

Neutral Testimony

HB 2049 – reduce required number of training hours to become a CNA

House Health and Human Services Committee

February 8, 2023

Madam Chair and Members of the House Health and Human Services Committee,

My name is Lacey Hunter and I am Commissioner for the Kansas Department for Aging and Disability Services Survey, Certification and Credentialing Commission. My Commission is responsible for approving training courses for a variety of health professions that work in Adult Care Homes in Kansas, including Certified Nurse Aides.

On behalf of KDADS, I am here to provide neutral testimony for HB 2049 which would reduce the required number of training hours to become a CNA from 90 to 75.

The Kansas Certified Nurse Aide training program uses the federal Nurse Aide Training and Competency Evaluation Program (NATCEP) curriculum as the basis for training programs for Certified Nurse Aides. Certified Nurse Aides are a federally designated health care profession that must complete a NATCEP program and pass written test and clinical skills assessment to be able to work in a long term care facility.

History of Kansas Certified Nurse Aide Training

Since 1977, KS has offered a 90 hour training course for direct care aides that work in long term care facilities. The title of the certification has changed over the years. Over the years the certification has been called *Training in Adult Education (1977-1978)*, *Nursing Home Aide (1979-1981)*, *Adult Care Home Aide (1982-1985)*, and *Nurse Aide (1986-current)*.

In our research we found a 1983 document from the Kansas Department of Health and Environment titled “Nursing Home Program, Fact Sheet” that described the curriculum for an adult care home aide. At that time the course was split into two segments. Part 1 was 40 hours and Part 2 was 50 hours of training for a total of 90 hours. The state requirement for 90 hours of training over two parts is the current practice for Certified Nurse Aides (CNA.)

The federal requirements for Nurse Aides in long term care settings were passed in the Omnibus Budget Reconciliation Act (OBRA) of 1987. That law required a minimum of 75 hours of training to become a CNA anywhere in the United States. Kansas program at the time required 90 hours of training, exceeding the federal requirement of 75 hours.

Context from Other States

Table 1 lists the required number of hours to become a CNA in all 50 states and the District of Columbia. Of the 51, 20 states follow the Federal minimum of 75 hours. Of those 20, three border Kansas: Colorado, Nebraska, and Oklahoma. Missouri requires a 175 hour NATCEP Program to receive the CNA credential.

Table 1 – Certified Nurse Aide Hour Requirements by State			
State	Classroom Hours	Clinical Hours	Total
Alabama		16 clinical 16 lab	75
Alaska	60 Didactic	80 Lab and Clinical	140
Arizona			130
Arkansas	Part 1-16 hours classroom	Part 2- 74 hours-16 hours clinicals	90
California	60	100	160
Colorado	no less than 16 hours	no less than 16 hours	75
Connecticut			100
DC	45	30 lab 45 practicums	120
Delaware	75 hours	75 hours	150
Florida	80	40 at least 20 in long term care	120
Georgia	61	24	85
Hawaii	70	30	100
Idaho	80	40	120
Illinois	80	40	120
Indiana	30	75	105
Iowa	45	30	75
Kansas	45	45	90
Kentucky	59	16	75
Louisiana	40	40	80
Maine	90	20 hours lab and 70 clinical	180
Maryland	60	40	100
Massachusetts	50	25	75
Michigan	59	16	75
Minnesota	59	16	75
Mississippi	59	16	75
Missouri	75	100 hands on job training	175
Montana	50	25	75
Nebraska	59	16	75
Nevada	60	15	75
New Hampshire	40	60	100
New Jersey	50	40	90
New Mexico			75
New York	100	30	130
North Carolina			75 +
North Dakota	59	16	75
Ohio	59	16	75
Oklahoma	59	16	75
Oregon	80	75	155
Pennsylvania	43	37	80
Rhode Island	80	40	120
South Carolina	60	40	100

South Dakota	59	16	75
Tennessee	40	35	75
Texas	60	40	100
Utah	76	24	100
Vermont	59	16	75
Virginia	80	40	120
Washington	35	50	85
West Virginia	45	30 lab 45 practicums	120
Wisconsin	88	32	120
Wyoming	59	16	75

What is required to become a CNA in Kansas?

The federal requirements for a NATCEP training program are found in 42 CFR 483.152. That regulation specifies the topics that must be covered in a Nurse Aide training program. The regulation also specifies the number of hours of training that must be delivered before a student can have contact with a resident in a long term care facility.

Figure 2 – Federal Requirements for Nurse Aide Training

42 CFR 483.152 (b) The curriculum of the nurse aide training program must include

- (1) At least a total of 16 hours of training in the following [areas](#) prior to any direct contact with a resident:
 - (i) Communication and interpersonal skills;
 - (ii) Infection [control](#);
 - (iii) Safety/emergency procedures, including the Heimlich maneuver;
 - (iv) Promoting residents' independence; and
 - (v) Respecting residents' rights.
- (2) Basic nursing skills;
 - (i) Taking and recording vital signs;
 - (ii) Measuring and recording height and weight;
 - (iii) Caring for the residents' environment.
 - (iv) Recognizing abnormal changes in body functioning and the importance of reporting such changes to a supervisor; and
 - (v) Caring for [residents](#) when death is imminent.
- (3) Personal care skills, including, but not limited to -
 - (i) Bathing;
 - (ii) Grooming, including mouth care;
 - (iii) Dressing;
 - (iv) Toileting;
 - (v) Assisting with eating and hydration;
 - (vi) Proper feeding techniques;
 - (vii) Skin care; and
 - (viii) Transfers, positioning, and turning.
- (4) Mental health and social service needs:
 - (i) Modifying aide's behavior in response to residents' behavior;
 - (ii) Awareness of developmental tasks associated with the aging process;
 - (iii) How to respond to [resident](#) behavior;

- (iv) Allowing the [resident](#) to make personal choices, providing and reinforcing other behavior consistent with the [resident](#)'s dignity; and
- (v) Using the [resident](#)'s family as a source of emotional support.
- (5) Care of cognitively impaired residents:
 - (i) Techniques for addressing the unique needs and behaviors of individual with dementia (Alzheimer's and others);
 - (ii) Communicating with cognitively impaired residents;
 - (iii) Understanding the behavior of cognitively impaired residents;
 - (iv) Appropriate responses to the behavior of cognitively impaired residents; and
 - (v) Methods of reducing the effects of cognitive impairments.
- (6) Basic restorative services:
 - (i) Training the [resident](#) in self care according to the [resident](#)'s abilities;
 - (ii) Use of assistive devices in transferring, ambulation, eating, and dressing;
 - (iii) Maintenance of range of motion;
 - (iv) Proper turning and positioning in bed and chair;
 - (v) Bowel and bladder training; and
 - (vi) Care and use of [prosthetic and orthotic devices](#).
- (7) Residents' Rights.
 - (i) Providing privacy and maintenance of confidentiality;
 - (ii) Promoting the residents' right to make personal choices to accommodate their needs;
 - (iii) Giving assistance in resolving grievances and disputes;
 - (iv) Providing needed assistance in getting to and participating in [resident](#) and family groups and other activities;
 - (v) Maintaining care and security of residents' personal possessions;
 - (vi) Promoting the [resident](#)'s right to be free from abuse, mistreatment, and neglect and the need to report any instances of such treatment to appropriate facility staff;
 - (vii) Avoiding the need for restraints in accordance with current professional standards.

KDADS reviews and approves training courses submitted by community colleges, technical schools, hospitals, nursing facilities, or private schools. That review includes verifying the proposed curriculum meets the state required curriculum including topics taught in a classroom setting, through simulated laboratory, or clinical setting. KDADS also reviews the qualifications of the course sponsor and the course instructors or supplemental instructors before approving courses. Table 3 maps the training topics in the federal regulation for Nurse Aide training to the Kansas curriculum approved for CNAs. There is not a clear mapping of the number of hours within each content section or specific section of training. Kansas has the flexibility to develop a curriculum for Nurse Aides that must meet the minimum federal requirements for subject matter and hours. The course used in Kansas developed under the current statute includes 90 hours of training including classroom and clinical training.

Changing the training requirements for CNAs also impacts training for other credentialed under the supervision of KDADS. Certified Medication Aides build on the CNA curriculum to prepare aides to help administer medications. If HB 2049 were passed, KDADS would have to revise the Certified Medication Aide (CMA) curriculum to add hours to make up for the reduced hours of training in the CNA curriculum to maintain the same course requirements or make corresponding reductions in the CMA course.

Table 3 – Kansas Curriculum Mapped to the Federal Required Topics

**COURSE TOPICS - PART 1
(20 hours Didactic/ 20 hours Simulated Lab Training)**

UNIT 1 - INTRODUCTION	
UNIT 2 - RESIDENTS OF AN ADULT CARE HOME	42 CFR 483.152 (b) (1)
UNIT 3 - ROLE AND RESPONSIBILITIES OF CNA	42 CFR 483.152 (b) (1)

UNIT 4 - MEETING THE RESIDENT NEEDS: COMMUNICATION	42 CFR 483.152 (b) (1)
UNIT 5 - MEETING THE RESIDENT NEEDS: INFECTION PREVENTION AND CONTROL	42 CFR 483.152 (b) (1)
UNIT 6 - MEETING THE RESIDENT NEEDS: MOBILITY	42 CFR 483.152 (b) (3)
UNIT 7 - MEETING THE RESIDENT NEEDS: THE RESIDENT'S PERSONAL LIVING SPACE	42 CFR 483.152 (b) (2)
UNIT 8 - MEETING THE RESIDENT NEEDS: SAFETY	42 CFR 483.152 (b) (1)
UNIT 9 - MEETING THE RESIDENT NEEDS: PERSONAL CARE AND GROOMING	42 CFR 483.152 (b) (3)
UNIT 10 - MEETING THE RESIDENT NEEDS: NUTRITION AND FLUIDS	42 CFR 483.152 (b) (3)
UNIT 11 - MEETING THE RESIDENT NEEDS: ELIMINATION	42 CFR 483.152 (b) (3)
UNIT 12 - MEASURING AND RECORDING VITAL SIGNS	42 CFR 483.152 (b) (2)

*Out of the combined 40 hours, with 16 of those hours covered in Unit 2,3,4,5,8 leaving a remaining a combine 24 HOURS of both didactic and lab to cover Unit 1,6,7,9,10,11,12.

COURSE TOPICS -PART 2

(25 hours Didactic/ 25 hours Clinical-Hands on Training

UNIT 13 - THE RESIDENT'S CARE PLAN	42 CFR 483.152 (b) (1)
UNIT 14 - OBSERVING, REPORTING AND DOCUMENTING	42 CFR 483.152 (b) (2)
UNIT 15 - PHYSICAL CHANGES ACCOMPANYING AGING	42 CFR 483.152 (b) (4)
UNIT 16 - SEXUALITY IN AGING	
UNIT 17 - MEETING RESIDENT NEEDS FOR COMFORT AND REST	42 CFR 483.152 (b) (2)
UNIT 18 - MEETING RESIDENT NEEDS: END OF LIFE CARE	42 CFR 483.152 (b) (2)
UNIT 19 - MEETING RESIDENT NEEDS: RESTORING NUTRITION AND ELIMINATION	42 CFR 483.152 (b) (6)
UNIT 20 - MEETING RESIDENT NEEDS: MAINTAINING AND RESTORING MOBILITY	42 CFR 483.152 (b) (6)
UNIT 21 - MEETING RESIDENT NEEDS: DEMENTIA AND PROBLEM BEHAVIORS	42 CFR 483.152 (b) (5) 42 CFR 483.152 (b) (4)
UNIT 22 - ADDITIONAL RESIDENT CARE PROCEDURES	
UNIT 23 - MEETING RESIDENT AND FAMILY NEEDS: ADMISSION, TRANSFER AND DISCHARGE	42 CFR 483.152 (b) (7)
UNIT 24 - FIRST AID IN THE ADULT CARE HOME	
UNIT 25 - WORKING AS A CNA	

Thank you for the opportunity to provide testimony.

Respectfully,

Lacey Hunter
Commissioner, Survey, Certification and Credentialing Commission
Kansas Department for Aging and Disability Services