California Department of Public Health (CDPH)
Licensing and Certification Program (L&C)
Aide and Technician Certification Section (ATCS)
Training Program Review Unit (TPRU)
P.O. Box 997416, MS 3301
Sacramento, CA 95899-7416
PHONE: (916) 327-2445 FAX: (916) 324-0901
EMAIL: TPRU@cdph.ca.gov

SCHOOL: NURSE ASSISTANT TRAINING PROGRAM NOTICE

County: Siskiyous COLLEGE OF THE SISKIYOUS 2001 CAMPUS DRIVE YREKA, CA 96097 Telephone Number: 530-841-5929 Telephone Number: 530-841-5929 Telephone Number: 530-841-5929 Telephone Number: 530-841-5929 The Provider In Has BEEN APPROVED APPLIA, 30, 2021 Provider Identification Number The written plan of the program is incomplete regarding: Nurse Assistant Training Program (NATP) may only use instructors "approved" on this communication notice. Approved Instructors: 1. Denise Wheeler, RN Program Director 2. Rhonda Brown 3. Penny Huleatt, RN 4. Eric Ricohermoso, RN 5. William Handshy, jr. RN 6. Robert Brickey, LVN This NaTP is approved to use the training program schedule (DDPH 276) Clinical Site Agreement Instructor(s): Director of Staff Development (DSD) / Instructor Application (CDPH 276) Resume(s) Resume(s	ATTN: Administrator	
TPRU Survey Date: N/A Approved RN Program Director: Denise Wheeler, RN Approved RN Program Director: Denise Wheeler, RN COMMENTS	Address	County: Siskiyous
The Department has received, reviewed and approved the renewal application for this NATP, ID # \$-0080. HAS BEEN APPROVED	COLLEGE OF THE SISKIYOUS 2001 CAMPUS DRIVE	pproved RN Program Director: Denise Wheeler, RN
HAS BEEN APPROVED HAS BEEN RENEWED HAS BEEN DISAPPROVED APRIL 30, 2021 S 0080 Provider Identification Number The written plan of the program is incomplete regarding: Nurse Assistant Certification Training Program (NATP) Application (CDPH 276S) Nurse Assistant Training Program Skills Checklist (CDPH 276B) Daily Nurse Assistant Training Program Skills Checklist (CDPH 276B) Nurse Assistant Training Program Individual Student Record (CDPH 276C) Disclosure Ownership and Control Interest Statement (CDPH 276D) Clinical Site Agreement Instructor(s): Director of Staff Development (DSD) / Instructor Application (CDPH 279) Resume(s) Resume(s) Resume(s) Denise Wheeler, RN Name of Approved RN Program Director All changes of RN Program director, instructor(s), approved training program schedule, Location of NATP, etc. must be approved by the Department prior to implementation.		The Department has received, reviewed and approved the renewal application for this NATP, ID # S-0080.
HAS BEEN DISAPPROVED APRIL. 30, 2021 Program Expitation Date S - 0080 Provider Identification Number S - 0080 Provider Identification Number The written plan of the program is incomplete regarding: Nurse Assistant Certification Training Program (NATP) Application (CDPH 276S) Nurse Assistant Training Program Schedule (CDPH 276A) Daily Nurse Assistant Training Program Schedule (CDPH 276B) Daily Nurse Assistant Training Program Schedule (CDPH 276B) Disclosure Ownership and Control Interest Statement (CDPH 276D) Clinical Site Agreement Instructor(s): Discotor of Staff Development (DSD) / Instructor Application (CDPH 279) Resume(s) Copy of current nursing license Copy of previously approved CDPH 279 Twenty-four (24) hours BRN-approved Continuing Education Hirs confirmation notice. Approved Instructors: 1. Denise Wheeler, RN 4. Eric Ricohermoso, RN 5. William Handshy, jr. RN 6. Robert Brickey, LVN 1. Shay Program Schedule (D5/01/2019 revision. Approved Training Program: Theory: 60 hours (8:00AM-2:30PM) Clinical: 120 hours (0600AM-2:30PM) Clinical: 120 hours (0600AM-2:30PM) Clinical: 120 hours (0600AM-2:30PM) All clinical site approvals expire concurrent with the program expiration unless otherwise specified. ***********************************		2001 CAMPUS DRIVE, YREKA, CA 96097
S-0080 J Day P.M. Weekend	HAS BEEN DISAPPROVED	may only use instructors "approved" on this
□ Disclosure Ownership and Control Interest Statement (CDPH 276D) □ Clinical Site Agreement □ Instructor(s): □ Director of Staff Development (DSD) / Instructor Application (CDPH 279) □ Resume(s) □ Copy of current nursing license □ Copy of previously approved CDPH 279 □ Twenty-four (24) hours BRN-approved Continuing Education □ Hire confirmation letter from Administrator with a copy of statewide DSD certificate □ Denise Wheeler, RN □ Name of Approved RN Program Director □ Awleen Kr. Brar, RN Avleen Brar, RN, Nurse Surveyor □ Name of Approved Surveyor	S-0080 Provider Identification Number The written plan of the program is incomplete regardi Nurse Assistant Certification Training Program (NATP) Application (CDPH 276S) Nurse Assistant Training Program Skills Checklist (CDDaily Nurse Assistant Training Program Schedule (CDDNurse Assistant Training Program Individual Student R	Approved Instructors: 1. Denise Wheeler, RN Program Director 2. Rhonda Brown 3. Penny Huleatt, RN 4. Eric Ricohermoso, RN 5. William Handshy, jr. RN PH 276B) 6. Robert Brickey, LVN
□ Resume(s) □ Copy of current nursing license □ Copy of previously approved CDPH 279 □ Twenty-four (24) hours BRN-approved Continuing Education □ Hire confirmation letter from Administrator with a copy of statewide DSD certificate Denise Wheeler, RN Name of Approved RN Program Director Auleen Brar, RN, Nurse Surveyor Approved Clinical Site(s): 1. Shasta View Estates (F-0136) 445 PARK ST., WEED, CA 96094 All clinical site approvals expire concurrent with the program expiration unless otherwise specified. ***********************************	□ Disclosure Ownership and Control Interest Statement (CDPH 276D) □ Clinical Site Agreement □ Instructor(s): □ Director of Staff Development (DSD) / Instructor Applic	program schedule, 05/01/2019 revision. Approved Training Program: Theory: 60 hours (8:00AM-4:30PM)
Name of Approved RN Program Director All changes of RN Program director, instructor(s), approved training program schedule, location of NATP, etc. must be approved by the Department prior to implementation.	Resume(s) Copy of current nursing license Copy of previously approved CDPH 279 Twenty-four (24) hours BRN-approved Continuing Edu Hire confirmation letter from Administrator with a copy statewide DSD certificate	1. Shasta View Estates (F-0136) 445 PARK ST., WEED, CA 96094 All clinical site approvals expire concurrent with the program expiration unless otherwise specified.
V 1 V V V V V V V V V V V V V V V V V V	Name of Approved RN Program Director Avleen K. Bran, RN Avleen Brar, RN, Nurse Surveyor	All changes of RN Program director, instructor(s), approved training program schedule, location of NATP, etc. must be approved by the Department

*Please include a copy of this notice when responding to requests made by the Department. *This form is for the exclusive use of TPRU.

Form 280B (1/19)