

SCHOOL: NURSE ASSISTANT TRAINING PROGRAM NOTICE

ATTN: Administrator

County: Riverside

Name and Main Address:

Riverside City College
4800 Magnolia Avenue
Riverside, CA 92506

Theory Training Location Address:
(If different from Main address)

Telephone Number: 951-222-8818

COMMENTS

The Department has received, reviewed and approved the renewal application dated 6/22/2020 for this NATP.
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This Nurse Assistant Training Program (NATP) may only use instructors "approved" on this communication notice.
Approved Instructors:
1. Amy Cowart, RN
2. Jill Smithen, RN
3. Mary Fehn, RN
4. Glynn Ramer, RN
5. Maria Rivas, RN
6. Stacey Ramos, LVN
7. Wanda Williams, RN
\*\*\*\*\*
Approved Clinical Site(s):
1. Valencia Gardens Health Care Center (F-0785)
All clinical site approvals expire concurrent with the program expiration unless otherwise specified.
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Reminders:
All changes of RN Program director, instructor (s), approved training program schedule, location of NATP, etc. must be approved by the Department prior to implementation.
Please submit your renewal paperwork 60-90 days prior to your program expiration date.

Program Identification Number(s):
S-1771

PROGRAM STATUS:

[x] Approved

Program Expiration Date: 06/30/2022

Training Program Schedule: Revised 7.14.20
Theory: 0800-1630
Clinical: 0700-1530

[ ] The written plan of the program is incomplete regarding:

- [ ] Nurse Assistant Certification Training Program (NATP) Application (CDPH 276S)
[ ] Nurse Assistant Training Program Skills Checklist (CDPH 276A)
[ ] Daily Nurse Assistant Training Program Schedule (CDPH 276B)
[ ] Nurse Assistant Training Program Individual Student Record (CDPH 276C)
[ ] Disclosure Ownership and Control Interest Statement (CDPH 276D)
[ ] Clinical Site Agreement (CDPH 276E)

[ ] Instructor(s):

- [ ] Director of Staff Development (DSD) / Instructor Application (CDPH 279)
[ ] Resume(s) with verifiable qualifications
[ ] 1 year of verifiable experience in teaching adults OR
[ ] 1 year of verifiable experience supervising nurse aides OR
[ ] Completion of a course in teaching adults (Attach the certificate of completion)

[ ] Other (See Comments)

Amy Cowart, RN
Name of Approved RN Program Director

Avleen K. Brar, RN

Avleen Brar, Nurse Surveyor (916-552-8723)

Training Program Review Unit Staff 07/15/2020

\*Please include a copy of this notice when responding to requests made by the Department.

\*This form is for the exclusive use of TPRU.