States regulate more than 17,000 nursing homes. These nursing homes must comply with Federal and State standards to receive Medicare and Medicaid reimbursement for the care they provide to residents enrolled in the Medicare and Medicaid programs. In Fiscal Year 2000, Medicare and Medicaid paid more than \$45 billion to nursing homes.

Most of the daily care furnished to nursing home residents is rendered by the nearly 696,000 nurse aides employed by nursing homes. For many nursing home residents, the nurse aide may be the only person with whom they have regular daily contact.

Before passage of the Omnibus Budget Reconciliation Act of 1987 (OBRA 87), only a handful of States required training of nurse aides. Passage of OBRA 87 required each State to establish State-approved nurse aide training programs and to establish minimum requirements for nurse aide competency. This report provides information as to what the States have done to implement the nurse aide training requirements specified in OBRA 87.

All of the information in this report was obtained from State program officials. We visited a total of eight States to obtain information about their nurse aide training programs. The remaining 42 States and the District of Columbia were asked to complete a mail survey. Overall, 48 States and the District of Columbia provided information about their nurse aide training programs. Two States did not return our survey. We did not verify the data submitted by State nurse aide training program representatives. Additional information about State nurse aide training programs can be found in our report entitled, *Nurse Aide Training (OEI-05-01-00030)*.

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INTRODUCTION

PURPOSE

To describe the State nurse aide training programs.

BACKGROUND

Today more than 1.6 million elderly and disabled persons reside in nursing homes. The vast majority of these nursing homes comply with Federal and State standards to receive reimbursement for the care they provide to residents enrolled in the Medicare, Medicaid, and other government programs. The Federal Government and the States regulate more than 17,000 nursing homes, and in Fiscal Year 2000, Medicare and Medicaid paid more than \$45 billion to nursing homes.

Most of the daily care furnished to nursing home residents is rendered by the nearly 696,000 nurse aides employed by nursing homes. Nurse aides assist nursing home residents in bathing, dressing, eating, toileting, and other tasks. Nurse aides also provide residents with psychological, social, and spiritual support. The actual scope of work a nurse aide performs varies from State to State and from nursing home to nursing home. For many nursing home residents, the nurse aide may be the only person with whom they have regular daily contact.

Before passage of the Omnibus Budget Reconciliation Act of 1987 (OBRA 87), only a handful of States required training of nurse aides. Passage of OBRA 87 established the Nurse Aide Training and Competency Evaluation Program (NATCEP). This Federal law required each State to establish State-approved nurse aide training programs and established minimum requirements for nurse aide competency. Enactment of OBRA 87 required that all nurse aides employed in nursing homes take a State-approved nurse aide training course. Upon completion of training, all nurse aide trainees must pass a State exam within 120 days to become certified to work in a nursing home.

Federal Training Requirements

Federal regulations require that nurse aides have no less than 75 hours of training prior to receiving their certification. At least 16 hours of a training program must be supervised practical (clinical) training. Training must be performed by, or under the general

supervision of, a registered nurse who has a minimum of 2 years of nursing experience. At least 1 year of the 2 years must be long-term care nursing experience. By law, training must include:

- ▶ Basic nursing skills,
- ▶ Personal care skills,
- ▶ Mental health and social service skills,
- ▶ Caring for cognitively-impaired residents,
- ▶ Basic restorative skills, and
- ▶ Residents' rights.

Upon completion of the training, a nurse aide trainee must pass a State exam to become certified to work in a nursing home. The State exam includes a written or oral component and a skills-demonstration component. Candidates for nurse aide certification must pass both components before a State can enter their name in the State registry of nurse aides who have successfully completed their training requirements. States also use their nurse aide registry to help nursing homes and other employers ensure that potential employees meet Federal and State requirements for employment, and that no adverse actions exist that would prohibit the hiring of a certain individual.

SCOPE AND METHODOLOGY

This inspection provides information about the State Nurse Aide Training and Competency Evaluation Programs (NATCEPs).

We visited the States of Florida, Louisiana, Minnesota, New York, and Washington to gather in-depth information about their nurse aide training programs. We selected these States based on their geographic location, nursing home population, and State budgets for nursing home care. Missouri, Ohio, and Wisconsin were also visited during the early stages of this study. During our visits to all of these States, we met with NATCEP program officials to discuss their nurse aide training programs. Our visits were conducted during May, June and July of 2001.

In the remaining 42 States and the District of Columbia, we mailed a survey to the person responsible for the oversight of the State's nurse aide training programs. We asked them to provide specific information about their State nurse aide training programs. The survey contained both open and closed-ended questions dealing primarily with how each State had implemented Federal requirements for nurse aide training.

Overall, 48 States and the District of Columbia provided information about their nurse aide training programs. Two State NATCEP directors did not respond to our survey. All information in this report is based on the State responses. All information was self-reported and was not independently verified.

Our review was conducted in accordance with the *Quality Standards for Inspections* issued by the President's Council on Integrity and Efficiency.

FEATURES OF STATE NURSE AIDE TRAINING PROGRAMS

Each State is responsible for ensuring that the nurse aide training programs offered in their State meet minimum Federal requirements. Federal law also prescribes specific areas that must be included in all State-approved nurse aide training programs. We asked States to report on their nurse aide training programs. All information was self-reported and was not independently verified.

Application for State Approval

Nursing homes and other entities that wish to sponsor a nurse aide training program must obtain State approval. Nearly all of the States provide prospective sponsors of nurse aide training programs with an application and materials to guide them in developing a curriculum that will meet State approval. Ten States indicated that they charge nursing homes a fee for this service.

All States report that they review each sponsors' application and examine course materials to ensure that the sponsor's nurse aide training program meets Federal and any existing State requirements. All State respondents report that their application process is designed to ensure that the training programs will be under the supervision of instructors who meet Federal requirements. The application and review process also helps the State determine whether the training program seeking State approval contains all of the skill requirements mandated by Federal and State law.

Applications for State approval of a nurse aide training program are reviewed by the State nurse aide training and competency program director. In some States, this responsibility is shared or delegated to other staff. In some cases, another State agency or a subcontractor may be contracted to review and approve nurse aide training programs. In many States, the NATCEP director may have other duties and responsibilities besides the oversight of the nurse aide training programs. Moreover, the number of staff persons assigned to assist them may be limited.

Curricula

The OBRA 87 requires that each State ensure that the nurse aide training programs they approve meet Federal requirements pertaining to basic nursing skills, personal care skills, restorative skills, mental health, and social service skills. Besides these basic patient care

skills, State-approved training programs must also ensure that nurse aides know how to care for cognitively-impaired residents and are knowledgeable about residents' rights.

Responses to our survey reveal that about half the States have elected to establish a single statewide curriculum for nurse aide training. All of the nurse aide training programs approved by these States are required to include the State core curriculum. Seven States encourage sponsors of nurse aide training to use a State-approved core curriculum, but they do not mandate its use. The remaining States leave the development of nurse aide training curricula totally to the discretion of the sponsor. These States do not encourage the use of a core program nor do they endorse the use of any nurse aide training programs. Sponsors are free to develop their own nurse aide training programs, and the States appear to approve all programs that meet Federal and State criteria.

Determining how many uniquely different nurse aide training curricula exist is difficult. Many sponsors of training programs purchase their course curriculum and training materials from vendors, others develop their own curriculum and course materials, and others adapt material from different programs.

Nurse aide training programs not approved by the States also exist. In two States we visited, we were told that nurse aide training programs not approved by the State were being offered to persons interested in becoming a nurse aide. These non-approved programs are both facility-based (e.g., nursing home) and non-facility based. Seventeen States require that all persons taking the State nurse aide exam complete a State-approved nurse aide training program. The remaining States permit certain individuals, who have not graduated from a State-approved nurse aide training program, to take the State exam. The most common exception is made for nursing students and nurses.

Hours of Training

Federal law requires that State-approved nurse aide training programs consist of at least 75 hours of classroom and clinical instruction. Half of the States report that their nurse aide training programs exceed the Federal requirement of 75 hours. One out of every three States report that they require 100 or more hours of nurse aide instruction. State nurse aide training programs range from 75 hours, the minimum required by Federal law, up to 175 hours. Twenty-three States only require that the training programs they approve meet the Federal minimum requirement of 75 hours. At the discretion of the training sponsor, the actual amount of time a student spends in training can exceed the required minimum length.

Number of Training Hours

States reporting...	Number	%
Minimum of 75 hours	23	47
> 75 to 100	13	26.5
Greater than 100	13	26.5

Practical/Clinical Exposure

All of the States that responded to our survey report that they require clinical exposure during nurse aide training. More than half report that they require more than the minimum 16 hours of supervised practical training required by OBRA 87. One-third of the States reported that they require more than 37 hours of supervised practical training. The actual number of clinical hours required by the States ranges from 16 hours, the Federal minimum, up to 100 hours. Four of the 49 States that responded to our survey reported that they do not specify precisely how many hours of a nurse aide's training must be in supervised clinical practice. Other than prescribing the minimum number of hours of clinical experience, States have few, if any, requirements pertaining to practical training.

Federal law defines supervised practical training as experience gained “. . . 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.” Many nurse aide training programs provide practical or clinical exposure by arranging for their students to practice the skills they have learned in the classroom on nursing home residents. Other training programs use a laboratory setting designed to simulate the nursing home environment.

Clinical Hours

States reporting...	Number	%
Minimum of 16 hours	16	32.7
> 16 less than 37	6	12.2
37 or more	23	46.9
Not specified	4	8.2
At least one-half of training devoted to practical	15	33.3

Federal regulations prohibit nurse aide trainees from actual clinical experience until they have had at least 16 hours of classroom training. Other than this Federal requirement, States do not prescribe at what point in the training students should be exposed to the actual job requirements. States also do not specify how clinical training should be conducted or when students should be exposed to actual clinical practice.

Program Re-certification

Federal law (OBRA 87) requires sponsors of State-approved nurse aide training programs to notify the State when they make substantive changes to their training program. The law also requires that the States must review programs that report changes to ensure that the training program remains in compliance with Federal requirements.

All of the States in our survey reported that they periodically review and re-certify all of their approved nurse aide training programs. Most States require that training sponsors provide updated information about their nurse aide training programs at least every other year. One State reported that they review each new program within a year of approval. Ten States require annual updates. A few States said that they re-certify nurse aide training programs every 3 to 4 years or “as time permits.”

Program reviews

States reporting program reviews are conducted ...	Number	%
yearly	10	16.3
every 2 years	36	75.5
at other intervals	3	16.3
when problems/complaints arise	7	8.2

The program re-certification process requires that State-approved training programs provide updated information about their nurse aide training program. States review the updated information to ensure that sponsors have not made changes that would put the training program out of compliance with Federal or State requirements. Part of the review process is designed to help States ensure that an approved program continues to:

- ▶ have an approved supervisor that meets Federal and State requirements, and
- ▶ provide a curriculum that meets Federal and State training requirements.

Several States said that they would deviate from their established program review and re-certification schedule if they receive complaints about a program, or if students from a particular program have unusually high failure rates on State exams. In addition, all States report that they periodically conduct onsite visits to nurse aide training sites. State health department employees conduct the vast majority of these onsite visits. In four States, these onsite visits are conducted by the State Department of Education. Two States have contracted with a private firm to visit the programs in their State.

Training Sites

Based on State-reported information, we estimate that there are more than 12,500 State-approved nurse aide training programs in the United States. Approximately 60 percent of the State-approved training programs are facility-based and sponsored primarily by nursing homes. Most students who enroll in a facility-based program attend classes in a nursing home. Overall, the States have approved more than 7,500 facility-based nurse aide training programs.

The remaining 5,000 nurse aide training programs are non facility-based. These

programs are not sponsored by a nursing home and classes are usually not held in a nursing home. Non facility-based training programs are sponsored by not-for-profit and for-profit entities and can be found in local high schools, community colleges, and private schools. Some nurse aide training programs are affiliated with welfare-to-work programs. Some are supported by labor unions and others are sponsored by non-profit organizations such as the American Red Cross and the Department of Veterans Affairs.

Alaska and Louisiana report that they have more non facility-based programs than facility-based training programs. Idaho and the District of Columbia report that they have no State-approved facility-based programs. All of the nurse aide training programs in Idaho are sponsored by vocational/technical schools. The programs in the District of Columbia are conducted by privately owned companies and a local college.

Laws and regulations in three States make it difficult, if not impossible, for nursing homes to sponsor a nurse aide training program. These three States rely primarily on private schools or community-based schools and colleges to train nurse aides.

Instructors

Federal law requires that, “[t]he training of nurse aides be performed by or under the general supervision of a registered nurse. This registered nurse must have a minimum of 2 years nursing experience, at least 1 year of which must be in the provision of long-term care facility services. Instructors must have completed a course in teaching adults or have experience in teaching adults or supervising nurse aides.”¹

Federal law permits other health personnel (e.g., pharmacists, therapists) with at least one year of experience in their field to supplement the instructor. From our in-person interviews, we learned that nurse aide students may often have more than one instructor. We spoke with licensed practical nurses and other nursing home personnel (e.g., dieticians) involved in nurse aide training. We were told that equipment manufacturers, pharmacists, and other health specialists also routinely participate in nurse aide training. During one of our visits we had the opportunity to observe a class taught by a physical therapist.

Eighteen States report that they do not require that nurse aide instructors in their State complete a course in teaching adults. These States waive this requirement when the instructor can establish that they have current adult teaching experience or current valid State-issued teaching credentials in adult education. The remaining 29 States require that nurse aide instructors take an adult education course. One State requires that all nurse

¹ 42 CFR §§483.152(a)(5)(i) and 483.152(a)(5)(ii).

aide training instructors take (and show proof of successful completion) a train-the-trainer or adult education course every 2 years.

Most States review the primary or supervising instructor's credentials when an application is made for initial State approval of a nurse aide training program. States report that these credentials are reviewed each time the State renews a nurse aide training program to ensure they have not changed from the previous period. While it is clear that the primary or supervising instructor's credentials are verified to ensure that they meet Federal requirements for nurse aide instructors, we did not determine whether States require supplemental personnel to have adult education experience.

Five States report that they go beyond a paper review to ensure compliance and make some effort to evaluate instructor effectiveness or assess the quality of their State-approved nurse aide training programs. One State reported that they use student evaluations of the instructor when deciding whether they will renew a sponsor's program. Three States report that they conduct random visits to observe how classes are conducted. One State reported that they look at how well students perform on the State written and competency exams when deciding whether an instructor should be permitted to continue teaching a nurse aide training class.

Exams and Certification

In addition to successfully completing a State-approved nurse aide training course, nurse aides must successfully pass a State's written and competency examinations. Only when a nurse aide has completed training and passed the competency exam are they considered "certified nurse assistants." Federal law permits, and States use, both written and oral nurse aide exams.

All of our State respondents indicated that they offer the State nurse aide exam at multiple locations throughout their State. Students have the option of taking the exam at the site nearest to them or traveling to another county or location if they do not want to wait until the examiner visits the site nearest to them. Thirty-two States hire private subcontractors to administer their State nurse aide exams. Seventeen States use their own staff or work with other State entities to administer the State exams. In most States, the class instructor is prohibited from participating in the State examination of their students.

Exams are usually scheduled whenever there are a sufficient number of students in an area to be tested. Passing scores and the content of the State written and skill competency exams varies from State to State. Passing exam scores on the written exams range from 70 percent to 80 percent. Acceptable scores on the clinical skills portion of State exams range from 70 percent to 100 percent. Several States only report whether a student has passed or failed their State nurse aide written or clinical exam.

Most States charge students a fee to take their State nurse aide exams. Eighteen States charge a single fee for both the written and clinical exam, and 26 States charge a separate fee for each section of the exam. State nurse aide exam fees range from a low of \$10 to a high of \$200. Most States require students who fail either the written or clinical portion of their State exam to pay additional fees each time they retake the exam.

Nursing homes are required to pay the State exam fees for students who complete their facility-based training programs. Students who complete non facility-based programs and take a job as a nurse assistant may have part, or all, of their training expenses and exam fees reimbursed by the State. The OBRA 87 requires the States to “. . . provide for the reimbursement of costs incurred in completing the [nurse aide] program on a pro rata basis during the period in which the individual is employed as a nurse aide.”

Nurse Aide Registries

Federal law requires that each State establish and maintain a registry of nurse aides who have successfully passed the State’s competency exams. At a minimum, the State nurse aide registry must contain information about each individual who has successfully completed a nurse aide training and competency program, or is found by the State to be competent. The registry must contain:

- ▶ the name of the individual;
- ▶ identifying information;
- ▶ date the individual became eligible for placement in the registry; and,
- ▶ information on any finding by the State of abuse, neglect or theft.

Entries for individuals who have performed no nursing or nursing-related services for 24 consecutive months are to be removed from the registry. However, information about individuals with documented findings of abuse, neglect, or theft cannot be removed from the registry.

Most States report that they periodically verify that the nurse aides listed in their registry are still active in nursing. Most verify nursing activity by requiring nurse aides to attest or provide information (e.g., W-2 form, letter from employer, pay stub) showing that they have worked at least 8 hours in nursing care during the past 24 months. Several States require that nursing homes and other nurse aide employers periodically report information about nurse aide employment to the State. Some States rely on nursing homes to verify that the nurse aide they hire has been active in providing nursing care.

In practice, most States do not remove names from their registry. They simply place individuals in an inactive file if they do not receive information showing that a nurse aide has been active in nursing or nursing-related services in the prior 24 months. As a result, information provided by the States reveals that nurse aide registries contain information on more than 2.8 million individuals. We did not receive information from four States on the number of nurse aides in their registry. Twenty-one States that provided information about the number of nurse aides in their registry did not provide information on the number of active nurse aides in their State. Based on information provided by the remaining 30 States, we estimate that approximately 1.4 million of the nurse aides listed in State registries are active in nursing or nursing related services. The General Accounting Office's report entitled, *Nursing Workforce, Recruitment and Retention of Nurses and Nurse Aides Is a Growing Concern* (GAO-01-750T) indicates that, in 1999, more than half (695,570) of the active nurse aides worked in a nursing home. The remaining nurse aides worked in home health care and in hospitals. Data on the number of nurse aides providing services in other settings (e.g., personal care givers) is not known.

In-Service Training

Requirements for initial nurse aide training are found in Subpart D of 42 CFR §§483.150 through 483.158 dealing with nurse aide training and competency evaluation programs. Federal requirements for on-going nurse aide training, commonly referred to as in-service, are found in Subpart B of 42 CFR §483.75 --Requirements for Long Term Care Facilities. Federal law requires that each nurse aide have no less than 12 hours of in-service training per year.²

The Federal regulations pertaining to in-service require that all nursing homes complete a performance review of every nurse aide at least once every 12 months. Nursing homes must also provide regular in-service training designed to address problems documented in nurse aide performance reviews. In-service training should address specific nurse aide skill deficiencies or issues related to specific resident care needs.

While Federal regulations require 12 hours of in-service training annually, 4 States require more than 12 hours of in-service training. Sixteen State NATCEP respondents reported that their State required that specific topics be covered during in-service training. Topics mentioned as being required include fire prevention and response, emergency procedures and preparedness, resident's rights, infection control and prevention, proper use of restraints, confidentiality of resident information and care of the cognitively-impaired. Training on these topics is required as a Medicare/Medicaid Condition of Participation for nursing homes.

² 42 CFR §483.75(e)

The remaining 32 States did not report having specific topics for in-service training.³ Seven State respondents specifically mentioned that in-service topics should be based on nurse aide weaknesses identified by the nursing home. One of these States reported that in-service training, “. . . should be based on the needs of the nurse aide, but most nursing homes do it based on the needs of their resident population.”

³ One State did not respond to our in-service questions. Two States did not return our survey.

STATE NURSE AIDE TRAINING PROGRAMS

Table Comparisons of Key Elements of State Training Programs

STATE	RESPONSIBLE DEPARTMENT	MINIMUM TRAINING HOURS REQUIRED	MINIMUM CLINICAL HOURS	MORE THAN 1 APPROVED CURRICULUM	FACILITY BASED APPLICATION FEE	TRAINING PROGRAM REVIEW	FACILITY BASED SITES	NON FACILITY SITES	CURRICULA CONTENT
AK	COMMERCE & ECONOMIC DEV	140	80	YES *	YES	2 YEAR	20	28	A,B,C,D,E,F
AL	DOH	75	16	YES *	NO	2 YEAR	142	98	A,B,C,D,E,F
AR	DOH	75	16	NO	NO	2 YEAR	56	78	A,B,C,D,E,F
AZ	BD OF NURSING	120	16	YES / ~160	NO	2 YEAR	70	90	A,B,C,D,E,F
CA	DOH	150	100	YES **	YES	2 YEAR	300	486	A,B,D,F
CO	BD OF NURSING	75	16	YES *	NO	2 YEAR	102	59	A,B,C,D,E,F
CT	DOH	100	50	YES **	NO	2 YEAR	92	74	A,B,C,D,E,F
DC	CONTRACT University of DC	120	not specified	NO	NO	YEARLY	0	5	A,B,C,D,E,F
DE	DOH	75	37.5	NO	NO	2 YEAR	17	11	A,B,C,D,E,F
FL	DOEduc	120	40	YES**	YES	YEARLY	see note 1	586	A,B,C,D,E,F

KEY

- * Can be individualized within OBRA requirements
- ** Has a core set of requirements that must be included in each curriculum.
- *** State has an approved model used by most programs

CURRICULA CONTENT

- A = Basic nursing skills
- B = Personal care skills
- C = Mental health and social service skills
- D = Caring for cognitively impaired residents

STATE	TRAIN THE TRAINER REQUIRED	INSTRUCTOR RECRUITMENT PROBLEMS	STUDENTS TAKING EXAM 01/01/01-03/31/01/ NUMBER WHO PASSED	EXAM FEES	COMPENSATION FOR NON-FACILITY BASED TRAINING	IN-SERVICE MINIMUM HOURS	AIDES ON STATE REGISTRY	NUMBER OF ACTIVE NURSE AIDES
AK	YES	NO	90 / 69	40	NO	24	7381	2469
AL	YES	NO	1872 / 1425	80	YES	12	68329	DK
AR	YES	DK	DK / DK	70	UNCERTAIN	12	19414	19000
AZ	NO	YES	902 / DK	90	DK	12	25000	25000
CA	NO	YES	DK / DK	85	YES	24	105194	DK
CO	YES	NO	DK / 530	105	YES	12	19796	DK
CT	NO	NO	1000 / 909	92	NO	12	61732	31486
DC	NO	NO	DK / DK	63	DK	12	DK	DK
DE	YES	YES	171 / 116	85	NO	12	11053	5872
FL	NO	YES	NR	NR	YES	18	270000	DK

KEY

DK indicates that the respondent did not know.

STATE	RESPONSIBLE DEPARTMENT	MINIMUM TRAINING HOURS REQUIRED	MINIMUM CLINICAL HOURS	MORE THAN 1 APPROVED CURRICULUM	FACILITY BASED APPLICATION FEE	TRAINING PROGRAM REVIEW	FACILITY BASED SITES	NON FACILITY SITES	CURRICULA CONTENT
GA	GA Medical Foundation	85	16	NO	NO	YEARLY	93	251	A,B,C,D,E,F
HI									
IA	INSPECTIONS & APPEALS	75	30	YES / 4	YES	AS TIME PERMITS	36	30	A,B,C,D,E,F
ID	BD OF NURSING	120	40	NO	NO	YEARLY	0	45	A,B,C,D,F
IL	DOH	120	40	NO	NO	2 YEAR	78	161	A,B,C,D,E,F
IN	DOH	105	75	NO	NO	YEARLY	216	67	A,B,C,D,E,F
KS	DOH	90	45	NO	NO	2 YEAR	129	43	A,B,C,D,E,F
KY	DOH	75	16	NO	NO	2 YEAR	152	105	A,B,C,D,E,F
LA	DOH	80	40	YES *	NO	YEARLY	86	118	A,B,C,D,E,F
MA									

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- C = Mental health and social service skills
- D = Caring for cognitively-impaired residents
- E = Basic restorative skills
- F = Residents' rights

STATE	TRAIN THE TRAINER REQUIRED	INSTRUCTOR RECRUITMENT PROBLEMS	STUDENTS TAKING EXAM 01/01/01-03/31/01/ NUMBER WHO PASSED	EXAM FEES	COMPENSATION FOR NON-FACILITY BASED TRAINING	IN-SERVICE MINIMUM HOURS	AIDES ON STATE REGISTRY	NUMBER OF ACTIVE NURSE AIDES
GA	YES	NO	DK / DK	DK	YES	12	DK	DK
HI								
IA	NO	NO	552 / 476	60	YES	12	30605	DK
ID	YES	NO	DK / DK	37	YES	12	29868	11263
IL	YES	NO	DK / DK	50	YES	12	DK	DK
IN	YES	NO	5000 / DK	60	YES	12	104297	DK
KS	NO	YES	945 / 891	10	NO	12	29850	29850
KY	YES	NO	DK/ DK	75	YES	12	73157	28281
LA	YES	NO	DK / 1300	110	NO	12	113827	36500
MA								

KEY

DK indicates that the respondent did not know.

NR indicates that the respondent did not respond to the question.

STATE	RESPONSIBLE DEPARTMENT	MINIMUM TRAINING HOURS REQUIRED	MINIMUM CLINICAL HOURS	MORE THAN 1 APPROVED CURRICULUM	FACILITY BASED APPLICATION FEE	TRAINING PROGRAM REVIEW	FACILITY BASED SITES	NON FACILITY SITES	CURRICULA CONTENT
MD	BD OF NURSING	100	40	YES / 4	NO	2 YEAR	894	107	A,B,C,D,E,F
ME	DOEduc	150	50	NO	NO	2 YEAR	91	33	A,B,C,D,E,F
MI	DOH	75	16	YES **	NO	2 YEAR	165	135	A,B,C,D,E,F
MN	DOH	75	37.5	YES / 2	NO	2 YEAR	100	46	A,B,C,D,E,F
MO	AGING	175	100	NO	NO	2 YEAR	397	95	A,B,C,D,E,F
MS	DOH	75	16	NO	NO	2 YEAR	64	89	A,B,C,D,E,F
MT	DOH	75	25-30	NO	NO	2 YEAR	59	16	A,B,C,D,E,F
NC	DOH	75	16	YES ***	NO	PRIORITY BASIS	103	547	A,B,C,D,E,F
ND	DOH	75	16	NO	NO	2 YEAR	44	14	A,B,C,D,E,F
NE	DOH	76	not specified	YES ***	NO	2 YEAR	79	18	A,B,C,D,E,F

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STATE	TRAINING PROGRAM REVIEW	INSTRUCTOR RECRUITMENT PROBLEMS	STUDENTS TAKING EXAM / NUMBER WHO PASSED 1 ST QUARTER '01	EXAM FEES	COMPENSATION FOR NON-FACILITY BASED TRAINING	IN-SERVICE MINIMUM HOURS	AIDES ON STATE REGISTRY	NUMBER OF ACTIVE NURSE AIDES
MD	YES	YES	NR / 419	86	DK	12	15164	15164
ME	YES	NO	300 / DK	20	YES	12	35789	12674
MI	YES	YES	2314 / 1805	176.50	YES	12	36552	DK
MN	YES	YES	2176 / 1693	110-150	YES	12	117605	45253
MO	YES	NO	1470 / 1393	25-200	YES	12	99035	58211
MS	YES	NO	DK / DK	88	NO	12	13204	DK
MT	NO	NO	483 / 458	96	YES	12	8801	8801
NC	NO	YES	DK / 3466	VARIABLES	YES	12	213445	87906
ND	NO	NO	DK / 342	110	YES	12	22366	9518
NE	NO	NO	DK / DK	DK	YES	12	50149	DK

KEY

DK indicates that the respondent did not know.

NR indicates that the respondent did not respond to the question.

STATE	RESPONSIBLE DEPARTMENT	MINIMUM TRAINING HOURS REQUIRED	MINIMUM CLINICAL HOURS	MORE THAN 1 APPROVED CURRICULUM	FACILITY BASED APPLICATION FEE	TRAINING PROGRAM REVIEW	FACILITY BASED SITES	NON FACILITY SITES	CURRICULA CONTENT
NH	BD OF NURSING	100	60	YES / 53	NO	YEARLY	39	14	A,B,C,D,E,F
NJ	DOH	90	40	NO	YES	2 YEAR	383	30	A,B,C,D,E,F
NM	DOH	75	no answer	NO	NO	2 YEAR	83	32	A,B,C,D,E,F
NV	BD OF NURSING	75	not specified	NO	YES	2 YEAR	14	7	A,B,C,D,E,F
NY	DOH	100	30	NO	NO	2 YEAR	280	300	A,B,C,D,E,F
OH	DOH	75	16	NO	YES	YEARLY	305	220	A,B,C,D,E,F
OK	CONTRACTED	75	16	YES / 10	YES	2 YEAR	346	70	A,B,C,D,E,F
OR	BD OF NURSING	150	75	NO	YES	2 YEAR	40	36	A,B,C,D,E,F
PA	DOEduc	75	37.5	YES *	NO	2 YEAR	512	356	A,B,C,D,E,F
RI	DOH	100	20	YES **	YES	2 YEAR	68	13	A,B,C,D,E,F

KEY

- * Can be individualized within OBRA requirements
- ** Has a core set of requirements that must be included in each curriculum
- *** State has an approved model used by most programs

CURRICULA CONTENT

- A = Basic nursing skills
- B = Personal care skills
- C = Mental health and social service skills
- D = Caring for cognitively-impaired residents
- E = Basic restorative skills
- F = Residents' rights

STATE	TRAIN THE TRAINER REQUIRED	INSTRUCTOR RECRUITMENT PROBLEMS	STUDENTS TAKING EXAM 01/01/01-03/31/01/ NUMBER WHO PASSED	EXAM FEES	COMPENSATION FOR NON-FACILITY BASED TRAINING	IN-SERVICE MINIMUM HOURS	AIDES ON STATE REGISTRY	NUMBER OF ACTIVE NURSE AIDES
NH	YES	NO	200 / 190	75-125	YES	12	10000+/-	10000
NJ	YES	NO	1100 / 575	80	YES	24/2 YEARS	30000+/-	DK
NM	YES	NO	683 / NR	100	NO	12	20222	20222
NV	YES	YES	DK / DK	90	YES	24/2 YEARS	14413	4632
NY	YES	NO	DK / DK	115	YES	12	249369	99726
OH	YES	NO	DK / DK	102	YES	12	164691	71443
OK	NO	NO	DK / 2100	DK	YES	24	45000	DK
OR	YES	YES	977 / 634	96	YES	12	54676	15492
PA	YES	NO	2870 / 2190	93	YES	12	152351	99848
RI	NO	NO	323 / 279	45	YES	12	28400	14000+/-

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STATE	RESPONSIBLE DEPARTMENT	MINIMUM TRAINING HOURS REQUIRED	MINIMUM CLINICAL HOURS	MORE THAN 1 APPROVED CURRICULUM	FACILITY BASED APPLICATION FEE	TRAINING PROGRAM REVIEW	FACILITY BASED SITES	NON FACILITY SITES	CURRICULA CONTENT
SC	DOH	80	40	NO	NO	2 YEAR	18	55	A,B,C,D,E,F
SD	DOH	75	16	YES / 2	NO	2 YEAR	100	3	A,B,C,D,E,F
TN	DOH	75	35	YES ***	NO	2 YEAR	184	85	A,B,C,D,E,F
TX	DOH	75	24	NO	NO	2 YEAR	540	323	A,B,C,D,E,F
UT	STATE AGENCY	80	16	NO	YES	2 YEAR	37	43	A,B,C,D,E,F
VA	BD OF NURSING	120	40	YES / 242	NO	YEARLY	91	151	A,B,C,D,E,F
VT	BD OF NURSING	75	16	YES **	NO	2 YEAR	32	13	A,B,C,D,E,F
WA	DOH	85	50	NO	NO	3-4 YEARS	110	110	A,B,C,D,E,F
WI	DOH	75	16	YES / 60	NO	2 YEAR	84	54	A,B,C,D,E,F
WV	DOH	120	55	NO	NO	2 YEAR	74	67	A,B,C,D,E,F
WY	BD OF NURSING	75	48	YES / 4	NO	2 YEAR	41	14	A,B,C,D,E,F

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CURRICULA CONTENT

- A = Basic nursing skills
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STATE	TRAIN THE TRAINER REQUIRED	INSTRUCTOR RECRUITMENT PROBLEMS	STUDENTS TAKING EXAM 01/01/01-03/31/01/ NUMBER WHO PASSED	EXAM FEES	COMPENSATION FOR NON-FACILITY BASED TRAINING	IN-SERVICE MINIMUM HOURS	AIDES ON STATE REGISTRY	NUMBER OF ACTIVE NURSE AIDES
SC	NO	YES	966 / 604	86	NO	12	18334	DK
SD	NO	NO	DK / 145	145	YES	12	19929	DK
TN	NO	NO	1933 / 1305	75	YES	12	30269	DK
TX	YES	YES	5427 / 4056	69.75	YES	12	91873	DK
UT	YES	NO	2156 / 1590	60	YES	12	37000	1200
VA	NO	NO	NR / NR	80	NO	12	32742	DK
VT	NO	NO	142 / 142	105	DK	12	11649	3996
WA	YES	YES	NR / 1100	85	YES	12	77348	36323
WI	YES	YES	3046 / 3046	60-180	YES	12	145161	44383
WV	YES	NO	410 / 281	100	YES	12	24272	13807
WY	YES	YES	269/209	35	YES	12	4191	DK

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