

July 17, 2013

DAL: *DHCBS 13-14*
Subject: *Guide to Operation of a
Home Health Aide Training Program -
Revision dated July 1, 2013*

Dear Administrator:

The purpose of this letter is to provide the revised Guide to Operation of a Home Health Aide Training Program dated July 1, 2013. This revision replaces the February 1, 2012 version, and includes all the changes to the Guide provided through the following Dear Administrator Letters (DAL):

- DAL HCBS 13-03; dated February 19, 2013
- DAL HCBS 13-10; dated June 24, 2013
- DAL HCBS 13-12; dated June 24, 2013

The information below identifies the sections that have changed. The specific text changes are identified in **bold print** in the copy of the Guide that is included with this DAL.

Page 4
Introduction

- Deleted information regarding the implementation requirements of the February 1, 2012 Guide.
- Added language regarding the replacement of the February 1, 2012 Guide.

Page 4 & 5
Training Requirements

- Added language regarding Supervised Practical Training (SPT) for Personal Care Aides (PCAs).

Page 7
Personal Care Aide Upgrading

- Added language clarifying the program requirements for PCA upgrading.

Page 13
Training in a Foreign Language

- Deleted the requirement on textbooks written in foreign languages.
- Added new language regarding text books, test bank of questions, translation of publisher materials, and certified translations.
- Added new language regarding the agency's responsibility to ensure patient safety.

For questions or clarification on this directive, contact the New York State Department of Health, Division of Home and Community Based Services at hhatp@health.state.ny.us.

Sincerely,



Rebecca Fuller Gray, Director
Division of Home & Community Based Services

Attachment

GUIDE TO OPERATION OF A HOME HEALTH AIDE TRAINING PROGRAM



**New York State Department of Health
Division of Home and Community Based Services**

| July 1, 2013

ACKNOWLEDGEMENTS

We wish to express our gratitude and appreciation to all the people who participated in the work group conference calls and helped in the revisions of the Guide to Operation of a Home Health Aide Training Program.

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Guide to Operation of a Home Health Aide Training Program

INTRODUCTION

The purpose of this Guide is to clarify for certified home health agencies (CHHAs), long term home health care programs (LTHHCs), licensed home care services agencies (LHCSAs), and hospices, hereafter referred to as home care agencies, the New York State Home Health Aide Training Program (HHATP) requirements, and the process and procedures for Department of Health (NYSDOH) initial approval and re-approval of HHATPs. These requirements supersede the requirements set forth in the New York State Department of Health's Guide to Home Health Aide Training and Competency Evaluation (1992) and (2006) and Guide to Operation of a Home Health Aide Training Program (February 1, 2012).

The training and evaluation requirements and approval process set forth in this guide are consistent with Part 484 of Title 42 of the Code of Federal Regulations (42 CFR) and Section 700.2 of Title 10 of the New York Code, Rules and Regulations (10 NYCRR).

In order to provide home health aide services in New York State, a person must successfully complete training and competency evaluation program or competency evaluation program only conducted by an approved HHATP and be issued a certificate of completion.

Any questions regarding home health aide training and program approval requirements should be directed to the appropriate NYSDOH regional office Home Care Program Manager. (Attachment 1)

TRAINING REQUIREMENTS

A HHATP must include classroom and supervised practical training. The aide trainee must receive a minimum of 75 hours of training including a minimum of 59 hours classroom and 16 hours of supervised practical training. Required testing and competency evaluation are not included in the 75 hours.

Supervised practical training means training in a skills laboratory, patient's home or other health care setting in which the trainee demonstrates knowledge while performing tasks on an individual under the direct supervision of an approved Nurse Instructor. (Please refer to requirements for Nurse Instructor) At a minimum, fifty percent (50%) **or 8 hours** of each aide's supervised practical training must be provided in a patient care setting. The setting(s) used for practical training and the number of training hours provided must be based on each trainee's learning needs. Supervised practical training may take place in any setting where patient care can occur except in nursing homes (skilled nursing facilities). **Services provided by a trainee during supervised practical training are not reimbursable by Medicaid.**

It is permissible for the entire 16 hours of SPT to occur in the skills laboratory ONLY for trainees who have been employed as certified Personal Care Aides (PCAs) and have experience providing personal care services in patients' home, and enrolled in the Personal Care Aide Upgrading program. The trainee must have been employed as a certified Personal Care Aide and have direct experience providing services to home health patients in

their homes. Additionally, none of the experience providing care to patients as a PCA can be used to satisfy the SPT requirement for the home health aide training program.

Federal regulations found in 42 CFR Part 484.36 specify that a mannequin cannot be used for SPT purposes. A volunteer or “pseudo-patient” must be used during the SPT in a laboratory setting. The HHATP must have a record that distinguishes between the skills taught at a patient’s bedside, with supervision, and those taught in a laboratory using a volunteer or “pseudo-patient

The maximum number of trainees to the approved Nurse Instructor ratio is 20:1 in the classroom setting and 10:1 for supervised practical training in the skills laboratory and patient care setting. The number of trainees must be consistent with the available space in the classroom and appropriate to the supervised practical training location.

(See space requirements found on page 11)

STANDARDIZED CURRICULAR CONTENT

Each HHATP must identify and clearly state its goals and objectives and must include measurable performance criteria specific to both the curricular subject material and clinical content required by the Department. We recommend that the curriculum be taught at a sixth grade reading level.

In order to assure that all HHATPs are teaching comparable content, HHATPs are required to base their training, including lesson plans, on the content of the Home Care Curriculum (HCC) and Health Related Tasks Curriculum (HRTC) available on the DOH website and Health Commerce System (HCS).

The training program's teaching staff may exercise discretion in determining the amount of time required to adequately teach each of the subject areas, however, the minimum training time required must be met for each subject area and the training hours must total a minimum of 75 hours.

Other resources may be used at the discretion of the approved Nurse Instructor supervising the approved HHATP.

EVALUATION OF THE TRAINEE

The HHATP is also responsible for ensuring that each home health aide trainee is competent in each skill and procedure taught in the training program. Competency evaluation may be integrated throughout the training program or may be conducted subsequent to classroom and supervised practical training. Competency must be evaluated by an approved Nurse Instructor.

The following methods must be utilized in the evaluation of competency:

- written and/or oral examinations that demonstrate the trainee’s knowledge of the information presented in the classroom training; and
- observation and demonstration by the trainee of his/her competency in performing the required skills in the laboratory or patient care setting.

All training programs are required to use a published text consistent with the content of the Department's HCC and HRTC curriculum. To evaluate each home health aide trainee's competence in performing the minimally required number of home health skills, each HHATP must utilize the procedure checklists found in the appendices of HCC and HRTC curriculum and written tests obtained from publishers who publish text books for the purpose of training home health aides. Test questions must be obtained from a "bank" of test questions. Questions must comprehensively test the student in all areas of the curriculum and questions must be rotated. If a student is retaking a test after an unsuccessful attempt, this test must be a different version from the previous test taken. A minimum score of 80% is required to ensure mastery of subject material.

Documentation of Competency:

For each home health aide who has completed classroom and supervised practical training, all competencies must be documented on a Trainee Evaluation Form(s) (Appendix 5, 5a). The trainee evaluation form must include documentation of the competencies which were demonstrated proficiently, name, license number and initials of the approved Nurse Instructor who has evaluated the trainee's performance of each task and the date completed.

Classroom and supervised practical training and competency evaluation must be completed within 60 calendar days of each trainee's entry into the training program.

COMPETENCY EVALUATION PROGRAM

In lieu of the standardized training and competency evaluation, the HHATP must make available to eligible individuals a competency evaluation program. The competency evaluation program must be derived from a comprehensive written test and procedure demonstration checklists derived from the program's full training program. The written and procedure demonstration portions of the competency evaluation program must contain sufficient content to assure that the aide is competent in the information and required skills set forth in the HCC and HRTC curricula.

Individuals eligible to complete the competency evaluation program only, in lieu of the standardized training, include:

- A nursing assistant with one year of full time experience in a general hospital within the past five years;
- An individual with documented home health aide or nurse aide training and competency evaluation from an out-of-state training program;
- A home health aide with documented home health aide training and competency evaluation who has not been employed as a home health aide for 24 consecutive months;
- A nursing student who has documented evidence of successful completion of course work requiring mastery of home health aide tasks within the past 24 months.

Documentation would include a transcript with passing grade(s) and course description(s) or skills checklist signed by the nursing school instructor; and

- Veterans who were trained in the United States Military as medical technicians or medics.

If a prospective home health aide demonstrates competency in some, but not all of the content and skills evaluated, the HHATP must provide additional training, as appropriate, and reevaluate the aide's competency only in those areas requiring remediation.

The trainee will be issued a Certificate of Completion upon successful completion of the competency evaluation program. This certificate will identify the training methodology as competency evaluation.

NOTE: A registered professional nurse or a licensed practical nurse currently licensed and registered in the State of New York may be employed as a home health aide and will be considered exempt from training and competency evaluation requirements. The possession of a current valid registration as a nurse from the New York State Department of Education (NYSED), Office of the Professions precludes the need for a home health aide certificate.

PERSONAL CARE AIDE UPGRADING

Personal care aides (Level II) are permitted to perform fewer health-related tasks than home health aides. Personal care aides, who have been trained in approved personal care activities, are issued a certificate from a NYSDOH or NYSED approved training program, which must offer a minimum of 40 hours of training.

To upgrade a personal care aide to a home health aide, HHATPs must provide the 35 hours of training outlined in the HRTC. This includes 19 hours of classroom and 16 hours of supervised practical training as previously described under Training Requirements. **The Personal Care Aide Upgrading is intended for individuals who have been employed as personal care aides and have direct experience providing personal care services to home health patients in their homes. A trainee may not move directly from a Personal Care Aide training program to a Personal Care Aide Upgrading program for purposes of completing the requirements to become a home health aide.**

The HRTC appendix indicates the 18 required performance standards, which must be successfully demonstrated to and assessed by an approved Nurse Instructor. A personal care aide with a valid personal care aide certificate is not required to repeat training in the content and skills learned in the basic personal care aide training program. However, the HHATP must assure that the personal care aide is competent in such skills prior to providing additional training and issuing a home health aide certificate. Documentation of the successful completion of the 35 hours of training and proof of competency in the content and skills required by the personal care aide training program must be kept in the individual's file.

CERTIFIED NURSE AIDE TRANSITIONING

Certified nurse aides (CNAs) employed in residential health care facilities (RHCF, commonly known as nursing homes) provide personal care and health-related services, which are comparable to the activities and tasks performed by home health aides. A CNA who is employed in a RHCF is required to be certified in accordance with the provisions of Section 415.26 of Title 10 of NYCRR. In order to obtain nurse aide certification and be listed in the New York State RHCF Nurse Aide Registry, an individual must successfully complete a State-approved RHCF nurse aide training program, which is a minimum of 100 hours in duration, and pass the State-authorized competency examination.

HHATPs must have the capability to augment a nurse aide's training with classroom and supervised practical training in those skills not included in the nurse aide training program. Such skills include but are not limited to: assistance with medications; handling the patient's money; maintaining a clean, safe home environment; safety, accident prevention and responses to emergencies in the home; taking of blood pressure; and observing, recording and reporting in the home care setting. A CNA who is registered in the New York State Nurse Aide Registry is not required to repeat training in the content and skills learned in a previous training program. However, the HHATP must assure that the CNA is competent in such skills prior to providing additional training and issuing a home health aide certificate.

DOCUMENTATION OF SUCCESSFUL COMPLETION OF THE TRAINING PROGRAM

Home health aide training program certificates are issued by the training program through the Home Care Registry (HCR). HHATPs must follow the directives and advisories promulgated by the HCR in regards to documentation of completion of training and the issuance of certificates. The original certificate must be issued to the individual who has successfully completed the program within the timeframes required by the HCR.

The home health aide must also be provided with a copy of the completed Home Health Aide Trainee Evaluation Forms (Appendix 5 and 5a). The training program must maintain copies of each aide's training certificate and trainee evaluation forms for at least six years.

An individual who successfully completed an approved HHATP will not be considered qualified to provide home health aide services if that individual has not been employed as a home health aide in an Article 36 or 40 approved agency within any consecutive 24 month period. The home health aide who wishes to be re-employed after a two-year lapse in employment as a home health aide will be eligible to take the competency evaluation program in lieu of the standardized training program. After successful completion of the competency evaluation program, a new certificate will be issued to the home health aide by the training program conducting the competency evaluation program.

HOME HEALTH AIDE TRAINING PROGRAM APPROVAL REQUIREMENTS

Home Health Aide Training Programs can be approved by either NYSDOH or NYSED. Training programs cannot be dually approved by the NYSDOH and NYSED. A HHATP sponsored by an

educational facility which is regulated by the NYSED must meet the training and competency evaluation requirements established by the NYSED. Such requirements are consistent with the standards set forth in this Guide; however, program length may differ.

An educational facility wishing to conduct home health aide training may access information at <http://www.highered.nysed.gov/bpss/steps.htm> and must submit its proposed home health aide training program plan for approval to NYSED as follows:

For programs originating in for-profit schools that do not award academic credit:

Bureau of Proprietary School Supervision
Room 1613 OCP
One Commerce Plaza, 16th Floor
99 Washington Avenue
Albany, NY 12234
Phone: 518-474-3969
<http://www.access.nysed.gov/bpss/schools/steps.htm>

For programs in BOCES and high schools:

Career and Technical Education
Education Building, Room 315
89 Washington Avenue
Albany, NY 12234
Phone: 518-486-1547

For programs in colleges, universities and Educational Opportunity Centers:

Office of the Professions
Professional Education Program Review
Education Building, 2nd Floor West Wing
89 Washington Avenue
Albany, NY 12234
Phone: 518-486-2967

Only a home care agency or hospice licensed under Article 36 or 40 of the Public Health Law may be approved to establish a home health aide training program through the NYSDOH and must meet the training and competency evaluation requirements as stipulated in this Guide. Applicants must submit its proposed program plan to the appropriate NYSDOH Home Care Program Manager (Attachment 1) for approval.

HHATPs approved by the NYSDOH are allowed to charge a trainee fee, up to a maximum of \$100.00 (one hundred dollars) to recoup the cost of those items trainees are required to have (e.g. books, supplies, equipment) and which the individual trainee retains upon completion or separation from the program. The program must be able to verify an associated cost if a trainee fee is charged. Any program intending to charge over \$100.00 in fees or tuition must apply to the NYSED for approval to operate and should not seek NYSDOH approval.

HOME HEALTH AIDE TRAINING PROGRAM REQUIREMENTS:

Faculty and Credentials:

These requirements are derived from federal regulations found at 42 CFR 484.36(a)(2)(ii).

Nurse Instructor:

The HHATP must be provided by or under the direction of a registered professional nurse who:

- has two years of nursing experience; and
- at least one year of which must be in the provision of home health care services in an Article 36 or Article 40 approved agency or its out of state equivalent; and
- cannot be on the Office of Medicaid Inspector General's (OMIG) list of Restricted, Terminated or Excluded Individuals or Entities or the U.S. Department of Health and Human Services Office of Inspector General's list of Excluded Individuals/Entities.

All Nurse Instructors must be approved by the Department prior to inclusion in the HCR instructor database. The Nurse Instructor Application form(s) (Appendix 1) must be submitted to the NYSDOH regional office responsible for review and approval at least 30 days prior to the instructor teaching any classes. Nurse Instructor application(s) will be approved and entered into the HCR within 15 days of receipt of application. The regional office home care program manager will communicate in writing any Nurse Instructor application(s) that are disapproved.

The training program must notify the regional office of any change in the status of approved Nurse Instructors such as resignations or extended leave within 10 business days of change. Failure to notify the regional office of a change in status of an approved Nurse Instructor or the addition of new Nurse Instructors may result in immediate disapproval of the program. It is not necessary to notify the regional office of substitutions for the instructor as long as the substitute is an approved Nurse Instructor for that program in the registry.

Approved Nurse Instructor(s) responsibilities include:

1. Coordinating the didactic portion of the program
2. Conducting the supervised practical training
3. Performing all competency evaluations

Coordinating Nurse Instructor:

If there are multiple approved Nurse Instructors, the program must designate at least one approved Nurse Instructor to be responsible for the coordination of training activities and oversight to ensure that training and supervision of practical training is consistent. This designated Nurse Instructor would be listed on the program application as the Coordinating Nurse Instructor.

Adjunct Faculty:

The use of other individuals such as a therapist or a dietician is encouraged as long as such individuals provide instruction under the supervision of the approved Coordinating Nurse Instructor.

A LPN can be an adjunct faculty and provide some of the instruction under the direct supervision of an approved Nurse Instructor. The approved Nurse Instructor must be physically present during the entire time of the instruction provided by an LPN.

Confidentiality of Tests and Examinations:

The program is required to have procedures for maintaining the confidentiality of all HHATP tests and examinations. All testing materials must be kept strictly confidential.

Screening Training Applicants:

Training programs are expected to develop procedures for screening for the appropriateness of training applicants. Applicants should be selected on the basis of such factors as sympathetic attitude toward the care of the sick; ability to read, write, and carry out directions; maturity and ability to deal effectively with the demands of the job. A minimum age of 18 is recommended but not required. A list of resources regarding ability to read is available at: <http://www.acces.nysed.gov/bpss/schools/pg60201.htm>

Location, Equipment, and Space to be utilized for the Training:

At a minimum, the training site should include a classroom area for didactic presentation of curricular content and a laboratory area with equipment and supplies that enable trainers and trainees to adequately demonstrate clinical tasks. The training site must have the following: tables/desks and chairs, running water, kitchen facilities or a mock kitchen, audiovisual equipment storage space, electrical outlets and lighting. The space should be adequate to suit both the number of trainees and the equipment. (Attachment 2 – Suggested Equipment List)

Each trainee should have approximately 12-20 square feet of space in the classroom setting and 30 square feet of space in the clinical laboratory setting. Training space can be flexible in nature, meaning used for formal classroom instruction and rearranged for clinical laboratory instruction.

A lease, Certificate of Occupancy or written agreement must be obtained prior to any training classes conducted on the premises.

Program Monitoring:

All programs are required to have policies and procedures describing their quality management program and the annual evaluation of the training program. Quality management processes should focus on the overall operation of the training program and should address at a minimum the following:

- Monitoring for compliance with the requirements in this Guide
- Monitoring of contracts
- Analysis and evaluation of program’s educational outcomes that address the effectiveness of the:
 - Instructor(s)
 - Lesson plans
 - Equipment and other materials utilized to achieve learning objectives, e.g. videos, textbooks, etc.
 - Evaluation of the supervised practical training site(s)

- Student evaluation of the program, including effectiveness of communication between instructor and students
- Analysis and evaluation of testing results, admission standards and program completion rates
- Development and implementation of strategies for improvement of the HHATP
- Submission of an annual evaluation report to the sponsoring agency's governing authority and to the NYSDOH with the re-approval application.

All programs are required to conduct monitoring on at least a quarterly basis and documentation of such must be included in the quality assurance minutes of the sponsoring agency. Programs may choose to utilize tools developed by the Department and provider workgroup which are found in Attachment 3a, 3b, and 3c.

Maintaining Training Records:

The HHATP must have a procedure to retain, for a period of at least six years, a training record for each person who has successfully completed home health aide training and/or competency evaluation, including:

- Documentation of the trainee's receipt of the program's Trainee Rights (Attachment 4). The Trainee Rights must be given to the student at or prior to the first class in a format (i.e. language, reading level) that the trainee can comprehend. These rights must address at a minimum, the items in Attachment 4 and any other rights the program chooses.
- Attendance sign-in sheet for classroom and supervised practical training; trainees must document their arrival and departure as well as the start and completion of their lunch break by signing their full name at the commencement of each day. They may use their initials for signing in/out for lunch and at the end of the day.
- Each trainee's completed written tests and trainee evaluation forms.
- Copy of the training certificate of completion.

Electronic record keeping is acceptable. Providers must ensure that electronic records are able to be produced upon request by DOH or any other regulatory agency. Providers must also ensure that appropriate electronic backup of these records exists.

Home Care Registry Requirements:

The training program must have policies and procedures demonstrating compliance with all requirements for the Home Care Registry (HCR) found on the Health Commerce System (HCS).

Contracts for Supervised Practical Training (if applicable):

The program is required to have copies of signed contracts or letters of intent, if applicable, specifying those home care agencies, or other health care settings which will provide trainees with supervised practical training. When the contracting entity is providing the nursing supervision of the trainees, the contract must include an agreement that the supervision will be conducted by an approved Nurse Instructor who is listed on the HCR as such.

Training in a Foreign Language:

If a program proposes to teach in a foreign language, the Nurse Instructor must be bi-lingual and fluent in both English and the language in which instruction is given in order to adequately teach and evaluate the student. The program that proposes to conduct training in a foreign language must submit the Nurse Instructor application with documentation of the Nurse Instructor's fluency in the foreign language. Documentation of fluency must include two written references; one of which may be from the sponsoring organization; and one of which may be proof of graduation (such as diploma) where the targeted foreign language is spoken.

Classes can only be conducted in one language at a time and not through an interpreter.

The program is not required to obtain a textbook written in the foreign language that is being taught. However, in accordance with the guidelines described under "Evaluation of the Trainee" on page 5 of this Guide, programs must use an approved published textbook (in English) as a resource for instruction in the foreign language. The Department maintains the authority to review and approve textbooks to ensure that the curriculum meets the minimum standards.

Testing may be conducted in the language that the curriculum was taught and must follow the guidelines as described under "Evaluation of the Trainee" on page 5 of this guide.

When providing instruction in a foreign language, the training program must use written tests obtained from publishers who publish textbooks for the purpose of training home health aides. Test questions must be from a "bank" of test questions. Questions must comprehensively test the student in all areas of the curriculum and questions must be rotated. If a student is retaking a test after an unsuccessful attempt, this test must be a different version from the previous test taken. A minimum score of 80% is required to ensure mastery of subject material.

The Department requires that the program (or a group of programs) must consult with the publisher(s) of approved English textbook(s) to discuss the possibility of translating associated test questions obtained from their "bank" of test questions. The program(s) is responsible for understanding and adhering to the publisher's current requirements and limitations.

In all instances, all translations of the English material must be completed and documented by a certified language translation service. When requesting approval (initial and re-approval) to conduct training in a foreign language, the training program will be required to provide documentation of the text book to be used, the certified translation attestation (a signed statement that the translation is an accurate and complete rendering of the original document) and the formal permission granted by the publisher to translate their materials.

As a reminder, all Home Health Agencies are responsible for ensuring that patient care is provided in a safe, effective and efficient manner. When training is conducted in a foreign language, it is expected that the employing agency will ensure that these home health aides are able to understand care plans, medication bottles and other patient information that are typically written in English. In addition, agencies need to ensure that these home health aides are able to appropriately communicate and document changes in patient conditions to the registered nurse (or therapist).

INITIAL APPROVAL OF HOME HEALTH AIDE TRAINING PROGRAM

Initial approval of a program requires the submission of a completed Home Health Aide Training Program Application (Appendix 2), and HHATP Nurse Instructor Application(s) (Appendix 1). The approval of a HHATP will be associated with the sponsoring LHCSA, CHHA, LTHHCP, or hospice. One application is required for each licensed or certified agency which can conduct training at multiple sites. The application must specify the associated license number that will sponsor the HHATP.

Note: The sponsoring agency must be in operation for at least one year prior to application as a HHATP.

HHATP initial approval is based on submission and review of the following:

- Completed Home Health Aide Training Program Application (Appendix 2)
- Completed HHATP Nurse Instructor Application (s) (Appendix 1)
- A review of the sponsoring agency's current compliance status

After reviewing the completed application package, a representative of the Department may, prior to approval, make a site visit to examine the physical layout of the training site or sites. Subsequent visits may also be made once approval is granted to observe classroom instruction and/or in conjunction with survey visits. Initial HHATP approval is granted for a period of up to three years.

NOTE: If the training program makes any significant changes within the three year approval period, including changes in faculty or sites for training and/or supervised practical training, or a change in the status of the sponsoring agency such as a change of address, the program **MUST** notify the appropriate regional office of such changes in writing prior to the change.

MAINTENANCE OF APPROVAL

HHATPs must provide the Department with a schedule of anticipated classes biannually. Approved programs are expected to submit an anticipated schedule of training every six months each October 1st and April 1st. This schedule must include the dates, times and location of each class, and the name of the approved Nurse Instructor for each class. (Attachment 5) This information must be sent to the appropriate NYSDOH regional home care program manager or designee in the region where the program is located. Subsequent changes to the submitted schedule should be reported as soon as they occur.

The training program must approve and issue at least one original certificate a year in order to remain an active approved program. This would include a certificate issued for Competency Evaluation Program, Personal Care Aide Upgrading or CNA Transitioning. One full 75 hour training program class must be conducted within a three-year period to maintain an on-going training program approval. Competency evaluations, PCA upgrades and nurse aide transitioning

are not full training (75 hour) program classes. Failure to conduct the full training program will require reapplication for approval.

RE-APPROVAL OF THE HOME HEALTH AIDE TRAINING PROGRAM

Re-approval of programs will be based on evidence in the Home Care Registry that a full 75 hour course has been conducted at least once during the 36 month period and submission of the HHATP Re-approval Application (Appendix 3) to the appropriate regional office. Applications for re- approval must be submitted ninety days prior to expiration of the current three year approval. Failure to conduct a full 75 hour program in the 36 month period will result in the program having to reapply with a full “initial” application (at the discretion of the regional office). Notification of approval and/or request for additional information will be communicated in writing to the applicant.

RESCINDING APPROVAL OF THE HOME HEALTH AIDE TRAINING PROGRAM

The Department may rescind approval of a HHATP if a training program is found to be out of compliance with the Federal and State training requirements. Egregious, systemic, cumulative, or repetitive deficient findings or failure to submit an acceptable plan of correction (after two attempts) may constitute grounds for rescinding approval. The entire training program approval will be revoked for a period of at least two years. The Operator will be required to re-apply after the two year period in order to resume training.