

## LEGISLATIVE BILL 1080

Approved by the Governor April 6, 1990

Introduced by Schellpeper, 18; Haberman, 44

AN ACT relating to health care; to amend sections 71-1,258, 71-1,260, 71-2052, 71-6038, and 71-6039, Revised Statutes Supplement, 1988, and section 71-2017.01, Revised Statutes Supplement, 1989; to change certification provisions for social workers; to provide for waiver of staffing requirements for skilled nursing facilities as prescribed; to change provisions for courses of training and instruction for care staff members and nursing assistants; to harmonize provisions; and to repeal the original sections.

Be it enacted by the people of the State of Nebraska,

Section 1. That section 71-1,258, Revised Statutes Supplement, 1988, be amended to read as follows:

71-1,258. (1) A person shall be qualified to be a certified master social worker if he or she (a) has a doctorate or a master's degree in social work from an approved educational program, (b) has had a minimum of at least three thousand hours of experience, in addition to the master's or doctorate degree, in social work under the supervision of a certified master social worker, (c) provides evidence to the board that he or she meets the requirements of subdivisions (1)(a) and (1)(b) of this section, and (d) satisfactorily passes an examination approved by the board. The department, upon the recommendation of the board, may adopt and promulgate rules and regulations defining the experience required under subdivision (1)(b) of this section.

(2) A person shall be qualified to be a certified social worker if he or she:

(a) Provides evidence to the board that he or she has a baccalaureate or master's degree in social work:

(i) ~~from~~ From an approved educational program;

or

(ii) ~~from~~ From any program of social work education and training in which the person was enrolled between July 17, 1983, and October 1, 1987, if the person applies to the department for a certificate by

October 1, 1990:

(b) Applies to the department for a certificate by October 1, 1991, and provides evidence to the board that he or she:

(i) Has a baccalaureate or master's degree in a field related to social work, such as, psychology, sociology, gerontology, human services, human development, family relations, or counseling; and

(ii) Has been actually engaged in the practice of social work for at least one thousand hours in a nursing home; or

(c) Applies to the department for a certificate by October 1, 1991, and provides evidence to the board that he or she has been actually engaged in the practice of social work in a nursing home at least twenty hours per week for at least three of the seven years prior to making such application.

For purposes of this subsection, actually engaged in the practice of social work may include (i) services and activities provided under the direct supervision of a person with at least a master's degree in social work from an approved educational program or (ii) services and activities which are classified by title or description of duties and responsibilities as social work practice. 7 and (b) provides evidence to the board of his or her professional education:-

Sec. 2. That section 71-1,260, Revised Statutes Supplement, 1988, be amended to read as follows:

71-1,260. (1) Upon payment of the fee provided in section 71-162 and the provision of evidence to the board of his or her professional education, training, experience, and qualifications to practice certified master social work, a certificate to practice as a certified master social worker shall be issued without examination to any applicant who (a) applies to the department for a certificate by October 1, 1987, (b) satisfies the board that he or she has had at least three thousand hours of experience in the practice of social work; in addition to the master's or doctorate degree, and (c) satisfies the educational requirements established in subsection (1) of section 71-1,258.

(2) Upon payment of the fee provided in section 71-162 and the provision of evidence to the board of his or her professional education, training, experience, and qualifications to practice certified social work, a certificate to practice as a certified social worker shall be issued to any applicant who (a) applies to the department for a certificate by October

17, 1987, and satisfies the educational requirements of subsection subdivision (2)(a) of section 71-1,258 on July 17, 1986, or (b) applies to the department for a certificate by October 1, 1991, and satisfies the educational and practice requirements of subdivision (2)(b) of section 71-1,258 or satisfies the practice requirements of subdivision (2)(c) of section 71-1,258. provides evidence to the board that he or she has been actually engaged in the practice of social work at least twenty hours per week for at least three of the seven years prior to July 17, 1986. For purposes of this subsection, actual engagement in the practice of social work may include (i) services and activities provided under the direct supervision of a person with at least a master's degree in social work from an approved educational program; (ii) services and activities for which a baccalaureate degree in social work or in a related field of study is required; or (iii) services and activities which are classified by title or description of duties and responsibilities as social work practice. An applicant shall submit all materials, as the board or department may require, to determine his or her qualifications for a certificate to practice as a certified social worker and to determine his or her compliance with the requirements of this subsection. Failure to comply with these provisions shall be sufficient grounds to reject an application for a certificate to practice as a certified social worker under subdivision ~~(2)(b)~~ (b) of this section subsection.

Sec. 3. That section 71-2017.01, Revised Statutes Supplement, 1989, be amended to read as follows:

71-2017.01. As used in For purposes of sections 71-2017 to 71-2029 and section 4 of this act, unless the context otherwise requires:

(1) Care shall mean the exercise of concern or responsibility for the comfort and welfare of the residents of a facility by the owner, occupant, administrator, or operator of the facility in addition to the provision of food and shelter to the residents and shall include, but not be limited to, the maintenance of a minimum amount of supervision of the activities of the residents of the facility as well as the ~~providing~~ provision of a minimum amount of assistance to the residents and shall also include personal care, hereby defined as the provision of health-related services for individuals who are in need of a protective environment but who are otherwise able to manage the normal activities of daily living;

(2) Hospital shall mean (a) any institution, facility, place, or building which is devoted primarily to the maintenance and operation of facilities for the diagnosis, treatment, or medical care over a period exceeding twenty-four consecutive hours of two or more nonrelated individuals suffering from illness, condition, injury, or deformity, (b) a place which is devoted primarily to the rendering over a period exceeding twenty-four consecutive hours of obstetrical or other medical care for two or more nonrelated individuals, or (c) any institution, facility, place, or building in which any accommodation is primarily maintained, furnished, or offered for the medical and nursing care over a period exceeding twenty-four consecutive hours of two or more nonrelated aged or infirm persons requiring or receiving convalescent care. Hospital and shall include, but not be restricted limited to, facilities or parts of facilities which provide space for general acute hospitals, short-term hospitals, rehabilitation hospitals, long-term care hospitals, psychiatric or mental hospitals, and emergency hospitals or treatment centers. Hospital and shall not be construed to include the residence, office, or clinic of a private physician or of an association of physicians, any other health practitioner, or any practitioner or association of practitioners licensed pursuant to Chapter 71, in which residence, office, or clinic patients are not treated or given care for a period in excess of twenty-four consecutive hours;

(3) General acute hospital shall mean a hospital having a duly constituted governing body which exercises administrative and professional responsibility and an organized medical staff which provides inpatient care, including medical, nursing, surgical, anesthesia, laboratory, diagnostic radiology, pharmacy, and dietary services. Such services may be provided through a contract or agreement;

(4) Short-term hospital shall mean a hospital that (a) is primarily devoted to the diagnosis and treatment of individuals requiring short-term treatment or treatment of diagnosis consistent with the medical support available and (b) has written coordination agreements with a general acute hospital for transfers and quality assurance programs. Short-term hospital shall not mean a facility for the treatment of mental diseases, a rehabilitation hospital, an alcoholic treatment center, or a drug treatment center;

(5) Rehabilitation hospital shall mean an inpatient facility which is operated for the primary

purpose of assisting in the rehabilitation of disabled persons through an integrated program of medical and other services provided under professional supervision;

(6) Long-term care hospital shall mean any hospital, any distinct part of any hospital, or any portion of a hospital which is primarily devoted to providing the care and services as set forth in subdivisions (10) and (11) of this section;

(7) Psychiatric or mental hospital shall mean a hospital which is primarily engaged in providing to inpatients, by or under the supervision of a physician, psychiatric services for the diagnosis and treatment of mentally ill persons;

(8) Emergency hospital or treatment center shall mean a hospital primarily devoted to the diagnosis and treatment of individuals requiring emergency outpatient services and emergency care and with written coordination agreements with a general acute hospital for transfers and quality assurance programs;

(9) Health clinic shall mean any institution, facility, place, building, or agency, not licensed as a hospital, which is operated under the name or title of health clinic, health center, or any other word or phrase of like or similar import, either independently or in connection with any other purpose, for the purpose of providing or making available at such institution, facility, place, building, or agency on an outpatient basis and for a period not exceeding twenty-four consecutive hours advice, counseling, diagnosis, treatment, care, or services relating to the preservation or maintenance of health primarily or exclusively to persons not residing or confined in such institution, facility, place, or building, and which is not licensed as a hospital. Satellite clinics operated on an intermittent basis at a specific location or site and providing services within a portion of the total geographic area served by a licensed health clinic need not be licensed, but may operate as a part of the parent clinic and share administration and services. Specific types or categories of health clinics may be further defined by appropriate rule and regulation of the Department of Health not inconsistent with this definition and in no case shall be construed to include the residence, office, or clinic of a private physician or an association of physicians, any other health practitioner or association of practitioners, or any practitioner licensed pursuant to Chapter 71 unless ten or more abortions, as defined in subdivision (1) of section 28-326, are performed during any one calendar

week in such residence, office, or clinic;

(10) Skilled nursing facility shall mean any institution or facility, or a distinct part of any institution or facility, which is primarily devoted to providing to inpatients skilled nursing care and related services for patients who require medical or nursing care or rehabilitation services for the rehabilitation of injured, disabled, or sick persons. A Unless a waiver is granted pursuant to section 4 of this act, a skilled nursing facility shall provide at least one licensed registered nurse on duty on the day shift seven days per week and a licensed registered nurse or licensed practical nurse on the other two shifts seven days per week. The Director of Nursing Services shall be a licensed registered nurse, and this requirement shall not be waived;

(11) Intermediate care facility shall mean any institution, facility, place, or building in which accommodation and board for a period exceeding twenty-four consecutive hours and also nursing care and related medical services are provided for two or more nonrelated individuals who are ill, injured, or disabled but not in need of hospital or skilled nursing facility care, but who by reason of illness, disease, injury, deformity, disability, convalescence, or physical or mental infirmity require such nursing care and related medical services. An intermediate care facility shall provide at least one licensed registered nurse or licensed practical nurse on duty on the day shift seven days a per week and at least one licensed registered nurse, licensed practical nurse, or care staff member on duty on the other two shifts seven days per week. An intermediate care facility shall provide a Director of Nursing Services, who shall be a licensed registered nurse, to administer, supervise, delegate, and evaluate nursing and nursing support services of the facility, except that an intermediate care facility that, as of February 1, 1987, has in its employ a licensed practical nurse as Health Service Supervisor may retain such licensed practical nurse in that capacity after March 27, 1987- Such facility shall not be required to provide a Director of Nursing Services during the continuance of employment of such licensed practical nurse if such licensed practical nurse is and continues to be supervised by a licensed physician, osteopathic physician, or licensed registered nurse who, by employment or contract, is above such licensed practical nurse in the line of authority of the facility and is responsible, in the interest of the facility, for his or

her hire, transfer, promotion, layoff, recall, promotion, discharge, assignment, reward, or discipline and adjustment of grievances or the effective recommendation of such action, which responsibility is not merely routine or clerical in nature but requires the exercise of independent judgment. Nothing contained in this section shall be construed to expand the scope of practice of a licensed practical nurse to permit an intermediate care facility utilizing a licensed practical nurse as Health Service Supervisor to provide nursing services other than those which are within the scope of practice of a licensed practical nurse as defined in section ~~71-1,132-06~~ 71-1.132.05. The Director of Nursing Services or Health Service Supervisor shall serve on the day shift five days a per week, eight hours per day, except when it is necessary to vary working hours to provide supervision on other shifts, and may satisfy the day-shift nurse requirement for five of seven days per week if he or she can meet both the nursing care needs of the patients or residents for that shift and his or her administrative and supervisory responsibilities as Director of Nursing Services or Health Service Supervisor;

(12) Intermediate care facility for the mentally retarded shall mean any institution, facility, place, or building, not licensed as a hospital, that provides accommodation, board, training or habilitation services, advice, counseling, diagnosis, treatment, and care, including nursing care and related medical services, for a period exceeding twenty-four consecutive hours for fifteen or more nonrelated individuals who have mental retardation or related conditions, including epilepsy, cerebral palsy, or other developmental disabilities. The requirement of fifteen or more nonrelated individuals shall not apply to any intermediate care facility for the mentally retarded which has a valid license as of January 1, 1988;

(13) Residential care facility shall mean any institution, facility, place, or building in which there are provided for a period exceeding twenty-four consecutive hours accommodation, board, and care, such as personal assistance in feeding, dressing, and other essential daily living activities, to four or more nonrelated individuals who by reason of illness, disease, injury, deformity, disability, or physical or mental infirmity are unable to sufficiently or properly care for themselves or manage their own affairs; but do not require the daily services of a licensed registered nurse or licensed practical nurse;

(14) Domiciliary facility shall mean any institution, facility, place, or building in which there are provided for a period exceeding twenty-four consecutive hours accommodation and supervision to four or more individuals, not related to the owner, occupant, manager, or administrator thereof, who are essentially capable of managing their own affairs; but who are in need of supervision, including supervision of nutrition, by the facility on a regular, continuing basis; but not necessarily on a consecutive twenty-four-hour basis. This definition shall not include those homes or facilities providing casual care at irregular intervals;

(15) Mental health center shall mean any institution, facility, place, or building, not licensed as a hospital, which is used to provide, for a period exceeding twenty-four consecutive hours; accommodation, board, and advice, counseling, diagnosis, treatment, care, or services primarily or exclusively to persons residing or confined in the facility who are afflicted with a mental disease, disorder, or disability; ~~and which is not licensed as a hospital;~~

(16) Center for the developmentally disabled shall mean any residential facility, place, or building, not licensed as a hospital, which is used to provide accommodation, board, and training, advice, counseling, diagnosis, treatment, care, including medical care when appropriate, or services primarily or exclusively to four or more persons residing in the facility who have developmental disabilities;

(17) Alcoholic treatment center shall mean any institution, facility, place, or building, not licensed as a hospital, including any private dwelling, which is used to provide residential care, treatment, services, maintenance, accommodation, or board in a group setting primarily or exclusively for individuals having any type of habituation, dependency, or addiction to the use of alcohol, ~~and~~ in which there are provided guidance, supervision, and personal services relating to those areas of adjustment which enable the alcohol dependent or alcoholic to move into independent living in normal surroundings; but not services that can be rendered only by a physician or within the confines of a hospital, and which is not a permanent residence but only a temporary one. Alcoholic treatment center; ~~and~~ shall include facilities in which there are provided nonresidential programs and services primarily or exclusively to nonresidents of the facility having any type of habituation, dependency, or addiction to the use of alcohol. Specific types or categories of alcoholic



treatment centers may be further defined by appropriate rule and regulation of the Department of Health department not inconsistent with this definition;

(18) Drug treatment center shall mean any institution, facility, place, or building, not licensed as a hospital, including any private dwelling, which is used to provide residential care, treatment, services, maintenance, accommodation, or board in a group setting primarily or exclusively for individuals who have any type of habituation, dependency, or addiction to the use of any kind of controlled substance, narcotic drug, or other type of drug, and in which there are provided guidance, supervision, and personal services relating to those areas of adjustment which enable the drug user, dependent, or addict to move into independent living in normal surroundings; but not services that can be rendered only by a physician or within the confines of a hospital, and which is not a permanent residence but only a temporary one. Drug treatment center; and shall include facilities in which there are provided nonresidential programs and services primarily or exclusively to nonresidents of the facility having any type of habituation, dependency, or addiction to the use of any kind of controlled substance, narcotic drug, or other type of drug. Specific types or categories of drug treatment centers may be further defined by appropriate rule and regulation of the Department of Health department not inconsistent with this definition;

(19) Home health agency shall mean a public agency, private organization, or subdivision of such an agency or organization which is primarily engaged in providing skilled nursing care or a minimum of one other therapeutic service as defined by the department on a full-time, part-time, or intermittent basis to patients in a place of temporary or permanent residence used as the patient's home under a plan of care as prescribed by the attending physician and which meets the rules, regulations, and standards as established by the Department of Health department. Parent home health agency shall mean the primary home health agency which establishes, maintains, and assures administrative and supervisory control of branch offices and subunits. Branch office shall mean a home health agency which is at a location or site providing services within a portion of the total geographic area served by the parent agency and is in sufficient proximity to share administration, supervision, and services with its parent agency in a manner that renders it unnecessary for the branch independently to meet licensure

requirements. A branch office shall be part of its parent home health agency and share administration and services. Subunit shall mean a home health agency which serves patients in a geographic area different from that of the parent agency and which, by virtue of the distance between it and the parent agency, is judged incapable of sharing administration, supervision, and services on a daily basis and shall independently meet the licensing requirements for home health agencies. Home health agency shall not include private duty nursing registries as long as the private duty nursing registrant individual is the direct payee from the patient. Home health agency shall not apply to the practice of home health care by other licensed medical persons as authorized by the practice of their particular specialty nor to the individuals providing homemaker or chore services within the home;

(20) Developmental disability shall mean a severe, chronic disability of a person which (a) is attributable to a mental or physical impairment or combination of mental and physical impairment, (b) is manifested before the person attains the age of twenty-two, (c) is likely to continue indefinitely, (d) results in substantial functional limitations in three or more of the following areas of major life activity: Self-care; receptive and expressive language; learning; mobility; self-direction; capacity for independent living; and economic self-sufficiency, and (e) reflects the person's need for a combination and sequence of special interdisciplinary or generic care, treatment, or other services which are of lifelong or extended duration and are individually planned and coordinated; and

(21) Qualified mental retardation professional shall mean any person (a) who has satisfied any of the educational requirements listed in this subdivision, (b) who has at least two years of additional experience in treating persons with mental retardation, one of which was spent in an administrative capacity, and (c) who has offered proof of fulfillment of the requirements prescribed in this subdivision to the department. Educational requirements to satisfy this subdivision shall include the following: A psychologist with at least a master's degree in psychology from an accredited college or university and with specialized training or one year of experience in treating persons with mental retardation; a physician licensed under the Uniform Licensing Law to practice medicine and surgery, osteopathic medicine and surgery, or as an osteopathic

physician and with specialized training or one year of experience in treating persons with mental retardation; an educator with a degree in education from an accredited college or university and with specialized training or one year of experience in working with persons with mental retardation; or a certified social worker or certified master social worker certificated under the Uniform Licensing Law who has at least three years' social work experience and specialized training or one year of experience in working with persons with mental retardation.

Sec. 4. (1) On and after October 1, 1990, the Department of Health may waive the evening and night staffing requirements of subdivision (10) of section 71-2017.01 for skilled nursing facilities, except the requirement that the Director of Nursing Services be a licensed registered nurse, if:

(a) The facility demonstrates to the satisfaction of the department that it has been unable, despite diligent efforts, to hire enough licensed registered nurses and licensed practical nurses to fulfill such requirements. For purposes of this subdivision, diligent efforts shall include, but not be limited to, offering wages equal to or greater than the community prevailing wage rate being paid such nurses at nursing facilities;

(b) The department determines that a waiver of the requirement will not endanger the health or safety of residents of the facility; and

(c) The department finds that, for any period in which staffing requirements cannot be met, a licensed registered nurse or a physician is obligated to respond immediately to telephone calls from the facility.

A waiver granted under this subsection shall be subject to annual review by the department. As a condition of granting or renewing a waiver, a facility may be required to employ other qualified licensed personnel.

(2) On and after October 1, 1990, the department may waive the requirement of subdivision (10) of section 71-2017.01 that a facility provide a licensed registered nurse on duty at the facility for more than forty hours per week if:

(a) The facility is located in a nonurban area where the supply of skilled nursing facility services is not sufficient to meet the needs of individuals residing in the area;

(b) The facility has one full-time licensed registered nurse who is regularly on duty at the

facility forty hours per week; and

(c) The facility (i) has only patients whose physicians have indicated through orders or admission or progress notes that the patients do not require the services of a licensed registered nurse or a physician for more than forty hours per week or (ii) has made arrangements for a licensed registered nurse or a physician to spend time at the facility, as determined necessary by the physician, to provide the necessary services on days when the regular, full-time licensed registered nurse is not on duty.

A waiver may be granted under this subsection for a period of up to one year by the department.

Sec. 5. That section 71-2052, Revised Statutes Supplement, 1988, be amended to read as follows:

71-2052. (1) No person shall act as a care staff member unless such person:

(a) Is at least eighteen years of age and has not been convicted of a crime involving moral turpitude; and

(b) Has successfully completed a current course of training approved by the department for care staff members.

(2) The department may prescribe a curriculum for training care staff members and may adopt and promulgate rules and regulations for such courses of training. The department may also approve courses of training developed by associations, educational institutions, hospitals, or other entities so long as such courses of training meet the criteria set out in the rules and regulations ~~adopted and promulgated by~~ of the department. The courses of training shall include instruction on the responsibility of each care staff member to report suspected abuse or neglect pursuant to sections 28-372 and 28-711. Such rules and regulations shall include procedures for hospitals to carry out approved courses of training within the rehabilitation or long-term care facility. The rules and regulations shall provide that the prescribed training be administered by a licensed registered nurse. The Prior to October 1, 1990, the courses of instruction training shall be no less than ninety hours in duration, and On and after October 1, 1990, the courses shall be no less than one hundred fifteen hours in duration, or in the alternative the person required to complete such training may substitute passing a written or oral examination and competency evaluation deemed to meet the federal seventy-five-hour-training requirement for a

nurse aide and successful completion of an advanced course consisting of at least forty hours of pharmacology, medication administration, and oxygen administration by means of an oxygen concentrator. Successful completion of such advanced course shall require a grade of eighty percent or higher in an advanced course test administered by the department, a grade of eighty percent or higher in a non-facility-based program approved by the department, or successful completion of a course in another state which has been approved by the department. The courses shall include at least fifteen hours of basic personal care training and five hours of basic therapeutic and emergency procedure training. This section shall not prohibit any hospital from exceeding the minimum hourly or training requirements.

Sec. 6. That section 71-6038, Revised Statutes Supplement, 1988, be amended to read as follows:

71-6038. For purposes of sections 71-6038 to 71-6042, unless the context otherwise requires:

(1) Department shall mean the Department of Health;

(2) Care staff member shall mean a nursing assistant who meets the following qualifications: (a) Has attained the age of eighteen; (b)(i) has completed a basic resident care course which shall be not less than twenty hours and an advanced course which shall be not less than seventy hours, including thirty hours in anatomy, oxygen administration by means of an oxygen concentrator, physiology, and advanced therapeutics and forty hours of pharmacology and medication administration prior to October 1, 1990, for nursing assistants at all nursing homes, and on and after such date for nursing assistants at intermediate care facilities for the mentally retarded, has completed training approved by the department of at least ninety hours consisting of a basic resident care course of no fewer than twenty hours and an advanced course consisting of no fewer than forty hours in pharmacology, medication administration, and oxygen administration by means of an oxygen concentrator plus at least thirty hours of anatomy and physiology and advanced therapeutics if not included in the basic resident care course or (ii) on or after October 1, 1990, for nursing assistants at all nursing homes other than intermediate care facilities for the mentally retarded (A) has completed training approved by the department of at least one hundred fifteen hours consisting of a basic

resident care course of no fewer than seventy-five hours and an advanced course consisting of no fewer than forty hours in pharmacology, medication administration, and oxygen administration by means of an oxygen concentrator or (B) has passed a written or oral examination and competency evaluation deemed to meet the federal seventy-five-hour-training requirement for a nurse aide and successfully completed an advanced course consisting of at least forty hours of pharmacology, medication administration, and oxygen administration by means of an oxygen concentrator; (c) has received a grade of eighty percent or higher in an advanced course approved test administered by the department, has received a grade of eighty percent or higher in a non-facility-based program approved by the department, or has successfully completed a course in another state which has been approved by the department; and (d) has been approved by the nursing home administrator and the department to administer oral and external medication and oxygen as provided in section 71-6501. An individual who has been approved by the department as a care staff member shall be retested every three years on medication administration and oxygen administration by means of an oxygen concentrator and shall receive a grade of eighty percent or higher on such test. Individuals who have An individual who has not worked for a period of three years as an approved care staff member shall complete an approved forty-hour pharmacology and medication administration course and receive a grade of eighty percent or higher in such course. To maintain the status of an approved care staff member, such member shall attend, at least quarterly, inservice programs with topics dealing in medications or medication administration and oxygen administration by means of an oxygen concentrator; and

(3) Nursing assistant shall mean any person, other than a licensed registered or practical nurse, employed by a nursing home for the purpose of aiding a licensed registered or licensed practical nurse through the performance of nonspecialized tasks related to the personal care and comfort of residents.

Sec. 7. That section 71-6039, Revised Statutes Supplement, 1988, be amended to read as follows:

71-6039. No person shall act as a nursing assistant in a nursing home unless such person:

- (1) Is at least sixteen years of age and has not been convicted of a crime involving moral turpitude;
- (2) Is able to speak and understand the

English language or a language understood by a substantial portion of the nursing home residents; and

(3) Has successfully completed a basic course of training approved by the department for nursing assistants within one hundred twenty days of initial employment in the capacity of a nursing assistant at any nursing home if employment begins after January 1, 1984. The department may prescribe a curriculum for training nursing assistants and may adopt and promulgate rules and regulations for such courses of training. The content of the courses of training shall be consistent with the requirements of the Omnibus Budget Reconciliation Act of 1987, Public Law 100-203, unless exempted. The department may also approve courses of training developed by associations, educational institutions, health care facilities, or other entities so long as such courses of training meet the criteria set out in the rules and regulations adopted and promulgated by of the department. Such courses of training shall include instruction on the responsibility of each nursing assistant to report suspected abuse or neglect pursuant to sections 28-372 and 28-711. Such rules and regulations shall include procedures for nursing homes to carry out approved courses of training within the nursing home. Such rules and regulations shall provide that the prescribed training be administered by a licensed registered nurse. Such Prior to October 1, 1990, for nursing assistants at all nursing homes, and on and after such date for nursing assistants at intermediate care facilities for the mentally retarded, such courses of instruction training shall be no less than twenty hours in duration and shall include at least fifteen hours of basic personal care training and five hours of basic therapeutic and emergency procedure training, and on and after October 1, 1990, for nursing assistants at all nursing homes other than intermediate care facilities for the mentally retarded, such courses shall be no less than seventy-five hours in duration. This section shall not prohibit any facility from exceeding the minimum hourly or training requirements.

Sec. 8. That original sections 71-1,258, 71-1,260, 71-2052, 71-6038, and 71-6039, Revised Statutes Supplement, 1988, and section 71-2017.01, Revised Statutes Supplement, 1989, are repealed.