

REQUEST FOR CONTINUING EDUCATION CLOCK HOURS

ARKANSAS NURSING HOME ADMINISTRATOR LICENSURE PROGRAM

ALL APPLICATIONS MUST BE SUBMITTED TO THE DIVISION OF PROVIDER SERVICES AND QUALITY ASSURANCE (DPSQA) NURSING HOME ADMINISTRATOR LICENSURE UNIT AT LEAST ONE MONTH PRIOR TO THE START OF THE COURSE OR WHEN A COURSE WILL BE MADE AVAILABLE. APPLICATIONS THAT DO NOT MEET THIS DEADLINE WILL BE REJECTED.

This CE Request Form is required for program courses that are NOT already approved by the National Association of Long-Term Care Administrator Boards (NAB). Please read this application in its entirety prior to submitting your application for review. Before sending the application, ask yourself the following questions.

If you find yourself answering no to any item, then your application is not complete.

- Does the course content fall under one or more of the Nursing Home Administrator Domains of Practice set by NAB? (List of Domains of Practice can be found on the [Arkansas-DHS Nursing Home Administrator webpage](#))
- Have I included a sample of the actual course brochure/announcement?
 - Does it include the course schedule/agenda, including registration time and all breaks?
 - Does it include the clear learning objective?
 - Does it include the course description and desired outcome?
 - Does it include a short speaker bio?
- Have I included a clearly labeled course bibliography/reference list?
- Have I included a resume for ALL speakers?
- Have I included a sample evaluation form?
- Have I included a sample Certification of Completion?
- Is the course free from commercial bias and does not promote the use/sale of a specific product/service?

See the following pages of instruction on completing the application form, submitting the application and the state agency review and approval process.

For questions regarding applying for CEUs through the Nursing Home Administrator Licensure Program, please visit licensing page on the Arkansas DHS website. For additional questions, please contact NHA.Licensure@dhs.arkansas.gov.

Submit your CE Request Application and all required documentation to:
NHA.Licensure@dhs.arkansas.gov

Application Process

1. Application must be completed by the course provider. Provider is defined as the organization which manages registrations, issues credit to the participants, completes the Summary of Evaluations, and processes payment for the course (if applicable).
2. Applications can be submitted using **one** of the following methods:
 - a. Email: **PREFERRED METHOD**
Complete and email the application and all requested documentation in a single .pdf file and send to NHA.Licensure@dhs.arkansas.gov. If the file is too large to send in one .pdf file, application may be split into two (2) files and labelled. An emailed application will receive a confirmation email informing you that we are in receipt of the application.
 - b. Via Mail: **NOTE- via mail could delay the approval process**
complete and mail **one (1) copy** of the application, requested documentation and payment to:
Arkansas Department of Human Services
ATTN: OLTC/Nursing Home Licensure
PO Box 1437, Slot S-407
Little Rock, AR 72203
3. Once the application is received by DHS office, an initial screening will be conducted of the application to ensure completeness. If there are issues with the application or changes that need to be made, you will be contacted via email. Applications will be reviewed and processed in the order they are received.
4. Once the application has been processed and deemed complete, it will be sent for review, the Review Committee has up to 30 business days to issue an initial response. Business days do not include weekends, holidays, or any day in which state agency offices are closed.

Please note:

- The DHS/OLTC- Nursing Home Administrator Licensure Unit will not process CE Requests during the designated NHA Licensure Renewal Period currently established as June 1 through July 1. If any applications are received during this time, the application will not be processed until the office reopens.
- All mention of business hours/days refer to the state agency calendar. Any holidays, early closures, or other days which the state agency offices are closed does not count as business time.

Approvals

If approved, your course approval will be valid for only the one date/time that is indicated on the application form and therefore noted on the approval letter you will receive. Approvals cannot be used for additional dates or locations; additional request forms will be required for each instance you would like to provide CE hours for. This approval is only authorized for continuing education requirements for Nursing Home Administrator licensing.

You will be required to submit a Summary of Evaluations and an Attendee List within 60 days after the approved course date. Failure to submit your summary and attendee list could result in future applications being denied.

Denials

If approval is denied, you may correct the application and submit additional materials for a new review of the application. Denied applications will not be held for corrections. You will be required to resubmit the application in full. The most common reasons for denial include, but are not limited to:

- Course content and/or learning objectives are not relevant to the field of Nursing Home Administrator
- The course promotes the use or sale of a commercial program, product, or services
- Speaker(s) not qualified to present course material
- The bibliography does not provide sufficient, current evidence to support the course content
- Requested documentation is missing from the application

Definitions

Approved Course: A continuing education seminar, workshop, or other event which meets the standards set forth by the Arkansas Nursing Home Administrator Licensure Unit within Arkansas Department of Human Services' Division of Provider Services and Quality Assurance and the Office of Long-Term Care to satisfy ongoing educational requirements mandated in the Rules and Regulations of Nursing Home Administrators and ACA §20-10-405.

Course Provider: The course provider is the organization that will be handling registration; marketing the course; administering course evaluations, consent forms and waivers; issuing CEU certificates; and maintaining course records for at least seven years.

Course Host/Sponsor: The facility where the course is taking place. Unless they are the same as the course provider, they have no burden regarding CEUs.

Course Speaker(s): The person or persons who will be presenting the course content to the attendees.

Course Author: The person or persons that developed the content of the course. This may be the same person as the Course Speaker.

Continuing Education Unit (CEU): In the state of Arkansas, CEUs and Contact Hours are used interchangeably. Credit may be awarded and accrued in either format. Registration times, breaks and lunches are not included in the calculation of CEUs or contact hours. Every one (1) contact hour is equal to 1.0 CEUs, and every 1.0 CEUs is equal to one (1) contact hour. Fractional hours will be awarded down to a quarter hour (.25). Example: A course on Ethics from 10am-11:15am could be awarded a total of 1.25 contact hours.

Public Course: This course will be available for anyone currently holding an active or inactive Arkansas Nursing Home Administrator license to register and attend. Any public course authorized to provide NHA CEUs will be listed on the DHS-Nursing Home Administrator Licensure webpage.

Certification of Completion: The certification of completion must be provided to each attendee who will receive CEUs for their Nursing Home Administrator license. This certificate must include the following criteria- Participant Name, Participant License Number, Course Title, Date and Time of Course, CE Approval Number, Number of Contact Hours Received, Signature of Course Speaker or Host/Sponsor and Title, The following disclaimer must be noted on the form:
“This course has been authorized for CE contact hours through the Arkansas Department of Human Services. These CEUs are only authorized for Nursing Home Administrator licensing requirements.”

Sample Evaluation Form: The evaluation form must be provided to each attendee who will receive CEUs for their Nursing Home Administrator license. This evaluation form must include the following criteria- Course Title, Date and Time of Course, CE Approval Number, a Score Key and questions to evaluate the instructor and presentation, educational material (if provided), class site and overall course. General comments, recommendations, and/or suggestions must also be included. The evaluator's name is not required.

CONTINUING EDUCATION COURSE APPROVAL APPLICATION

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****If submitting a conference with concurrent sessions for approval, each session must be submitted as a separate application. The DPSQA/OLTC CE authorization is for the specific program/workshop/seminar listed below. If you wish to obtain CE authorization for this program/workshop/seminar for a different date and time, you are required to submit an application for each additional date and time. DPSQA/OLTC's CE authorization is not valid for any other professional use.****

Check off the following documents to be sure they are included with the application. Failure to include all requested documentation will result in the application being delayed or rejected. Please allow 30 days for processing.

- Resumes or Statement of Qualifications for ALL speakers listed in Section 2
- Descriptive brochure or course advertisement, including detailed course schedule/agenda and learning objectives
- Course Bibliography
- Participant evaluation form
- Certificate of Completion

SECTION 1: PROVIDER INFORMATION									
Provider Name									
Contact Person									
Mailing Address									
City		State		Zip Code					
Telephone									
Email Address					Website				
SECTION 2: COURSE INFORMATION									
Course Title									
Course Author									
Course Host/Sponsor									
Speaker/Presenter Name(s) (Do not write "see attached"; all speakers must be declared on the form)									
Course Date					Registration Fee?	Yes	No		
Time Begins		AM	Time Ends		AM	Total time minus: Breaks, lunch, registration and evaluation			
		PM			PM				
CEs are authorized for each class per session. If you are planning to present this class in multiple sessions on multiple dates/times, please provide each date(s) and time(s) on the additional form. CE Authorization Numbers will be unique to each class session. NOTE: You cannot use a CE Authorization number for any date/time other than what is identified on the authorization letter.									
Course Description									
Teaching Method	In-Person	Live Webinar	Other:		Course open to the public to register?	No			
	Self-Study/Self-Paced	Audio Conference			<i>Please circle one</i>	Yes <small>(DHS can list the course on their website)</small>			
Will course include a lab or hands-on component?		Attendance Minimum				Attendance Maximum			
If Yes, please provide description and attendee/presenter ratio (i.e.: 3:1)									

SECTION 2b: DOMAIN OF PRACTICE

Example: 10.01

Establishing care recipient service policies and procedures applicable to federal/state laws, rules, regulations

Additional Information You Would Like to Provide:

Name- Please type/print

Signature

Date of Signature

AR NHA STATE OFFICE USE ONLY

Date Received:

Approved

Denied

Date of Approval/Denial

CEs Authorized:

Authorization ID:

Authorized Signature: