

**(Rev. 211; Issued: 02-03-23; Effective: 10-21-22; Implementation: 10-24-22)**

**§483.95(f) Compliance and ethics.**

**The operating organization for each facility must include as part of its compliance and ethics program, as set forth at §483.85—**

**§483.95(f)(1) An effective way to communicate the program's standards, policies, and procedures through a training program or in another practical manner which explains the requirements under the program.**

**§483.95(f)(2) Annual training if the operating organization operates five or more facilities.**

**DEFINITION:**

For the purpose of this guidance, the term “Staff” includes all new and existing staff (direct and indirect care functions); individuals providing services under a contractual arrangement; and volunteers, consistent with the volunteers’ expected roles (see requirements in §483.95).

**GUIDANCE §483.95(f)**

The operating organization (the individual or entity that operates a facility) must provide a training program or another practical manner to effectively communicate the standards, policies, and procedures of the compliance and ethics program to its entire staff.

For the operating organizations that operate five or more facilities, annual training for staff on the compliance and ethic program must be conducted.

All training should support current scope and standards of practice through curricula which detail learning objectives, performance standards, and evaluation criteria. There should be a process in place to track staff participation in the required trainings.

**PROBES §483.95(f)**

- Does the facility provide training or effectively communicate, in some manner, the facility’s standards, policies and procedures of the compliance and ethics program?
- Does the facility have a system in place to track staff attendance at required trainings?
- For organizations with five or more facilities, determine if annual compliance and ethics training is provided.

**F947**

**(Rev. 225; Issued: 08-08-24; Effective: 08-08-24; Implementation: 08-08-24)**

**§483.95 Training Requirements.**

**Training topics must include but are not limited to—**

**§483.95(g) Required in-service training for nurse aides.  
In-service training must—**

**§483.95(g)(1) Be sufficient to ensure the continuing competence of nurse aides, but must be no less than 12 hours per year.**

**§483.95(g)(2) Include dementia management training and resident abuse prevention training.**

**§483.95(g)(3) Address areas of weakness as determined in nurse aides' performance reviews and facility assessment at §483.71 and may address the special needs of residents as determined by the facility staff.**

**§483.95(g)(4) For nurse aides providing services to individuals with cognitive impairments, also address the care of the cognitively impaired.**

**DEFINITIONS**

A “nurse aide” is defined in §483.5 as any individual providing nursing or nursing-related services to residents in a facility. This term may also include an individual who provides these services through an agency or under a contract with the facility, but is not a licensed health professional, a registered dietitian, or someone who volunteers to provide such services without pay. Nurse aides do not include those individuals who furnish services to residents only as paid feeding assistants as defined in §488.301.

Private duty nurse aides who are not employed or utilized by the facility on a contract, per diem, leased, or other basis, do not come under the nurse aide training provision and therefore are not required to take the training.

Performance Reviews: The process used to evaluate the performance of staff on a periodic basis, which may be annually.

NOTE: See Tag F730-§483.35(d)(7) related to the conduct of performance reviews for every nurse aide at least once every 12 months.

**GUIDANCE §483.95(g)**

All facilities must develop, implement and permanently maintain an in-service training program for nurse aides that is appropriate and effective, as determined by nurse aide performance reviews [see §483.35(d)(7)] and the facility assessment as specified at §483.71. Changes to the facility’s resident population, the facility’s physical environment, staff turnover, and modifications to the facility assessment may necessitate ongoing revisions to the facility’s training program.

There are a variety of methods that could be used to provide training. For example, nurse aide training may be facilitated through any combination of in-person instruction,

webinars (though, should not be webinars alone) and/or supervised practical training hours and should be reflective of nurse aides' performance reviews in order to address identified weaknesses. When able, each nurse aide should be evaluated based on individual performance, and the facility should develop training that can be utilized and beneficial to all nurse aide staff when applicable.

Supervised practical training means training in a setting in which instruction and oversight are provided by a person who has relevant education and/or experience specific to the subject of the training being provided.

All training should support current scope and standards of practice through curricula which detail learning objectives, performance standards and evaluation criteria, and addresses potential risks to residents, staff and volunteers if procedures are not followed. There should be a process in place to track nurse aide participation in the required trainings.

The adequacy of the in-service education program may be measured not only by documentation of hours of completed in-service education, but also by demonstrated competencies of nurse aide staff through written exam and/or in consistently applying the interventions necessary to meet residents' needs as identified in the facility assessment. Observations of nurse aides that indicate deficiencies in their nurse aide skills may be the result of an inadequate training program and/or inadequate performance review.

A minimum of 12 hours of nurse aide training per year is required under §483.95(g)(1). The training must be sufficient to ensure the continuing competence of the nurse aides, which may require more than 12 hours of training per year to meet identified staff or resident needs.

The survey team does not need to find a negative outcome to cite a deficiency at F947.

### **PROCEDURES AND PROBES §483.95(g)**

If there have been deficient care practices identified during the survey, review as appropriate training received by nurse aides in that corresponding subject area. If there is a concern about required in-service training for nurse aides, interview staff and review training records to determine the following:

- Were nurse aides observed working with residents in a manner that indicates a training need?
- Did interviews with residents and/or resident representatives indicate any areas where training was needed?
- What type of training do the nurse aides report receiving about the concern identified by the surveyor?
- Verify the mandatory nurse aide in-service program is no less than 12 hours per year.
- Review facility training records which supports mandatory nurse aide attendance.