

Quality Care Health Foundation CNA UpSkilling Program
CNA UpSkilling Registry Memo of Understanding

(Please save this document prior to completing to avoid losing valuable information)

Quality Care Health Foundation (QCHF) maintains a statewide registry for certified nurse assistants (CNAs) who meet the criteria for each level of the CNA UpSkilling Program (CUSP).

A CUSP level certificate validates successful completion of micro-education, demonstration of skill competency and completion of the prerequisite time on the job.

QCHF will provide verification of CNA's CUSP level registration to current/future employers and/or CNA at any time.

Employer participation in CUSP is voluntary. Participating employers agree to:

- A) Allow all CNAs employees that meet criteria to participate in CUSP:
 - i) A minimum of six (6) months' work experience prior to advancement to the next skill level;
 - ii) successful completion of CUSP authorized on-line, micro-education course, and
 - iii) successful return demonstration of skill competency.
- B) Guarantee of an incremental, standardized wage increase for each CUSP level attained.
- C) Acknowledgment of new employee's pre-existing CNA CUSP level of achievement upon hire.

This Letter of Understanding outlines the terms by which Quality Care Health Foundation will provide Certificate of Completion to the below-named company/organization. When signed by representatives of both parties, this arrangement will constitute a firm understanding. Any proposed changes to the arrangement must be made in writing and approved.

ALL INFORMATION IS REQUIRED FOR PROCESSING

Company Name: _____

Company Rep: _____ **2nd Company Rep:** _____

Title: _____ **Title:** _____

Address: _____ **Address if Different:** _____

Phone: _____ **Ex.** _____ **Phone:** _____ **Ex.** _____

Email: _____ **Email:** _____

Mandatory requirements, which must be met by your organization when requesting CNA CUSP Level registry entry and certificates.

- Employer will submit completed registry request via email to QCHF
- QCHF will send invoice via email to employer (payable upon receipt)
- Upon receiving payment in full, QCHF will enter CNA into CUSP level registry and issue CUSP level certificate.
- QCHF will provide Employer and CNA an electronic certificate via email.

REGISTRY REQUEST:

Submit (Microsoft Word, Excel or typed in the body of an email) the below information

- Employer/facility
- Employer/facility address
- First and Last name of CNA (Bill Smith **NOT** Smith, Bill)
- CNA certificate number
- CNA Birthdate (MM/DD/YYYY)
- CNA’s personal email
- Previous CNA Level __CNA I __CNA II __CNA III __CNA IVa __CNA IVb
- Date previous level completed

- Level requested & completion date
__Preceptor (CNA II) __RNA (CNA III) __Serious Mental Illness (CNA IVa) __Dementia (CNA IVb)

Attach to email each applicant’s micro-education certificate of completion.

PAYMENT/BILLING ARRANGEMENTS:

Upon receipt of Registry Request QCHF will provide invoice.

- Payment of \$30.00 per certificate requested
- All orders must be paid in full prior to processing
- Check or Money Order payable to QCHF and mailed to 2201 K Street, Sacramento, CA 95816
- Credit Card – Visa, Master Care and American Express accepted
- All orders must be paid in full simultaneously when multiple certificates being ordered.

1st Company Rep. (Required)
Print Name

Authorized Signature (Required)

Date

2nd Company Rep. (Required)
Print Name

Authorized Signature (Required)

Date