



In-Facility Testing Agreement

Instructions:

- Please read this entire agreement. Your facility must meet all requirements in order to be approved as an In-Facility.
- New facilities that have not tested with Prometric in the past must complete this In-Facility contract and request form. Additional contracts and forms may be obtained from www.prometric.com/NurseAide/NY or by calling 800.805.9128. Prometric reserves the right to discontinue use of a facility if security breeches or requirements are not met.
- Signed agreement and request forms must be received by Prometric 30 days in advance of the requested test date.
- Returning facilities that have not previously filled out this agreement will only be required to send the request form to Prometric 30 days in advance of requested test date.
- Each Nurse Aide Evaluator can only test eight candidates per day. If your facility is approved to test more than eight candidates, you must indicate that on the request form.
- Prometric will attempt to schedule a Nurse Aide Evaluator for one of the requested dates.
- Prometric will fax the request form back to the facility with the scheduled test date.
- After candidates have completed the Nurse Aide Registry Application, all candidate applications must be sent together with payment and a copy of the completed request form to Prometric 10 business days prior to the confirmed test date.

Part I – Contact Information

Name of NY Approved Training Program or LTCF:		
Mailing Address		

City	State	Zip Code
Phone No. (Include Area Code):	Fax No.:	
Training Program Approval Number:	Email Address:	
Training Program Coordinator/Instructor:		

Part II – Agreement

The space, equipment and supply requirements for In-Facility testing are detailed in Part III and the procedures for requesting In-Facility testing are detailed in Part IV. Review the agreement terms below and sign the agreement. This Agreement page and the processing request form (Page 39), along with directions to your training program/facility and a description of the areas that will be used for testing must be sent to Prometric. Submit by fax to: 800.813.6670; or by mail to: Prometric, Attn: NYS NA Program, 1260 Energy Lane, St. Paul, MN 55108.

On behalf of my LTCF or training program, we agree to the following terms:

- Ensure that the required space, equipment and supplies described herein for the administration of the Clinical Skills Exam and the Written or Oral Exam are provided;
- Ensure adequate inventories of supplies based on the volume of candidates to be tested;
- Ensure that all the supplies and equipment required for the administration of the Clinical Skills Exam are set up to simulate a resident’s unit and equipment is in working order before the arrival of the Nurse Aide Evaluator;
- Ensure that candidates or the training program have provided for a person to play the role of the resident (volunteer) and that candidates and volunteers have signed the release forms;
- Prescreen candidates to assure that they have the required identification documents for admission to testing; and
- Permit site visits by Prometric, DOH and Senior NAEs to monitor and observe testing and test site compliance.

I understand that failure to comply with the space, equipment and supply requirements may result in suspension of In-Facility testing. Compliance issues will be reported to the DOH. The facility is also expected to work collaboratively with the NAE toward ensuring efficiency in the administration of testing. I understand that Prometric reserves the right to deny and/or cancel testing at my facility at any time.

Signature of Authorizing Facility Representative

Date

Part III – Required Space, Equipment and Supplies

In order to qualify for In-Facility testing, the training program/facility must provide the required space, equipment and supplies needed to conduct a standardized test administration. These requirements are detailed below.

Candidate waiting areas

- A. Area where candidate can wait for testing (including designated area where candidate is permitted to eat)
- B. Public restrooms

Oral and Written Test Space and Equipment

- A. Lighting in testing room should be appropriate for office work.
- B. Well ventilated with temperature controls that provide for the general comfort of candidates.
- C. Quiet environment conducive to the concentration required for test taking.
- D. Room used exclusively for testing during administration.
- E. Restroom available to candidate within facility, preferably within proximity of testing room.
- F. Privacy provisions for testing such as ability to close door to testing room.

Clinical Skills Administration Space

- A. Room with closed door to provide for the privacy of testing.
- B. Area simulated to be resident room in LTCF. Actual resident room can be used as long as use of space does not infringe on resident's use of room or resident's rights since testing cannot be interrupted.
- C. Sink with running water and hand controls for turning water on and off located in testing room or within immediate proximity of testing room. (Note: If outside of testing room must be accessible throughout testing.)
- D. Privacy curtain (or other privacy provision)

Clinical Skills Administration Equipment

- A. Resident Room Environment:
 - Working hospital bed with regular mattress (no air mattresses, etc.). Must be able to raise and lower height of bed.
 - Side rails on bed optional
 - Sink with hot running water (both hot and cold) and hand-controlled faucets located in clinical skills room
 - Call bell (designated device, does not need to be operational)
 - Side chair (2)
 - Provision for privacy (curtain screen/screen) – partial does not need to wrap; minimum 2 feet
 - Soiled linen hamper
 - Overbed table – working controls and level surface
 - Bedside cabinet (night table) - must have shelves or drawers
 - Commode chair or toilet (required)
 - Wheelchair with footrests and brakes – standard
- B. Basic Supplies:
 - Bath basins (2) (rectangular shape preferred for footcare)
 - Bedpans (fracture and regular)
 - Emesis basin
 - Combs (6)
 - Drinking Cups – disposable (12)
 - Denture
 - Denture container/cup
 - Toothpaste (2)
 - Toothbrushes (6)
 - Gloves (non-latex all sizes)
 - Lotion
 - Emery Boards (6)
 - Orange Sticks (6)

- Paper Towels
- Soap (2)
- Toilet tissue
- Underpads (incontinent pads)(6)
- Water Pitcher
- Napkins
- Plastic spoons, forks, knives (6)
- Snack containers of Jell-O, pudding or applesauce- not expired (6)
- Drinkable water
- Straws (optional)

C. Linens:

- Bath blanket or similar item (4)
- Flat sheets (6)
- Fitted sheets (6) must fit mattress size
- Pillowcases (8)
- Pillows (minimum 5)
- Patient gowns (6)
- Towels (12)
- Washcloths (24)
- Clothing protector (bibs)(4)

D. Clothing to fit mannequin:

- Button or snap shirt (extra large; 2 with long sleeves)
- Sweat pants or similar item – elastic waist pant shorts (2 extra large)
- Socks

E. Additional items:

- Full-size Mannequin – with female genitalia that allows for catheter insertion (not life-weight mannequin, must have moveable joints)
- Blood pressure cuff
- Stethoscope with double earpiece (teaching)
- Stand up scale (non-digital) or may use chair scale (non-digital)
- Gait or transfer belt (2 large)
- Disinfectant (2)
- Clock with second hand
- Indwelling catheter
- Urinary drainage bag (must be able to be inserted and stay within mannequin; fit securely in mannequin with no tape)
- Clear or opaque graduate container for measuring urine (not urinal; not metal and marked with cc's)
- Alcohol swabs (individually wrapped)
- Toothettes (optional)
- Yellow food coloring
- Sphygmomanometer
- Waist restraint

Part IV – Procedure for Requesting In-Facility Testing

New facilities (facilities that have not tested with Prometric in the past) must obtain an In-Facility contract and request form from www.prometric.com/NurseAide/NY or by calling 800.805.9128 to request the form. The contract must be filled out by the facility, and all supply requirements must be met. Signed contracts and request forms must be submitted by mail or fax to Prometric 30 days in advance of the requested testing date. Returning facilities (facilities that have not previously filled out this agreement) will only be required to send the processing request form (Page 39) to Prometric 30 days in advance of requested test date.

All request forms must be received and contain three different testing date requests. After receiving a request form and/or In-Facility agreement, confirmations will be faxed and/or emailed to the facility verifying the testing date. After candidates have completed the Nurse Aide Registry Application, all candidate applications must be sent together with the facility's confirmation form and all payments to Prometric 10 business days prior to the confirmed test date. The facility will be faxed or emailed a confirmation of the test days.

Each Nurse Aide Evaluator can only test eight candidates per day. If a facility needs to test more than eight candidates, the facility must submit multiple forms with different requested test dates. If your facility is approved to test more than eight candidates in a day, be sure to indicate how many candidates are testing on the processing request form (Page 39). Testing fees may be paid by facility check, money order or certified check made payable to NY Commissioner of Health. A facility check for the group is allowed, however it may only be for the amount covering the candidates testing on each event date. We will not accept future payments or applications without payments. Candidates covered by the facility check must be listed on the check. If individual payments are made, the candidate's name must appear on each money order/certified check. No cash or personal checks are accepted. Exam fees are nonrefundable and nontransferable.

Candidates who do not show up for testing or who are not admitted to testing because they arrived late or had insufficient identification will forfeit their testing fees. It is the responsibility of the In-Facility site to notify candidates of their scheduled test day. Individual candidates may be rescheduled for another test date if the request is made before **five business days** preceding the scheduled test date. Additions **will not be accepted** without a completed application and exam fees. To reschedule a candidate, call 800.805.9128.

Materials may be sent to: Prometric; Attn: NYS NA In-Facility Testing Request; 1260 Energy Lane; St. Paul, MN 55108. If are trying to ensure delivery in an expedient timeframe, we do not recommend using USPS certified mail. Materials may also be faxed to 800.813.6670.

Part V – Day of Testing

Candidates are expected to provide a volunteer to play the role of the resident during testing. The volunteer may be another nurse aide candidate. Instructors may not play the role of the resident.

Candidate/Volunteer Release forms will be available to candidates on the day of testing. Candidates and volunteers under the age of 18 must have a release form signed by a parent or guardian prior to arriving at the testing center. A copy of the form is on Page 30 and online at www.prometric.com/NurseAide/NY.

Training programs/facilities are asked to remind candidates about identification requirements for admission to testing to ensure candidates are not denied testing by providing insufficient identification. Copies of identification documents cannot be accepted. Torn, cracked or taped ID will not be accepted. Identification must be in the same name as the name the candidate used when registering to test. The only exception to this requirement is if the candidate provides the NAE with a copy of a legal document that supports the name change.