



Nurse Aide Training Program and Test Site Informational Call

Nurse Aide Registry
November 13, 2023

Tennessees Warning

- **The Minnesota Department of Health is hosting this informational call to inform nurse aide training programs and testing sites of processes and updates.**
- **Your comments, questions and image, which may be private data, may be visible during this event.** You are not required to provide this data, and there are no consequences for declining to do so.
- **The informational call may be accessible to anyone** who has a business or legal right to access it. By participating, you are authorizing the data collected during this presentation to be maintained by MDH. MDH will be posting this on YouTube with a nonpublic link. The posting will be available for 90 days.
- **To opt out of the presentation, please exit now.**



- Attendees are muted. During the Q&A portion, please raise your hand and we will unmute you.
- You can also submit comments or questions in the chat feature.

- Updated Candidate Handbook
 - Updates to skill tasks
 - Update in-facility and MN State specific language
 - Candidate disputes
- Questions from October call
 - Headmaster staff
- Survey findings
 - Incorrect training program codes
- Knowledge test time frame
- In-facility testing update
- Quarterly testing data
- NAR Modernization
- Resources

Self-Assessment Reading Comprehension

Self-Assessment Reading Comprehension Exam

The following passages and corresponding questions will assess your reading comprehension required for the knowledge portion of the state competency evaluation. If you miss more than three (3) questions, you should consider utilizing the oral/audio option for the knowledge exam.

PASSAGE 1

Paul and Ben are twins. They are identical in features, but opposite in personality. Paul likes to wear dark colors. Ben likes to wear bright colors. Paul likes to read quietly. Ben likes to attend football games with friends.

1. Paul can be classified as an
 - a. omnivert
 - b. extrovert
 - c. introvert
 - d. ambivert

2. Ben can be classified as an
 - a. omnivert
 - b. extrovert
 - c. introvert
 - d. ambivert

3. Paul and Ben have identical
 - a. noses
 - b. shoes
 - c. earrings
 - d. tattoos

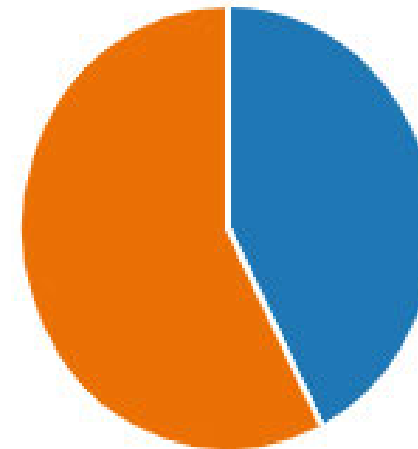
Polling Question

Please answer these three questions as part of the poll in the chat:

1. Does your program utilize the self-assessment reading comprehension test in the nurse aide handbook? Yes/No
2. Have students completed the oral knowledge exam test as a result of taking the comprehension test? Yes/No
3. Has this process been beneficial for your students? Yes/No

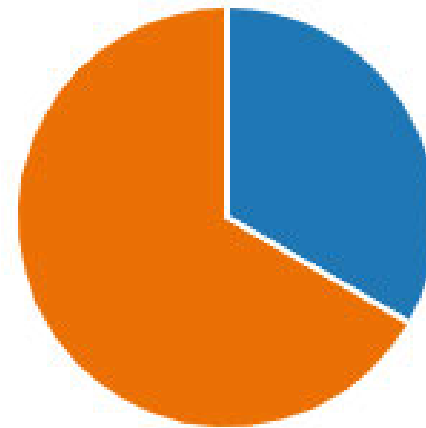
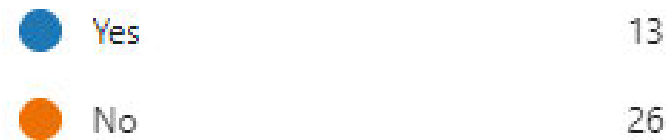
1. Does your program utilize the self-assessment reading comprehension test in the nurse aide handbook?

[More Details](#)



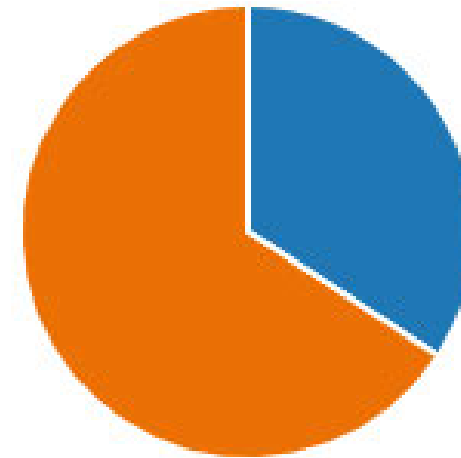
2. Have your students completed the oral knowledge exam test as a result of taking the comprehension test?

[More Details](#)



3. Has this process been beneficial for your students?

[More Details](#)



- Based on this information:
 - Continue using this in the nurse aide handbook
 - Update the questions for the scenario

Updated Candidate Handbook & Mock Skills



Locating Updated Materials

D&S - Minnesota Nurse Aide (hdmaster.com)



Minnesota Nurse Aide Testing Services

Innovative, quality technology solutions throughout the United States since 1985.



Headmaster is honored to be approved by the Minnesota Department of Health to offer Certified Nurse Aide Testing Services to the Minnesota Health Care Community.

We look forward to working with everyone involved with Certified Nurse Aide Training and Testing in Minnesota!

Update to the MN Nurse Aide Candidate Handbook, Effective December 11, 2023:

Candidates	Training Programs - Test Sites	Test Observers	Contacts
TestMaster Universe (TMU©)	Minnesota Recording Form	All Test Observer Independent Contractor Forms for HEADMASTER MN RN Testors	Please feel free to contact us if you have questions, concerns, or suggestions about our service. We value the feedback we receive from everyone involved in the Minnesota Nurse Aide training, testing, and certification process.
MN State Login TMU©	Minnesota Mock Skills		
In-Facility TMU© Login	Minnesota Mock Skills Effective 12-11-23		D&S Diversified Technologies - HEADMASTER
Minnesota Candidate Handbook Version 5.1 Update	Test Site Agreement Form 1502MN: Fill online and SUBMIT		PO Box 6609 Helena, MT 59604 TMU (Software) Questions Toll Free Phone: 888-401-0462 Fax: 406-442-3357
Minnesota Candidate Handbook Effective December 11, 2023	Test Site Equipment List Form 1503MN: Fill online and SUBMIT		MN Registry Questions Phone MDH: 651-215-8705
Practice Tests - Click Here - Then Look at the Left Column.	Large Lab Waiver Submission Tips and Attachments		Testing Questions: Check with your selected Test Site minnesota@hdmaster.com
	Test Site Instructions How To Change Number of Seats and Reschedule a Candidate.		

Minnesota Mock Skills

Updates Effective: December 11, 2023

D&S Diversified Technologies (D&SDT), LLP –
Headmaster, LLP

UPDATES TO THE SKILL TASKS

- The Feeding a Dependent Resident and Mouth Care tasks **will be included in testing and demonstrated with a live actor.**
- The Modified Bed Bath task **will be demonstrated with a live actor.**
- The Vital Signs: Pulse and Respirations – Candidates will have the option to count the Pulse and Respirations for either 1 full minute or 30 seconds and double their recording. They will need to verbally tell the RN Test Observer which count they will be using.
- ***Other updates made to the Skill Tasks are in red font and highlighted in gray.***

Minnesota Nurse Aide Candidate Handbook

EFFECTIVE FOR TESTING: December 11, 2023

Version 6

Updates Effective December 11, 2023

Policies throughout the handbook are clarified for MN State and MN In-Facility.
Test Review Request information updated (page 21).

UPDATES TO THE SKILL TASKS

- The Feeding a Dependent Resident and Mouth Care tasks will be included in testing and demonstrated with a live actor (page 37 and pages 39-40).
- The Modified Bed Bath task will be demonstrated with a live actor (pages 38-39).
- The Vital Signs: Pulse and Respirations – Candidates will have the option to count the Pulse and Respirations for either 1 full minute or 30 seconds and double their recording. They will need to verbally tell the RN Test Observer which count they will be using (page 47).
- *Other updates made to the Skill Tasks are in **red font and highlighted in gray** (pages 30-44).*

Reschedules

MN STATE

All candidates must reschedule through their testing site and conform to test site policies for rescheduling. If you must reschedule your exam date, please do so as soon as possible. Contact the test site to conform to test site rescheduling policies.

Please note: If a reschedule request is not received by your test site before one (1) full business day prior to your scheduled test date, it generally will not be granted.

Reschedules, In-Facility



Minnesota Nurse Aide Candidate Handbook

IN-FACILITY

All candidates may reschedule to a new test date up until **one (1) full business day** preceding a scheduled test day, **excluding** Saturdays, Sundays and holidays.

If you must reschedule your exam date, please do so as soon as possible. You may reschedule an exam date by signing in to your TMU© record at <https://mr.tmutest.com>. (See instructions under 'Schedule/Reschedule into a Test Event'.)

- *Example:* If you are scheduled to take your exam on a Saturday, Sunday or Monday, you would need to reschedule by close of business the Thursday before your scheduled exam.

Scheduled test date is on a:	Reschedule online by the previous:
Monday	The previous Thursday
Tuesday	The previous Friday
Wednesday	The previous Monday
Thursday	The previous Tuesday
Friday	The previous Wednesday
Saturday	The previous Thursday
Sunday	The previous Thursday

Note: Reschedules will not be granted less than one (1) full business day prior to a scheduled test date.

Refund of Testing Fees

Refund of Testing Fees Paid

MN STATE

Requesting a refund of testing fees paid is different than rescheduling a test date. Requesting a refund means that you are not interested in taking the Minnesota Nurse Aide Competency exam at all. Generally, test sites do not refund any testing fees paid.

IN-FACILITY

Requesting a refund of testing fees paid is different than rescheduling a test date. Requesting a refund means that you are not interested in taking the Minnesota Nurse Aide Competency exam at all.

Scheduled in a Test Event

- 1) If you are scheduled in a test event, a refund request of testing fees paid must be made by filling out and submitting the [Refund Request Fillable Form 1405](#) on D&SDT-Headmaster's main webpage at www.hdmaster.com at least **one (1) full business day** prior to your scheduled test event (excluding Saturdays, Sundays and holidays). No phone calls will be accepted.
 - **Example:** If you are scheduled to take your exam on a Saturday, Sunday or Monday, you would need to request a refund by filling out and submitting the Refund Request Fillable Form on the D&SDT-Headmaster main webpage at www.hdmaster.com by close of business the Thursday before your scheduled exam. D&SDT-Headmaster is open until 7:00PM Central time, Monday through Friday, excluding Saturdays, Sundays and holidays.



Minnesota Nurse Aide Candidate Handbook

- 2) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund processing fee.
- 3) Refund requests must be made within thirty (30) days of payment of original testing fees with D&SDT-Headmaster. Any requests for refunds made beyond the 30 days of original payment of testing fees with D&SDT-Headmaster *will not be issued*.

Not Scheduled in a Test Event

- 1) Refund requests must be made within thirty (30) days of original payment of testing fees with D&SDT-Headmaster. Any requests for refunds made beyond the 30 days of original payment of testing fees with D&SDT-Headmaster *will not be issued*.
- 2) A refund request of testing fees paid must be made by filling out and submitting the [Refund Request Fillable Form 1405](#) on D&SDT-Headmaster's main webpage at www.hdmaster.com. No phone calls will be accepted.
- 3) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund processing fee.

No Show Policy, MN State & In-Facility

No Show Policy

MN STATE

If you are scheduled for your exam and do not show up without notifying **your test site** before the one (1) full business day prior to your scheduled testing event, OR if you are turned away for lack of proper identification, proper attire, or any other reason to deem that you are ineligible to test, you will be considered a **NO SHOW**. You will forfeit all test fees paid and must schedule into a new test event.

If a reschedule or refund request is not received **by your test site** before the one (1) full business day preceding a scheduled test event a NO SHOW status will exist and you will forfeit any testing fees paid and must repay the full testing fee to secure a test seat in a new test event.

MN State No Show Exceptions

Check with the test site where you were scheduled to take your test for particular No Show Exception policies.

IN-FACILITY

If you are scheduled for your exam and do not show up without notifying D&SDT-Headmaster at least one (1) full business day prior to your scheduled testing event, **excluding** Saturdays, Sundays and holidays, OR if you are turned away for lack of proper identification, proper attire, or any other reason to deem you ineligible to test, you will be considered a **NO SHOW**. You will forfeit all fees paid and must sign into your TMU© record to repay or submit a new testing fee to schedule yourself into a new test event.

These fees partially offset D&SDT-Headmaster's costs incurred for services requested and resulting work that is performed. If a reschedule or refund request is not done or received before the one (1) full business day preceding a scheduled test event, excluding Saturdays, Sundays and holidays, a NO SHOW status will exist and you will forfeit your testing fees and must repay the full testing fee to secure a new test event.

No Show, In-Facility Exceptions



Minnesota Nurse Aide Candidate Handbook

In Facility No Show Exceptions

Exceptions to the No Show status exist; if you are a No Show for any test component for any of the following reasons, a free reschedule will be authorized to the remitter of record providing **the required documentation is received within the appropriate time frames outlined below:**

These are examples and not an all-inclusive list. Please contact D&SDT-Headmaster if you have unique circumstances that are not addressed below.

- **Car breakdown or accident:** D&SDT-Headmaster must be contacted within one business day via phone call, fax or email and a tow bill, police report or other appropriate documentation must be submitted within **three (3) business days** of the exam date. If we do not receive proof within the 3-business day time frame you will have to pay as though you were a No Show.
- **Weather or road condition related issue:** D&SDT-Headmaster must be contacted within one business day via phone call, fax or email and a road report, weather report or other appropriate documentation must be submitted within **three (3) business days** of the exam date. If we do not receive proof within the 3-business day time frame you will have to pay as though you were a No Show.
- **Medical emergency or illness:** D&SDT-Headmaster must be contacted within one business day via phone call, fax or email and a doctor's note must be submitted within **three (3) business days** of the missed exam date. If we do not receive proof within the 3-business day time frame you will have to pay as though you were a No Show.
 - * For an at home Covid test result, you will need to image (take a picture) the Covid positive test result with your photo ID together within the same image (picture) and email to minnesota@hdmater.com.

In-Facility Exceptions, cont

- **Death in the family**: D&SDT-Headmaster must be contacted within one business day via phone call, fax or email and an obituary for **immediate family only** submitted within **seven (7) business days** from a missed exam date. If we do not receive proof within the 7-business day time frame you will have to pay as though you were a No Show. (Immediate family is parent, grand and great-grand parent, sibling, children, spouse or significant other.)
- **Virtual testing issues**: D&SDT-Headmaster must be contacted within one business day via phone call, fax or email and appropriate documentation must be submitted within **three (3) business days** of the exam date. If we do not receive proof within the 3-business day time frame you will have to pay as though you were a No Show.
 - **Internet outage or issue**: Documentation from Internet provider showing outage date and times.
 - **Computer or cell phone issue**: If computer or cell phone fail to work for any reason, documentation from a computer repair technician/shop or other appropriate documentation.

Test Review Request Information Updated

PLEASE READ BEFORE FILLING OUT THE TEST REVIEW REQUEST: Please call D&SDT-Headmaster at (800)393-8664 during regular business hours 7:00AM to 7:00PM CST Monday through Friday, excluding holidays, and discuss the test outcome you are questioning before committing to sending the \$25 test review request deposit. Many times, once you have further details about the scoring of your test, you will understand the scoring process and learn how you can better prepare yourself for subsequent exam attempts. If, after discussion with D&SDT-Headmaster staff, you still have a concern with your testing process that affected the outcome of your exam, you may submit a Test Review Request. If the outcome of the review is in your favor, the test review request deposit fee will be refunded to the remitter.

Formal Test Review Request

Test Review Requests

You may request a review of your test results or dispute any other condition of your testing. **There is a \$25 test review deposit fee.** To request a review, you must submit the PDF fillable [Test Review Request and Payment Form 1403](#) available on D&SDT-Headmaster's main webpage at www.hdmaster.com. Submit the Test Review Fee of \$25 (Visa, MasterCard or debit card) and a detailed explanation of why you feel your dispute is valid **within three (3) business days** from official scoring of your test (excluding Saturdays, Sundays and holidays). Late requests will be returned and will not be considered.

Candidate Handbook, Mock Skill Changes

- Communication will be sent via GovDelivery three times prior to implementation of revised candidate handbook
- Revised candidate handbook will be posted on the Headmaster website along side the current approved handbook
- Posting the revised candidate handbook for 90 days will allow training programs to assist in preparing students for competency testing
- Effective date **December 11, 2023**

Signing up for GovDelivery



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Nursing Assistant Registry

The Nursing Assistant Registry lists nursing assistants who have met Minnesota training and/or testing standards to work in nursing homes and certified boarding care homes. The registry also has information about nursing assistants who have substantiated findings of abuse, neglect, and theft.

This is an online registry. N...
employers, and others can



STAY CONNECTED

Nursing Assistant Registry

Sign up for updates from the Nursing Assistant Registry. Choose the option below for the audience that best fits your role. (You may select more than one).

If you don't select an option, you will be added to the Nursing Assistants list.

Email *

- Nursing Assistants
- Nursing Assistant Training Programs
- Nursing Assistant Testing Sites

- By checking this box, you consent to our [data privacy policy](#). *

Next

[Close this window](#)

Overview of Skill Changes



D&S - Minnesota Nurse Aide (hdmaster.com)



Minnesota Nurse Aide Testing Services

Innovative, quality technology solutions
throughout the United States
since 1985.



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	Test Site Instructions How To Change Number of Seats and Reschedule a Candidate.		

HM Website for Mock Skills



Ambulate with Gait Belt

ASSIST RESIDENT TO AMBULATE USING A GAIT BELT

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Provide for privacy.
3. Explain the procedure to the resident. (Speak clearly, and directly, maintaining face-to-face contact whenever possible.)
4. Obtain a gait belt for the resident.
5. Adjust the bed height to ensure that the resident's feet are flat on the floor when the resident is sitting on the edge of the bed BEFORE assisting to stand.
6. Assist resident to put on non-skid shoes/footwear BEFORE ~~assisting to standing~~
7. Lock bed brakes to ensure resident's safety BEFORE assisting to stand.
8. Lock wheelchair brakes to ensure resident's safety.
9. Bring resident to a sitting position.
10. Place gait belt around resident's waist to stabilize trunk.
11. Tighten gait belt.
12. Check gait belt for tightness by slipping fingers between gait belt and resident.

NEW STEP ORDER DENOTED

Assist with Bedpan

ASSISTING RESIDENT WITH THE USE OF A BEDPAN, MEASURE AND RECORD URINE OUTPUT WITH HAND WASHING

(One of the possible first mandatory tasks.)

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain the procedure to the resident. (Speak clearly, and directly, maintaining face-to-face contact whenever possible.)
3. Provide for privacy.
4. Put on gloves.
5. Position resident on bedpan/fracture pan safely and correctly. (Pan not upside down, is centered, etc.)
6. Remove gloves turning inside out as they are removed and dispose.
7. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
8. AFTER positioning resident on bedpan/fracture pan and removing gloves, raise head of bed to comfortable level.
9. Leave tissue within reach of resident.
10. Leave call light or signaling device within reach of resident.
11. Step behind privacy curtain to provide privacy for resident.
12. When the RN Test Observer indicates, candidate returns.
13. Put on gloves. **(NOTE: 2nd glove change required.)**
14. Lower the head of the bed BEFORE gently removing bedpan.
15. Hold the bedpan for the RN Test Observer while an unknown quantity of liquid is poured into bedpan.

CATHETER CARE FOR A FEMALE RESIDENT WITH HAND WASHING

(One of the possible first mandatory tasks.) [DEMONSTRATED ON A MANIKIN]

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain the procedure to the resident/manikin. (Speak clearly, and directly, maintaining face-to-face contact whenever possible.)
3. Provide for privacy.
4. Fill basin with comfortably warm water.
5. Put on gloves.
6. Expose area surrounding catheter, only exposing resident between hip and knee.
7. ~~Hold catheter at the meatus.~~ **REMOVE THIS STEP HERE AND REWORDED IT TO STEP 9**
8. Use water and soapy washcloth.
9. **Hold catheter at the meatus and does not allow to be pulled or tugged at any time. KEY STEP**
10. ~~While holding catheter at the meatus,~~ Wash at least 4 inches away from the meatus down the catheter (wash with strokes only away from the meatus). **NO LONGER A KEY STEP**
11. ~~Use a clean portion of the washcloth for each stroke.~~ **REMOVE THIS STEP HERE AND REWORDED IT TO STEP 13**
12. ~~While holding catheter at the meatus,~~ Rinse at least 4 inches away from the meatus down the catheter (rinse with strokes only away from the meatus). **NO LONGER A KEY STEP**
13. **Rinse using a clean portion of the washcloth for each stroke. Reworded to: —> While washing and rinsing, use a clean portion of the washcloth for each stroke.**
14. While holding the catheter at the meatus, dry at least 4 inches away from meatus using a dry towel/washcloth.
15. ~~Do not allow the tube to be tugged/pulled at any time during the procedure.~~ **REMOVED STEP, COMBINED ABOVE WITH STEP 9**
16. Replace top cover over resident.

DRESSING A RESIDENT WITH AN AFFECTED (WEAK) SIDE

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain the procedure to the resident. (Speak clearly, directly, maintaining face-to-face contact whenever possible.)
3. Provide for privacy.
4. Raise bed height.
5. Keep resident covered while removing gown.
6. Remove gown from unaffected side first.
7. Place soiled gown in designated laundry hamper.
8. Dress the resident in a button-up shirt. Insert hand through the sleeve of the shirt and grasp the hand of the resident.
9. **When dressing the resident in a button-up shirt, always dress from the affected (weak) side first.**
10. Assist the resident to raise her/his buttocks or turn the resident from side-to-side and draw the pants over the buttocks and up to the resident's waist.
11. **When dressing the resident in pants, always dress the affected (weak) side leg first. *NO LONGER A KEY STEP***
12. Put on the resident's socks. Draw the socks up the resident's foot until they are smooth.
13. Leave the resident comfortably/properly dressed.
14. Lower bed.

MODIFIED BED BATH- FACE AND ONE ARM, HAND AND UNDERARM

23. Assist resident/manikin to put on a clean gown.
24. Empty equipment.
25. Rinse equipment.
26. Dry equipment.
27. Return equipment to storage.
28. Place soiled linen in designated laundry hamper.
- ~~29. Lower bed.~~
30. Remove gloves turning inside out as they are removed and dispose.
31. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 32. Lower bed. MOVED STEP 29 HERE**
33. Place call light or signaling device within easy reach of the resident.
34. Maintain respectful, courteous interpersonal interactions at all times.

TRANSFER RESIDENT FROM BED TO WHEELCHAIR USING A GAIT BELT

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Provide for privacy.
3. Explain the procedure to the resident. (Speak clearly, and directly, maintaining face-to-face contact whenever possible.)
4. Obtain a gait belt for the resident.
5. Adjust the bed height to ensure that the resident's feet are flat on the floor when the resident is sitting on the edge of the bed BEFORE assisting to stand.
6. Assist resident to put on non-skid shoes/footwear BEFORE assisting to standing.
7. Lock bed brakes to ensure resident's safety BEFORE assisting to stand.
8. Lock wheelchair brakes to ensure resident's safety BEFORE assisting to stand.

NEW STEP ORDER DENOTED

VITAL SIGNS – COUNT AND RECORD RESIDENT’S RADIAL PULSE AND RESPIRATIONS

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain the procedure to the resident. (Speak clearly, and directly, maintaining face-to-face contact whenever possible.)
3. Locate the resident’s radial pulse by placing fingertips on the thumb side of the resident's wrist.
4. Count resident’ radial pulse for one full minute, **or thirty (30) seconds and then double your recording.**
 - a. *Tell the RN Test Observer when you start counting and tell them when you stop counting.*
5. Record your radial pulse rate reading on the previously signed recording form.
6. **Candidate’s recorded radial pulse rate is within 4 beats of RN Test Observer's recorded rate.**
7. Count resident’s respirations for one full minute, **or thirty (30) seconds and then double your recording.**
 - a. *Tell the RN Test Observer when you start counting and tell them when you stop counting.*
8. Record your respiration reading on the previously signed recording form.

Use of Calculators During Testing



- Calculators **are** allowed during:
 - Knowledge Exam
 - Skills Exam

Implementation of Skills on Hold, Effective 12/11/23



Skills Resuming for Testing



- Mouth Care- Brushing Resident's Teeth
- Feeding a Dependent Resident
- Modified Bed Bath –Face and One Arm, Hand and Underarm

Feeding Dependent Resident Skill



Feeding skill- Candidates

Must be familiar with
measuring fluids

240 ml and 120 ml = total
consumed



- Staff from Headmaster discuss implementation of skills

Questions from October call

- If a candidate is about to wash the actor's eyes with soap, do we let them? Is it an automatic fail?
- What if they had open areas on their hands and did not glove before beginning bed bath?
- During testing, what will the actor be eating?

- If a student graduated from the CNA class before the new skills were taught in detail, but don't test out until after 12/11, are they exempt from those skills?
 - No
- Is there no clothing protector like there was with the previous vendor?
 - Offer napkin, clothing protector, or towel to protect clothing from soiling- not a key step

Survey Findings



Students Entered in TMU with Incorrect Code

- Instructors may be affiliated with different training programs in TMU
- When instructors enter students, they must choose the correct training program in which they are training under
- Training program coordinators must routinely review list of students trained for accuracy of program code

Example of Choosing Program Code

CHOOSE TRAINING PROGRAM *

✓ Choose Training Program

Super Minnesota College (12345) (TP)

Minnesota 1135 Waiver Option (8888) (TP)

Choose Instructor

Program Instructors not Added to TMU

Qualified instructors must contact Headmaster to obtain login to register students

Requesting a Login for TMU®
MN State Instructor Login Request
In-Facility Instructor Login Request

Inform Headmaster of updated RN licensure or will be disabled

Knowledge Test



Knowledge Test Time Frame Determined

- MDH has reviewed the data regarding length of time taken for the knowledge test over the last 12 months
- Currently working on communication
- Watch for Gov Delivery message coming

In-Facility Testing Update



In-Facility Test Site Update

- 12 sites chosen
- Headmaster completing training for each new test site
- Some sites will be ready to test soon

Question from October NAR call:

Can denied facility have another opportunity to apply to become a test site?

Yes, test site can reapply when next applications period is open.

Third Quarter 2023 Test Data



Training Program Test Data



- Third quarter test data available
- [Training Program Test Data - MN Dept. of Health \(state.mn.us\)](https://state.mn.us)



New and Improved Nurse Aide Registry

Kia | Federal LCR Supervisor
Ann | NAR Credentialer
Monica | Federal LCR Credentialer

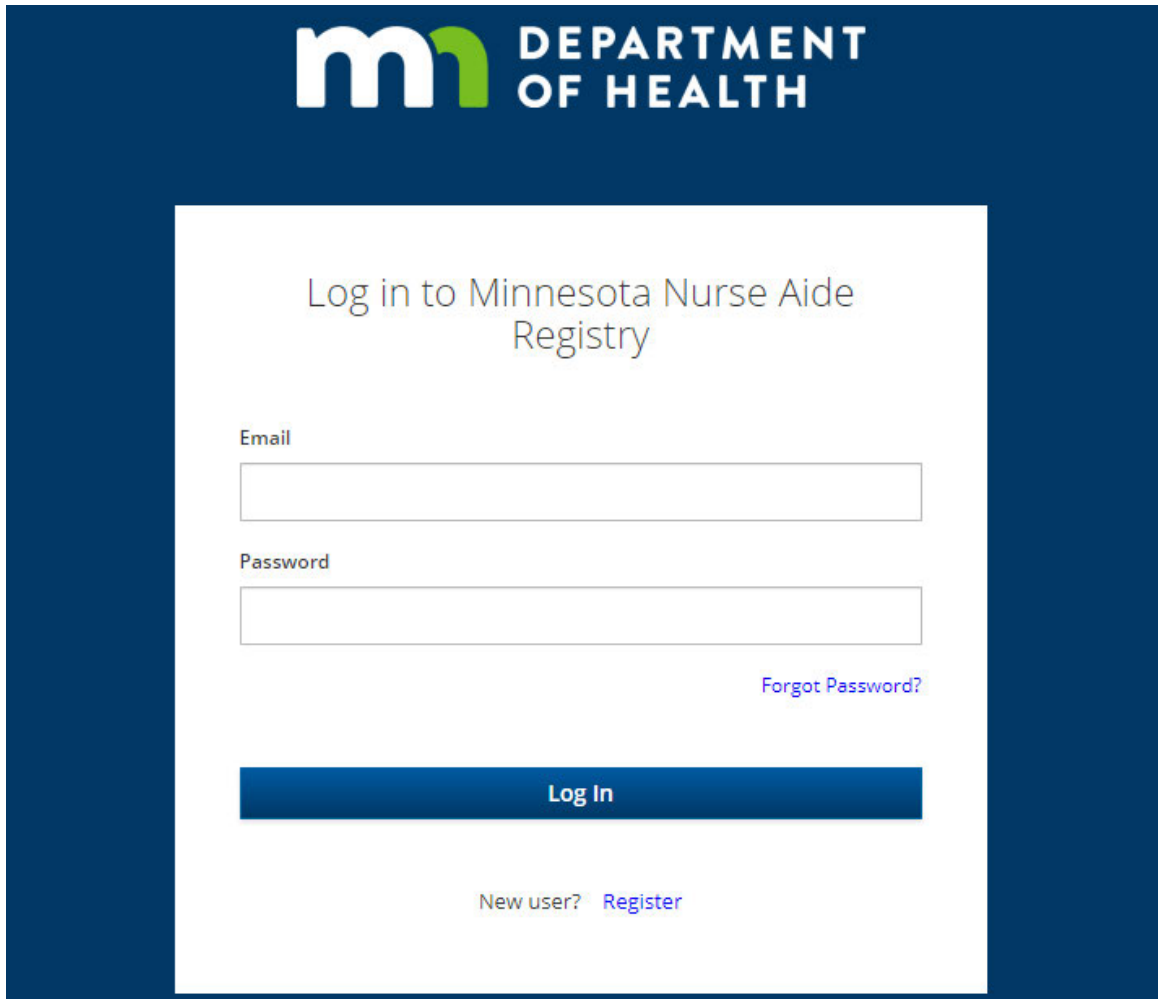
- The Minnesota Nurse Aide Registry is transitioning to become 100% digital in a new, secure and mobile-optimized application.
- Beginning early December 2023, active nurse aides will be able to:
 - Update their contact information
 - Update their employer information
 - Renew their certificate
 - View employment and testing history, and
 - Print their certificate

Nursing Home Facilities



- Nursing home facilities will be able to:
 - Update their nurse aides real-time, no more semi-annual updates
 - Administrators can add users

Step 1: Register



The screenshot shows the login page for the Minnesota Nurse Aide Registry. At the top left is the logo for the Minnesota Department of Health, featuring a stylized 'm' and 'h' in green and white, followed by the text 'DEPARTMENT OF HEALTH'. The main heading is 'Log in to Minnesota Nurse Aide Registry'. Below this are two input fields: 'Email' and 'Password'. To the right of the password field is a blue link for 'Forgot Password?'. At the bottom of the form is a blue 'Log In' button. Below the button is a link for 'New user? Register'.

- Active nurse aides must first register to create an account to access their information and perform tasks, such as submitting their renewals.
- Nursing home facilities will need to create an account to update their staff reports.
- To begin, select Register at the bottom of the login screen.

Step 1: Register

Register

First name

Last name

Email

Password

Confirm password

[« Back to Login](#)

1. Enter first name and last name
 - For nursing home facility, the Authorized Agent should register using facility email.
2. Enter email to be used for login into the registry.
3. Enter and confirm password.
4. Select Register.

Step 1: Register



[Dashboard](#) [Search Certificate](#) [Frequently Asked Questions](#) [Correct Name or SSN](#) [Log out](#)

Register

I am seeking to register as a(n) :

[Certified Nurse Aide](#)

[Interstate Endorsement Candidate](#)

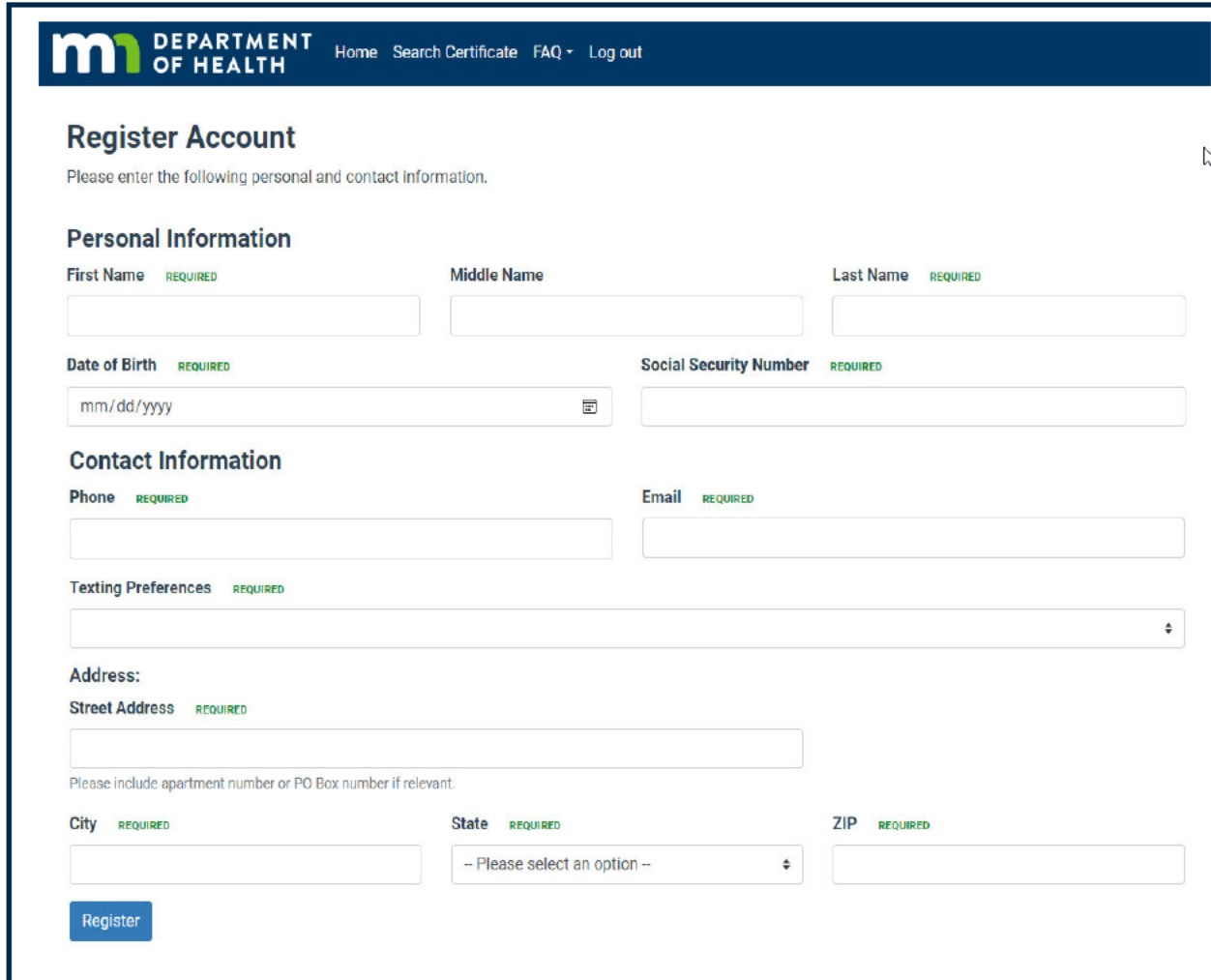
[Provider](#)

If you are a CNA and believe that the name or SSN in the certificate register is incorrect such that you cannot register, you will need to submit supporting documentation to correct these before registering. If your name has changed since you last certified, you may instead register using the name under which you last certified, then use the "Update Name" link in "My Information" to update the name associated with your certificate.

[Correct Name or SSN](#)

- Select the appropriate category to access the registry.

Step 2: Create Your Account



The screenshot shows the 'Register Account' page on the Minnesota Department of Health website. The page includes a navigation bar with the MDH logo and links for Home, Search Certificate, FAQ, and Log out. The main heading is 'Register Account' with a sub-instruction: 'Please enter the following personal and contact information.' The form is divided into several sections: 'Personal Information' with fields for First Name, Middle Name, Last Name, Date of Birth, and Social Security Number; 'Contact Information' with fields for Phone, Email, and Texting Preferences; and 'Address' with fields for Street Address, City, State, and ZIP. A 'Register' button is located at the bottom left of the form.

Register Account
Please enter the following personal and contact information.

Personal Information

First Name REQUIRED Middle Name Last Name REQUIRED

Date of Birth REQUIRED Social Security Number REQUIRED

Contact Information

Phone REQUIRED Email REQUIRED

Texting Preferences REQUIRED

Address:

Street Address REQUIRED

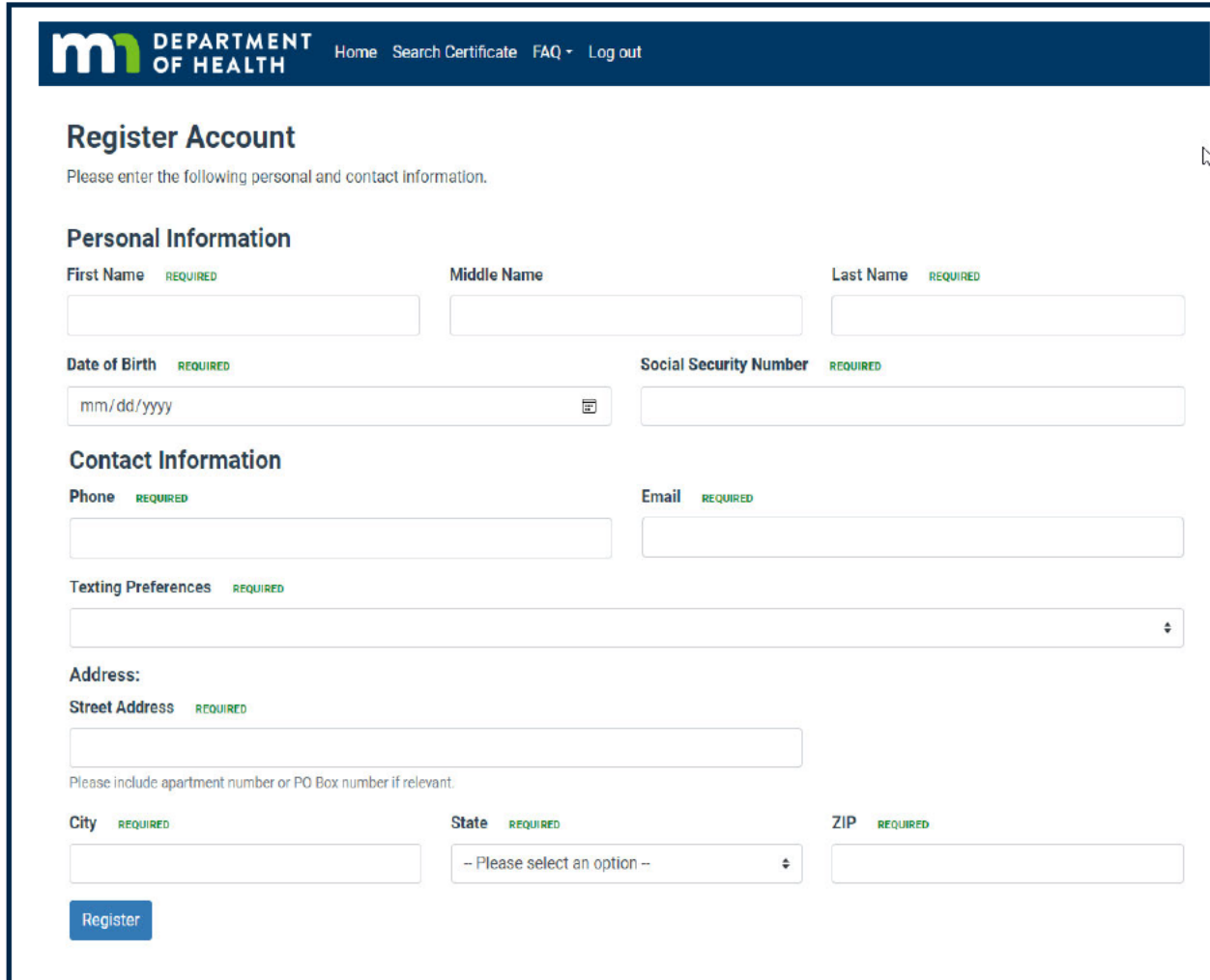
Please include apartment number or PO Box number if relevant.

City REQUIRED State REQUIRED ZIP REQUIRED

Register

1. Enter first name, last name, date of birth, and social security number.
 - These four fields must match exactly with the data MDH has for the nurse aide. If an error message occurred, one or more of the fields do not match. Contact NAR at HEALTH.FPC-NAR@state.mn.us for assistance.

Step 2: Create Your Account, cont



The screenshot shows the 'Register Account' page on the MDH website. The page has a dark blue header with the MDH logo and navigation links: Home, Search Certificate, FAQ, and Log out. The main content area is white and contains the following sections:

- Register Account**: A heading followed by the instruction 'Please enter the following personal and contact information.'
- Personal Information**: A section with three input fields for 'First Name', 'Middle Name', and 'Last Name', each with a 'REQUIRED' label. Below these are two more input fields: 'Date of Birth' (with a calendar icon and 'mm/dd/yyyy' placeholder) and 'Social Security Number', both with 'REQUIRED' labels.
- Contact Information**: A section with two input fields for 'Phone' and 'Email', both with 'REQUIRED' labels. Below these is a dropdown menu for 'Texting Preferences' with a 'REQUIRED' label.
- Address:**: A section with a single input field for 'Street Address' with a 'REQUIRED' label. Below this is a note: 'Please include apartment number or PO Box number if relevant.' At the bottom of this section are three input fields: 'City', 'State' (a dropdown menu with the text '-- Please select an option --'), and 'ZIP', all with 'REQUIRED' labels.

At the bottom left of the form is a blue button labeled 'Register'.

2. Enter email or cell phone. Provide an email address to be monitored frequently. This is the address MDH will use to communicate updates and notices to log into the registry to view your message.

3. Indicate texting preference.

4. Enter mailing address.

5. Select Register.

Successful Registration

Register Account

Please enter the following personal and contact information.

The nurse aide/nursing home facility's dashboard will appear.

Step 3: Navigating Your Dashboard

m1 DEPARTMENT OF HEALTH Home Search Certificate FAQ Print Certificate My Information Log out

[Redacted]s Dashboard

Your Certificate Information

Name: [Redacted]	Certificate Status: Active	Print Certificate
Certificate Number: [Redacted]	Issue Date: 04/28/2023	Expiration Date: 04/01/2021
Renewal Status: Received	Processing Timeline: N/A	

[View Employment History](#) [View Testing History](#) [Further Registry Information](#)

[Renewal Application](#)

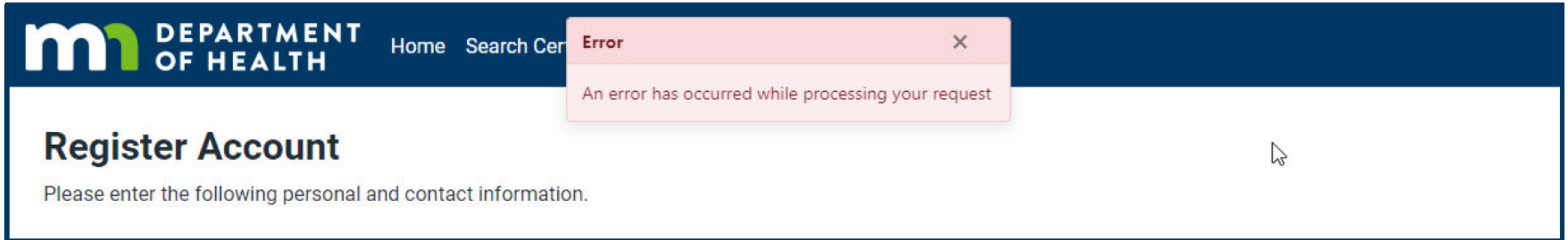
Step 3: Navigating Your Dashboard, cont

Success! You have now created your Minnesota Nurse Aide Registry Account.

From here you can:

- See your Certificate Number (shown is a sample number)
- Update your employment information and renew your certificate
- Update your contact information
- View your employment history
- View your testing history, and
- Print your certificate.

If You Need Assistance



The screenshot shows the Minnesota Department of Health website. The header includes the logo and navigation links for Home and Search Certificates. A pink error message box is displayed, stating: "Error: An error has occurred while processing your request". Below the error message, the "Register Account" section is visible, with the instruction: "Please enter the following personal and contact information."

If the information the nurse aide entered does not match their certificate, please contact the NAR office for assistance at 651-201-4200 or email at Health.fpc-nar@state.mn.us.

It is possible the registry has a different name, date of birth, and/or social security number than what the nurse aide entered.

If this is the case, the NAR staff will advise the nurse aide on how to make the update.

Sign up for GovDelivery

- More information will be available in the coming weeks.
- To receive updates, please [sign up for GovDelivery email communications from the Minnesota Nurse Aide Registry.](#)

Thank You!

Nurse Aide Registry Credentialing Team

Health.FPC-NAR@state.mn.us




651-201-4200


Resources Available



MDH Nurse Aide Registry Home Page

[Nursing Assistant Registry - MN Dept. of Health \(state.mn.us\)](#)

 DEPARTMENT OF HEALTH  MENU I am looking for... 

[Home](#) ▶ [Health Care Facilities, Provide...](#) ▶ [Provider Certifications, Licens...](#) ▶ [Nursing Assistant Registry](#) 

NURSING ASSISTANT REGISTRY

[NAR Home](#)

[Nurse Aide Registry Search](#)

[Nurse Aide Resources](#)

[Nurse Aide Testing](#)

[Training Program Calls](#)

[Training Program Test Data](#)

[Contact Us](#)

Nursing Assistant Registry

The Nursing Assistant Registry lists nursing assistants who have met Minnesota training and/or testing standards to work in nursing homes and certified boarding care homes. The registry also has information about nursing assistants who have substantiated findings of abuse, neglect, and theft.

This is an online registry. Nursing assistants, employers, and others can check the registry



Available to Training and Testing Programs

- NAR home page under employer and training program resources
- Use as reference tool

[Federal Nurse Aide Training and Competency Evaluation Program Resource \(state.mn.us\)](#)

[NATCEP Survey Worksheet \(state.mn.us\)](#)

[Nurse Aide Competency Test Site Survey Form \(state.mn.us\)](#)

- ✓ Updated candidate handbook and mock skill
- ✓ Survey findings
- ✓ Questions from October call
- ✓ Knowledge test time frame
- ✓ In-Facility update
- ✓ Third quarter test data available
- ✓ NAR Modernization



- No call scheduled for December
- Next call January 2024
- Check the [NAR Calls website](#) for call details and GovDelivery

Questions?



Program Contact Information

Training Program Questions:

Health.NAR.coord@state.mn.us

Nursing Assistant Registry Questions:

Health.FPC-NAR@state.mn.us

NAR Home Page:

<https://www.health.state.mn.us/nar>

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