



Registered Apprenticeship Standards

National Program Standards National Guidelines for Apprenticeship Standards
 Local Apprenticeship Standards



IDAHO PRIMARY
CARE ASSOCIATION

Idaho Primary Care Association
1087 W River St, Suite 160
Boise, ID 83702

Occupation: *Multiple*

O*NET-SOC Code: *See Appendix A* **RAPIDS Code:** *See Appendices A*

In Coordination with the Idaho Department of Labor

Developed in Cooperation with the
U.S. Department of Labor
Office of Apprenticeship

Approved by the
U.S. Department of Labor
Office of Apprenticeship

Registered By: **ROBERT SNYDER**

Signature: *Robert A. Snyder*
Title: State Director, Idaho
Office of Apprenticeship Region 6
Date: 03/24/2022
Registration Number: 2022-ID-1197

Check here if these are revised standards



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SECTION I – STANDARDS OF APPRENTICESHIP 29 CFR § 29.5

A. Responsibilities of the sponsor: IDAHO PRIMARY CARE ASSOCIATION must conduct, operate, and administer this program in accordance with all applicable provisions of Title 29 Code of Federal Regulations (CFR) part 29, subpart A and part 30, and all relevant guidance issued by the Office of Apprenticeship (OA). The sponsor must fully comply with the requirements and responsibilities listed below and with the requirements outlined in the document “Requirements for Apprenticeship Sponsors Reference Guide.”

Sponsors shall:

- Ensure adequate and safe equipment and facilities for training and supervision and provide safety training for apprentices on-the-job and in related instruction.
- Ensure there are qualified training personnel and adequate supervision on the job.
- Ensure that all apprentices are under written apprenticeship agreements incorporating, directly or by reference, these standards and the document “Requirements for Apprenticeship Sponsors,” and that meets the requirements of 29 CFR § 29.7. Form ETA 671 may be used for this purpose and is available upon logging into RAPIDS.
- Register all apprenticeship standards with the U.S. Department of Labor, including local variations, if applicable.
- Submit apprenticeship agreements within 45 days of enrollment of apprentices.
- Arrange for periodic evaluation of apprentices’ progress in skills and technical knowledge, and maintain appropriate progress records.
- Notify the U.S. Department of Labor within 45 days of all suspensions for any reason, reinstatements, extensions, transfers, completions and cancellations with explanation of causes. Notification may be made in RAPIDS or using the contact information in Section K.
- Provide each apprentice with a copy of these standards, Requirements for Apprenticeship Sponsors Reference Guide, and Appendix A, any applicable written rules and policies, and require apprentices to sign an acknowledgment of their receipt. If the sponsor alters these standards or any Appendices to reflect changes it has made to the apprenticeship program, the sponsor will obtain approval of all



modifications from the Registration Agency, then provide apprentices a copy of the updated standards and Appendices and obtain another acknowledgment of their receipt from each apprentice.

B. Minimum Qualifications - 29 CFR § 29.5(b)(10)

An apprentice must be at least 16 years of age, except where a higher age is required by law, and must be employed to learn an apprenticesable occupation. Please include any additional qualification requirements as appropriate:

- There is an educational requirement of _____
- There is a physical requirement of _____
- The following aptitude test(s) will be administered _____
- A valid driver's license is required.
- Other *See Appendix A*

C. Apprenticeship Approach and Term - 29 CFR § 29.5(b)(2)

The apprenticeship program(s) will select an apprenticeship training approach. See Appendix A to select approach.

D. Work Process Schedule and Related Instruction Outline - 29 CFR § 29.5(b)(4)

Every apprentice is required to participate in related instruction in technical subjects related to the occupation. Apprentices **will** **will not** be paid for hours spent attending related instruction classes outside of work hours. See Work Process Schedule and Related Instruction Outline at Appendix A.

E. Credit for Previous Experience - 29 CFR § 29.5(b)(12)

Apprentice applicants seeking credit for previous experience gained outside the apprenticeship program must furnish such transcripts, records, affidavits, etc. that may be appropriate to substantiate the claim. IDAHO PRIMARY CARE ASSOCIATION will evaluate the request for credit and make a determination during the apprentice's probationary period.

F. Probationary Period - 29 CFR § 29.5(b)(8) and (20)

Every applicant selected for apprenticeship will serve a probationary period which may not exceed 25 percent of the length of the program or 1 year whichever is shorter. See probationary period at Appendix A.

G. Ratio of Apprentices to Journeyworkers - 29 CFR § 29.5(b)(7)

Every apprenticeship program is required to provide an apprenticeship ratio of apprentices to journeyworkers for adequate supervision. See ratio at Appendix A.



H. Apprentice Wage Schedule - 29 CFR § 29.5(b)(5)

Apprentices must be paid a progressively increasing schedule of wages based on either a percentage or a dollar amount of the current hourly journeyworker wage rate. See the progressive wage schedule at Appendix A.

I. Equal Employment Opportunity and Affirmative Action

1. Equal Opportunity Pledge - 29 CFR §§ 29.5(b)(21) and 30.3(c)(1)

IDAHO PRIMARY CARE ASSOCIATION will not discriminate against apprenticeship applicants or apprentices based on race, color, religion, national origin, sex (including pregnancy and gender identity), sexual orientation, genetic information, or because they are an individual with a disability or a person 40-years old or older.

IDAHO PRIMARY CARE ASSOCIATION will take affirmative action to provide equal opportunity in apprenticeship and will operate the apprenticeship program as required under Title 29 of the Code of Federal Regulations, part 30.

The equal opportunity pledge applies to the following additional protected bases (as applicable per the sponsor's state or locality):

2. Affirmative Action Program - 29 CFR §§ 29.5(b)(21), 30.4-30.9

IDAHO PRIMARY CARE ASSOCIATION acknowledges that it will adopt an affirmative action plan in accordance with 29 CFR § 30.4-30.9 (required for sponsors with five or more registered apprentices by two years from the date of the sponsor's registration or by two years from the date of registration of the program's fifth (5th) apprentice). Information and technical assistance materials relating to the creation and maintenance of an affirmative action plan will be made available on the Office of Apprenticeship's website.

3. Selection Procedures - 29 CFR § 30.10

Every sponsor will adopt selection procedures for their apprenticeship programs, consistent with the requirements set forth in 29 CFR § 30.10(b). See Appendix A to enter your selection procedures for each occupation for which the sponsor intends to train apprentices.



J. Complaint Procedures - 29 CFR §§ 29.5(b)(22), 29.7(k), 29.12, and 29 CFR § 30.14

If an applicant or an apprentice believes an issue exists that adversely affects the apprentice's participation in the apprenticeship program or violates the provisions of the apprenticeship agreement or standards, the applicant or apprentice may seek relief. Nothing in these complaint procedures precludes an apprentice from pursuing any other remedy authorized under another Federal, State, or local law. Below are the methods by which apprentices may send a complaint:

- 1. Complaints regarding discrimination.** Complaints must contain the complainant's name, address, telephone number, and signature, the identity of the respondent, and a short description of the actions believed to be discriminatory, including the time and place. Generally, a complaint must be filed within 300 days of the alleged discrimination. Complaints of discrimination should be directed to the following contact:

*U.S. Department of Labor, Office of Apprenticeship
200 Constitution Ave. NW, Washington, DC 20210
Telephone Number: (202) 693-2796
Email Address: ApprenticeshipEEOcomplaints@dol.gov
Point of Contact: Director, Division of Registered Apprenticeship and Policy
Attn: Apprenticeship EEO Complaints*

You may also be able to file complaints directly with the EEOC, or State fair employment practices agency.

- 2. Other General Complaints.** The sponsor will hear and attempt to resolve the matter locally if written notification from the apprentice is received within 15 days of the alleged violation(s). The sponsor will make such rulings as it deems necessary in each individual case within 30 days of receiving the written notification.

*Name: David Garrett
Address: 1087 W River St, Suite 160, Boise, ID 83702
Telephone Number: 208-898-3828
Email Address: dgarrett@idahopca.org*

Any complaint described above that cannot be resolved by the program sponsor to the satisfaction of all parties may be submitted to the Registration Agency provided below in Section K.



K. Registration Agency General Contact Information 29 CFR § 29.5(b)(17)

The Registration Agency is the United States Department of Labor's Office of Apprenticeship. General inquiries, notifications and requests for technical assistance may be submitted to the Registration Agency using the contact information below:

Name: *US/DOL/OA, Robert Snyder, Idaho State Director*

Address: *1387 S. Vinnell Way, #110*

Boise, ID 83709

Telephone Number: *208-321-2973*

Email Address: *Snyder.robert@dol.gov*

L. Reciprocity of Apprenticeship Programs 29 CFR § 29.13(b)(7)

States must accord reciprocal approval for Federal purposes to apprentices, apprenticeship programs and standards that are registered in other States by the Office of Apprenticeship or a Registration Agency if such reciprocity is requested by the apprenticeship program sponsor.

Program sponsors seeking reciprocal approval must meet the wage and hour provisions and apprentice ratio standards of the reciprocal State.

SECTION II - APPENDICES AND ATTACHMENTS

- Appendix A – Work Process Schedule, Related Instruction Outline, Apprentice Wage Schedule, Ratio of Apprentices to Journeyworkers, Type of Occupation, Term of Apprenticeship, Selection Procedures, and Probationary Period*
- Appendix B – ETA 671 - Apprenticeship Agreement and Application for Certification of Completion of Apprenticeship (To be completed after registration)*
- Appendix C – Affirmative Action Plan (Required within two years of registration unless otherwise exempt per 29 CFR §30.4(d))*
- Appendix D – Employer Acceptance Agreement (For programs with multiple-employers only)*



SECTION III - VETERANS' EDUCATIONAL ASSISTANCE AS MANDATED BY PUBLIC LAW 116-134 (134 STAT. 276)

Pursuant to section 2(b)(1) of the Support for Veterans in Effective Apprenticeships Act of 2019 (Pub. L. 116-134, 134 Stat. 276), by signing these program standards, the program sponsor official whose name is subscribed below assures and acknowledges to the U.S. Department of Labor's Office of Apprenticeship the following regarding certain G.I. Bill and other VA-administered educational assistance referenced below (and described in greater detail at the VA's website at: <https://www.va.gov/education/eligibility>) for which current apprentices and/or apprenticeship program candidates may be eligible:

- (1) The program sponsor is aware of the availability of educational assistance for a veteran or other eligible individual under chapters 30 through 36 of title 38, United States Code, for use in connection with a registered apprenticeship program;
- (2) The program sponsor will make a good faith effort to obtain approval for educational assistance described in paragraph (1) above for, at a minimum, each program location that employs or recruits a veteran or other eligible individual for educational assistance under chapters 30 through 36 of title 38, United States Code; and
- (3) The program sponsor will not deny the application of a qualified candidate who is a veteran or other individual eligible for educational assistance described in paragraph (1) above for the purpose of avoiding making a good faith effort to obtain approval as described in paragraph (2) above.

NOTE: The aforementioned requirements of Public Law 116-134 shall apply to "any program applying to become a registered apprenticeship program on or after the date that is 180 days after the date of enactment of this Act" (i.e., September 22, 2020). Accordingly, apprenticeship programs that were registered by a Registration Agency before September 22, 2020, are not subject to these requirements.



SECTION IV - SIGNATURES

OFFICIAL ADOPTION OF APPRENTICESHIP STANDARDS

The undersigned sponsor hereby subscribes to the provisions of the foregoing Apprenticeship Standards formulated and registered by IDAHO PRIMARY CARE ASSOCIATION, on this 14th day of February, 2022.

The signatories acknowledge that they have read and understand the document titled "Requirements for Apprenticeship Sponsors Reference Guide" and that the provisions of that document are incorporated into this agreement by reference unless otherwise noted.

A handwritten signature in blue ink that reads "David V. Garrett".

Signature of Sponsor (designee)

David Garrett

Printed Name

SECTION V - DISCLOSURE AGREEMENT (Optional)

I, David Garrett acting on behalf of IDAHO PRIMARY CARE ASSOCIATION authorize OA to share the Work Process Schedule and Related Instruction Outline in Appendix A with other potential apprenticeship sponsors.

A handwritten signature in blue ink that reads "David V. Garrett".

Signature

A handwritten date in blue ink that reads "2/22/22".

Date

David Garrett

Printed Name

Appendix A

**TRAINING APPROACH, TERM OF APPRENTICESHIP,
RATIO OF APPRENTICES, WAGE SCHEDULE,
PROBATIONARY PERIOD, SELECTION PROCEDURES**

AND

**WORK PROCESS SCHEDULE
RELATED INSTRUCTION OUTLINE**



Appendix A

WORK PROCESS SCHEDULE Dental Assistant

O*NET-SOC CODE: 31-9091.00 RAPIDS CODE: 0101CB

This schedule is attached to and a part of these Standards for the above identified occupation.

1. APPRENTICESHIP APPROACH

Time-based Competency-based Hybrid

2. TERM OF APPRENTICESHIP

The term of the occupation shall be competency-based, supplemented by the minimum recommended 144 hours of related instruction per year.

3. RATIO OF APPRENTICES TO JOURNEYWORKERS

The apprentice to journeyworker ratio is: 2 Apprentice(s) to 1 Journeyworker(s).

4. APPRENTICE WAGE SCHEDULE

Apprentices shall be paid a progressively increasing schedule of wages based on either a percentage or a dollar amount of the current hourly journeyworker wage rate, which is: \$15.00.

Progressive Wage Schedule is as follows:

Period	Hours/Competencies	Wage
1	Starting wage	\$13.00
2	50% of Competencies Satisfied	\$14.00

5. PROBATIONARY PERIOD

Every applicant selected for apprenticeship will serve a probationary period of 90 days.



6. SELECTION PROCEDURES

The process for finding and selecting the best talent possible for an apprenticeship opening position includes the following:

The sponsor may post open positions on career sites or the company's internal career board to solicit applications.

Applications will be pre-screened to eliminate candidates who do not meet the basic qualifications requirements of the position.

Those applicants that meet basic qualifications will be processed through an assessment to screen out those who lack the desire and interest for the apprenticeship. Screening applicants will be performed through interviews and job simulations to select candidates with the highest potential for apprenticeship success.

The Apprentice(s) will be selected based on the most qualified candidate.

Applicants that have accepted the position will be registered within 45 days. The apprenticeship selection process and procedures will be uniformly and consistently applied to all applicants.

Any applicant who feels that they were wrongfully denied entry into the apprenticeship program may appeal the decision using the applicant appeals procedure described in Section J of the Standards.

Maintenance of Applications and Selection Records

The sponsor and participating employer will keep adequate records according to their own internal systems, policies, and procedures. There will be no undue burden placed on the company in regarding to hiring the applicant as their apprentice. The items and records maintained, including qualifications of each applicant; the basis for evaluation for selection or rejection of each applicant; the records pertaining to interviews of applicants; the original application for each applicant; information relative to the operation of the apprenticeship program, including, but not limited to, job assignment, promotion, demotion, layoff, or termination; rates of pay or other forms of compensation or conditions of work; hours including hours of work and, separately, hours of training provided; and any other records pertinent to a determination of compliance with 29 CFR § 30, as may be required by the U.S. Department of Labor.

The records pertaining to individual applicants selected will be maintained in such manner as to permit the identification of race, gender, or ethnicity.

Records will be maintained for 5 years from the date of last action and made available upon request to the U.S. Department of Labor or other authorized representative.



WORK PROCESS SCHEDULE Dental Assistant

O*NET-SOC CODE: 31-9091.00 RAPIDS CODE: 0101CB

DESCRIPTION:

Perform limited clinical duties under the direction of a dentist. Clinical duties may include equipment preparation and sterilization, preparing patients for treatment, assisting the dentist during treatment, and providing patients with instructions for oral healthcare procedures. May perform administrative duties such as scheduling appointments, maintaining medical records, billing, and coding information for insurance purposes.

To enter the Apprenticeship Program:

An apprentice must be at least 16 years of age, except where a higher age is required by law, and must be employed to learn an apprenticeable occupation.

- There is an educational requirement of: attending high school, high school diploma or equivalent
- There is a physical requirement of:
- The following aptitude test(s) will be administered:
- Other:

ON-THE-JOB TRAINING:

PATIENT ENGAGEMENT

1. Intake

- a. *Welcomes patient with an emphasis on customer service, introduces self & explains role in visit; maintains eye contact as appropriate*
- b. *Confirms reason for visit and explains what will happen during visit*
- c. *Collects & documents appropriate patient history*
- d. *Able to review previous patient history in preparation for visit*

MET	NOT MET	Date & Initials



GENERAL SKILLS

Hand washing:

- a. Able to state how often and when should you wash your hands?
- b. Describes how long to wash hands

MET	NOT MET	Date & Initials
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Vitals Signs:

- a. Able to take and record blood pressure
- b. Able to take a temperature

Allergies:

- a. Can demonstrate when and where to document allergies
- b. Accurately articulates how often allergies are to be Checked

Biohazard Waste:

- a. Able to articulate the difference between biohazardous waste from non-biohazardous waste
- b. Able to describe disposal of sharps and when to change sharps container

SET UP OF DENTAL OPERATORY (NO INSTRUMENTS OR MATERIALS PRESENT)

MET	NOT MET	Date & Initials
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- a. Dons new clean gloves
- b. Places barrier on:
 - Bracket table handle
 - Lamp handles
 - Chair cover
 - Keyboard and mouse
 - Others:
- c. Remove and disposes of gloves



d. Washes hand for 20 seconds

BREAK DOWN OF DENTAL OPERATORIES

	MET	NOT MET	Date & Initials
a. Appropriately dons PPE and puts on nitrile gloves			
b. Removes anesthetic from syringe and dispose in sharps container			
c. Able to safely dispose of sharps with needles			
d. If scalpel is used, able to safely dispose of in sharps container			
e. If sutures are used, able to cut needle from suture and safely dispose of needle in sharps container			
f. Disposes of all disposable items including bibs, HVE, Saliva ejectors, A/W syringe, plastic barrier, in the trash can			
g. Places all used and unused instruments in covered transporting container.			
h. Able to transport dirty instruments to sterilization for appropriate cleaning and sterilization			
i. Able to disinfect transport containers after use, with Cavi-Wipe and prepare for further disinfection			
j. Able to use Cavi-Wipe towlettes to disinfect:			
k. Bracket table			
l. Chair including hand rests			
m. Lamp handle, lamp switches and clear lamp cover			
n. A/W syringes on all bracket tables (chairs may have			



multiple A/W syringes)

o. Cycle time for flushing lines

p. Run water through vacuum lines for 20 seconds

q. If necessary (after extractions/oral surgery), run appropriate amount of Evacuation System Cleaner through both HVE and saliva ejector hoses.

r. Removes gloves and washes hands for 30 seconds

INFECTION CONTROL: PROCESSING DIRTY INSTRUMENTS

Processing dirty instruments in the sterilization room

a. Able to don a gown

MET	NOT MET	Date completed
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b. Able to don mask and safety glasses

c. Able to don nitrile gloves on hands

d. Dons appropriately sized gloves

e. Able to don in appropriate order

f. Appropriately transfers dirty instruments from the dirty instrument bin using the carrier containers and drops them in the ultrasonic unit

- Able to lower basket of dirty instruments into the ultrasonic unit gently*
- Sets ultrasonic unit timer for 10 minutes*

g. Once 10-minute cycle is completed, the assistant:

- Removes the ultrasonic basket of instruments and places in the sink to run under tap water to rinse*



off solution

- *Lift basket out of sink and empty instruments from the basket onto the designated, dirty instrument countertop*

Bagging Dirty Instruments

- h. *Able to separate instruments according to procedure set-ups*
- i. *Able to identify appropriate cassette and/or size sterilization pouch and stamp the sterilization date on pouch or wrap*
- j. *Places instrument in the sterilization pouch or cassette*
- k. *Appropriately seals the sterilization pouch or wraps and tapes cassette*

Bagging handpieces

- a. *Handpieces and straight attachments are not placed in ultrasonic unit*
- b. *Handpieces and straight attachments are taken and placed in the handpiece lubrication station for lubrication*
- c. *Once the lubrication cycle is completed, handpieces and straight attachments are removed from the station and are wiped with a paper towel to remove any excess lubricating agent.*
- d. *Transport handpieces, contra-angles and straight attachments to the bagging station*
 - *Separate instruments according to procedure set-ups*
 - *Identify appropriately sized sterilization pouch and stamp sterilization date on pouch*
 - *Seal the sterilization pouch*

Labelling and logging of sterilization pouches

- e. *Each sterilization pouch or cassette that contains instruments are labelled with:*
 - *Stamped date*



- Autoclave unit number
- Load number of the autoclave used to sterilize pouch

After the sterilization cycle is complete:

- Remove pouches and cassettes from the autoclave and place in the "clean" area to dry
- Inspect pouches and cassettes to check that the biological indicator on the pouch or cassette has changed from pink to dark brown
- Makes sure that there are no holes, perforations or tears to the pouches or cassette wrap

PATIENT CARE

Patient Flow:

- Able to describe standardized patient flow process
- Accurate demonstration of patient Intake/walkout in NextGen

MET	NOT MET	Date completed

COMPUTER SKILLS

NextGen:

- Able to maneuver in NextGen
- Able to accurately document patient data in correct fields
- Able to access patient and provider schedules

MET	NOT MET	Date completed

REFERRALS

- Able to describe the referral process
- Able to describe how referrals documents are entered into Nextgen

MET	NOT MET	Date completed

Radiography/Dexis



Knowledge of appropriate radiographic technique:

- a. *Demonstrate navigation of XrayVision software for taking radiographs*
- b. *Knowledge of proper infection control techniques for radiography*
- c. Practice safety measures to protect patient and operator from radiation

MET	NOT MET	Date completed
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Demonstrate taking of panoramic radiograph and Cone Beam CT

MET	NOT MET	Date completed
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- a. *Demonstrate taking of periapical radiographs (anterior and posterior)*
- b. *Demonstrate taking of bitewing radiographs*
- c. *Evaluate radiographs for errors and retake if necessary*

This section is to be completed by supervisor:

Based on observation of Employee's performance and Competency Assessment,
_____ (employee) is competent to perform as a: Dental Assistant

Date: _____ YES NO (If no, see below)

Deficiency	Action Plan	Time Line

Employee Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____



RELATED INSTRUCTION OUTLINE Dental Assistant

0*NET-SOC CODE: 31-9091.00 RAPIDS CODE: 0101

INSTRUCTION PROVIDED BY:



North Idaho College

**North Idaho College
Workforce Training Center
525 Clearwater Loop, Post Falls, ID 83854
Contact: Marty Matney
Email: mmmatney@nic.edu
Phone: (208) 769-7704**

RELATED INSTRUCTION DESCRIPTIONS:

Related instruction can be delivered to apprentices through in-house training, in a classroom, and/or online.

CONTENT STANDARD 1.0: DENTAL PROFESSIONS

Performance Standard 1.1: Introduction to the Dental Field

- List members of the dental team and describe their role.
- Describe the dental specialties and related procedures.
- List and describe the dental assisting credentials.
- Explore dental professional organizations.

CONTENT STANDARD 2.0: LAW AND ETHICS

Performance Standard 2.1: Professional Organizations

- Encourage participation in dental professional organizations.
- Demonstrate an understanding of a professional code of conduct.

Performance Standard 2.2: State Dental Practice Act

- Demonstrate an understanding of Rule 19.01.01.035 in Idaho Administrative Procedures Act (IDAPA) code.
- Demonstrate an understanding of Idaho Code, Title 54, Chapter 9 (specifically, 54-903).



Performance Standard 2.3: Ethics in Dental Assisting

- Demonstrate professional and ethical expectations.

Performance Standard 2.4: Risk Management

- Demonstrate understanding and handling of the patient records.
- Demonstrate the significance of the medical and dental health record.
- Demonstrate an understanding of Health Insurance Portability and Accountability Act (HIPAA) regulations.
- Demonstrate office compliance in regards to OSHA and CDC guidelines.
- Demonstrate the necessity for appropriate consent for or refusal of dental treatment.
- Demonstrate appropriate language/actions necessary for precautionary measures in the prevention of legal or board action against dental personnel.
- Demonstrate process of due care for dental health care personnel.

CONTENT STANDARD 3.0: NUTRITION

Performance Standard 3.1: Nutrition

- Identify cariogenic foods.
- List the components of a dietary analysis.
- Describe eating disorders and how they relate to oral health.

CONTENT STANDARD 4.0: INFECTION CONTROL

Performance Standard 4.1: Patient and Dental Healthcare Worker Education

- Demonstrate an understanding of infectious diseases and mode of transmission.
- Demonstrate an understanding of the chain of infection and the consequences to patient, self, family and community.
- Demonstrate an understanding of the need for immunizations for self and patient to prevent spread of infectious diseases.

Performance Standard 4.2: Precautions and the Prevention of Disease Transmission

- Manage infection and hazard control protocol consistent with CDC guidelines.
- Demonstrate proper PPE usage.
- Demonstrate proper hand hygiene.
- Demonstrate protocols for single-use disposables.
- Demonstrate barrier techniques.
- Demonstrate proper sterilization and disinfection techniques of instruments and equipment.
- Demonstrate sterilization monitoring protocols and spore testing.
- Demonstrate proper water lines disinfections and biofilm management.
- Demonstrate proper disposal of biohazards and sharps.



Performance Standard 4.3: Occupational Safety

- Demonstrate proper use and preparation of chemical agents according to manufacturer's instructions.
- Demonstrate an understanding of OSHA Bloodborne Pathogens Standards.
- Demonstrate engineering and work practice controls.
- Demonstrate regulations described in the OSHA Hazard Communication Standard.
- Demonstrate an understanding of safety data sheet (SDS).
- Demonstrate appropriate first aid procedures, documentation and reporting of all incidents.
- Demonstrate an understanding of all safety measures for chemical and physical hazards.
- Demonstrate an understanding of how to maintain and document a quality assurance program for infection control and safety.

CONTENT STANDARD 5.0: ANATOMY AND PATHOLOGY

Performance Standard 5.1: Head and Neck Anatomy

- Describe major bones, muscles and nerves of the head and neck.

Performance Standard 5.2: Oral Anatomy

- Describe the soft and hard tissues of the oral cavity.

Performance Standard 5.3: Primary and Permanent Dental Anatomy

- Demonstrate the three numbering systems.
- Identify the five surfaces of a tooth.
- Identify the characteristics of teeth.

Performance Standard 5.4: Oral Pathology

- Identify stages of dental caries
- Identify stages of periodontal disease.
- Identify anomalies of the oral cavity.

CONTENT STANDARD 6.0: OFFICE OPERATIONS

Performance Standard 6.1: Patient Relations

- Demonstrate understanding of patient reception.
- Demonstrate effective patient communication skills.
- Proper use of dental terminology in patient care.
- Accurately define and spell dental terminology.
- Proper use of dental abbreviations.

Performance Standard 6.2: Administrative Operations



- Maintain inventory control.
- Demonstrating dental software program skills.
- Demonstrate proper phone etiquette.
- Demonstrate communication of treatment plans and financial arrangements.

CONTENT STANDARD 7.0: EMERGENCIES

Performance Standard 7.1: Management of Dental and Medical Emergencies

- Recognize signs and symptoms of medical and dental conditions that could result in an emergency.
- Demonstrate use of the medical emergency kit.
- Demonstrate how to respond to medical emergencies relating to specific medical conditions.
- Demonstrate health care provider CPR and first aid.

CONTENT STANDARD 8.0: PHARMACOLOGY

Performance Standard 8.1: Dental Anesthesia

- Identify the types of anesthesia used in dental procedures.
- Identify indications and contraindications for local anesthetics.
- Identify indications and contraindications for vasoconstrictors.
- Identify indications and contraindications of sedations.

CONTENT STANDARD 9.0: DENTAL ASSISTING SKILLS

Performance Standard 9.1: Collecting and Recording of Clinical Data

- Take/review and record medical and dental histories.
- Take and record vital signs.
- Assist with and/or perform soft tissue extra/intra oral examinations.
- Assist with and/or perform dental charting.
- Maintain accurate patient treatment records.

Performance Standard 9.2: Preparation for Dental Treatment

- Demonstrate how to prepare the treatment room for a patient.
- Demonstrate how to prepare appropriate treatment trays with armamentarium in sequence of use and delivery position.
- Demonstrate how to seat and dismiss patients using ergonomically correct techniques to include positioning and adjusting equipment.
- Prepare tray set-ups for a variety of procedures and specialty areas.

Performance Standard 9.3: General Chairside Assisting Skills

- Maintain clear field of operation by use of oral evacuation devices, air/water syringe and other isolation techniques.



- Perform a variety of instrument transfers.
- Provide patient preventive education and oral hygiene instruction.
- Provide pre-and post-operative instructions prescribed by a dentist.
- Identify and respond to medical and dental emergencies.
- Demonstrate four-handed dentistry in treatment procedures.
- Identify dental equipment, maintenance, and use.
- Identify dental instruments and their uses.

Performance Standard 9.4: Additional Chairside Assisting Skills

- Apply topical anesthetic and desensitizing agents.
- Assemble and disassemble a local anesthetic syringe.
- Place and remove a dental dam.
- Apply fluoride agents.
- Apply bases and liners.
- Assist with the application of bonding agents.
- Assist with placement and removal of provisional restorations.
- Place and remove matrix retainers, matrix bands, and wedges.
- Remove excess cement.
- Assist with a direct permanent restoration.
- Obtain preliminary impressions.
- Fabricate trays, e.g., bleaching trays, mouth guard trays, custom trays
- Clean removable dental appliances.
- Remove sutures.
- Place and remove periodontal dressing
- Perform orthodontic functions.

Performance Standard 9.5: Expanded Dental Assisting Functions

- Perform supragingival coronal polishing with the use of rubber cup or brush.
- Application of pit and fissure sealants.
- Perform mechanical polishing of restoration.
- Initiating, regulating and monitoring the administration of Nitrous Oxide-Oxygen analgesia.
- Perform use of high speed hand piece only for removal of orthodontic cement or resin.
- Fabrication and placement of temporary crowns.

CONTENT STANDARD 10.0: DENTAL MATERIALS

Performance Standard 10.1: Restorative Materials

- Demonstrate how to prepare, mix and deliver restorative materials.

Performance Standard 10.2: Dental Cements

- Demonstrate how to prepare, mix and deliver dental cements.



Performance Standard 10.3: Lab Materials

- Demonstrate how to prepare, mix and deliver lab materials.

Performance Standard 10.4: Impression Materials

- Demonstrate how to prepare, mix and deliver impression materials.

CONTENT STANDARD 11.0: RADIOLOGY

Performance Standard 11.1: Radiation Safety

- Identify the biological effects of ionizing radiation.
- Demonstrate patient and operator protection techniques.

Performance Standard 11.2: Dental X-Ray Equipment

- Identify components of the x-ray machine.
- Identify types of radiographic receptors.
- Identify use of receptor device holders.

Performance Standard 11.3: Exposure and Processing of Intraoral and Extraoral Radiographs

- Identify sizes and types of dental radiographs.
- Demonstrate various radiograph techniques.
- Demonstration of evaluation of radiographs for diagnostic value.
- Demonstrate proper processing technique.
- Demonstrate proper mounting of radiographs.
- Identify radiographic landmarks.

Adapted from Idaho Career & Technical Education Standards for Dental Assisting

TOTAL MINIMUM HOURS 144 PER YEAR



Appendix A.1

WORK PROCESS SCHEDULE

AND

RELATED INSTRUCTION OUTLINE



Appendix A.1

WORK PROCESS SCHEDULE

Community Health Worker

O*NET-SOC CODE: 21-1091.00 RAPIDS CODE: 2002CB

This schedule is attached to and a part of these Standards for the above identified occupation.

1. APPRENTICESHIP APPROACH

Time-based Competency-based Hybrid

2. TERM OF APPRENTICESHIP

The term of the occupation shall be competency-based, supplemented by the minimum recommended 144 hours of related instruction per year.

3. RATIO OF APPRENTICES TO JOURNEYWORKERS

The apprentice to journeyworker ratio is: 1 Apprentice to 1 Journeyworker.

4. APPRENTICE WAGE SCHEDULE

Apprentices shall be paid a progressively increasing schedule of wages based on either a percentage or a dollar amount of the current hourly journeyworker wage rate, which is:

\$16.00.

Period	Competencies/Hours	Wage
1 st	Starting Wage	\$13.00
2 nd	50% of Competencies	\$14.50

5. PROBATIONARY PERIOD

Every applicant selected for apprenticeship will serve a probationary period of 90 days.

6. SELECTION PROCEDURES

Please see page A-14.



Appendix A.1
ON-THE-JOB LEARNING OUTLINE
Community Health Worker
O*NET-SOC CODE: 21-1091.00 RAPIDS CODE: 2002CB

REQUIREMENTS:

To enter the Apprenticeship Program:

An apprentice must be at least 17 years of age, except where a higher age is required by law, and must be employed to learn an apprenticeable occupation.

- There is an educational requirement of: High school diploma/GED
- There is a physical requirement of:
- The following aptitude test(s) will be administered:
- A valid driver's license is required.
- Other:

ON-THE-JOB LEARNING:

Provides cultural mediation among individuals, communities and health and social service systems		
Competencies	Date Completed	Initial
A. <i>Educes individuals and communities about how to use health and social service systems (including explaining how systems operate)</i>		
B. <i>Educes health and social service systems and providers about community perspectives and cultural norms (including supporting implementation of Culturally and Linguistically Appropriate Services (CLAS) standards</i>		
C. <i>Expands health literacy among constituents served</i>		
D. <i>Facilitates cross-cultural communication among individuals, communities and health/social service system workers</i>		

Provides culturally appropriate health education and information		
Competencies	Date Completed	Initial
A. <i>Conducts health promotion and disease prevention education in a matter that matches linguistic and cultural needs of participants or community</i>		



B. Provides necessary information and support to help individuals and communities learn the etiology, pathology and likely outcomes of health conditions, as well as appropriate prevention and management strategies, including for chronic disease		
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Coordinates care, provides case management support and assists individuals and communities in navigating health and social service systems		
Competencies	Date Completed	Initial
A. Participates in care coordination or case management, including as part of a team		
B. Provides referrals and follow-up support to ensure that services were obtained		
C. Facilitates, obtains or coordinates transportation to services and helps ameliorate other barriers to services		
D. Documents and tracks individual- and population-level data		
E. Identifies and informs people and systems about community assets and challenges		

Provides coaching and social support		
Competencies	Date Completed	Initial
A. Provides individual support and coaching		
B. Motivates and encourages people to obtain care and other services		
C. Supports self-management of disease prevention and management of health conditions, including chronic disease		
D. Plans, organizes and/or leads support groups		



Advocates for individuals and communities

Competencies	Date Completed	Initial
A. Assists individuals in building and expanding their personal capacity to identify and manage their health conditions, obtain services as needed, identify opportunities to help others, and represent their needs through communication and advocacy		
B. Assists communities in building capacity by identifying resources, coordinating service and support providers, linking groups or systems that provide synergistic support, and implementing advocacy strategies to address unmet needs		
C. Identifies and works with CHW peers to help others grow professionally, act ethically and meet the needs of the individuals and communities served		

Helps build individual and community capacity

Competencies	Date Completed	Initial
A. Assists individuals in building and expanding their personal capacity to identify and manage their health conditions, obtain services as needed, identify opportunities to help others, and represent their needs through communication and advocacy		
B. Assists communities in building capacity by identifying resources, coordinating service and support providers, linking groups or systems that provide synergistic support, and implementing advocacy strategies to address unmet needs		
C. Identifies and works with CHW peers to help others grow professionally, act ethically and meet the needs of the individuals and communities served		

Provides direct health and social service assistance

Competencies	Date Completed	Initial
A. Conducts and accurately reports and communicates results and implications of basic screening tests (height, weight, blood pressure, glucose level, etc.)		



B. Provides basic health support services (e.g. first aid, diabetic foot checks)		
C. Collects and distributes materials that meet basic needs (e.g. provides food, blankets, clothing to those in need)		

Implements individual and community assessments		
Competencies	Date Completed	Initial
A. Participates in design, implementation and interpretation of individual-level assessments (e.g. home environmental assessment)		
B. Participates in design, implementation and interpretation of community-level assessments (e.g. windshield survey of community assets and challenges, community asset mapping)		

Conducts outreach to individuals, communities, service providers and groups		
Competencies	Date Completed	Initial
A. Identifies and recruits individuals, families and community groups to services and systems		
B. Follows up on health and social service encounters with individuals, families and community groups		
C. Conducts home visits to provide education, assessment and social support		
D. Presents at local agencies and community events to share information and educate individuals and communities about health and social service concerns and resources		

Participates in evaluation and research		
Competencies	Date Completed	Initial
A. Evaluates CHW services and programs		



B. Identifies and engages community members as research partners, including community consent processes		
C. Identifies priority issues and evaluation/research questions		
D. Develops evaluation/research design and methods		
E. Collects and interprets data		
F. Shares results and findings		
G. Engages stakeholders to take action on findings		

Table 1: COMMUNITY HEALTH WORKER ROLES/SCOPE OF PRACTICE

<input type="checkbox"/> Checklist for personal, programmatic, and policy review	Community Health Worker Core Consensus Project Roles/Scope of Practice
Role: Functions that CHWs serve in communities and the health care system. For example, CHWs provide health education.	
Scope of Practice: An all-inclusive list of roles and tasks which an occupation includes in its scope of work. The exact mix of these roles and tasks for any one individual will vary based on the needs of those served and host organizations.	
ROLE	SUB-ROLES
1. Cultural Mediation Among Individuals, Communities, and Health and Social Service Systems	<ul style="list-style-type: none">a. Educating individuals and communities about how to use health and social service systems (including understanding how systems operate)b. Educating systems about community perspectives and cultural norms (including supporting implementation of Culturally and Linguistically Appropriate Services [CLAS] standards)c. Building health literacy and cross-cultural communication
2. Providing Culturally Appropriate Health Education and Information	<ul style="list-style-type: none">a. Conducting health promotion and disease prevention education in a manner that matches linguistic and cultural needs of participants or communityb. Providing necessary information to understand and prevent diseases and to help people manage health conditions (including chronic disease)



3. Care Coordination, Case Management, and System Navigation	<ul style="list-style-type: none">a. <i>Participating in care coordination and/or case management</i>b. <i>Making referrals and providing follow-up</i>c. <i>Facilitating transportation to services and helping address barriers to services</i>d. <i>Documenting and tracking individual and population level data</i>e. <i>Informing people and systems about community assets and challenges</i>
4. Providing Coaching and Social Support	<ul style="list-style-type: none">a. <i>Providing individual support and coaching</i>b. <i>Motivating and encouraging people to obtain care and other services</i>c. <i>Supporting self-management of disease prevention and management of health conditions (including chronic disease)</i>d. <i>Planning and/or leading support groups</i>
5. Advocating for Individuals and Communities	<ul style="list-style-type: none">a. <i>Advocating for the needs and perspectives of communities</i>b. <i>Connecting to resources and advocating for basic needs (e.g. food and housing)</i>c. <i>Conducting policy advocacy</i>
6. Building Individual and Community Capacity	<ul style="list-style-type: none">a. <i>Building individual capacity</i>b. <i>Building community capacity</i>c. <i>Training and building individual capacity with peers and among CHW groups</i>
7. Providing Direct Service	<ul style="list-style-type: none">a. <i>Providing basic screening tests (e.g. height, weight, blood pressure)</i>b. <i>Providing basic services (e.g. first aid, diabetic foot checks)</i>c. <i>Meeting basic needs (e.g., direct provision of food and other resources)</i>
8. Implementing Individual and Community Assessments*	<ul style="list-style-type: none">a. <i>Participating in design, implementation, and interpretation of individual-level assessments (e.g. home environmental assessment)</i>b. <i>Participating in design, implementation, and interpretation of community-level assessments (e.g. windshield survey of community assets and challenges, community asset mapping)</i>
9. Conducting Outreach*	<ul style="list-style-type: none">a. <i>Case-finding/recruitment of individuals, families, and community groups to services and systems</i>b. <i>Follow-up on health and social service encounters with individuals, families, and community groups</i>c. <i>Home visiting to provide education, assessment, and social support</i>d. <i>Presenting at local agencies and</i>



	<i>community events</i>
10. Participating in Evaluation and Research*	<ul style="list-style-type: none">a. <i>Engaging in evaluating CHW services and programs</i>b. <i>Identifying and engaging community members as research partners, including community consent processes</i>c. <i>Participating in evaluation and research:</i><ul style="list-style-type: none">i) <i>Identification of priority issues and evaluation/research questions</i>ii) <i>Development of evaluation/research design and methods</i>iii) <i>Data collection and interpretation</i>iv) <i>Sharing results and findings</i>v) <i>Engaging stakeholders to take action on findings</i>

Table 2: COMMUNITY HEALTH WORKER COMPETENCIES: SKILLS

<input checked="" type="checkbox"/> Checklist for personal, programmatic, and policy review	Community Health Worker Core Consensus Project Skills
<p>Skill: <i>The ability, coming from one's knowledge, practice, and aptitude, to do something well. A core role or a task that must be performed may be supported by multiple skills.</i></p>	
SKILLS	SUB-SKILL/DESCRIPTION
1. Communication Skills	<ul style="list-style-type: none">a. <i>Ability to use language confidently</i>b. <i>Ability to use language in ways that engage and motivate</i>c. <i>Ability to communicate using plain and clear language</i>d. <i>Ability to communicate with empathy</i>e. <i>Ability to listen actively</i>f. <i>Ability to prepare written communication including electronic communication (e.g., email, telecommunication device for the deaf)</i>g. <i>Ability to document work</i>h. <i>Ability to communicate with the community served (may not be fluent in language of all communities served)</i>
2. Interpersonal and Relationship-Building Skills	<ul style="list-style-type: none">a. <i>Ability to provide coaching and social support</i>b. <i>Ability to conduct self-management coaching</i>c. <i>Ability to use interviewing techniques (e.g. motivational interviewing)</i>d. <i>Ability to work as a team member</i>e. <i>Ability to manage conflict</i>f. <i>Ability to practice cultural humility</i>



3. Service Coordination and Navigation Skills	<ul style="list-style-type: none">a. Ability to coordinate care (including identifying and accessing resources and overcoming barriers)b. Ability to make appropriate referralsc. Ability to facilitate development of an individual and/or group action plan and goal attainmentd. Ability to coordinate CHW activities with clinical and other community servicese. Ability to follow-up and track care and referral outcomes
4. Capacity Building Skills	<ul style="list-style-type: none">a. Ability to help others identify goals and develop to their fullest potentialb. Ability to work in ways that increase individual and community empowermentc. Ability to network, build community connections, and build coalitionsd. Ability to teach self-advocacy skillse. Ability to conduct community organizing
5. Advocacy Skills	<ul style="list-style-type: none">a. Ability to contribute to policy developmentb. Ability to advocate for policy changec. Ability to speak up for individuals and communities
6. Education and Facilitation Skills	<ul style="list-style-type: none">a. Ability to use empowering and learner-centered teaching strategiesb. Ability to use a range of appropriate and effective educational techniquesc. Ability to facilitate group discussions and decision-makingd. Ability to plan and conduct classes and presentations for a variety of groupse. Ability to seek out appropriate information and respond to questions about pertinent topicsf. Ability to find and share requested informationg. Ability to collaborate with other educatorsh. Ability to collect and use information from and with community members
7. Individual and Community Assessment Skills*	<ul style="list-style-type: none">a. Ability to participate in individual assessment through observation and active inquiryb. Ability to participate in community assessment through observation and active inquiry
8. Outreach Skills*	<ul style="list-style-type: none">a. Ability to conduct case-finding, recruitment and follow-upb. Ability to prepare and disseminate materialsc. Ability to build and maintain a current



	<i>resource inventory</i>
9. Professional Skills and Conduct	<ul style="list-style-type: none">a. Ability to set goals and to develop and follow a work planb. Ability to balance priorities and to manage timec. Ability to apply critical thinking techniques and problem solvingd. Ability to use pertinent technologye. Ability to pursue continuing education and life-long learning opportunitiesf. Ability to maximize personal safety while working in community and/or clinical settingsg. Ability to observe ethical and legal standards (e.g. CHW Code of Ethics, Americans with Disabilities Act [ADA], Health Insurance Portability and Accountability Act [HIPAA])h. Ability to identify situations calling for mandatory reporting and carry out mandatory reporting requirementsi. Ability to participate in professional development of peer CHWs and in networking among CHW groupsj. Ability to set boundaries and practice self-care
10. Evaluation and Research Skills*	<ul style="list-style-type: none">a. Ability to identify important concerns and conduct evaluation and research to better understand root causesb. Ability to apply the evidence-based practices of Community Based Participatory Research (CBPR) and Participatory Action Research (PAR)c. Ability to participate in evaluation and research processes including:<ul style="list-style-type: none">i) Identifying priority issues and evaluation/research questionsii) Developing evaluation/research design and methodsiii) Data collection and interpretationiv) Sharing results and findingsv) Engaging stakeholders to take action on findings



Appendix A.1
RELATED INSTRUCTION OUTLINE
Community Health Worker
O*NET-SOC CODE: 21-1091.00 RAPIDS CODE: 2002CB

RELATED INSTRUCTION DESCRIPTIONS:

Idaho Department of Labor Apprentice Mentee Training Program: [Apprentice Mentee Training Program \(hubspotpagebuilder.com\)](http://ApprenticeMenteeTrainingProgram.hubspotpagebuilder.com)

The Apprentice Mentee Training Program is designed to help you become a stronger, more agile team member and learner. In under three hours, you'll learn how promote an innovative and collaborative work environment, advance your team's competitive edge, and reach your maximum potential with the guidance of your mentor. Take the future into your own hands and become a better mentee today.

Idaho State University Community Health Worker Training Academy

CHW Core course (Didactic 48 hours)

- Unit 1- Roles and boundaries for CHWs
- Unit 2- Effective communication
- Unit 3- Cultural competency
- Unit 4- Key concepts in personal and public health
- Unit 5- Outreach
- Unit 6- Organization, time management, & documentation
- Unit 7- Individual and community assessment
- Unit 8- Advocacy and community capacity building
- Unit 9- Care coordination & systems navigation
- Unit 10- Navigating health insurance
- Unit 11- Promoting healthy behavior change
- Unit 12- Health literacy and barriers to care
- Unit 13- Crafting and presenting a case
- Unit 14- Self-care and customer service
- Unit 15- Evaluation of CHW program activities

Advanced CHW Training (Didactic 48 hours - Experiential 48 hours)

- Unit 1—CHW History and Code of Ethics
- Unit 2—Cultural Humility
- Unit 3—Promoting Health Equity
- Unit 4—Client-Centered Counseling
- Unit 5— Care Management/Systems Navigation
- Unit 6-- Community Education and Outreach
- Unit 7—Facilitating health education trainings
- Unit 8—Group Facilitation
- Unit 9—Community-based participatory research
- Unit 10—Home visiting



Community track	Clinical track
Unit 11—Advanced Community Assessment of Underserved Community	Unit 11—Advanced Individual Assessment of Social Determinants of Health
Unit 12-- Community Organizing and Advocacy	Unit 12-- Telehealth
Unit 13—Peer support groups	Unit 13— Electronic medical records
Unit 14—Community resources	Unit 14— Charting
Community-based practicum (48 hours)	Clinic-based clinical (48 hours)
	Total 144 hours (96 didactic and 48 experiential)
	Apprenticeship (2000 hours at place of employment)

TOTAL MINIMUM HOURS 144 PER YEAR



SELECTION PROCEDURES:

The process for finding and selecting the best talent possible for an apprenticeship opening position includes the following:

The sponsor may post open positions on career sites or the company's internal career board to solicit applications.

Applications will be pre-screened to eliminate candidates who do not meet the basic qualifications requirements of the position.

Those applicants that meet basic qualifications will be processed through an assessment to screen out those who lack the desire and interest for the apprenticeship. Screening applicants will be performed through interviews and job simulations to select candidates with the highest potential for apprenticeship success.

The Apprentice(s) will be selected based on the most qualified candidate.

Applicants that have accepted the position will be registered within 45 days.

The apprenticeship selection process and procedures will be uniformly and consistently applied to all applicants.

Any applicant who feels that they were wrongfully denied entry into the apprenticeship program may appeal the decision using the applicant appeals procedure described in Section J of the Standards.

Maintenance of Applications and Selection Records

The sponsor and participating employer will keep adequate records according to their own internal systems, policies, and procedures. There will be no undue burden placed on the company in regarding to hiring the applicant as their apprentice. The items and records maintained, including qualifications of each applicant; the basis for evaluation for selection or rejection of each applicant; the records pertaining to interviews of applicants; the original application for each applicant; information relative to the operation of the apprenticeship program, including, but not limited to, job assignment, promotion, demotion, layoff, or termination; rates of pay or other forms of compensation or conditions of work; hours including hours of work and, separately, hours of training provided; and any other records pertinent to a determination of compliance with 29 CFR § 30, as may be required by the U.S. Department of Labor.

The records pertaining to individual applicants selected will be maintained in such manner as to permit the identification of race, gender, or ethnicity.

Records will be maintained for 5 years from the date of last action and made available upon request to the U.S. Department of Labor or other authorized representative.



Appendix A.2

WORK PROCESS SCHEDULE

AND

RELATED INSTRUCTION OUTLINE



Appendix A.2

WORK PROCESS SCHEDULE

MEDICAL ASSISTANT

O*NET-SOC CODE: 31-9092.00 RAPIDS CODE: 1085CB

This schedule is attached to and a part of these Standards for the above identified occupation.

1. APPRENTICESHIP APPROACH

Time-based Competency-based Hybrid

2. TERM OF APPRENTICESHIP . . .

The term of the occupation shall be competency-based, supplemented by the minimum recommended 144 hours of related instruction per year. As per [USDOL Circular 2016-1](#), Competency-based approach" [Section 29.5(b)(2)(ii)] provides for the apprentice's progression through apprenticeship through the acquisition of identified and measured competencies. Competencies should be identified and defined through a valid occupational-job task analysis method and directly related to the occupation and the on-the-job learning. Occupations need to be a minimum of 2,000 hours of on-the-job learning, as required by Section 29.4, Criteria for an apprenticeable occupation, and supplemented with the required related technical instruction. An apprentice must be registered in an approved competency-based occupation for twelve (12) calendar months of on-the-job learning. A competency-based approach does not require hours to be assigned in the processes. Maximum allowable credit for prior work experience is 50 percent of training.

The term of the MEDICAL ASSISTANT apprenticeship may be as many as two years with an OJL attainment of 4000 hours, supplemented by the minimum required 288 hours of related instruction.

3. RATIO OF APPRENTICES TO JOURNEYWORKERS

The apprentice to journeyworker ratio is: 1 Apprentice to 1 Journeyworker.

4. APPRENTICE WAGE SCHEDULE

Apprentices shall be paid a progressively increasing schedule of wages based on either a percentage or a dollar amount of the current hourly journeyworker wage rate, which is: \$16.00.

Period	Hours/Competencies	Minimum Wage
1	Starting wage	\$14.00
2	50% of competencies signed off as proficient	\$14.50
3	75% of competencies signed off as proficient	\$15.50



5. PROBATIONARY PERIOD

Every applicant selected for apprenticeship will serve a probationary period of 90 days.

6. SELECTION PROCEDURES

Please see page A-11.



Appendix A.2
ON-THE-JOB LEARNING OUTLINE
MEDICAL ASSISTANT
O*NET-SOC CODE: 31-9092.00 RAPIDS CODE: 1085CB

REQUIREMENTS:

To enter the Apprenticeship Program:

An apprentice must be at least 16 years of age, except where a higher age is required by law, and must be employed to learn an apprenticeable occupation.

- There is an educational requirement of: Currently enrolled in high school OR have obtained a high school diploma/GED
- There is a physical requirement of: Bending, standing, lifting 50pounds, finger dexterity, stooping, pushing, pulling, handling medical equipment and hazardous waste.
- The following aptitude test(s) will be administered:
 - A valid driver's license is required.
 - Other:

ON-THE-JOB LEARNING:

COMPETENCIES	Mentor Initials	Date
Patient Interaction: <ul style="list-style-type: none">• <i>Information gathering</i>• <i>Medical terminology usage</i>• <i>Professional correspondence in Next Gen</i>• <i>HIPPA</i>• <i>Rooming and Vital signs</i>• <i>Phones/Triage/Scheduling</i>• <i>Care Coordinator</i>• <i>Chronic Disease Management</i>• <i>Preventive Care and Screenings</i>• <i>Patient Self-Management and Health Coaching</i>• <i>Accurate HPI</i>• <i>Mental Health Screening</i>• <i>Professional Correspondence</i>		
Clinical Procedures and Diagnostic Tests <ul style="list-style-type: none">• <i>Included but not limited to: Peak flow, URI prep, STI/GU Preps, nebulizer, spirometry, urine analysis, pregnancy test, HGA1c, Autoclave and instrument cleaning, EKG, oxygen, Venipuncture and capillary blood collection, audiometry, injections including vaccines, aseptic technique, preparing sterile field.</i>		



<ul style="list-style-type: none">• <i>Immunizations</i><ul style="list-style-type: none">○ <i>Order/administration process for vaccines in Next Gen</i>○ <i>CDC immunization schedules</i>○ <i>IRIS</i>○ <i>Health maintenance</i>○ <i>Immunizations for Children (VFC) Program</i>○ <i>Immunization storage and handling/emergency process</i>○ <i>VIS sheets</i>○ <i>Vaccine Administration</i>○ <i>Vaccine Supply/Ordering</i>○ <i>Resources – IIP Provider Resource Binder, CDC Pink Book, Schedules, CDC You call the shots modules, etc.</i>		
Maintain Health Information/Data Entry <ul style="list-style-type: none">• <i>Provide for patient confidentiality</i>• <i>Obtain and file consents</i>• <i>Document all patient information</i>• <i>Prepare patient charts/Pull Reports</i>• <i>File office data</i>• <i>Interacting with H.R.E.</i>• <i>Medical Records</i>• <i>Chart prep and organization</i>• <i>Transfer patient/client records</i>		
Provide/maintain aseptic environment <ul style="list-style-type: none">• <i>Wash hands & Hand Sanitizing Methods (Foam/Gel/etc)</i>• <i>Maintain clean room environment</i>• <i>Sterilize instruments</i>• <i>Don gloves as appropriate</i>• <i>Dispose of hazardous waste</i>		
Prepare patient for examination <ul style="list-style-type: none">• <i>Communicating with Patients and Families</i>• <i>Measure patient's weight & height</i>• <i>Obtain vital signs</i>• <i>SBAR Report</i>• <i>Obtain health history</i>• <i>Set-up for exam and/or procedures</i>• <i>Position/drape patient as appropriate</i>		
Assist/Implement Physician or Provider orders <ul style="list-style-type: none">• <i>Setup/assist with minor surgical procedures</i>• <i>Administer medication</i>		



<ul style="list-style-type: none">• <i>Apply splints/support wraps</i>• <i>Provide patient counseling/education</i>• <i>Coordinate transportation of the patient</i>		
Perform CLIA/State approved in office lab procedures and misc. procedures and Cleaning <ul style="list-style-type: none">• <i>Calibrate and standardize all equipment</i>• <i>Collect/process lab specimen</i>• <i>As appropriate for each clinic site (2018 POCT annual competency skills checks):</i><ul style="list-style-type: none">◦ <i>Perform glucose testing</i>◦ <i>Perform stool testing for occult blood</i>◦ <i>Perform hemoglobin determination</i>◦ <i>Perform A1C testing</i>◦ <i>Perform rapid strep testing</i>◦ <i>Perform RSV testing</i>◦ <i>Perform pregnancy testing</i>◦ <i>Perform urinalysis (dip stick)</i>◦ <i>Perform Influenza testing</i>◦ <i>Perform UDS testing</i>◦ <i>Perform clinic-specific tests (i.e. Jaundice, bladder scan)</i>◦ <i>Perform INR Testing</i>◦ <i>Perform Mono-Testing</i>• <i>Stocking supplies and cleaning</i>• <i>Reordering supplies</i>		
Medication Administration <ul style="list-style-type: none">• <i>Medication safety</i>• <i>Hazardous drugs criterion checklist</i>• <i>Pediatric Medication safety</i>• <i>Medication administration documentation</i>• <i>Medication storage, handling and preparation</i>• <i>Emergency treatment for narcotic overdoes, hypoglycemia, chest pains and anaphylaxis</i>• <i>Intradermal injections</i>• <i>Intramuscular injections</i>• <i>Subcutaneous injections</i>• <i>Tuberculin skin testing (TST) policy, order and documentation</i>		
Quality Improvement <ul style="list-style-type: none">• <i>Rapid-Cycle Change/PDSA and Problem Solving</i>• <i>Improving Care processes</i>• <i>Innovative models to increase access</i>• <i>Workflow</i>		



<ul style="list-style-type: none">• <i>Revenue enhancement</i>• <i>Implementation of and/or meetings regarding QI</i>		
Care Team Interactions <ul style="list-style-type: none">• <i>Population and Panel management</i>• <i>Team huddles</i>		
Manage General Office <ul style="list-style-type: none">• <i>Track license and certificate of health care personnel</i>• <i>Coordinate patient/office communication</i>• <i>Provide/coordinate office maintenance</i>• <i>Coordinate/process incoming/outgoing mail</i>• <i>Inventory and order office equipment and supplies</i>		



Appendix A.2
RELATED INSTRUCTION OUTLINE
MEDICAL ASSISTANT
O*NET-SOC CODE: 31-9092.00 RAPIDS CODE: 1085CB

RELATED INSTRUCTION

Apprentice Orientation Checklist and Apprenticeship Agreement Form 671

Per 29 CFR 29.5, prior to signing the apprenticeship agreement, each selected applicant must be given an opportunity to read and review the sponsor's Apprenticeship Standards approved by the Office of Apprenticeship, the sponsor's written rules and policies, the apprenticeship agreement, and the sections of any collective bargaining agreement (CBA) that pertain to apprenticeship. After selection of an applicant for apprenticeship, but before employment as an apprentice or enrollment in related instruction, the apprentice must be covered by a written apprenticeship agreement, which must be submitted to the Office of Apprenticeship.

It is the responsibility of the sponsor to submit the following proof of apprentice consent by uploading the following documents signed by the apprentice to the apprentice's RAPIDS profile:

1. *Signed Form 671 (apprentice agreement)*
2. *Signed Apprentice Orientation Checklist*

Visit the Idaho Sponsor Success Guide – Onboarding Apprentices to download required document templates.

RELATED INSTRUCTION PROVIDER

College of Western Idaho
1450 S Eagle Flight Way
Boise, ID, 83709
Sabina Omair
sabinaomair@cwi.edu
(208) 562-2409



RELATED INSTRUCTION OUTLINE

Apprentice Orientation

Idaho Department of Labor to Apprentice Orientation Training Program:

<https://labor-idaho.hubspotpagebuilder.com/apprentice-mentee-training-program>

The Apprentice Orientation Program is designed to help you become a stronger, more agile team member and learner. In under three hours, you'll learn how promote an innovative and collaborative work environment, advance your team's competitive edge, and reach your maximum potential with the guidance of your mentor. Take the future into your own hands and become a better mentee today.

USDOL Anti-Harassment Video:

<https://www.dol.gov/agencies/eta/apprenticeship/eeo/harassment/video>

Informational video from the USDOL regarding Anti-Harassment created specifically for apprenticeship programs.

The Sponsor recognizes relevant course completions earned in several ways, including college coursework in high school, transferred credits from other institutions, standardized subject tests, and various industry and agency training and certifications.

Recommended options for courses (or their equivalent) are below. Total course load is 144 hours per 2000 hours of On-the-Job Learning within the apprenticeship training period.

Program Required Courses		
The related instruction is aligned to CWI Medical Assistant – Accelerated BTC Program (Catalog 2023-2024)		
Course Number	Course Title	Number of Credits
Major Requirements		
MEDA 108	Pharmacology	2
MEDA 132	Medical Office Procedures	4
MEDA 201	Medical Assisting Professional Development	3
MADM 240	Health Insurance and Billing	3
MEDA 242	Clinical Procedures I	7
MEDA 243	Clinical Procedures II	7
MEDA 245	Medical Assistant Practicum	6
Minimum Credit Hours 32		
Plan of Study Guide		



Course Number	Course Title	Number of Credits
Fall Semester (Enrollment)		
MADM 240	Health Insurance and Billing	3
MEDA 108	Pharmacology	2
MEDA 132	Medical Office Procedures	4
MEDA 242	Clinical Procedures I	7
Total Semester Credit Hours 16		
Spring Semester		
MEDA 201	Medical Assisting Professional Development	3
MEDA 243	Clinical Procedures II	7
MEDA 245	Medical Assistant Practicum	6
Total Semester Credit Hours 16		
Minimum Credit Hours 32		
Spring Semester (Enrollment)		
MADM 240	Health Insurance and Billing	3
MEDA 108	Pharmacology	2
MEDA 132	Medical Office Procedures	4
MEDA 242	Clinical Procedures I	7
Total Semester Credit Hours 16		
Summer Semester		
MEDA 201	Medical Assisting Professional Development	3
MEDA 243	Clinical Procedures II	7
Total Semester Credit Hours 10		
Fall Semester		
MEDA 245	Medical Assistant Practicum	6
Total Semester Credit Hours 6		
Minimum Credit Hours 32		



SELECTION PROCEDURES:

The process for finding and selecting the best talent possible for an apprenticeship opening position includes the following:

The sponsor may post open positions on career sites or the company's internal career board to solicit applications.

Applications will be pre-screened to eliminate candidates who do not meet the basic qualifications requirements of the position.

Those applicants that meet basic qualifications will be processed through an assessment to screen out those who lack the desire and interest for the apprenticeship. Screening applicants will be performed through interviews and job simulations to select candidates with the highest potential for apprenticeship success.

The Apprentice(s) will be selected based on the most qualified candidate.

Applicants that have accepted the position will be registered within 45 days. The apprenticeship selection process and procedures will be uniformly and consistently applied to all applicants.

Any applicant who feels that they were wrongfully denied entry into the apprenticeship program may appeal the decision using the applicant appeals procedure described in Section J of the Standards.

Maintenance of Applications and Selection Records

The sponsor and participating employer will keep adequate records according to their own internal systems, policies, and procedures. There will be no undue burden placed on the company in regarding to hiring the applicant as their apprentice. The items and records maintained, including qualifications of each applicant; the basis for evaluation for selection or rejection of each applicant; the records pertaining to interviews of applicants; the original application for each applicant; information relative to the operation of the apprenticeship program, including, but not limited to, job assignment, promotion, demotion, layoff, or termination; rates of pay or other forms of compensation or conditions of work; hours including hours of work and, separately, hours of training provided; and any other records pertinent to a determination of compliance with 29 CFR § 30, as may be required by the U.S. Department of Labor.

The records pertaining to individual applicants selected will be maintained in such manner as to permit the identification of race, gender, or ethnicity.

Records will be maintained for 5 years from the date of last action and made available upon request to the U.S. Department of Labor or other authorized representative.



SPONSOR OBLIGATION TO PREVENT HARASSMENT AND INTIMIDATION OF APPRENTICES:

Under the National Apprenticeship Act of 1937, OA is conferred the responsibility to protect the safety and welfare of apprentices. Pursuant to this authority, OA has issued regulations designed to ensure that apprentices participating in the National Apprenticeship System are free from unlawful discrimination, harassment, intimidation, and workplace violence. In all states under 29 CFR 30.3(b)(4), sponsors are obligated to develop and implement procedures to ensure that its apprentices are not harassed because of their race, color, religion, national origin, sex, sexual orientation, age (40 or older), genetic information, or disability and to ensure that its apprenticeship program is free from intimidation and retaliation as prohibited by §30.17.

Harassment and intimidation of any apprentices is intolerable and unacceptable. Program sponsors are obligated under 29 CFR Part 30 to design and implement internal procedures and adopt practical measures for effectively addressing and mitigating harassment risks to apprentices, as well as for promptly handling and resolving apprentice complaints about harassment and intimidation. Additionally, sponsors are responsible for ensuring affiliated and contracted employers do not ignore, tolerate, or encourage any conduct that suggests acceptance of such behaviors.

Incidents of harassment and intimidation of apprentices warrant swift and decisive action from sponsors to prevent reoccurrences and promote environments of tolerance and equity in the workplace so that all apprentices feel safe, welcomed, and treated fairly.

Examples of practical measures sponsors may employ to combat incidents of harassment, discrimination, and intimidation include, but are not limited to:

- designating an individual or office within the employing organization to handle harassment complaints and effectively address harassment risks;
- establishing disciplinary guidelines and procedures for holding offending persons accountable for their actions;
- adopting a process for immediately referring incidents of workplace harassment that involve assault or other crimes to law enforcement agencies; and
- providing supportive services (such as counseling) to apprentices who have experienced harassment and intimidation in the workplace.

OA prohibits, and sponsors must be vigilant in preventing, retaliation against any apprentice for making a good-faith report of harassing conduct, opposing any harassing behavior or other form of discrimination, cooperating with or participating in any investigation of alleged harassing conduct, or otherwise engaging in protected activity.

Harmful and malicious conduct must never be ignored, tolerated, or abetted by program sponsors or participating employers. Apprentices of all racial, ethnic, sexual, religious, and disability backgrounds are entitled to a workplace that is safe, welcoming, and free of both physical and emotional abuse. When made aware of such conduct, the failure of RAP sponsors or an SAA to take immediate action to address and eradicate said conduct could result in the initiation of enforcement proceedings by the Office of Apprenticeship, as well as other governmental agencies, against those parties. Regulatory compliance dictates all reasonable measures be put forth to avoid such an outcome. Sponsors can work towards eliminating harassment by promoting awareness, steadfastly committing to the principles of diversity, equity, inclusion and accessibility (DEIA), and taking swift action to report and hold accountable those who engage in harassing behavior.