



Kansas Hospital
ASSOCIATION

January 23, 2024

The Honorable Chiquita Brooks-LaSure
Centers for Medicare and Medicaid Services
7500 Security Blvd.
Baltimore, MD 21244

RE: 42 CFR 483.152(a)(5)(i); Requirements for approval of a nurse aide training and competency evaluation program.

Dear Administrator Brooks-LaSure,

On behalf of 121 community hospitals in Kansas, the Kansas Hospital Association appreciates the opportunity to provide comments regarding 42 CFR 483.152(a)(5)(i) and encourages the consideration of rulemaking to reform this regulation in calendar year 2024. The KHA membership encompasses a diverse set of community hospitals, ranging from small, rural critical access hospitals to large, urban academic medical centers. KHA believes the Centers for Medicare and Medicaid's existing regulation regarding Certified Nurse Assistant (CNA) instructor qualifications unnecessarily restricts who can teach a CNA training course which results in fewer CNAs entering the health care workforce.

The recent COVID-19 pandemic has highlighted many challenges to the current health care delivery system. Most notably, health care organizations across the country encountered difficulties in attracting and retaining health care workers. This challenge was no different for Kansas hospitals. The Kansas Hospital Association's annual statewide vacancy and turnover survey reports that the nurse assistant vacancy rate in Kansas hospitals is 19 percent with over 1,100 positions vacant.

Kansas hospitals are committed to playing a key part in addressing the issues facing our health care workforce and recognize the critical role that Certified Nurse Assistants play in providing essential care to patients. These dedicated professionals are a vital part of the health care system, and any barriers to their training and entry into the workforce have a direct impact on the quality and accessibility of health care services.

While CNAs are not required by regulation to be used to staff acute care facilities, health care organizations recognize the value of CNAs and desire to train more to meet the staffing needs of the present, but also getting more students of all ages into the health care pipeline with CNA being a key first step on the health care career ladder.

The Kansas Department of Labor reports that there will be 27,619 nursing assistant openings by 2028 driven by turnover and an increase in demand for staffing. Kansas colleges currently produce 3,115 CNAs annually compared to 5,007 in 2014. While there are other training programs besides those offered by colleges, a common theme heard from both education institutions and health care delivery organizations throughout Kansas is that CNA course supervisors and instructors with the required long-term care (LTC)

experience have become harder to find to staff CNA training courses. Similarly, Kansas colleges have expressed that their nursing faculty with decades of practice and teaching experience have an interest in teaching CNA courses but only lack the 1-year long-term care experience qualification. This is a gap in the status quo that Kansas hospitals believe can be addressed by CMS.

Kansas hospitals encourage the consideration of removing the requirement of 1 year experience in the provision of long-term care facility services to be a CNA course supervisor and instructor. We believe that by revisiting and potentially revising these qualifications, we can create a more inclusive environment that allows a broader range of experienced health care professionals to contribute to CNA training courses and thereby increasing training organizations' capacity to serve students, job seekers, and incumbent workers.

Kansas Hospital Association members have cited that despite having nursing homes in their systems, some have had to turn away leading CNA training courses at their facilities simply because their very capable RNs that would be instructors did not have the LTC hours needed. Even with RNs willing to take hours of professional continuing education courses for teaching adults, they cannot do clinicals or sign off on the CNA clinical checklist without LTC experience.

Many nurses throughout Kansas are passionate about teaching the next generation and growing the workforce to meet the needs of communities, and while a nurse without LTC experience could work as a faculty for a school of nursing and teach LPN and RN nursing students (which is a more advanced level than a CNA) they cannot teach students wanting to become CNAs. This is a gap.

We recognize that there are other non-CMS certifications that may work for training acute care versions of CNAs, like a Patient Care Technician (PCT). However, with many facilities lacking the resources to pursue these new opportunities, it makes sense for them to want to pursue the training of CNAs, particularly since CNAs can work in both acute-care and LTC, while a non-CNA role cannot. This limits the employee pool even more than it already is. One hospital nursing leader that oversees a LTC facility echoed this sentiment and shared that "many CAHs lean towards the CNA training because it has a curriculum that is already structured and can give me confidence that the nursing assistant has had a formal certified training prior to taking care of hospitalized patients. I just feel like our bandwidth is not enough to support the development of a curriculum for [an alternative certification] training, nor is it necessary to have colleges develop a very similar curriculum and name it something else all because of a regulated barrier of LTC experience. ... Our system has two LTC facilities so our nurses can still do the clinicals in the LTC setting and have the potential to offer CNA trained staff to the community as a whole, not just the hospital."

We propose a review of the existing regulations to ensure that health care professionals with practice experience can serve as CNA course supervisors and instructors. By doing so, we aim to enhance the accessibility and efficiency of CNA training programs, leading to an increased number of well-trained CNAs entering the healthcare workforce.

We appreciate the dedication of CMS to maintaining high standards in health care education and training. However, we believe that a thoughtful review of the current CNA instructor qualifications will contribute to the overall improvement of health care services and address the growing need for skilled Certified Nurse Assistants.

Thank you for your attention to this matter. We look forward to the possibility of working collaboratively with CMS to create positive changes that benefit both healthcare professionals and the patients they serve.