

**DEPARTMENT OF DEVELOPMENTAL SERVICES**

1600 NINTH STREET, Room 320, MS 3-9  
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TDD 654-2054 (For the Hearing Impaired)  
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**DATE:** JULY 31, 2000

**TO:** ICF/DD-N PROVIDERS

**SUBJECT:** ATTENDANT TRAINING PROGRAM - SPECIALIZED PROCEDURES

This informational packet was developed for you in response to multiple questions from the field. Providers are required, under the amended Title 22 draft regulations, Section 73874, to provide all non-licensed direct care staff an "Attendant Training Program" that has been approved by the Department of Developmental Services (DDS). Under Section 73874.1, you are also required to seek approval from DDS for, and provide training to non-licensed direct care staff in, specific specialized procedures prior to their implementing and performing the procedure.

The following provides an overview of draft ICF/DD-N regulations that relate to specialized procedures under Section 73874.1 (e) (1-6) and (f) (1-4). The citations are included for your reference.

**Section 73874.1**

(e) An attendant may perform a specific procedure for a specific client subject to the following:

- (1) The procedure is specifically ordered by the attending physician.
- (2) Prior to performing the procedure, the attendant shall be trained by the facility registered nurse to perform the procedure and shall demonstrate proficiency in performing the procedure while under the immediate supervision of the registered nurse. The attendant shall also be trained to recognize complications which could arise as a result of the procedure and to be knowledgeable in how to respond if a complication arises.
- (3) A signed written statement shall be prepared by the registered nurse which includes a certification of the attendant's competency to perform the procedure and which identifies the client for whom the certification is applicable. This certification shall be placed and maintained in the attendant's training record and a copy shall be placed in the client's record.

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- (4) The certification is procedure and client specific, and shall not be transferred between clients and facilities.
- (5) The registered nurse shall be responsible for the monitoring and staff implementation of the procedure. At least once every three months, the registered nurse shall observe and confirm the attendant's proficiency in performing the approved procedure and shall update the certification.
- (6) Training protocols for each procedure performed by an attendant shall be reviewed and approved as part of the facility program plan pursuant to 73859 (a) (12).

(f ) Attendants shall not insert or remove the following:

- (1) Nasogastric and gastrostomy tubes.
- (2) Tracheostomy appliances.
- (3) Indwelling catheters.
- (4) Any intravenous apparatus.

For your information, I have included a listing of additional resource materials and provided you with documents that explore and define the role of the non-licensed direct care staff and the registered nurse. Materials have also been enclosed that will guide you when submitting specialized procedures for approval to the Department of Developmental Services, Health Facilities Program Section. These documents and information include:

- PTB 91-42, - Outlines amendments to ICF/DD-N Regulations, 10/1/91.
- Licensing and Certification Amended Draft Intermediate Care Facility/Developmentally Disabled - Nursing (ICF/DD-N ) Regulations.
- Board of Registered Nursing - Position Paper on "Unlicensed Assistive Personnel," Board approved 11/94, revised 7/97.
- Board of Registered Nursing - Position Paper on "The RN as Supervisor," Revised 3/91.
- The Role of the Registered Nurse matrix.
- Suggested Considerations for the Assignment and Performance of Specialized Procedures.

- Specialized Procedures Approval Request Cover Sheet Sample.
- Specialized Procedure Format Sample.

The following list provides examples of commonly approved specialized procedures.

- Apnea monitoring.
- Colostomy care.
- Gastrostomy feeding and care.
- Medication administration via a gastrostomy tube.
- Tracheostomy care and light suctioning.
- Oxygen therapy
- Intermittent positive-pressure breathing.
- Catheterization - clean technique.
- Wound care - simple dressing changes.

To ensure that all components of a protocol are addressed, and to facilitate the approval process, please use the sample ***Specialized Procedures Approval Request Cover Sheet*** and ***Specialized Procedure Format*** when submitting a request to DDS for the approval of the performance of a specific procedure. If corrections or additional information are required, the protocol must be returned for further development before approval is granted. If you should have any questions or need assistance, please contact me at (916) 654-2430, or via e-mail at [lessie.Murphy@dds.ca.gov](mailto:lessie.Murphy@dds.ca.gov).

Sincerely,

**ORIGINAL SIGNED BY**

LESSIE J. MURPHY, RN  
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Enclosures