

REGISTRATION AS A NURSE AIDE DURING COVID-19 PANDEMIC EMERGENCY

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House Bill 5089 (H-1) as reported from committee
Sponsor: Rep. Ann Bollin
Committee: Health Policy
Complete to 10-25-21

Analysis available at
<http://www.legislature.mi.gov>

SUMMARY:

House Bill 5089 would amend the Public Health Code to allow an applicant to be registered as a nurse aide with modified requirements during a declared COVID-19 public health emergency and for a four-month grace period after the end of the declared emergency. The bill also would make other changes to the registration requirements for nurse aides.

COVID-19 emergency requirements

Under the bill, only during a *COVID-19 pandemic emergency*, an individual who is a registered professional nurse licensed under the code could provide training to a nurse aide candidate without a permit.

COVID-19 pandemic emergency would mean a public health emergency declared by the Secretary of the U.S. Department of Health and Human Services resulting from the coronavirus disease 2019 (COVID-19) and the immediately following four months after it ends.

Generally, an applicant may be registered as a nurse aide if the applicant submits the required application and fee, successfully completes a training program and competency examination approved by the Department of Licensing and Regulatory Affairs (LARA), and meets any other requirements set by LARA.

The bill would provide that, during a COVID-19 pandemic emergency, an applicant meets the above training program and other LARA requirements if he or she does all of the following:

- Completes a minimum of 16 hours of online or classroom instruction covering the training areas listed in the Code of Federal Regulations,¹ including all of the following:
 - Psychological well-being, which includes resident rights, confidentiality, and abuse.
 - Infection control with a focus on the prevention and control of COVID-19.
 - Safety and emergency care, including proper use of the Heimlich maneuver.
 - Assisting with activities of daily living, including positioning, locomotion, and restorative care.
 - Nutrition and hydration.
 - End of life and comfort care.
 - Dementia care.
 - Communication and interpersonal skills.
 - Documentation and use of care plans.

¹ <https://www.law.cornell.edu/cfr/text/42/483.152>

- Promoting independence of residents.
- Basic nursing skills.
- Providing personal care and basic restorative services.
- Caring for cognitively impaired residents.
- Mental health and social service needs.
- Under the supervision of an individual of a licensed registered professional nurse, completes a minimum of 80 hours of temporary nurse aide training, training on the job, or in-service nurse aide education.

Other amendments

The bill also would add an alternative option for demonstrating competency to LARA. Under the bill, instead of successfully completing a competency examination approved by LARA, the applicant could successfully complete an assessment performed by a site administrator responsible for assessing the applicant’s competency skills or by the entity hiring the applicant, as long as those assessments were determined by LARA to meet federal requirements.

Under the bill, LARA would have to allow an applicant to complete a competency examination online or through remote means.

Finally, LARA could not deny a person a permit as a nurse aide training program solely because the program allows individuals to complete curricula online or by other remote means or counts each hour an individual has worked performing skills necessary of a nurse aide as one hour of training. (This provision would not apply to the 16 hours of supervised practical training, or the 16 hours of training prior to direct contract with a resident, as specified in the Code of Federal Regulations.)

MCL 333.21903, 333.21909, and 333.21911

FISCAL IMPACT:

House Bill 5089 would not have a significant fiscal impact on any unit of state or local government, given the limited time period to which the bill would apply.

POSITIONS:

Representatives of the following entities testified in support of the bill (6-24-21):

- NexCare Health Systems & WellBridge Group
- Health Care Association of Michigan
- Michigan County Medical Care Facilities Council

LeadingAge Michigan indicated support for the bill. (6-24-21)

Legislative Analyst: Jenny McInerney
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■ This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations and does not constitute an official statement of legislative intent.