

Instructor Qualification Review Tool

Objective: Determine whether a NATCEP meets State and Federal curriculum requirements.

The designated RN instructor and all other supplemental instructors, when employed by the NATCEP, must meet the following requirements.

Name of NATCEP: _____

Primary RN Instructor <input type="checkbox"/> N/A	Met	Not Met	Comments
Name of RN: _____			
Possesses a Hawaii State RN License	<input type="checkbox"/>	<input type="checkbox"/>	
Primary RN Instructor Requirements			
Has at least 2 years of nursing experience	<input type="checkbox"/>	<input type="checkbox"/>	
1 year of which in the provision of nursing facility services.	<input type="checkbox"/>	<input type="checkbox"/>	
Has completed a course in teaching adults or have experience in teaching adults or supervising nurses' aides.	<input type="checkbox"/>	<input type="checkbox"/>	
Supplemental Instructor <input type="checkbox"/> N/A			
Name/Title of Instructor: _____			
Supplemental Instructor Requirements			
All supplemental personnel, when employed by the NATCEP, must submit proof that they have at least one (1) year of experience in their fields and are currently licensed/certified in Hawaii to practice in their fields.	<input type="checkbox"/>	<input type="checkbox"/>	
Has 1 year of experience in appropriate field	<input type="checkbox"/>	<input type="checkbox"/>	
Possesses a Hawaii State license/certificate in field	<input type="checkbox"/>	<input type="checkbox"/>	

<input type="checkbox"/> Primary RN instructor met requirements and was approved <input type="checkbox"/> Primary RN instructor did not meet requirements	<input type="checkbox"/> Supplemental instructor met requirements and was approved <input type="checkbox"/> Supplemental instructor did not meet requirements
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Reviewed by _____

Date _____