ARTICLE 8. CERTIFIED NURSING ASSISTANTS AND CERTIFIED MEDICATION ASSISTANTS

**Updates: July 25, 2014** (See Historical Notes after each Rule Section for Official Effective Date of Rules)

R4-19-801. Common Standards for Certified Nursing Assistant (CNA) and Certified Medication Assistant (CMA) Training Programs

A. Program Administrative Responsibilities
   1. Any person or entity offering a training program under this Article shall, before accepting tuition from prospective students, and at all times thereafter, provide program personnel including a coordinator and instructors, as applicable, who meet the requirements of this Article.
   2. If at any time, a person or entity offering a training program cannot provide a qualified instructor for its students, it shall immediately cease instruction and, if the training program cannot provide a qualified instructor within 5 business days, the training program shall offer all enrolled students a refund of all tuition and fees the students have paid to the program.
   3. A training program shall obtain and maintain Board approval or re-approval as specified in this Article and A.R.S § 32-1650.01 (B) before advertising the program, accepting any tuition, fees, or other funds from prospective students, or enrolling students.
   4. A training program that uses external clinical facilities shall execute a written agreement with each external clinical facility that:
      a. Provides the program instructor the ability to assign patient care experiences to students after consultation with facility staff, and
      b. Contains a termination clause that provides sufficient time for enrolled students to complete their clinical training upon termination of the agreement.
   5. A training program that requires students to pay tuition for the program shall:
      a. Make all program costs readily accessible on the school’s website with effective dates,
      b. Publically post any increases in costs on the school’s website 30 days in advance of the increase;
      c. Include in the cost calculation and public posting, all fees directly paid to the program including but not limited to tuition, lab fee, clinical fee, enrollment fee, insurance, books, uniform, health screening, credit card fee and state competency exam fee; and
      d. Provide a description of all program costs to the student that are not directly paid to the program.
   6. Before collecting any tuition or fees from a student, a training program shall notify each prospective student of Board requirements for certification including legal presence in the United States, criminal background check requirements, and ineligibility for certification under A.R.S. § 32-1606 (B) (17).
   7. Within the first 14 days of the program and before 50% of program instruction occurs, a training program shall transmit to the Board-approved test vendor, accurate and complete information regarding each enrolled student for the purposes of tracking program enrollment, attrition and completion. Upon receipt of accurate completion information, the vendor shall issue a certificate of completion to the program for each successful graduate.
   8. A training program shall provide the Board, or its designee, access to all training program records, students and staff at any time, including during an announced or unannounced visit. A program’s refusal to provide such access is grounds for withdrawal of Board approval.
   9. A training program shall provide each student with an opportunity to anonymously and confidentially evaluate the course instructor, curriculum, classroom environment, clinical instructor, clinical setting, textbook and resources of the program;
   10. A training program shall provide and implement a plan to evaluate the program that includes the frequency of evaluation, the person responsible, the evaluative criteria, the results of the evaluation and actions taken to improve the program.
      The program shall evaluate the following elements at a minimum every two years:
      a. Student evaluations consistent with subsection (A)(9);
      b. First-time pass rates on the written and manual skills certification exams for each admission cohort;
      c. Student attrition rates for each admission cohort;
      d. Resolution of student complaints and grievances in the past two years; and
      e. Review and revision of program policies.
   11. A training program shall submit written documentation and information to the Board regarding the following program changes within 30 days of instituting the change:
      a. For a change or addition of an instructor or coordinator, the name, RN license number, and documentation that the coordinator or instructor meets the applicable requirements of R4-19-802 (B) and (C) for CNA programs and R4-19-803 (B) for CMA programs;
      b. For a change in classroom location, the previous and new location, and a description of the new classroom;
c. For a change in a clinical facility, the name and address of the new facility and a copy of the signed clinical contract;
d. For a change in the name or ownership of the training program, the former name or owners and the new name or owners; and
e. For a decrease in hours of the program, a written revised curriculum document that clearly highlights new content, strikes out deleted content and includes revised hours of instruction, as applicable.

B. Policies and Procedures
1. A training program shall promulgate and enforce written policies and procedures that comply with state and federal requirements, and are consistent with the policies and procedures of the parent institution, if any. The program shall provide effective and review dates for each policy or procedure.
2. A training program shall provide a copy of its policies and procedures to each student on or before the first day the student begins the program.
3. The program shall promulgate and enforce the following policies with accompanying procedures:
   a. Admission requirements including:
      i. Criminal background, health and drug screening either required by the program or necessary to place a student in a clinical agency; and
      ii. English language, reading and math skills necessary to comprehend course materials and perform duties safely.
   b. Student attendance policy, ensuring that a student receives the hours and types of instruction as reported to the Board in the program’s most recent application to the Board and as required in this Article. If absences are permitted, the program shall ensure that each absence is remediated by providing and requiring the student to complete learning activities that are equivalent to the missed curriculum topics, clinical experience or skill both in substance and in classroom or clinical time.
   c. A final examination policy that includes the following provisions;
      i. Require that its students score a minimum 75% correct answers on a comprehensive secure final examination with no more than one re-take. The program may allow an additional re-take following documented, focused remediation based on past test performance. Any re-take examination must contain different items than the failed exam, address all course competencies, and be documented with score, date administered and proctor in the student record; and
      ii. Require that each student demonstrate, to program faculty, satisfactory performance of each practical skill as prescribed in the curriculum before performance of that skill on patients or residents without the instructor’s presence, direct observation, and supervision.;
   d. Student record maintenance policies consistent with subsection (D) including the retention period, the location of records and the procedure for students to access to their records.
   e. Clinical supervision policies consistent with clinical supervision provisions of this Section, and:
      i. R4-19-802 (C) and (D) for CNA programs, or
      ii. R4-19-803 (B) and (C) for CMA programs;
   f. Student conduct policies for expected and unacceptable conduct in both classroom and clinical settings;
   g. Dismissal and withdrawal policies;
   h. Student grievance policy that includes a chain of command for grade disputes and ensures that students have the right to contest program actions and provide evidence in support of their best interests including the right to a third party review by a person or committee that has no stake in the outcome of the grievance;
      i. Program progression and completion criteria.
C. Classroom and clinical instruction
1. During clinical training sessions, a training program shall ensure that each student is identified as a student by a name badge or another means readily observable to staff, patients, and residents.
2. A training program shall not utilize, or allow the clinical facility to utilize, students as staff during clinical training sessions.
3. A training program shall provide a clean, comfortable, distraction-free learning environment for didactic teaching and skill practice.
4. A training program shall provide, in either electronic or paper format, a written curriculum to each student on or before the first day of class that includes a course description, course hours including times of instruction and total course hours, instructor information, passing requirements, course goals, and a topical schedule containing date, time and topic for each class session.
5. For each unit or class session the program shall provide, to its students, written:
   a. Measurable learner-centered objectives,
   b. An outline of the material to be taught, and
   c. The learning activities or reading assignment.
6. A training program shall utilize an electronic or paper textbook corresponding to the certification level of the course that has been published within the previous five years. Unless granted specific permission by the publisher, a training program shall not utilize copies of published materials in lieu of an actual textbook.
7. A training program shall provide, to all program instructors and enrolled students, access to the following instructional and educational resources:
a. Reference materials, corresponding to the level of the curriculum; and
b. Equipment and supplies necessary to practice skills.

8. A training program instructor shall:
   a. Plan each learning experience;
   b. Ensure that the curriculum meets the requirements of this Section;
   c. Prepare written course goals, lesson objectives, class content and learning activities;
   d. Schedule and achieve course goals and objectives by the end of the course; and
   e. Require satisfactory performance of all critical elements of each skill under R4-19-802 (H) for nursing assistant and R4-19-803(D)(4) for medication assistant before allowing a student to perform the skill on a patient or resident without the instructor’s presence at the bedside.

9. A qualified RN instructor shall be present at all times and during all scheduled classroom, skills laboratory and clinical sessions. In no instance shall a nursing assistant or other unqualified person provide any instruction, reinforcement, evaluation or independent activities in the classroom or skills laboratory.

10. A qualified RN instructor shall supervise any student who provides care to patients or residents by:
   a. Remaining in the clinical facility and focusing attention on student learning needs during all student clinical experiences;
   b. Providing the instructor’s current and valid contact information to students and facility staff during the instructor’s scheduled teaching periods;
   c. Observing each student performing tasks taught in the training program;
   d. Documenting each student’s performance each day, consistent with course skills and clinical objectives;
   e. During the clinical session, engaging exclusively in activities related to the supervision of students; and
   f. Reviewing all student documentation.

D. Records

1. A training program shall maintain the following program records either electronically or in paper form for a minimum of three years for CNA programs and five years for CMA programs:
   a. Curriculum and course schedule for each admission cohort;
   b. Results of state-approved written and manual skills testing;
   c. Documentation of program evaluation under subsection (A)(10);
   d. A copy of any Board reports, applications, or correspondence, related to the program; and
   e. A copy of all clinical contracts, if using outside clinical agencies.

2. A training program shall maintain the following student records either electronically or in paper form for a minimum of three years for CNA programs and five years for CMA programs:
   a. A record of each student's legal name, date of birth, address, telephone number, e-mail address and Social Security number, if available;
   b. A completed skill checklist containing documentation of student level of competency performing the skills in R4-19-802(F) for nursing assistant, and in R4-19-803 (D)(4) for medication assistants;
   c. An accurate attendance record, which describes any make-up class sessions and reflects whether the student completed the required number of hours in the course; and
   d. Scores for each test, quiz, or exam and whether such test, quiz, or exam was retaken.

E. Certifying Exam Passing Standard: A training program and each site of a consolidated program under R4-19-802 (E) shall attain, at a minimum, an annual first-time passing rate on the manual skill and written certifying examinations that is equal to the Arizona average pass rate for all candidates on each examination minus 20 percentage points. The Board may waive this requirement for programs with less than five students taking the exam during the year. The Board shall issue a notice of deficiency under A.A.C. R4-19-805 to any program with five or more students taking the exam that fails to achieve the minimum passing standard in any calendar year.

F. Distance Learning: Innovative Programs

1. A training program may be offered using real-time interactive distance technologies such as interactive television and web based conferencing if the program meets the requirements of this Article.

2. Before a training program may offer, advertise, or recruit students for an on-line, innovative or other non-traditional program, the program shall submit an application for innovative applications in education under R4-19-214 and receive Board approval.

G. Site visits: A training program shall permit the Board, and its designee, including another state agency, to conduct an onsite scheduled evaluation for initial Board approval and renewal of approval in accordance with R4-19-804 and announced or unannounced site visits at any other time the Board deems necessary.

Historical Note


R4-19-802. CNA Program Requirements

A. Organization and Administration
1. A nursing assistant program may be offered by:
   a. An educational institution licensed by the State Board for Private Postsecondary Education,
   b. A public educational institution or a program funded by a local, state or federal governmental agency,
   c. A health care institution licensed by the Arizona Department of Health Services or a federally authorized health care institution,
   d. A private business that meets the requirements of this Article and all other legal requirements to operate a business in Arizona.

2. If a nursing assistant program is offered by a private business, the program shall meet the following requirements.
   a. Hold a surety bond from a surety company with a financial strength rating of “A-” or better by Best’s Credit Ratings, Moody’s Investors Service, Standard and Poor’s rating service or another comparable rating service as determined by the Board in the amount of a minimum of $15,000. The program shall ensure that:
      i. The amount of the bond is sufficient to reimburse the full amount of collected tuition and fees for all students during all enrollment periods of the program; and
      ii. The bond is maintained for an additional 24 months after program closure; and
   b. Upon initial use and remodeling, provide the Board with a fire inspection report from the Office of the State Fire Marshall or the local authority with jurisdiction, indicating that each program classroom and skill lab location is in compliance with the applicable fire code.

3. Programs approved by the Board before the effective date of this Section shall comply with subsection (A)(2) within one year of the effective date. If a program does not charge tuition or fees, the bond requirement is waived.

4. A Medicare or Medicaid certified long-term care facility-based certified nursing assistant program shall not require a student to pay a fee for any portion of the program including the initial attempt on the state competency exam.

5. In addition to the policies required in R4-19-801 (B), the Board may approve a nursing assistant program to offer an advanced placement option to a student with a background in health care. A nursing assistant program wishing to offer an advanced placement option shall submit their advanced placement policy to the Board and receive approval before implementing the policy. The program shall include, at a minimum, the following provisions in its policy:
   a. Advanced placement is limited to students with at least one year full-time employment in the direct provision of health care within the past five years or students who have successfully completed course work that included direct patient care experiences in allied health, medicine or nursing in the past five years.
   b. The program, at a minimum, shall require an advanced placement student to meet the same outcomes as regular students on all examinations and skill performance demonstrations.
   c. The program shall require an advanced placement student to successfully accomplish all clinical objectives during a minimum of 16 hours of clinical practice under the direct supervision and observation of a qualified instructor and in a long-term care facility.
   d. Upon successful completion of advanced placement and any other program requirements, the program shall credit the graduate with the same number of didactic, laboratory and clinical hours as the regular graduate.

B. Program coordinator qualifications and responsibilities
   1. Program coordinator qualifications include:
      a. Holding a current, registered nurse license that is active and in good standing or multistate privilege to practice as an RN under A.R.S. Title 32, Chapter 15; and
      b. Possessing at least two years of nursing experience at least one year of which is in the provision of long-term care facility services.
   2. A director of nursing in a health care facility may assume the role of a program coordinator for a nursing assistant training program that is housed in the facility but shall not function as a program instructor.
   3. A program coordinator’s responsibilities include:
      a. Supervising and evaluating the program;
      b. Ensuring that instructors meet Board qualifications and there are sufficient instructors to provide for a clinical ratio not to exceed 10 students per instructor;
      c. Ensuring that the program meets the requirements of this Article; and
      d. Ensuring that the program meets federal requirements regarding clinical facilities under 42 CFR 483.151.
   4. Other than the director of nursing in a long-term care facility, a program coordinator may also serve as a program instructor.

C. Program instructor qualifications and duties
   1. Program instructor qualifications include:
      a. Holding a current, registered nurse license that is active and in good standing under A.R.S. Title 32, Chapter 15 and provide documentation of a minimum of one year full time or 1500 hours employment providing direct care as a registered nurse in any setting; and
      b. At a minimum, one of the following:
         i. Successful completion of a three semester credit course on adult teaching and learning concepts offered by an accredited post-secondary educational institution,
ii. Completion of a 40 hour continuing education program in adult teaching and learning concepts that was awarded continuing education credit by an accredited organization;

iii. One year of full-time or 1500 hours experience teaching adults as a faculty member or clinical educator, or

iv. One year of full time or 1500 hours experience supervising nursing assistants, either in addition to or concurrent with the one year of experience required in subsection (C)(1)(a).

2. In addition to the program instruction requirements in R4-19-801(C), a nursing assistant program instructor shall provide on-site supervision for each student placed in a health care facility not to exceed 10 students per instructor;

D. Clinical and classroom hour requirements and resources

1. A nursing assistant training program shall ensure each graduate receives a minimum of 120 hours of total instruction consisting of:
   a. Instructor-led teaching in a classroom setting for a minimum of 40 hours;
   b. Instructor-supervised skills practice and testing in a laboratory setting for a minimum of 20 hours; and
   c. Instructor-supervised clinical experiences for a minimum of 40 hours, consistent with the goals of the program.

2. A nursing assistant training program shall ensure that equipment and supplies are in functional condition and sufficient in number for each enrolled student to practice required skills. At a minimum, the program shall provide:
   a. Hospital-type bed, over-bed table, linens, linen protectors, pillows, privacy curtain, call-light and nightstand;
   b. Thermometers, stethoscopes, including a teaching stethoscope, aneroid blood pressure cuffs, and a scale;
   c. Realistic skill training equipment, such as a manikin or model, that provides opportunity for practice and demonstration of perineal care;
   d. Personal care supplies including wash basin, towels, washcloths, emesis basin, rinse-free wash, toothbrushes, disposable toothettes, dentures, razor, shaving cream, emery board, orange stick, comb, shampoo, hair brush, and lotion;
   e. Clothes for dressing residents including undergarments, socks, hospital gowns, shirts, pants and shoes or non-skid slippers;
   f. Elimination equipment including fracture bed pans, bed pans, urinals, ostomy supplies, adult briefs, specimen cups, graduate cylinder, and catheter supplies;
   g. Aseptic and protective equipment including running water, sink, soap, paper towels, clean disposable gloves, surgical masks, particulate respirator mask for demonstration purposes, gowns, hair protectors and shoe protectors;
   h. Restorative equipment including wheelchair, gait belt, walker, anti-embolic hose, adaptive equipment, and cane;
   i. Feeding supplies including cups, glasses, dishes, straws, standard utensils, adaptive utensils and clothing protectors;
   j. Clean dressings, bandages and binders; and
   k. Documentation forms.

E. Consolidated Programs

1. A nursing assistant program may request, in writing, to consolidate more than one site of a program under one program approval for convenience of administration. The site of a program is where didactic instruction occurs. The Board may approve the request for a consolidated program if all the following conditions are met:
   a. The program is not based in a long-term care facility;
   b. The program does not offer an innovative program as defined in R4-19-214 at any consolidated site;
   c. A single RN administrator has authority and responsibility for all sites including hiring, retention and evaluation of all program personnel;
   d. Curriculum and policies are identical for all sites;
   e. Instructional delivery methods are substantially similar at all sites;
   f. Didactic, lab practice and clinical hours are identical for all sites;
   g. The program presents sufficient evidence that all sites have comparable resources, including classroom, skill lab, clinical facilities and staff. Evidence may include pictures, videos, documentation of equipment purchase and instructor resumes;
   h. The program provides an application to the Board a minimum of 30 days before consolidation of the program or use of the new site;
i. The site is fully staffed before accepting students;

j. The program evaluates each site separately under R4-19-801(A) (9);

k. The program arranges for the test vendor to provide a separate program number for each site;

2. There have been no substantiated complaints against the program or failure to follow the provisions of this Article in the past two years.

3. The program shall notify the Board if a site is closed or has not been used in two years.

4. A program that has been Board-approved as a consolidated program may request to add additional sites 30 days in advance of site utilization. The Board may approve the new site if the site meets the criteria in subsection (E)(1).

5. The Board may deny a request to consolidate programs or add a site if the requirements of this section are not met. Denial of such a request is not a disciplinary action and does not affect the program’s approval status.

6. The Board shall not renew or visit any site that was not used in the previous approval period.

F. Curriculum: a nursing assistant training program shall provide classroom and clinical instruction regarding each of the following subjects:

1. Communication, interpersonal skills, and documentation;

2. Infection control;

3. Safety and emergency procedures, including abdominal thrusts for foreign body airway obstruction and cardiopulmonary resuscitation;

4. Patient or resident independence;

5. Patient or resident rights, including the right to:
   a. Confidentiality;
   b. Privacy;
   c. Be free from abuse, mistreatment, and neglect;
   d. Make personal choices;
   e. Obtain assistance in resolving grievances and disputes;
   f. Security of a patient's or resident's personal property; and
   g. Be free from restraints;

6. Recognizing and reporting abuse, mistreatment or neglect to a supervisor;

7. Basic nursing assistant skills, including:
   a. Taking vital signs, height, and weight using standing, wheelchair and bed scales;
   b. Maintaining a patient's or resident's environment;
   c. Observing and reporting pain;
   d. Assisting with diagnostic tests including obtaining specimens;
   e. Providing care for patients or residents with drains and tubes including catheters and feeding tubes;
   f. Recognizing and reporting abnormal patient or resident physical, psychological, or mental changes to a supervisor;
   g. Applying clean bandages;
   h. Providing peri-operative care; and
   i. Assisting in admitting, transferring, or discharging patients or residents.

8. Personal care skills, including:
   a. Bathing, skin care, and dressing;
   b. Oral and denture care;
   c. Shampoo and hair care;
   d. Fingernail care;
   e. Toileting, perineal, and ostomy care;
   f. Feeding and hydration, including proper feeding techniques and use of assistive devices in feeding; and

9. Age specific, mental health, and social service needs, including:
   a. Modifying the nursing assistant's behavior in response to patient or resident behavior,
   b. Demonstrating an awareness of the developmental tasks and physiologic changes associated with the aging process,
   c. Responding to patient or resident behavior,
   d. Allowing the resident or patient to make personal choices and providing and reinforcing other behavior consistent with the individual’s dignity,
   e. Providing culturally sensitive care,
   f. Caring for the dying patient or resident, and
   g. Using the patient's or resident's family as a source of emotional support for the resident or patient;

10. Care of the cognitively impaired patient or resident including:
    a. Understanding and addressing the unique needs and behaviors of patients or residents with dementia or other cognitive impairment,
    b. Communicating with cognitively impaired patients or residents,
    c. Reducing the effects of cognitive impairment, and
    d. Appropriate responses to the behavior of cognitively impaired individuals.

11. Skills for basic restorative services, including:
    a. Body mechanics;
    b. Resident self-care;
c. Assistive devices used in transferring, ambulating and dressing;
d. Range of motion exercises;
e. Bowel and bladder training;
f. Care and use of prosthetic and orthotic devices; and
g. Turning and positioning a resident in bed, transferring a resident between bed and chair and positioning a resident in a chair.

12. Health care team member skills including the role of the nursing assistant and others on the health care team, time management and prioritizing work; and

13. Legal aspects of nursing assistant practice, including:
   a. Board-prescribed requirements for certification and re-certification including criminal background checks, testing, Board application, felony bar under A.R.S. § 32-1606 (B)(17), proof of legal presence, allotted time to certify and practice requirement for re-certification;
   b. Delegation of nursing tasks,
   c. Ethics,
   d. Advance directives and do-not-resuscitate orders, and
   e. Standards of conduct under R4-19-814.

14. Body structure and function, together with common diseases and conditions.

G. Curriculum sequence: A nursing assistant training program shall provide a student with a minimum of 16 hours instruction in the subjects identified in subsections (F)(1) through (F)(6) before allowing a student to care for patients or residents.

H. Skills: A nursing assistant instructor shall verify and document that the following skills are satisfactorily performed by each student before allowing the student to perform the skill on a patient or resident without the instructor present:
   1. Hand hygiene, gloving and gowning; and
   2. Skills in subsection (F)(7), (8) and (11)(a), (c), (d), (f), and (g).

I. One-year approval: following receipt and review of a complete initial application as specified in R4-19-804 the Board may approve the program for a period that does not exceed one year, if requirements are met, without a site visit.

J. A Medicare or Medicaid certified long-term care facility-based program shall provide in its initial and each renewal application, a signed, sworn, and notarized document, executed by the program coordinator, affirming that the program does not require a nursing assistant student to pay a fee for any portion of the program including the initial attempt on the state competency exam.

**Historical Note**


**R4-19-803. Certified Medication Assistant Program Requirements**

A. Organization and Administration: A certified medication assistant (CMA) program may only be offered by those entities identified in A.R.S § 32-1650.01 (A).

B. Instructor qualifications and duties
   1. A medication assistant program instructor shall:
      a. Hold a current, registered nurse license that is active and in good standing or multistate privilege to practice as an RN under A.R.S. Title 32, Chapter 15;
      b. Possess at least two years or 3,000 hours of direct care nursing experience; and
      c. Have administered medications to residents of a long-term care facility for a minimum of 40 hours.
   2. Duties of a medication assistant instructor include, but are not limited to:
      a. Ensuring that the program meets the requirements of this Article;
      b. Planning each learning experience;
      c. Teaching a curriculum that meets the requirements of this Section;
      d. Implementing student and program evaluation policies that meet or exceed the requirements R4-19-801 (A) (9) and (10);
      e. Administering not less than three secure unit examinations and one comprehensive final exam consistent with the course curriculum and the requirements of R4-19-801(B)(3)(c) and;
      f. Requiring each student to demonstrate satisfactory performance of all critical elements of each skill in subsection (D)(4) before allowing a student to perform the skill on a patient or resident without the instructor’s presence and direct observation;
      g. Being physically present and attentive to students in the classroom and clinical setting at all times during all sessions;
   3. A program instructor shall supervise only one student for the first 12 hours of each student’s clinical experience; no more than three students for the next 12 hours of each student’s clinical experience; and no more than five students for the next 16 hours of each student’s clinical experience;

C. Clinical and classroom hour requirements and resources
   1. A medication assistant training program shall ensure each graduate received a minimum of 100 hours of total instruction consisting of:
      a. Instructor-led didactic instruction for a minimum of 45 hours;
b. Instructor supervised skill practice and testing for a minimum of 15 hours;
c. Instructor supervised medication administration for a minimum of 40 hours in a long-term care facility licensed by the Department of Health Services.

2. A medication assistant program shall ensure that equipment and supplies are in functional condition and sufficient in number for each enrolled student to practice required skills in subsection (D)(3) and (D)(4). At a minimum, the program shall provide the following:
   a. A medication cart similar to one used in the clinical practice facility;
   b. Simulated medications and packaging consistent with resident medications;
   c. Pill crushers, pill splitters, medication cups and hand hygiene supplies;
   d. Medication administration record forms; and
   e. Current drug references, calculator and any other equipment used to administer medications safely.

D. Curriculum: A medication assistant training program shall provide classroom and clinical instruction in each of the following subjects.
   1. Role of certified medication assistant (CMA) in Arizona including allowable acts, conditions, delegation and restrictions;
   2. Principles of medication administration including:
      a. Terminology,
      b. Laws affecting drug administration,
      c. Drug references,
      d. Medication action,
      e. Medication administration across the human lifespan,
      f. Dosage calculation,
      g. Medication safety,
      h. Asepsis,
      i. Documentation.
   3. Medication properties, uses, adverse effects, administration and care implications for the following types of medications:
      a. Vitamins, minerals, and herbs,
      b. Antimicrobials,
      c. Eye and ear medications,
      d. Skin medications,
      e. Cardiovascular medications,
      f. Respiratory medications,
      g. Gastrointestinal medications,
      h. Urinary system medications and medications to attain fluid balance,
      i. Endocrine/reproductive medications,
      j. Musculoskeletal medications,
      k. Nervous system/sensory system medications’ and
      l. Psychotropic medications.
   4. Medication administration theory and skill practice in administration of:
      a. Oral tablets, capsules, and solutions;
      b. Ear drops, eye drops and eye ointments;
      c. Topical lotions, ointments and solutions;
      d. Rectal suppositories; and
      e. Nasal drops and sprays.
   5. Any other topics deemed by the program or the Board as necessary and pertinent to the safe administration of medications.

Historical Note

R4-19-804. Initial Approval and Re-Approval Training Programs
A. An applicant for initial training program approval shall submit an application packet to the Board at least 90 days before the expected starting date of the program. An applicant shall submit application documents that are unbound, typed or word processed, single-sided, and on white, letter-size paper plus one electronic copy of the entire packet. The Board does not accept notebooks, spiral bound documents, manuals or books.
B. The Board may impose disciplinary action including denial on any training program that has advertised, conducted classes, recruited or collected money from potential students before receiving Board approval or after expiration of approval except for completing instruction to students who enrolled before the expiration date.
C. A program applying for initial approval shall include all of the following in their application packet:
   1. Name, address, web address, telephone number, e-mail address and fax number of the program;
   2. Identity of all program owners or sponsoring institutions;
3. Name, license number, telephone number, e-mail address and qualifications of the program coordinator as required in R4-19-802;
4. Name, license number, telephone number, e-mail address and qualifications of each program instructor including clinical instructors as required in either R4-19-802 for CNA programs or R4-19-803 for CMA programs;
5. Name, telephone number, e-mail address and qualifications any person with administrative oversight of the training program, such as an owner, supervisor or director;
6. Accreditation status of the training program, if any, including the name of the accrediting body and date of last review;
7. Name, address, telephone number and contact person, for all health care institutions which will be clinical sites for the program;
8. Medicare certification status of all clinical sites, if any;
9. Evidence of program compliance with this Article including all of the following:
   a. Program description that includes the length of the program, number of hours of clinical, laboratory and classroom instruction, and program goals consistent with federal, state, and if applicable, private postsecondary requirements;
   b. A list and description of classroom facilities, equipment, and instructional tools the program will provide;
   c. Written curriculum and course schedule according to the provisions of this Article;
   d. A copy of the documentation that the program will use to verify student attendance, instructor presence and skills;
   e. Copy of signed, current clinical contracts;
   f. The title, author, name, year of publication, and publisher of all textbooks the program will require students to use;
   g. A copy of course policies and any other materials that demonstrate compliance with this Article and the statutory requirements in Title 32, Chapter 15;
   h. A plan to evaluate the program that meets requirements in R4-19-801(A) (10);
   i. An implementation plan including start date and a description of how the program will provide oversight to ensure all requirements of this Article are met;
   j. A self-assessment checklist of the application contents and their location in the application, on a form provided by the Board; and
   k. Other requirements as requested consistent with R4-19-802 for nursing assistant programs and R4-19-803 for medication assistant programs.

D. Re-approval of Training Programs
1. A training program applying for re-approval shall submit a paper and electronic application and accompanying materials to the Board before expiration of the current approval. The applicant program shall ensure that all documents submitted are unbound, typed or word processed, single-sided, and on white, letter-size paper. The Board does not accept notebooks, spiral bound documents, manuals or books. A program or site of a consolidated program that did not hold any classes in the previous approval period is not eligible for renewal of approval.
2. The program shall include the following with the renewal application:
   a. A program description and course goals;
   b. Name, license number, and qualifications of current program personnel;
   c. A copy of the current curriculum which meets the applicable requirements in either R4-19-802 or R4-19-803;
   d. The dates of each program offering, number of students who have completed the program, and the results of the state-approved written and manual skills tests, including first-time pass rates since the last program review;
   e. A copy of current program policies, consistent with R4-19-801;
   f. Any change in resources, contracts, or clinical facilities since the previous approval or changes that were not previously reported to the Board;
   g. The program evaluation plan with findings regarding required evaluation elements under R4-19-801 (A) (10);
   h. The title, author, year of publication, and publisher of the textbook used by the program;
   i. Copies of the redacted records of one program graduate;
   j. The total number of enrolled students and graduates for each year since the last approval;
   k. The total number of persons taking the state-approved exam in the past two years; if the number is less than 10, a comprehensive plan to increase program enrollment;
   l. A self-assessment checklist of the application contents and their location in the application, on a form provided by the Board; and
   m. Other requirements as requested consistent with R4-19-802 for nursing assistant programs and R4-19-803 for medication assistant programs.

E. Upon determination of administrative completeness of either an initial or renewal application, the Board, through its authorized representative, shall schedule and conduct a site visit of a CNA program, unless one year only approval is granted on an initial application. The Board may conduct a site visit of a CMA program. Site visits are for the purpose of verifying compliance with this Article. Site visits may be conducted in person or through the use of distance technology.

F. Following an evaluation of the program application and a site visit, if applicable, the Board may approve or renew the approval of the program for two years for a nursing assistant program and up to four years for a medication assistant program, if the program renewal application and site visit findings, as applicable, meet the requirements of this Article, and A.R.S. Title 32, Chapter 15 and renewal is in the best interest of the public. If the program does not meet these requirements, the Board may issue a notice of deficiency under R4-19-805 or take disciplinary action.
G. A program may request an administrative hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for program approval or renewal of approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

H. The owner, operator, administrator or coordinator of a program that is denied approval or renewal of approval shall not be eligible to conduct, own or operate a new or existing program for period of two years from the date of denial.

**Historical Note**


R4-19-805. Deficiencies and Rescission of Program Approval, Unprofessional Program Conduct, Voluntary Termination, Disciplinary Action, and Reinstatement

A. Deficiencies

1. Upon determining that a training program has not complied with this Article, the Board may issue a written notice of deficiency to the program. The Board shall establish a reasonable period of time, based upon the number and severity of deficiencies, for correction of the deficiencies. Under no circumstances, however, shall the period for correction of deficiencies exceed six months.
   a. Within ten days from the date that the notice of deficiency is served, the program shall submit a plan of correction to the Board.
   b. The Board, through its authorized representative, may approve the plan of correction or require modifications to the plan if the plan does not adequately address the deficiencies.
   c. The Board may conduct periodic evaluations and site visits during the period of correction to ascertain the program's progress toward correcting the deficiencies.
   d. The Board shall evaluate the program's compliance, at a regularly scheduled Board meeting following the period of correction to determine whether the program has corrected the deficiencies.

2. The Board may rescind the approval of a training program or take other disciplinary action under A.R.S. §32-1663, based on the number and severity of violations if the program engages in any of the following:
   a. Failure to submit a plan of correction to the Board within ten days of service of a notice of deficiency.
   b. Failure to comply with the requirements of this Article within the period set by the Board in the notice of deficiency;
   c. Noncompliance with federal, state, or, if applicable, private postsecondary requirements;
   d. Failure to permit a scheduled or unannounced Board site visit or failure to allow a Board representative access to program documents, staff or students during a site visit or investigation;
   e. Offering, advertising, recruiting, or enrolling students in a training program before Board approval is granted;
   f. Conducting a training program after expiration of Board approval without filing an application for renewal of approval before the expiration date;
   g. For a long-term care based nursing assistant program, charging for any portion of the program;
   i. Committing an act of unprofessional program conduct.

B. Unprofessional program conduct

A notice of deficiency or a disciplinary action including denial of approval or rescission of approval may be issued against a training program for any of the following acts of unprofessional conduct:

1. Failing to maintain minimum standards of acceptable and prevailing educational practice;
2. Any violation of this Article;
3. Utilization of students as labor rather than for educational purposes in a health care facility;
4. Failing to follow the program’s or parent institution’s mission or goals, program design, objectives, or policies;
5. Failing to provide the classroom, laboratory or clinical teaching hours required by this Article or described in the program description;
6. Enrolling students in a program without adequate faculty, facilities, or clinical experiences, as required by this Article;
7. Permitting unqualified persons to supervise teaching-learning experiences in any portion of the program;
8. Failing to comply with Board requirements within designated timeframes;
9. Engaging in fraud, misrepresentation or deceit in advertising, recruiting, promoting or implementing the program;
10. Making a false, inaccurate or misleading statement to the Board or the Board’s designee in the course of an investigation, or on any application or information submitted to the Board or on the program’s public website;
11. Failing to supervise students in the clinical setting in accordance with this Article or allowing more than the maximum students per clinical instructor prescribed in this Article;
12. Engaging in any other conduct that gives the Board reasonable cause to believe the program’s conduct may be a threat to the safety or welfare of students, faculty, patients or the public.
13. Failing to:
   a. Furnish in writing a full and complete explanation of a matter reported pursuant to A.R.S. §32-1664, or
   b. Respond to a subpoena issued by the Board;
14. Failing to take appropriate action to safeguard a patient’s or resident’s welfare or follow policies and procedures of the program or clinical site designed to safeguard the patient or resident;
15. Failing to promptly provide make-up classroom, laboratory, or clinical hours, with adequate notice to students, equivalent educational content, and reasonable scheduling, when shortages of hours were caused by the program or program instructors;
16. Failing to promptly remove, or adequately discipline or train, program instructors whose conduct violates this Article or may be a threat to the safety or welfare of students, patients, residents, or the public.
17. Engaging in retaliatory, threatening, or intimidating conduct toward current, prospective or former program students, instructors, other staff, or the public, who make complaints about any aspect of the program to program staff or the Board.

C. Disciplinary Action
If the Board issues disciplinary action against the approval of a nursing assistant or medication assistant, training program, the program may request a hearing by filing a written request with the Board within 30 days of service of the Board’s order. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10, and 4 A.A.C. 19, Article 6.

D. Voluntary termination
1. If a training program is voluntarily terminating before renewal, the program shall submit a written notice of termination to the Board.
2. The program coordinator shall continue the training program, including retaining necessary instructors, until the last student is transferred or has completed the training program.
3. Within 15 days after the termination of a training program, the administrator or a program representative shall notify the Board in writing of the permanent location and availability of all program records.
4. A program that fails to renew its approval with the Board shall be considered voluntarily terminated unless there is a complaint against the program.

E. Re-issuance of approval
1. If the Board revokes the approval of a training program, the owner, administrator or coordinator of the revoked program may apply for re-issuance of program approval after a period of two years by complying with the requirements of this Article. The owner, administrator and coordinator of a program that had its approval revoked shall not own, administer or coordinate a training program for a period of two years from the date of program revocation.
2. If the Board, in lieu of revocation, accepts a voluntarily surrender of a program’s approval, the program’s owner, administrator or coordinator may apply for reissuance of the program’s approval after a period of two years. The owner, administrator and coordinator of a program that voluntarily surrendered its approval shall not own, administer or coordinate a training program for a period of two years from the date of the surrender of approval.
3. A training program owner, administrator or coordinator whose program approval was voluntarily surrendered or that had its approval rescinded or revoked shall submit a complete reissuance application packet in writing that contains all of the information and documentation required of programs applying for initial approval. In addition, the program shall provide substantial evidence that the basis for revocation or voluntary surrender no longer exist and that reissuance of program approval is in the best interest of the public.
4. The Board may reissue approval to a training program that meets the requirements of this Article. A program that is denied reissuance of approval may request a hearing by filing a written request with the Board within 30 days of service of the Board’s order denying reissuance. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

Historical Note

R4-19-806. Nursing Assistant and Medication Assistant Certification by Examination
A. An applicant for certification by examination shall submit the following to the Board:
1. A verified application on a form furnished by the Board that provides the following information about the applicant:
   a. Full legal name and any and all former names used by the applicant;
   b. Current mailing address, including county of residence, e-mail address and telephone number;
   c. Place and date of birth;
   d. Social Security number;
   e. Ethnic category and marital status at the applicant's discretion;
   f. Educational background, including the name of the training program attended, and date of graduation and for medication assistant, proof of high school or equivalent education completion as required A.R.S. § 32-1650-02 (A)(4);
   g. Current employer, including address and telephone number, type of position, and dates of employment, if employed in health care;
   h. A list of all states in which the applicant is or has been registered as a nursing assistant or medication assistant and the certificate number, if any;
i. For medication assistant, proof of CNA certification and 960 hours or 6 months full time employment as a CNA in the past year, as required in A.R.S. §32-1650.02;

j. Responses to questions regarding the applicant’s background on the following subjects:
   i. Current investigation or pending disciplinary action by a nursing, nursing assistant or medication assistant regulatory agency in the United States or its territories
   ii. Action taken on a nursing assistant or medication assistant license, certification or registry designation in any other state;
   iii. Felony conviction or conviction of an undesignated or other similar offense and the date of absolute discharge of sentence;
   iv. Unprofessional conduct as defined in A.R.S. § 32-1601;
   v. Explanation and supporting documentation for each affirmative answer to questions regarding the applicant’s background;

2. Proof of satisfactory completion of a nursing assistant or medication assistant training program that meets the requirements of this Article;

3. Proof of United States citizenship or alien status as specified in A.R.S. § 41-1080;

4. For CNA applicants, one or more fingerprint cards or fingerprints, if required by A.R.S. § 32-1606 (B)(16);

5. For CMA applicants, one or more fingerprint cards or fingerprints, as required by A.R.S. § 32-1606 (B)(15) if a fingerprint background report has not been received by the Board in the past two years; and


B. An applicant for certification as a nursing assistant shall submit a passing score on a Board-approved nursing assistant examination and provide one of the following criteria:

1. Proof that the applicant has completed a Board-approved nursing assistant training program within the past two years;

2. Proof that the applicant has completed a nursing assistant training program approved in another state or territory of the United States consisting of at least 120 hours within the past two years;

3. Proof that the applicant has completed a nursing assistant program approved in another state or territory of the United States of at least 75 hours of instruction in the past two years and proof of working as a nursing assistant for an additional number of hours in the past two years that together with the hours of instruction, equal at least 120 hours;

4. Proof that the applicant either holds a nursing license in good standing in the U.S. or territories, has graduated from an approved nursing program, or otherwise meets educational requirements for a registered or practical nursing license in Arizona;

5. Documentation sent directly from the program that the applicant successfully completed a nursing course or courses as part of an RN or LPN program approved in either in this or another state in the last 2 years that included:
   a. Didactic content regarding long-term care clients; and
   b. Forty hours of instructor-supervised direct patient care in a long-term care or comparable facility; or

6. Documentation of a minimum of 100 hours of military health care training, as evidenced by military records, and proof of working in health care within the past 2 years.

C. An applicant for medication assistant shall meet the qualifications of A.R.S. §§32-1650.02 and 32-1650.03. An applicant who wishes to use part of a nursing program in lieu of completion of a Board approved medication assistant training program under A.R.S. § 32-1650.02 shall submit the following:

1. An official transcript from a Board approved nursing program showing a grade of C or higher in a 45 hour or 3 semester credit, or equivalent, pharmacology course; and

2. A document signed by both the applicant’s clinical instructor and the nursing program administrator verifying that the applicant completed 40 hours of supervised medication administration in a long-term care facility.

D. Certifying Exam

1. A CNA applicant shall take and pass both portions of the certifying exam within 2 years:
   a. Of program completion for graduates of nursing assistant programs approved in Arizona or another state, or
   b. Of date of the first test for all other applicants.

2. A CMA applicant shall take and pass both portions of the certifying exam within one year:
   a. Of program completion for graduates of Board-approved programs, or
   b. Of the date of the first test for all other applicants.

3. An applicant may re-take the failed portion or portions of a certifying exam, under conditions prescribed in written policy by the exam vendor, until a passing score is achieved or their time expires under subsections (D) (1) or (2).

E. An applicant who does not take or pass an examination within the time period specified in subsection (D) shall enroll in and successfully complete a Board approved training program in the certification category before being permitted to retake an examination.

F. The Board may certify an applicant who meets the applicable criteria in this Article and A.R.S. Title 32, Chapter 15 if certification is in the best interest of the public. A CNA who qualifies for a CMA certificate shall be issued a combined CNA-CMA certificate.

G. An applicant who is denied certification may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for certification. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.
H. Medication assistant certification expires when nursing assistant certification expires. CMA applicants whose nursing assistant certification will expire within 12 months of initial issuance, shall pay a prorated fee for medication assistant certification.

**Historical Note**


**R4-19-807. Nursing Assistant and Medication Assistant Certification by Endorsement**

A. An applicant for certification by endorsement shall submit all of the information, documentation, and fees required in R4-19-806.

B. An applicant who has been employed for less than one year shall list all employers during the past two years.

C. An applicant for nursing assistant certification by endorsement shall meet the training program criteria in R4-19-806(B). An applicant for combined nursing assistant and medication assistant endorsement shall, in addition, provide evidence satisfactory completion of a training program that meets the requirements of A.R.S. § 32-1650.04 and pass a competency examination as prescribed in A.R.S. § 32-1650.03.

D. In addition to the other requirements of this Section, an applicant for certification by endorsement shall provide evidence that the applicant:
   1. Is or has been, within the last 2 years, listed as active on a nursing assistant register or a substantially equivalent register by another state or territory of the United States with no substantiated complaints or discipline; and
   2. For nursing assistant, meets one or more of the following criteria:
      a. Regardless of job title or description, performed nursing assistant activities for a minimum of 160 hours for an employer or as part of a nursing or allied health program in the past two years; or
      b. Has completed a nursing assistant training program and passed the required examination within the past two years.
   3. In addition to the above requirements, for combined nursing assistant and medication assistant certification, meets the practice requirements of A.R.S. § 32-1650.04 and pays applicable fees under R4-19-808.

E. The Board may certify an applicant who meets the applicable criteria in this Article if certification is in the best interest of the public.

F. An applicant who is denied certification may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for certification. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

**Historical Note**


**R4-19-808. Fees Related to Certified Medication Assistant**

A. The Board shall collect the following fees related medication assistant certification:
   1. Initial application for certification by exam, $50.00.
   2. Fingerprint processing, $50.00.
   3. Renewal CNA-CMA certificate, $50.00.
   4. Renewal fee after expiration CNA-CMA certificate, $25.00 plus an additional $25.00 for each month lapsed.
   5. Application for certification by endorsement, $50.00.

B. If an individual or entity submits a dishonored check, draft order or note, the Board may collect, from the provider of the instrument, the amount allowed under A.R.S. § 44-6852.

**Historical Note**


**R4-19-809. Nursing Assistant and Medication Assistant Certificate Renewal**

A. An applicant for renewal of a CNA certificate or a combined CNA and CMA certificate shall:
   1. Submit a verified application to the Board on a form furnished by the Board that provides all of the following information about the applicant:
      a. Full legal name, mailing address including county of residence, e-mail address and telephone number;
      b. Marital status and ethnicity at the applicant’s discretion;
      c. Current health care employer including name, address, telephone number, dates of employment and type of setting;
If the applicant fails to meet the practice requirements in subsections (A)(2) for nursing assistant or (A)(3) for combined nursing assistant and medication assistant renewal, documentation that the applicant has completed a Board-approved training program for the certification sought and passed both the written and manual skills portions of the competency examination within the past two years;

e. Responses to questions that address the applicant’s background:

1. Any investigation or disciplinary action by a nursing regulatory agency or nursing assistant regulatory agency in the United States or its territories not previously disclosed by the applicant to the Board;
2. Felony conviction or conviction of an designated offense and date of absolute discharge of sentence since certified or last renewed, and
3. Unprofessional conduct committed by the applicant as defined in A.R.S. § 32-1601 since the time of last renewal and not previously disclosed by the applicant to the Board;
4. Any disciplinary action or investigation related to the applicant’s nursing license or nursing assistant or medication assistant license, certificate or registry listing by any other state regulatory agency since the last renewal and not previously disclosed to the Board.

v. Explanation and supporting documentation for each affirmative answer to questions regarding the applicant’s background:

2. For CNA renewal, employment as a nursing assistant, performing nursing assistant tasks for an employer or the applicant's performance of nursing assistant activities as part of a nursing or allied health program for a minimum of 160 hours every two years since the last certificate was issued, or
3. For combined CMA and CNA renewal, employment as a medication assistant for a minimum of 160 hours within the last 2 years, and

B. A nursing assistant certificate and a combined medication assistant-nursing assistant certificate expire every 2 years on the last day of the certificate holder’s birth date month. If a certificate holder fails to timely renew the certificate, the certificate holder shall:

1. Not work or practice as a CNA or CMA until the Board issues a renewal certificate; and
2. Pay any late fee imposed by the Board.

C. If an applicant holds a license or held a license or certificate that has been or is currently revoked, surrendered, denied, suspended or placed on probation in another jurisdiction, the applicant is not eligible to renew or reactivate the applicant’s Arizona certificate until a review or investigation has been completed and a decision made by the Board.

D. The Board may renew the certificate of an applicant who meets the criteria established in statute and this Article. An applicant who is denied renewal of a certificate may request a hearing by filing a written request with the Board within 30 days of service of the Board’s order denying renewal of the license. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

Historical Note
ii. Description of evidence supporting the finding;
c. Date of hearing, if any, or the date that the complaint was substantiated;
d. Statement disputing the allegation, if any;
e. The finding, including the date of the decision and a reference to each statute or rule violated; and
f. The sanction, including the dates of action and the duration of the sanction, if time-limited.

Historical Note

R4-19-811. Application for Duplicate Certificate
A. A certificate holder shall report a lost or stolen certificate to the Board in writing or electronically through the Board’s website, within 30 days of discovery of the loss.
B. An individual requesting a duplicate certificate shall file an application on a form provided by the Board for a duplicate certificate and pay the applicable fee under A.R.S. § 32-1643 (A) (14).

Historical Note

R4-19-812. Change of Name or Address
A. An applicant or a certificate holder shall notify the Board, in writing or electronically through the Board’s website of any legal name change within 30 days of the change, and submit a copy of the official document verifying the name change.
B. An applicant or a certificate holder shall notify the Board in writing or electronically through the Board’s website of any change of address within 30 days of the address change.

Historical Note

R4-19-813. Performance of Nursing Assistant Tasks; Performance of Medication Assistant Tasks
A. A certified nursing assistant may perform the following tasks as delegated by a licensed nurse:
1. Tasks for which the nursing assistant has been trained through the curriculum identified in R4-19-802, and
2. Tasks learned through inservice or educational training if the task meets the following criteria and the nursing assistant has demonstrated competence performing the task:
   a. The task can be safely performed according to clear, exact, and unchanging directions;
   b. The task poses minimal risk to the patient or resident and the consequences of performing the task improperly are not life-threatening or irreversible;
   c. The results of the task are reasonably predictable; and
   d. Assessment, interpretation, or decision-making is not required during the performance or at the completion of the task.
B. A nursing assistant who is also certified as a medication assistant under A.R.S. § 32-1650.02 may administer medications under the conditions imposed by A.R.S. § 32-1650.02 through 32-1650.07.
C. A certificate holder under this Article shall:
   1. Recognize the limits of the certificate holder’s personal knowledge, skills, and abilities;
   2. Comply with laws relevant to nursing assistant and medication assistant practice;
   3. Inform the registered nurse, licensed practical nurse, or another person authorized to delegate the task about the certificate holder’s ability to perform the task before accepting the assignment;
   4. Accept delegation, instruction, and supervision from a licensed nurse or another person authorized to delegate a task;
   5. Not perform any task that requires a judgment based on nursing knowledge;
   6. Acknowledge responsibility for personal actions necessary to complete an accepted assigned task;
   7. Follow the plan of care, if available;
   8. Observe, report, and record signs, symptoms, and changes in the patient or resident's condition in an ongoing and timely manner; and
   9. Retain responsibility for all assigned tasks without delegating any tasks to another person.

Historical Note
New Section adopted by final rulemaking at 6 A.A.R. 757, effective February 4, 2000 (Supp. 00-1). Amended by final
R4-19-814. Standards of Conduct for Certified Nursing Assistants and Certified Medication Assistants

For purposes of A.R.S. § 32-1601(22)(d), a practice or conduct that is or might be harmful or dangerous to the health of a patient or the public and constitutes a basis for disciplinary action on a certificate includes the following:

1. Failing to maintain professional boundaries or engaging in a dual relationship with a patient, resident, or any member of the patient's or resident's family;
2. Engaging in sexual conduct with a patient, resident, or any member of the patient's or resident's family who does not have a pre-existing relationship with the certificate holder, or any conduct while on duty or in the presence of a patient or resident that a reasonable person would interpret as sexual;
3. Leaving an assignment or abandoning a patient or resident who requires care without properly notifying the immediate supervisor;
4. Failing to accurately and timely document care and treatment provided to a patient or resident, including, for a CMA, medications administered or not administered;
5. Falsifying or making a materially incorrect entry in a health care record;
6. Failing to follow an employer's policies and procedures, designed to safeguard the patient or resident;
7. Failing to take action to protect a patient or resident whose safety or welfare is at risk from potential or actual incompetent health care practice, or to report the practice to the immediate supervisor or a facility administrator;
8. Failing to report signs, symptoms, and changes in patient or resident conditions to the immediate supervisor in an ongoing and timely manner;
9. Violating the rights or dignity of a patient or resident;
10. Violating a patient or resident's right of privacy by disclosing confidential information or knowledge concerning the patient or resident, unless disclosure is otherwise required by law;
11. Neglecting or abusing a patient or resident physically, verbally, emotionally, or financially;
12. Failing to immediately report to a supervisor and the Board any observed or suspected abuse or neglect, including a resident or patient’s report of abuse or neglect;
13. Soliciting, or borrowing, property or money from a patient or resident, or any member of the patient's or resident's family, or the patient's or resident's guardian;
14. Soliciting or engaging in the sale of goods or services unrelated to the certificate holder’s health care assignment with a patient or resident, or any member of the patient or resident’s immediate family, or guardians;
15. Removing, without authorization, any money, property, or personal possessions, or requesting payment for services not performed from a patient, resident, employer, co-worker, or member of the public;
16. Repeated use or being under the influence of alcohol, medication, or any other substance to the extent that judgment may be impaired and practice detrimentally affected or while on duty in any work setting;
17. Accepting or performing patient or resident care tasks that the certificate holder lacks the education, competence or legal authority to perform;
18. Removing, without authorization, narcotics, drugs, supplies, equipment, or medical records from any work setting;
19. Obtaining, possessing, using, or selling any narcotic, controlled substance, or illegal drug in violation of any employer policy or any federal or state law;
20. Permitting or assisting another person to use the certificate holder’s certificate or identity for any purpose;
21. Making untruthful or misleading statements in advertisements of the individual's practice as a certified nursing assistant or certified medication assistant;
22. Offering or providing certified nursing assistant or certified medication assistant services for compensation without a designated registered nurse supervisor;
23. Threatening, harassing, or exploiting an individual;
24. Using violent or abusive behavior in any work setting;
25. Failing to cooperate with the Board during an investigation by:
   a. Not furnishing in writing a complete explanation of a matter reported under A.R.S. § 32-1664;
   b. Not responding to a subpoena or written request for information issued by the Board;
   c. Not completing and returning a Board-issued questionnaire within 30 days; or
   d. Not informing the Board of a change of address or phone number within 10 days of each change;
26. Cheating on the certification exam or providing false information on an initial or renewal application for certification;
27. Making a false or inaccurate statement to the Board or the Board's designee during the course of an investigation;
28. Making a false or misleading statement on a nursing assistant, medication assistant or health care related employment or credential application;
29. If an applicant or certificate holder is charged with a felony or a misdemeanor, involving conduct that may affect patient safety, failing to notify the Board, in writing, within 10 working days of being charged under A.R.S. § 32-3208. The applicant or certificate holder shall include the following in the notification:
   a. Name, current address, telephone number, Social Security number, and license number, if applicable;
   b. Date of the charge; and
c. Nature of the offense;

30. Failing to notify the Board, in writing, of a conviction for a felony or an undesignated offense within 10 days of the conviction. The applicant or certificate holder shall include the following in the notification:
   a. Name, current address, telephone number, Social Security number, and license number, if applicable;
   b. Date of the conviction;
   c. Nature of the offense;

31. For a medication assistant, performance of any acts associated with medication administration not specifically authorized by A.R.S. § 32-1650 et seq; and

32. Practicing in any other manner that gives the Board reasonable cause to believe that the health of a patient, resident, or the public may be harmed.

33. Violation of any other state or federal laws, rules or regulations.

**Historical Note**


R4-19-815. Reissuance or Subsequent Issuance of a Nursing Assistant or Medication Assistant Certificate

An applicant whose application is denied or a certificate holder whose certificate is revoked in accordance with A.R.S. § 32-1663, may reapply to the Board after a period of five years from the date the certificate or application is revoked or denied. A certificate holder who voluntarily surrenders a certificate may reapply to the Board after no less than three years from the date the certificate is surrendered. The Board may issue or re-issue a nursing assistant certificate under the following terms and conditions:

1. An applicant shall submit documentation showing that the basis for denial, revocation or voluntary surrender has been removed and that the issuance or re-issuance of certification will no longer constitute a threat to the public health or safety. The Board may require an applicant to be tested for competency, or retake and successfully complete a Board approved training program and pass the required examination, all at the applicant’s expense.

2. The Board shall consider the application, and may designate a time for the applicant to address the Board at a regularly scheduled meeting.

3. After considering the application, the Board may:
   a. Grant certification, or
   b. Deny the application.

4. An applicant who is denied issuance or reinstatement of certification may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying issuance or reinstatement of nursing assistant certification. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

**Historical Note**

ARIZONA STATE BOARD OF NURSING
JOEY RIDENOUR, RN, MN, FAAN
EXECUTIVE DIRECTOR

4747 NORTH 7TH STREET, SUITE 200
PHOENIX, AZ 85014-3655
PHONE (602) 771-7800, FAX (602) 771-7888