

D&S DIVERSIFIED TECHNOLOGIES LLP

dba

HEADMASTER LLP

NURSING ASSISTANT & AMAP TESTING SERVICES

with

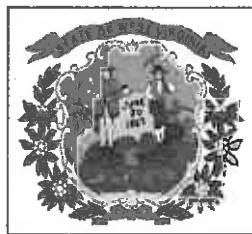
Educate-the Educator and Nursing Assistant Refresher Training Courses

for the

West Virginia Office of Health Facility Licensure and Certification

Proposal Submitted in Response to the CRFQ 0506 #FLC16000000001

for the



State of West Virginia



01/19/16 09:18:33
WV Purchasing Division

Submitted by:

D&S Diversified Technologies, LLP

dba HEADMASTER, LLP

3310 McHugh LN

Helena, Montana 59602

Phone Voice: (406) 442-8656

Toll Free: 1-800-393-8664

Email: hdmaster@hdmaster.com

Web Site: www.hdmaster.com

Submitted to:

April Battle / Bid Clerk

**Department of Administration,
Purchasing Division**

2019 Washington Street East

PO Box 50130

Charleston, WV 25305-0130

Closing Date: January 20th, 2016

Original - MASTER



Purchasing Division
2019 Washington Street East,
Post Office Box 50130
Charleston, WV 25305-0130

State of West Virginia
Request for Quotation

Proc Folder: 163427

Doc Description: COMPETENCY EVALUATION SVCS FOR NURSE AIDES & AMAP

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
	2016-01-20 13:30:00	CRFQ 0506 FLC1600000001	1

BID RECEIVING LOCATION

BID CLERK

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV 25305

US

VENDOR

Vendor Name

D & S Diversified Technologies, LLP
333 Oakland Avenue
Findlay, WV 45840

FOR INFORMATION CONTACT THE BUYER

April Battle

(304) 558-0067

april.e.battle@wv.gov

Signature X

FEIN # 81-04

DATE 1/18/2016

All offers subject to all terms and conditions contained in this solicitation

Request for Quotation

The West Virginia Purchasing Division for the agency, the West Virginia Department of Health and Human Resources, Office of Inspector General, Office of Health Facility Licensure and Certification is soliciting bids to establish an Open-End contract for the competency evaluation fees for Nurses Aides and Approved Medication Assistive Personnel candidates in West Virginia per the bid requirements, specifications and terms and conditions as attached.

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC 408 LEON SULLIVAN WAY CHARLESTON WV25301-1713 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC 408 LEON SULLIVAN WAY CHARLESTON WV 25301-1713 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	PROJECT A: NURSE AIDE WRITTEN COMPETENCY	1450.00000	LS	\$45 ⁰⁰	\$65,250

Comm Code	Manufacturer	Specification	Model #
85101600			

Extended Description :

PROJECT A. 8 - NURSE AIDE WRITTEN COMPETENCY EVALUATION FEE

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC 408 LEON SULLIVAN WAY CHARLESTON WV25301-1713 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC 408 LEON SULLIVAN WAY CHARLESTON WV 25301-1713 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	PROJECT A: NURSE AIDE ORAL COMPETENCY EVALUATION FEE	20.00000	LS	\$55 ⁰⁰	\$1,100 ⁰⁰

Comm Code	Manufacturer	Specification	Model #
85101600			

Extended Description :

PROJECT A. 10 - NURSE AIDE ORAL COMPETENCY EVALUATION FEE

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC LEON SULLIVAN WAY CHARLESTON WV25301-1713 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC 408 LEON SULLIVAN WAY CHARLESTON WV 25301-1713 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	PROJECT A. NURSE AIDE SKILLS PERFORMANCE EVALUATION FEE	1515.00000	LS	78	118,170

Comm Code	Manufacturer	Specification	Model #
85101600			

Extended Description :
PROJECT A. 11 - NURSE AIDE SKILLS PERFORMANCE EVALUATION FEE.

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC 408 LEON SULLIVAN WAY CHARLESTON WV25301-1713 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC 408 LEON SULLIVAN WAY CHARLESTON WV 25301-1713 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
4	PROJECT B: EDUCATE THE EDUCATOR WORKSHOP FEE	25.00000	LS	775	6875

Comm Code	Manufacturer	Specification	Model #
85101600			

Extended Description :
PROJECT B: 1 & 2 - EDUCATE THE EDUCATOR WORKSHOP FEE - 3 DAYS.

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC 408 LEON SULLIVAN WAY CHARLESTON WV25301-1713 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC 408 LEON SULLIVAN WAY CHARLESTON WV 25301-1713 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	PROJECT B: EDUCATE THE EDUCATOR WORKSHOP FEE	5.00000	LS	125	625

Comm Code	Manufacturer	Specification	Model #
85101600			

Extended Description :

PROJECT B: 1 & 2 - EDUCATE THE EDUCATOR WORKSHOP FEE - 1 DAY * NOTE: THIS SINGLE DAY MAY OR MAY NOT BE OPENED TO
 C R PROFESSIONALS IN THE INDUSTRY WHO MIGHT BE INTERESTED IN OBTAINING ADDITIONAL INFORMATION REGARDING
 NAJCEP FEDERAL AND STATE GUIDELINES.

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC 408 LEON SULLIVAN WAY CHARLESTON WV25301-1713 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC 408 LEON SULLIVAN WAY CHARLESTON WV 25301-1713 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
6	PROJECT C: AMAP SCORING FEE	890.00000	LS	32	28,480

Comm Code	Manufacturer	Specification	Model #
85101600			

Extended Description :

PROJECT C: 19 - AMAP SCORING FEE

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC 408 LEON SULLIVAN WAY CHARLESTON WV25301-1713 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OIG - OHFLAC 408 LEON SULLIVAN WAY CHARLESTON WV 25301-1713 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
7	PROJECT D: NURSE AIDE REFRESHER COURSE	100.00000	LS	150	15,000

Comm Code	Manufacturer	Specification	Model #
85101600			

Extended Description :

PROJECT D: 1 THROUGH 9 - NURSE AIDE REFRESHER COURSE.

SCHEDULE OF EVENTS

Line	Event	Event Date
1	Vendor Question Deadline@ 10:00 AM	2016-01-06



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State of West Virginia
Solicitation CRFQ 0506 FLC16000000001
For

Open End Blanket Contract
NA - AMAP Testing with Training Components

Release Date: December, 2015
Deadline for Submission and Opening Date and Time: January 20th, 2016, at 13:30 EST

For additional information, please contact:
April Battle
(304) 558-0067

Company Name D&S Diversified Technologies , LLP Contact Person: Paul Dorrance
Address 3310 McHugh LN City Helena State MT Zip 59602
Telephone (406) 442-8656 Fax (406) 442-3357
E-Mail Address: hdmaster@hdmaster.com

Certification and Signature Page:

By signing below, I certify that I have reviewed this Solicitation in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this bid or proposal for review and consideration; that I am authorized by the bidder to execute this bid or any documents related thereto on bidder's behalf; that I am authorized to bind the bidder in a contractual relationship; and that to the best of my knowledge; the bidder has properly registered with any State agency that may require registration.


Addendum Acknowledgement Form:

We hereby acknowledge receipt of no addendums for Solicitation CRFQ 0506 FLC16000000001:

No applicable Vendor Preference Status claimed:

Purchasing Division - Vendor Registration (WV-1) with Payment and Completed W-9 will be filed upon contract award.

I have read, understand, and agree to all terms and conditions herein: Date: 1-18-2016

Signed  Print Name & Title: Paul Dorrance - General Partner



Cover Letter

D&S Diversified Technologies, LLP (D&SDT) dba Headmaster, LLP is pleased to submit a response to the West Virginia OHFLAC request for services CRFQ 0506 FLC16000000001 for entering into a contractual relationship with the Agency delivering all the requested services in an exemplary manner. West Virginia, are you ready to experience the best customer service in the testing market place, from a right sized company who leverages, in-house created, advanced technology, to deliver cost effective testing and training services?

In the past twenty-two plus years D&SDT has worked in concert with agencies throughout the country to create Registered long term care registered long term care nurse aides Competency Evaluation Programs (NACEP) that have become a model of excellence in the world of Complex Adaptive Systems (Page 74) We also began Medication Aide testing in Montana in 2005 and have added eight additional Medication Aide (Certified) testing contracts since. (AR, AZ, OH, OK, OR, NJ, MA, NV) Collectively with these agencies, we strive to make certain that all the necessary feedback loops are in place so that our testing programs function smoothly and efficiently, and our philosophy of honest, open communication creates an environment where each stakeholder believes the system is worthy of their best efforts.

A short list of highlights of the innovative model we propose for the West Virginia NA & AMAP testing and training programs would at the very least include:

- A West Virginia volunteer Test Advisory Panel (TAP) appointed and approved by Agency staff to establish and recommend a state test plan to Agency staff. The TAP also "custom fits" our nationally developed test bank of over 2000+ NA and 1500+ AMAP knowledge test questions and recommends a set of NA skill tasks, including the specific steps, from 30+ NA skill tasks available that will meet West Virginia and Federal standards. The tests will be custom designed for and directly correlate to Agency approved West Virginia curriculums and will, therefore, be current to NA and MA practice in West Virginia. (We also have a set of eight available AMAP skill tasks and an AMAP transcription task, if ever desired.)
- Regular reviews of the entire NA and AMAP programs, allowing for rapid implementation of well thought out "adjustments". A by-product of these reviews will create the open and honest communication channels for input from all the stakeholders in the West Virginia NA and AMAP programs.
- Unprecedented live support and customer service. We pledge, to all our customers, that we will answer toll-free phone calls, with a live person, before the third ring, during regular EST Findlay, Ohio office business hours. Furthermore, questions will be answered with a minimum of phone transfers. Email questions will receive a response within no more than one business day from time of receipt. Phone messages left on our answering machines after business hours will be returned before 9:30 AM the next business day.
- A three person testing "team" model that allows more candidates (16) to be tested, more efficiently, on both test components, in a single testing day, (8 hours) utilizing only one RN test observer and his/her test 'team'. (RN observer is the test evaluator/administrator and his/her testing team is comprised of a professional actor and a knowledge test proctor.) This three person testing team model maximizes the RN observer's capabilities, while shortening candidate wait times between test components, thereby reducing test anxiety for test candidates. An efficient two person 'test team' option also allows a reduced number of candidates to be tested in some applicable situations.
- A two flight testing rotation model that brings a maximum of eight candidates to a test site for the morning "flight" and eight candidates to the test site for the "afternoon" flight and "rotates" the candidates through the knowledge test area, the skill test area, and a holding (waiting) area with simultaneous knowledge and skill testing occurring. One of the test candidates has no wait time between test components, and one candidate has a maximum of 50 non-continuous minutes of wait time. The other six candidates have non-continuous wait times somewhere between zero and a maximum of thirty-five minutes. No more than five candidates are in a "waiting mode", and the "no wait time" candidate is typically finished and leaves the test site within seventy minutes of arriving. All this leads to lower test anxiety, less impact on the test site and candidates don't have to take a whole day off work to test with hours wasted waiting for their "turn" to skill test.

- A **self scheduling** in-facility testing process that allows training programs to take charge of their testing destiny, giving them the capability to fit testing needs into their training and facility availability schedule, while always using an 'outside' (independent) three person testing team. In the NA and AMAP pricing structure and proposed testing model for West Virginia the possibility exists for testing just **one candidate**, in certain situations, at a scheduled test event.
- The **same business day received** processing of applications to test, scoring of tests received, and registry placement after **official scoring** and double checking is complete.
- **Detailed** feedback given to test candidates and authorized training program personnel. The knowledge test feedback can include performance by State test plan subject areas as well as a list of **key vocabulary words** missed that will help each candidate and training program focus on their specific weaknesses. The skill test feedback not only includes the skill tasks that may have been missed but also lists **every single step** that the candidate didn't perform correctly.
- Meaningful, timely, accurate data presented through a myriad of reporting features, for any selected time interval, **securely** available 24x7 through the provided Agency portal so Agency staff may perform their oversight function in a knowledgeable and efficient manner.
- A unique RN observer "cloning" process, using designated West Virginia RN mentor observers and a required yearly observer certification process, resulting in reliable, consistent test observers with inter observer reliability correlations that typically do not deviate more than .25 from the norm. Initially D&SDT staff will certify WV RN observers, using D&SDT created, OHFLAC approved, methods and materials, and ultimately at least one 'WV RN mentor observer' will be trained to conduct subsequent observer training and instructor workshops in West Virginia. Qualified West Virginia RN's will be found, trained and used to teach OHFLAC approved curriculums for projects B and D.
- Proprietary software developed specifically to support the functions of competency evaluation programs, which is the secret to our unmatched efficiency and quick response capabilities:
 - WebETest®, an Internet based system providing online candidate tracking for Agency staff from the time a candidate registers into a West Virginia approved NA, AMAP, train-the-trainer or NA refresher course through to graduation, when an Official State approved completion of training certificate can be/is issued to successful candidates from WebETest®. Then WebETest® provides on line candidate test registration by individual candidates or as groups by the training instructor or D&SDT staff. Other WebETest® features include; a dynamic online, statewide, master test schedule, dynamic online candidate scheduling and rescheduling, secure online proctoring and administration of knowledge tests and real time RN observer recording of skill test steps accomplished as candidates demonstrate their skill tasks using our tablet technology interface.
 - WebETest® also provides for 'immediate/same day in some situations' **official** scoring, printing and/or emailing of test results, final certification, automated registry interface, and the capability to generate a myriad of agency oversight reports, securely, 24x7, for Agency staff.
 - WebETest® offers differing levels of secure Internet access depending on user classification providing real-time or next day secure, online, official test results, dynamically changing test schedules, secure training program summary reports, and secure regulatory agency summary reports.
 - ItemMaster® to apply both classical statistical methods and item response theory (IRT) to predict and monitor the performance of test instruments with all item statistics shared with Agency staff during, at least a yearly, contract review and also securely available online through the Agency portal 24x7 with a few clicks/taps.
 - All West Virginia NA and AMAP data is at all times securely available to Agency staff via the WebETest® Agency portal we offer, with data searches available for any date range desired.
 - Our newest, most technologically advanced, RegistryMaster® software provides complete registry capabilities including online renewals and secure employment verification during the renewal process. RegistryMaster® is another option the Agency can consider at any time.
 - D&SDT staff is available at Agency staff (or RFQ review panel) convenience to demonstrate any of our advanced technologies and to brainstorm the best ways to leverage the technology to maximized the efficiency of the West Virginia NA and AMAP programs.

Cover Letter



D&S Diversified Technologies LLP
Headmaster LLP

So what does all this mean for the West Virginia OHFLAC staff? D&SDT will meet and exceed expectations, we will perform to the best of our ability, and we will continue to be leading innovators in the high stakes testing business. Our latest leap in software is our TestMaster Universe© project scheduled for completion in nine months! The Agency will be the benefactor of our innovations and over twenty-two year legacy of forward thinking in the testing industry. From all the members of our talented staff at both D&SDT offices, please accept our sincere thank you in advance for taking your valuable time to consider our response to Solicitation FLC16000000001.

A handwritten signature in black ink, appearing to read 'Paul Dorrance'.

Paul Dorrance – General Partner/Owner

Tim Petrick A handwritten signature in black ink, appearing to read 'Tim Petrick'.
Director of Company Operations

Jenn Underwood
Director of Eastern Region Operations

D&S Diversified Technologies LLP dba Headmaster LLP

3310 McHugh LN

Helena, MT. 59602

Voice: (406) 442-8656

Fax: (406) 442-3357

Toll Free: 1-800-393-8664

Email: hdmaster@hdmaster.com

Web Site: www.hdmaster.com

333 Oakland Ave

Findlay, OH 45840

(419) 420-1605

(419) 422-8328

1-877-851-2355

hdmastereast@hdmaster.com

One of the companies "Pioneering the Electronic Frontier" Dec. 1993, U.S. News and World Report.

Invited by and presented at the National Council of State Boards of Nursing conference in Chicago Fall 1999.

3 – GENERAL Requirements

3.1.1 Vendor shall provide competency evaluation services for four projects.

D&SDT understands that this request is for four projects A-D including WV NACEP - WV Educate the educator curriculum & workshop - WV AMAP - and the Registered long term care nurse aides refresher course curriculum & workshop. We will provide all these services in an exemplary manner in concert with OHFLAC staff at every step of the projects.

3.1.2 Vendor shall not receive any funding from the WVDHHR

D&SDT will collect any and all fees from all participants or sponsors base on the attached fee schedule. See Fee Schedule included in separate envelope along with the three RFQ official quote pages.

The price quote detailed in a separate, included, envelope will cover all costs of the NA - AMAP testing and education projects A-D.

3.1.3 Vendor shall coordinate/consult with OHFLAC

D&SDT will work with and seek OHFLAC staff approval for all activities presented in this response. D&SDT will always work in close communication with designated OHFLAC staff. Think of us as an additional arm, that will make OHFLAC's oversight responsibilities more manageable by adding our considerable experience and expertise to the current capabilities of OHFLAC staff.

3.1.4 Vendor shall coordinate with OHFLAC and securely interface with WVDHHR servers..

We have considerable experience interfacing with servers and multiple software programs across dozens of states to provide secure data and reports for WVDHHR.

3.1.5 Vendor shall keep OHFLAC informed of the progress and development...

Employees will be assigned and added as necessary in the Eastern regional office to provide our industry leading and proven customer service for the West Virginia contract. An experienced program manager will be assigned the West Virginia contract and Agency staff will have a direct line to their D&SDT program manager. All costs associated with interfacing with OHFLAC staff and WVDHHR servers is included in the Fee Schedule.

D&SDT will work closely with OHFLAC designated staff and provide all services requested using only participant fees as listed in the attached fee schedule.

3.1.6 Vendor shall provide evidence of three or more years of experience.

The Headmaster partnership began with a handshake in 1985 between Paul Dorrance and Ben Schmitt, and that was our binding partnership agreement for the first three years.

In 1993 "Montana's Headmaster network" was recognized by U.S. News & World Report (December 6 p 56-60, 62-63) for its contribution to "Pioneering the Electronic Frontier". The acknowledgment came as a result of the network's ability to deliver curriculum (distance learning) to remote regions of the country. One of the courses, that had to be approved by the Montana Department of Health, was created and taught by a Montana RN for registered long term care

3 – GENERAL Requirements



D&S Diversified Technologies LLP
Headmaster LLP

nurse aides training and evaluation. Our first proctored remote exam evaluating a registered long term care nurse aides took place in 1988.

In 1991, as a result of the success of our widely acclaimed distance learning system and in accordance with OBRA regulations, the Montana Department of Health contracted with Headmaster to become the certified registered long term care nurse aides (CNA) testing entity for the State of Montana using our in-house developed Testmaster© software and the initial bank of registered long term care nurse aides test items developed by subject matter experts, the Montana Department of Health and those pioneers in the distance learning program.

Approval to test, and contracts for testing of registered long term care nurse aides in Oregon, North Dakota, and South Dakota came in 1999.

Ohio STNA testing and Ohio lead abatement testing came on board in 2001. At that time it seemed appropriate to the founding partners that their business name change to reflect the diversity of their services, and that the company formally be structured as a limited liability partnership. Thus, D&S Diversified Technologies LLP dba Headmaster LLP was born. 2001 also saw the opening of our Eastern region office in Findlay, Ohio.

Tennessee, Delaware, and Idaho registered long term care nurse aides testing contracts followed in 2002. Iowa and Utah have since contracted to use our software and/or test bank for registered long term care nurse aides testing in their states.

In 2004 we rolled out WebETest©, a suite of wildly successful applications for developing online test content, online test scheduling, and online delivery of tests. That same year saw the expansion (10,800 sq ft addition) of our Findlay, Ohio office along with the creation of D&S Training Center LLP in Ohio. In addition, the Helena, Montana office moved into a beautiful new headquarters building.

2005 welcomed Arizona, Vermont, New Hampshire, and Oklahoma to our Nurse Assistant testing family, and in 2005-7 Ohio, Montana, Arizona, Oklahoma and Arkansas began item development and testing of medication aides/assistants/technicians/MAP/AMAPs. 2010 New Jersey came on board in strategic partnership with PSI and D&SDT offering four tests for Registered long term care registered long term care nurse aides, Medication Aides, Facility Administrators and Personal Care Aides. 2011 Massachusetts awarded their MAP testing contract to D&SDT and in 2012 the contract of MA-C testing in Nevada was awarded.

In recent years we have focused on expanding the use of the Internet for all facets of the testing process; from initial training program registration of candidates as they enroll in a training program, paperless secure completion of training verification, test scheduling, and test administration, to a complete web-based registry management system. Tablet technology, used to record skill test steps observed, real time, including images of candidate transcription exercises attached to each candidate's record, is used by the State testers in Massachusetts for skill testing MAP candidates.

All business entities continue to be fully owned and operated by partners Paul Dorrance and Ben Schmitt. See organizational chart on page 75. The Western office currently has 12 full time employees plus the two partners. The Eastern office currently has 22 employees.

We are the company to provide unprecedented service for West Virginia!

Follow the timeline for our references beginning on page 59 and notice that D&SDT has been testing registered long term care registered long term care nurse aides since 1989, before the OBRA regulations were finalized. We began testing medication aides in 2005. We have been creating curriculum (over 40 distance learning courses in the 1980s) since 1982 and conducting train-the-trainer courses in Ohio since 2006. We look forward to working with OHFLAC staff and select West Virginia RNs to create/alter/revise a WV registered long term care registered long term care nurse aides refresher course to fill that particular need in WV.

We began MA test development in 2005 and are the leading medication aide testing entity in the country, testing MA in nine states and in contract negotiations for a tenth state, as of this writing.

D&SDT business partners Paul Dorrance and Ben Schmitt began their careers as educators, and each taught in the classroom for twenty-plus years. Thus, curriculum development and delivery, test development and delivery, and psychometric evaluation have been an over thirty year ongoing development process for both. Our roots are firmly planted in real world education and our perspective of testing comes from a different viewpoint than most testing vendors. The net result of these thirty plus years (times two) culminates with our belief that we have developed a great balance between a secure competency evaluation model that does not compromise any of the *1999 Standards for Employment and Credentialing* while at the same time providing necessary detailed feedback to all the stakeholders in NA and AMAP programs that statistically is proven to improve the competency level of NA and AMAP candidates over time.

The founders have also been leaders in the use of technology for the delivery of curriculum and evaluation since the founding in 1982 of EDUNET (EDUCational NETwork), an individualized distance learning system that later became Headmaster Distance Learning Service. At one point in the 1980's EDUNET supplied all the distance education courses necessary for a "bubble boy" to graduate from the Simms, Mt. high school without ever stepping foot outside his house. Over 40 individualized distance learning courses were ultimately developed, with random generated tests uniquely created, by the partner developed EDUNET software, for each student taking a test. One of these courses, as related earlier, was the registered long term care nurse aides training and evaluation course that ultimately lead to our contract as the test vender for registered long term care nurse aides certification for the Montana Department of Health.

All this happened years before the Internet was even a thought in the general consciousness of the country! In fact, we personally had to build our own computers and create our own software because this was years before the proliferation of desktop computers. The initial content delivery was via toll free phone lines using 300 baud dial up modems and leading edge software we created to answer multiple phone lines simultaneously with one computer that had an unheard of 100K of disk storage and an *incredible* 64k of RAM.

When the OBRA regulations for registered long term care nurse aides training and testing were implemented we had more experience than anyone else in the country with curriculum development and testing in a rural setting and we were the logical choice for Montana to meet the OBRA testing requirements for registered long term care nurse aides testing statewide. It became clear as we implemented our methods and procedures that we were able to provide better and faster customer oriented service with our testing model than other testing companies.

Everyone D&SDT has subsequently brought on board, from technicians to support staff, have been specifically in support of our testing mission. As from the beginning, all technical support and software development is done in-house. Our technicians design and support our in-house networks and our Internet web and FTP blade servers and all infrastructure.

Our Testmaster© / WebETest© / RegistryMaster© / TestMaster Universe© test management and registry software packages are custom designed and written by staff that actually use the software. We have recently launched our TestMaster Universe© (TMU) project to advance the state of our software even further. We are down to 9 months before scheduled roll out of TMU!!! All this has been and is geared to continue to enhance our efficiency. The ability to adapt our software quickly to changing needs of certification agencies is one of the reasons we are the premier competency testing organization in the country and the *right sized* company to bring unprecedented service to West Virginia.



Our customer service oriented staff has decades of combined experience working with state and federal government programs, nursing care facilities, long-term care personnel from one end of the spectrum to the other, and administering examinations to medication aides across the country. We also train medication aides, in our beautiful Ohio training center. (D&STC where the NA skill tasks and MA medication cart testing concepts were invented and proven under live conditions! Observable through one way glass!)

We contracted with the Arizona Board of Nursing to do a Medication Error study during the pilot project of their Medication Technician program. The results of that study are now available from AZBN.

Our test items, developed by a nationwide core of RN subject matter experts (SME) often using our secure Internet based item development/collaboration software, meet all Federal and State regulations and are defensible while remaining adaptable to individual state needs. All components of the exam are subject to rigorous psychometric analysis, using our state of the art, in-house developed, ItemMaster® software with corroboration against SPSS™ software, a widely recognized software statistics package.

3.1.7 Vendor must provide computer-based testing on a secured network...

The knowledge (written) and skill test components will both be administered on the same day, on at least a monthly basis, at specified Regional test sites and at in-facility Flexible test sites on demand. WebETest® provides complete secured electronic testing or several combinations of electronic and paper testing, depending on the desires of the particular stakeholders involved and the facilities available for any given test event. We will provide the NA and AMAP test in written, electronic and oral formats. All testing is secure and proctored by professional test proctors and independently contracted RN test 'observers' for the NA skill test in compliance with Federal OBRA regulations. OHFLAC staff will make the final decision on the cut score for the AMAP test, based on psychometric information we will be able to provide at the culmination of the test advisory panel (TAP) process.

Audio files of every active question are read into digital wave file format and encrypted for storage on our secure blade servers. Our MediaMaster® software sequences and assembles the correct individual digital file for each question for an active knowledge (written) test and allows staff to record the sequenced audio files onto a standard cassette tape, CD or MP3 player, so every oral candidate taking a paper test receives an identical, consistent, opportunity when choosing an oral exam. The electronic WebETest® option of the test has every question available in audio format. We believe that reading the audio (oral) component into a digital file, in a neutral manner in a controlled environment is the most reliable way to accomplish the desired oral version requirement.

3 – GENERAL Requirements

3.1.8 Vendor shall provide resumes of key employees....

Teresa Whitney
Program Manager for Multiple State Contracts

Management Experience

Jan. 2006 - Present	Program Manager – D&S Diversified Technologies LLP – Headmaster LLP <ul style="list-style-type: none">➤ Directing operations and oversight of state contracts➤ Quality service assurance➤ Office personnel management➤ Client workshops and training presentations➤ Contract review presentations➤ Contract Manager for Arizona, Oklahoma, Oregon, North Dakota
May 2000-Dec. 2005	Assistant Manager - Crossroads Sports and Fitness <ul style="list-style-type: none">➤ Accounting duties for the club and personnel➤ Personnel manager➤ Customer service
1996 – 2000	Day Care Manager – Crossroads Sports and Fitness (1996-2000) <ul style="list-style-type: none">➤ Stay-at-Home Mom: Home day care and Tupperware representative (1991-2000)
1988 – 1991	Executive Assistant - Boeing <ul style="list-style-type: none">➤ Weekly upper-management presentation preparation➤ Managing daily schedules and appointments➤ Personnel management
1987 – 1988	Secretary/Receptionist - Westfield South center Mall Management <ul style="list-style-type: none">➤ Customer service➤ Daily secretarial duties➤ Assist Marketing Director with promotion preparation

Education

1981 - 1986	Montana State University, BS in Business Administration
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Paul Dorrance
General Partner-Owner

1946 - Born Lewistown, Montana

1964 - Graduate High School - Geraldine, Montana - 3rd in Class – escaped the speech!

1967 - Honor Graduate Aircraft Navigation Equipment Repair. (USAF) Finished a 42 week school in 22 weeks, thus ranking in the top 1% of graduates to ever complete the training

1969 to 1972:

Teaching Math and Physics at North Toole County High School - Sunburst, Montana

1972 to 1994:

Teaching Electronics, Physics and Trigonometry at Helena High and Capital High Schools - Helena, Montana

Member MVA-HEA-MEA-NEA

Building Representative for HEA - Member of Collective Gaining

Committee for HEA - Chairman of Collective Gaining Committee - Nominated for

Helena Teacher of the Year 1982 - Chairman HEA Membership Committee –

Chairman of Collective Gaining Extra Duty Subcommittee - Member of School

District #1's Curriculum Steering Committee - Member of School District #1's

Computer Study Committee - Treasurer of HEA - Member of Northwest Evaluation

Steering Committee at Helena High - Served as Sponsor of Sophomore, Junior and

Senior Classes - Student Council Advisor (Started the Helena High Hall of Fame.

Did you know that Helena High is the only High School in the Country to have two

graduates serving in the United States Senate at the same time!!) - Chess Club

Sponsor – VICA (Vocational Industrial Clubs of America) Sponsor (Students won the

Gold, Silver, and Bronze medals at the State Competition for Six Years in a row!)

Served on Northwest Evaluation Committees as they performed their evaluations of

Billings West High School, CM Russell High School, and Hellgate High School

1982 - Founded EDUNET (EDUcational NETwork, a computer, modem based distance learning network) Begin writing the telecommunications software to make EDUNET function with an awarded Carl Perkins Grant.

1983 - One of Helena School District's representatives at a Symposium on Master Teachers at the University of Idaho.

1983 - Helena High's Electronics Program nominated for outstanding Vo-Ed program in the NATION during the 1983-84 school year.

1985 - HEADMASTER Software Company formed and has first contract to write software for school administrative purposes. HEADMASTER writes "miracle" code to speed up attendance processing for School District #1. We manage to pull off the data conversion and new software startup by the start of school in the fall of

1985. Finalist for NASA teacher in space.

1986 to 1994:

NASA Space presentations to various groups and organizations, Presented Challenger Center Workshops and Conferences to Students and Teachers, Challenger Center National Curriculum Development, NASA/Challenger Center Conferences in Houston (Johnson Space Center), Washington DC (Greenbelt and NASA Headquarters), Pasadena (JPL, Voyager Fly-by of Uranus), Phoenix (Biosphere II), Hawaii (Climate Studies), Seattle (Boeing)

1988-1989:

EDUNET puts together the First annual Montana Distance Learning Conference. Certified Nurse Assistant class approved by Montana Department of Health to be taught using EDUNET Distance Learning system.

1989 - Contract with Battelle Memorial Institute to write software to link scientists at PNL (Pacific Northwest Labs) with students around the country. (Called the TRACLINK project)

1991-1992:

Secure approval from the Montana Department of Health to be the state approved test vendor to test all Nurse assistants in the State of Montana. D&S DT Nurse Aide

Testing is born. Hire first full time employee. Go to half time teaching, half time building the business.

1995 - Retire from teaching. (could it really have been 25 years?) Hire another employee. Business grows to \$500,000.00 annual gross revenues.

2015 - Twenty years growing the business into a quality organization second to none in the industry. We continue to write our own software and currently are releasing our latest state of the art technology called TestMaster Universe.

Ben Schmitt
Software Consultant

Programmer/Analyst for D&S Diversified Technologies/Headmaster LLP

- | | |
|--------------|--|
| 1990-Present | Developed Testmaster© for the DOS platform and Testmaster Gold© for the Windows© platform to maintain candidate data bases, maintain test content, schedule exams, administer exams, and maintain registries including the online registry component. Tests are randomly generated and scored using an OMR, ETest©, or WebETest©, includes extensive reporting options, and has been customized for differing agency requirements. |
| 1998-Present | Created ETest© and WebETest© for onsite and online electronic testing. The packages are compatible with Testmaster Gold©, and can use the internet, a modem and a dedicated server, email, and an FTP server for test registration, test completion, and submission of test results. |
| 1985-2007 | Produced Headmaster© and Headmaster Gold©, a DOS and subsequent Windows® package for student database management used by approximately fifty-five Montana and Idaho schools. The software includes management of daily attendance, report cards, permanent records, scheduling, custom reporting, and integration with Grademaster© and Grademaster Platinum©. |
| 1987-Present | Developed Grademaster©, Grademaster Gold© and Grademaster Platinum©, a teacher grade book application which has progressed from a DOS application to a state of the art Windows® application. |
| 1998-Present | Created numerous independent support applications to import and/or export data for existing applications into each of the above environments. |

Psychometric Team Leader for D&S Diversified Technologies/Headmaster LLP

- | | |
|--------------|--|
| 1990-Present | Created modules for Testmaster© and Testmaster Gold© to generate on-demand statistical reports for training facilities, state agencies, candidates, and in-house psychometric evaluation. |
| 1998-Present | Supervised training of psychometric team members and developed procedures for completing in-house psychometric evaluation using SPSS® statistical package. |
| 1999-Present | Created Psychomaster© for the purpose of integrating Testmaster Gold© data with the SPSS® statistical package; testing various weighting scenarios as requested by state testing agencies, and performing both classical statistical analysis and IRT analysis of test instruments. Added secure, online, web based item analysis capabilities for our clients to monitor, real time, individual active questions being used in their respective states. |
| Present | Maintaining our current proprietary software. Supervising our programmers and incorporating our proprietary technology into the Testmaster Universe project. |



Ben Schmitt (continued)

Education

1968-71, 1975-78	B.S. Mathematics	Montana State University, Bozeman, Montana
1978 – Present	Continuing Education: 46 semester-equivalent credits	MT State University, University of MT, Rocky Mountain College, Carroll College (Montana), Western MT College, Northern MT College, Carnegie Mellon University

Employment

1978 – 2001	Teacher of Mathematics AP Computer Science	Helena High School Helena, Montana
1985 – 2013	General Partner	D&S Diversified Technologies Helena, Montana & Findlay, Ohio

Tim Petrick Director of Company Operations

Management Experience

July 2001 To Present	Director of Company Operations D&S DT <ul style="list-style-type: none"> ➤ Directing operations and oversight of state contracts ➤ Quality service assurance ➤ Personnel management ➤ Company compensation and benefits coordination
August 1991 to September 2000	Station Manager - Federal Express <ul style="list-style-type: none"> ➤ Managed air-ground operations in Helena and Butte, Montana ➤ Hired, trained, staffed, evaluated and directed 25 employees ➤ Responsible for the safe operation and maintenance of two aircraft and a truck fleet of twenty-one vehicles ➤ Responsible for maintenance of two office buildings and vendor contracts and relations. ➤ Responsible for service and sales to over 500 accounts ➤ Responsible for the payroll and productivity of operations ➤ My locations frequently won recognition for quality, service and productivity
May 1986 to August 1991	Operations Manager – Federal Express <ul style="list-style-type: none"> ➤ Various management positions during this time period ➤ Scheduling Manager for 130 employees ➤ Mentor Manager for new Operations Managers. ➤ Quality Action Team Facilitator. ➤ Manager Customer Service and Vendor Operations ➤ Manager Sort and Load Operations ➤ Manager Reload and Airport Interface Operations ➤ Trainer for Dangerous Goods and Defensive Driving ➤ Twice a winner of FedEx Circle of Excellence Award

Education

1976-1979	Minnesota School of Business
1970 to 1972	Southwest State University

Jennifer Underwood
Director of Eastern Region Operations

EXPERIENCE

March 2001
thru Present

Director Eastern Regional Operations D&S Diversified Technologies

Responsibilities include:

- Implementation and training of State Testers and instructors in seven of our new state contract startups for Ohio, Tennessee, Massachusetts MAP, New Jersey, Vermont, Arizona, Colorado and Delaware
- Supervise 22 in-house D&S Diversified Technologies, Program Managers, Program Coordinators, billing and office assistance
- Co-instructor (Ohio Train the Trainer for past 6 plus years training Registered long term care nurse aides Trainings
- Supervise 4 in-house RN's for The D&S Registered long term care nurse aides Trainings for D&S Training Center
- Supervise 102 RN Test Observers throughout the state of Ohio for Registered long term care nurse aides and Medication aide testing
- Trained over 400 RN's throughout the United States to be D&S Test Observers
- Conduct and Co-lead state contract reviews
- Implementation and training of State Testers and instructors in seven of our new state contract startups for Ohio, Tennessee, Massachusetts MAP, New Jersey, Vermont, Arizona, Colorado and Delaware
- The establishment of State wide registered long term care nurse aides testing sites in Ohio, Tennessee, New Jersey, Massachusetts MAP, Delaware, Vermont, and Arizona
- New Test observer Training Sessions and re-certifications
- In-services trainings for Ohio, TN, Mass, New Jersey, DE, VT and Arizona Registered long term care nurse aides instructors – Mandatory Test Observer meetings implementation for OH, TN, VT and Mass
- In-services for Lead Testing Contract personnel
- Test site evaluations and recommendation requirements as identified in D & S procedures
- Development of Test observer News Letter
- Development of Instructor News Letter
- Coordinate with Training sites, Facilities, Ohio Registries and Ohio Department of Health for both STNA, CNA and Lead Abatement Testing Contracts
- Data entry and candidate scheduling
- Supervision of testing procedures
- Supervision of twenty two Ohio, Tennessee, Mass, New Jersey, Vermont, Delaware and Arizona Regional Program Coordinators and support staff to facilitate Ohio guidelines as mandated by the State Department of Health/Board of Nursing
- Inventory ordering and control
- Scheduling
- Employee evaluations and recommendations, staff education and cross training
- Candidate appeals
- Customer Service-Human Service Coordinator for D&SDT

3 – GENERAL Requirements



D&S Diversified Technologies LLP
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July 1998 thru
March 2001 Resident Service Coordinator, Balance Care Corporation –Outlook Pointe Assisted Living

Responsibilities included:

- Coordinating and Training of New Resident Service Coordinators for Balance Care throughout the United States
- Community Tours and Marketing
- Budget management
- Ordering and Inventory Control and month end reports
- Supervision, hiring, scheduling and annual performance evaluations of 27+ Registered long term care nurse aides
- Scheduling within budgeted FTE
- Weekly employee staff meeting and educational in-services
- Development and implementation of monthly newsletters
- Resident life style assessments and treatment goals
- Quality Assurance Indicators
- Supervision of Student Internships

December 1985
to July 1998

MedCentral Health Care System

Responsibilities included:

- Development and Implementation of treatment programs for persons with Neurological and Orthopedic Impairments
- Co-treatment with Occupational, Speech and Physical Therapist for Treatment goal setting and Achievement
- Implementation of patient assessment and treatment goals
- Weekly patient reviews, care plans and progress notes
- Development and implementation of community re-entry programs for inpatient physical Rehabilitation cliental
- Supervision of student affiliations
- Ordering of equipment and supplies within budget limitations
- Training neurological patients with life style adaptations
- Implementation of treatment goals. Adolescent and Adult psychiatric unit supervision.

Education

1994 thru 1996 Bachelor of Science in Therapeutic Recreation

Ashland University

1996 thru 2001 75 hour Continuing Education

Community, college and facility provided educational in-services as required by NCTRS

3 – GENERAL Requirements



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Headmaster LLP

3.1.9 Evaluators/Instructors are subject to approval of the State.

All applications we process for RN observers or instructors will be approved by OHFLAC staff before they are 'certified' to provide any services in West Virginia.

Any D&SDT employee resume requested will be provided in a timely fashion.

D&SDT will set up a flag/check box in our software where OHFLAC staff may securely login and check off/approve evaluators and instructors prior to D&SDT contracting with them for services. All D&SDT staff and any independently contracted WV personnel will have a nondisclosure / conflict of interest affidavit on file with D&SDT before being utilized in any capacity in support of testing or training in WV.

D&SDT has never been engaged under contract by any West Virginia State agency. Refer to our complete references beginning on page 62 for a list of engagements in other States.

D&SDT is not employed by the State of West Virginia, any of its political subdivisions or by any other WV government agency, nor is any D&SDT employee.

3.1.10 Vendor shall provide opinions from WV Ethics Commission

D&SDT does not anticipate having any employee or contractor working for us that is also an employee of the State. However, if that situation ever arises we will seek the requested opinion from the WV Ethics Commission.

3.1.11 Vendor shall hold unimpeded scheduled services for all applicants. Services may not be cancelled due to low participation

D&SDT will provide the required number of workshops and training sessions each year of the contract based on a mutually agreed upon schedule of events, regardless of the number of participants enrolled. We will use the enrollment data from previous years events to gauge needed sessions for subsequent years. D&SDT also commits to and will provide sessions beyond the required number of sessions if demand warrants. For instance, in both Ohio and Tennessee we have consistently provided training sessions beyond yearly contractual requirements based on the demand for needed training from the stakeholders.

We have no minimum requirements for holding test events. With our dynamic scheduling software the testing demand and number of scheduled events quickly balance to create an efficient testing infrastructure state wide.

3.2.1 & 2 & 3 Statement of Qualifications/Services:

D&SDT will meet or exceed all qualifications for vocational certified instructors for project A & D, will meet the first and second day requirements for project B utilizing an RN in good standing in WV and will use qualified and OHFLAC staff certified RN's to administer the competency test for project C, unless OHFLAC directs differently at some point, during the life of the contract.

3.3.1 & 2 & 3 The RFQ should have a cover, table of contents and dividers

Yes.

3.4 Begin knowledge test administration eight weeks after award of contract.

See the proposed startup/transition timeline on page 80. We are likely the only vender with a proven history of providing startups in the requested 56 day startup time frame.

3 – GENERAL Requirements



D&S Diversified Technologies LLP
Headmaster LLP

3.5 Insurance Requirements.

D&SDT will meet or exceed all requested insurance requirements and dollar minimums for a. bodily injury - b. property damage and c. professional liability insurance prior to contract signing and will add the State of West Virginia as a certificate holder.



Project A: WV Nurse Aide Competency Evaluation Program (NACEP)

D&S Diversified Technologies LLP will bring a NACEP model to WV meeting all Federal regulations and WV state criteria. All RN observers will be screened per Federal regulation (42 CRP 483.154) to have one year of long term care experience or care of the chronically ill of any age. We will provide both electronic and paper testing options. Our complex adaptive testing model has the option of testing single individuals in some circumstances.

1 Job Analysis.

We have included a sample of the job analysis (pages 76-79) and in conjunction with the National Council of State Boards of Nursing NA job analysis in conjunction with the proposed Test Advisory Panel (TAP) screening process as presented throughout this response, will insure job relatedness for all NACEP certification components.

2 Pool of written evaluation items.

The TAP (test advisory panel) members will review our nationwide bank of over 1500 AMAP test items and over 2000 NA test items that have been written by subject matters experts from across the nation and recommend test items current to the West Virginia approved NA and AMAP curriculums, Federal regulations, and West Virginia statutes, thus creating two active test banks of items customized to fit West Virginia's unique needs. Using this approach OHFLAC staff is guaranteed that the active NACEP test items will be consistent with the content identified in the Criteria, including all the areas listed as well as Personal Care. (These areas, in fact, 'become' the subject categories for the NACEP questions as approved for the WV active test pool of likely over 800 questions.) This process all translates into an active, real time, dynamic, job analysis that custom fits the active test bank of items in West Virginia to OHFLAC staff approved curriculum and desires for testing outcomes! We also have proprietary, secure, online item creation (collaboration) software so West Virginia subject matter experts (SME's) can contribute unique West Virginia questions to the nationwide pool of test items, if needed/desired. The test plan recommended by the TAP members and approved by OHFLAC staff will reflect West Virginia's approved curriculums and all applicable regulations as well as OHFLAC staff desired testing outcomes in determining minimum competency for West Virginia NA and AMAP candidates that successfully complete OHFLAC approved NA or AMAP training.

The TAP review process will establish the test bank size. Our experience has been that OHFLAC staff will end up approving around 1000 items for the WV active NACEP test item pool.

RN test observers receive at least seven hours of training/review/oversight every year, due to our yearly certification process for every active observer. We encourage OHFLAC staff to be actively involved in the yearly review and recertifying process, but at the very least, designated OHFLAC staff will electronically receive a copy of the detailed review (ten pages) of every RN observer and his/her test team at least once per year. New observers are required to spend a highly structured day with a designated and approved RN mentor observer during a live test event before conducting a test event on their own.

Each of our items is also categorized as recall, application or analysis to further delineate the items.

Our software allows the reading level parameter to be 'set' when generating comparable test forms. Typically we set the NACEP reading level parameter to be less than sixth grade, thus falling into the fifth grade reading level requested.

3 Distribution of Evaluation Information



Candidate handbooks will be approved by OHFLAC staff before being published. See transition/startup timeline on page 80. The handbooks are available for instructors in printed booklet form and class sets may be ordered by calling the Findlay office toll free in advance of the start date of a new class. The latest version of any candidate handbook is also available in .pdf format at www.hdmaster.com and may be downloaded to any tablet or smart phone. The candidate handbook will be a value added tool for instructors, helping guide their instruction toward successful outcomes for test candidates. We even publish a vocabulary list based on the active pool of knowledge test items ultimately approved by OHFLAC staff, if desired.

Candidates are scheduled, real time, as the Instructors securely certify training completion in WebETest(c). Testing can occur the next day, but certainly within two weeks for most candidates. Candidates will receive a notification letter upon test registration and may check their date and time on line and actually reschedule themselves on line or by calling D&SDT staff toll free.

4 Nomination of skills competency evaluators.

OHFLAC staff will have a check box accessible in our software and we will not be able to contract with a competency evaluator (RN observer) if the box isn't checked. We will alert designated OHFLAC staff when there are observers pending approval via email. OHFLAC staff will then use the WV Agency portal to approve or deny the potential RN observer through the secure agency portal we provide. We verify, with our RN Observer screening process, that all RN Observers meet the minimum Federal requirements of one year of experience in providing care for the elderly or chronically ill of any age and check the WV Nurse registry to insure any potential RN's are in good standing in WV.

5 Preparation of skills competency evaluators

D&SDT certifies each active skill evaluator (RN test observer) yearly. The initial RN observer certification workshop is a day long and utilizes an experienced mentor RN observer plus D&SDT staff to present the observer workshop material. All workshop materials are available, at any time, for OHFLAC staff review and suggestions/editing. In addition, new RN observers may be required (or want to) spend an additional day with an active RN observer at a live test event (as the actor) to gain real time experience and involvement before managing his/her own test event. We currently have several active Ohio RN observers that carry WV RN license numbers which we will utilize to jump start our active RN observer pool in WV. (Suzanne Perry WV permanent license #76684 is one of the experienced Ohio RN observers we are considering in this capacity.) At least once during each contract year each active RN observer is formally reviewed and the resulting evaluation is shared with OHFLAC staff. In this manner, over a very short time period, WV RN observers will achieve inter-observer reliability deviations that will vary no more than .25 from the norm and that inter-observer reliability data, of course, will be accessible by OHFLAC staff through the Agency portal!

Over the past twenty-five years, RN Subject Matter Experts (SMEs) from all over the country have created our 2000+ NA knowledge test questions, based on the Federal regulations (483.164). The WV Test Advisory Panel (TAP) and OHFLAC staff will select questions from this global test bank to become WV active questions representative of Federal regulations, WV curriculum and current practice. The resulting test bank of WV active knowledge test items will, therefore, be 'custom fit' to West Virginia's needs, desires and current practice with our experienced staff there to help every step of the way.

One of the test parameters the TAP and OHFLAC staff can set for WV test instruments is the reading level desired for WV test instruments.

6 Development of Pool of Skills Performance Evaluation Items

D&SDT has developed skill tasks for NA & AMAP testing and we have correlation data available to help TAP members and OHFLAC staff agree on the weight of each task that the software ultimately uses when generating comparable five task skill test instruments. Additional tasks may be added or deleted from the active task set at

Part 3.4 – Scope of Services



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Headmaster LLP

any time. AZ, NV and OR have started to use initial tasks with embedded hand washing and no verbalization of hand washing in subsequent tasks, but rather actual hand sanitation during subsequent tasks. The idea being that we don't want to encourage any verbalization of hand washing during training or testing. This option is available for approval in WV is desired. Following is some statistical information we keep on tasks to help the TAP determine weighting for approved skill tasks in WV. We actually can track skill task steps with our software for reporting purposes statewide for the Agency or by training program candidate for training programs to access the steps most missed by their candidates through the secure Agency and training program portals provided with our software.

Correlation of Task Pass Rates						
To task difficulty						
## Skill Name	Pass Rate	Number of Steps	Original Difficulty	Computer	TAP	Composite Difficulty
				analyzed Difficulty	recommended Difficulty	
08. Handwashing	98%	15	2	2	2	
09. Mouthcare Comatose Resident	90%	21	5	3	4	3.5
10. Bedpan and Output	82%	21	5	4	4	4
12. Feeding Dependent Resident	83%	21	4	4	4	4
13. Positioning on Side in Bed	74%	24	5	5	5	5
14. Transfer Bed to Wheel Chair	92%	18	4	2	3	2.5
15. Range of Motion Lower Extremities	90%	22	4	3	4	3.5
16. TPR, Oral Temperature	78%	21	3	5	5	5
17. Making Unoccupied Bed	94%	25	4	1	2	1.5
18. Making Occupied Bed	89%	37	5	3	4	3.5
19. Brushing Teeth	93%	20	2	2	2	2
21. Measure/Record Height/Weight	86%	17	2	4	4	4
22. Hair Care	94%	14	1	1	1	1
23. Anti Embolus Stockings	93%	14	3	2	2	2
25. Partial Bed Bath - Face, Arm, Leg	89%	23	5	3	4	3.5
28. Nail Care Fingernails	88%	16	3	3	3	3
29. Blood Pressure	73%	19	5	5	5	5
32. Vest Restraint	84%	13	4	4	4	4
33. Ambulation Gait Belt	92%	14	2	2	3	2.5
34. Ambulation Cane/Walker	88%	16	3	3	3	3
36. Transfer W/C to Bed	92%	18	4	2	3	2.5
37. TPR, Axillary Temperature	77%	23	5	5	5	5
38. Dressing	86%	16	3	4	4	4
40. Range of Motion Upper Extremities	86%	26	4	4	4	4
Correlation with pass rate		-0.213	-0.519	-0.926	-0.840	-0.908

AMAP tasks currently available:

Ear drops
 Eye drops
 Oral tablet
 Oral capsule
 Nasal mist
 Liquid pour

Ointment
Spray topical
Rectal suppository

The approved set of skill tasks will also be published in a West Virginia NA candidate handbook. Sample candidate handbooks can be viewed at www.hdmaster.com. All tasks and any step on any of the tasks is subject to review and editing by the West Virginia appointed TAP, during planned meetings prior to the start of test administration, and subject to final approval by Agency staff. Tasks and steps may be added or deleted at any time as needs warrant during the NA - AMAP testing contract. Skill test discussions and recommendations for OHFLAC approval typically take one day of TAP meeting time. Any SME that previously served during the knowledge test item review sessions can be bought back and utilized for the skill test recommendation activity, since the approved task steps will end up available to the public on the web via the West Virginia NA candidate handbook.

7 Approval by OHFLAC.

Utilizing the TAP screening model presented herein, OHFLAC staff will be actively involved as the knowledge items and skill task set are recommended for currency to WV needs with final approval given by OHFLAC staff, meeting all Federal requirements and reflecting any unique WV statutes/criteria or OHFLAC staff desires. At least yearly NACEP reviews with input from all the stakeholders will allow for changes going forward continually improve the care delivered to the residents of WV.

8 Final written evaluation instruments.

Once we have the test plan defined and approved, we program the parameters into our test generation algorithm, which has range adjustments on number of test items, P-value, reliability, reading level, and established cut score so we can create as many comparable tests with congruent TIF curves as we desire. Then the software generates tests from the approved West Virginia active test items until all the parameters are met and gives us a report as listed next.

Generating Test... Attempt # 4
70 total items

P-value average (0.82381285714286) is between 0.82 and 0.84, took 476 attempts of 500

Reliability (alpha) Coefficient (0.80728917230574) between 0.8 and 0.9

Reading Level (5.8536001147447) is between 5.3 and 6

Estimated average score (0.74405) is between cut score range 0.74 and 0.76

Test matches all test plan parameters. Click the button below to save as new test form!

11.6 seconds taken to generate this test.

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Script executed in 3.0113 seconds - 4 SQL queries used - 8.25MB of PHP memory used.

Notice that we can 'adjust' any test, before ever using it, to meet any requirements OHFLAC staff decides are needed and we positively know how the test is going to perform before ever actually administering it. These tools provide Agency staff unprecedented oversight and control of test instruments utilized as screening tools for contracts we help manage.

The number of questions on the test will be determined by the OHFLAC approved test plan that typically is recommended by the TAP toward the end of the third day of initial TAP review meetings. We prefer no less than a 10% sample of the active test bank of approved knowledge test questions. Sample customized test plans for NA testing are included next. Notice the difference in approved test plans that resulted from the TAP process. OHFLAC staff will have final approval of any proposed test plan and the test plan is always subject to future review and refinement. Knowledge test discussions, item review, and test plan recommendations typically take

two days of TAP time. We prefer small groups of volunteer subject matter experts (SME) for the OHFLAC appointed test advisory panel (TAP) participants rotated every four hours for two days, so no 'outside' content experts sees any more than 25% of the knowledge test items. Agency staff and HEADMASTER staff are present for the whole process to insure consistency of recommendations across the rotating SME sessions. We would propose concurrent NA and AMAP panels working with D&SDT staff (in two separate rooms) to establish both active test banks during the same two day period. We did this with four concurrent panels for the NJ startup and it worked quite nicely. All features of the test plans will be customized to OHFLAC staff needs and desires.

Part 3.4 – Scope of Services



D&S Diversified Technologies LLP
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Test Plans Total Questions	77	72	75
Knowledge Test Plan	OR	MT	TN
	Test Plan	Test Plan	Test Plan
Safety	10	8	8
Communication	6	6	6
Infection Control	10	11	5
Resident Rights	8	5	5
Data Collection	4	3	4
Basic Nursing Skills	11	11	11
Role / Responsibility	8	5	11
Disease Process	3	5	5
Mental Health	2	4	4
Personal Care	11	7	7
Care Impaired	2	5	5
Aging Process/Restorative Care	2	2	4
Grade Level Reading Range	4.99-5.73	5.29-5.94	5.12-5.92
Predicted Alpha Range for Test Set			.81-.82
Index Creation Range for Test Set		82.8-83.2	.818-.82
	OR	MT	TN
Replicate to version 41	Version	Replicate 12/18/11	7/19/11
P-value filter		12/18/11	7/19/11
Knowledge Version	97	59	37
Knowledge Cut Score	65	75	75
		Number of active Questions approved for	
Subject Area		each State Test Bank	
Safety	76	108	81
Communication	63	93	82
Infection Control	60	73	69
Resident Rights	86	132	117
Data Collection	41	85	74
Basic Nursing Skills	202	278	277
Role / Responsibility	113	136	114
Disease Process	116	159	130
Mental Health	57	86	79
Personal Care	65	95	63
Care Impaired	78	91	79
Aging Process/Restorative Care/Growth & Development	60	61	62
Total Active Questions	1017	1397	1227
Last update	3/17/11	12/18/11	1/27/12
Skill Task Cut Score with NO KEY steps missed	80	80	80
Skills Version	97	59	37
	OR	MT	TN

Final approval for any initial TAP recommended or subsequent proposed change to any West Virginia active knowledge test item and all skill tasks and skill task steps will be the purview of designated OHFLAC staff.

HEADMASTER securely provides designated Agency staff online 24x7 access to item analysis for all active West Virginia knowledge test items as well as point bi-serial correlations, p-Values, distracter analysis and IRT charts to name some available psychometric information we share with OHFLAC staff through the secure Agency portal into our ItemMaster© software. See pages 38 for more details.

Test security is a very high priority. We have proven security measures established including exposure of no more than 25% of the knowledge test items to any subject matter expert during initial TAP review of test items. Further, all testing information resides in encrypted form behind an active firewall on our blade servers until tests are unlocked by the assigned and designated RN test observer that is contractually bound to strict security protocols. Knowledge test proctors must securely log test candidates into the knowledge test, the candidate has to verify their own demographic information and identity, before proceeding to the actual knowledge test questions; all under strict knowledge test proctor guidelines. The knowledge test proctor must also log the candidate out of the knowledge test with another secure password upon the candidate completing the knowledge test. At that time, the information is re-encrypted and no further access is allowed to anyone at a test event. The re-encrypting event also triggers an automatic email to D&SDT staff that the test is ready for official scoring. All scoring takes place the same day received and agreed upon information is automatically ready for West Virginia registry retrieval/interfacing/data sharing concurrent with the completion of official scoring.

Any paper tests are only shipped to RN observer home addresses and RN observers are contractually bound to keep all testing materials under their control at all times. ALL paper testing materials are returned to D&SDT offices in Findlay using the pre-addressed, postage paid, envelope the same day testing is completed.

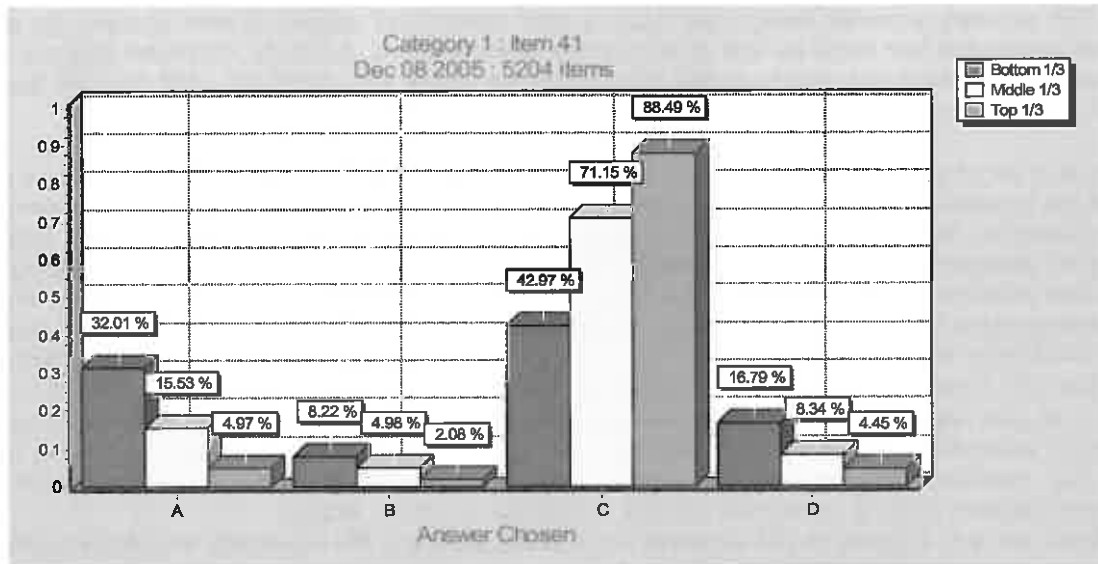
9	Equating evaluation forms
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D&SDT's test generation algorithm creates comparable test instruments that have the same average p-value, same cut score, reading levels in the same range, predicted alpha coefficients over .79 and TIF curves that are congruent, thus guaranteeing comparable test forms. Our software also shares all the following information with OHFLAC designated staff in a real time, on demand fashion. Ask Sharon Oxx (Massachusetts) how she has leveraged our online psychometric information to her advantage!

Testmaster© and our proprietary integrated statistical package, ItemMaster© allows for complete statistical analysis for each test item using both classical statistical methods and item response theory (IRT). Statistics are further verified with the widely used statistical package SPSS™. OHFLAC staff will have secure online access to inter-rater reliability statistics as well as distracter analysis, p-values for individual items in the active test bank and IRT curves for individual questions!

Item Analysis includes the following:

Distracter analysis measures how well an item and the incorrect answers are performing. In addition, the chart provided next shows how often each response is chosen by candidates from the top, middle and bottom thirds of all candidates that responded to the test item. This information is also helpful to the TAP members when they are looking at new beta test items that are brought before them for possible recommended inclusion into a state's active written test bank.



Item index of discrimination quantifies the ability of an item to distinguish between a qualified and non-qualified candidate. The magnitude of the discrimination index, in large part, is driven by the difficulty of an item, and our target standard is an index of discrimination of at least 0.2.

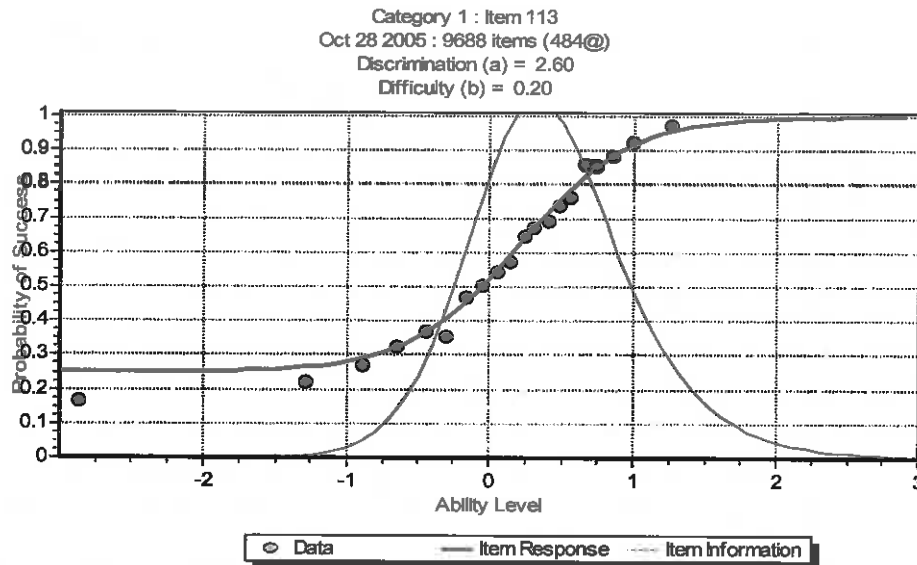
Index of Discrimination				Comparing the success rate of approximately the bottom 28% of candidates to the top 28%			
Cat	Num	Cor	Total	Low Index	Cor Total	High Index	Discrimination
53	74	1233	2073	0.59479	1926	2026	0.95064
53	75	276	612	0.45098	388	585	0.66325
53	76	716	1147	0.62424	991	1159	0.85505
53	77	246	604	0.40728	483	584	0.82705
53	78	317	455	0.69670	466	486	0.95885

Point bi-serial correlation assesses an item's contribution to the measure of competency. The value correlates each distracter to candidates' overall test scores. An acceptable item has a positive correlation of at least 0.2 for the correct answer. The higher the correlation, the more likely it is that a qualified candidate answered correctly.

Cat	Num	%%A%%	%%B%%	%%C%%	%%D%%	####
001	xxx	0.3345	-0.1209	-0.2120	-0.2119	4752
001	xxx	-0.2794	0.4055	-0.1718	-0.1829	4119
001	xxx	-0.2483	-0.1937	0.4288	-0.2325	5969
001	xxx	-0.1961	0.3878	-0.2896	-0.1555	5191
001	xxx	-0.1868	-0.1841	0.2917	-0.1485	4307
001	xxx	-0.1763	-0.1716	0.3034	-0.1345	4346
001	xxx	0.4478	-0.2799	-0.2520	-0.1771	5481
001	xxx	0.3674	-0.1739	-0.2891	-0.2163	336
001	xxx	-0.1696	0.2447	-0.1172	-0.1531	2094
001	xxx	-0.3403	-0.2381	-0.2288	0.4890	6215

Item response functions, the blue curve in the following graph, gauges the difficulty of an item across the population of candidates. Item information functions, the green curve, illustrates the competency (ability level) of candidates for which the item gives the most information. In addition to providing feedback about item performance, both of these parameters have implications in computer adaptive testing and are used by our proprietary test generation algorithm during the creation of congruent (comparable) test forms. The software we bring to the table, and our cooperative philosophy, will give OHFLAC staff great flexibility in "controlling" the competency evaluation program based on timely,

accurate, comprehensive information, a capability and philosophy we believe is truly unprecedented in the testing industry.



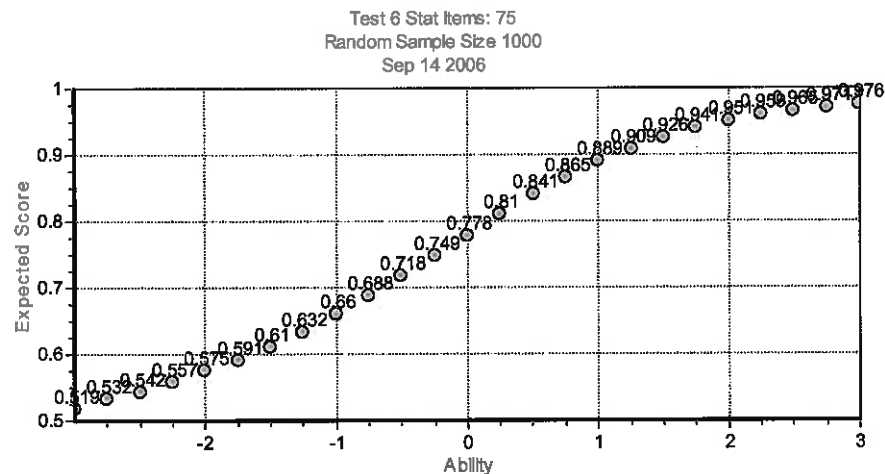
Gender and ethnic discrimination analysis determine if an item exhibits bias towards any demographic subgroup. Analysis is obtained using the relevant item statistics correlated with candidate demographic information.

Both classical and IRT methods are also applied to test forms as follows:

Test reliability coefficients measures the “stability” of test scores and indicates the likelihood a candidate would receive a similar score if tested again using the same test form. The benchmark standard that we strive for on written test forms is 0.8 and for skill test forms 0.85, both exceeding industry standards.

Skill Exam Reliability Coefficients				Oct 25, 2005
###	Exam Title	N of Items	N of Cases	Alpha Coefficient
S017.	XX Skill Test #17	87	163	0.86218
S021.	XX Skill Test #21	92	141	0.90349
S025.	XX Skill Test #25	88	128	0.92327
S026.	XX Skill Test #26	88	146	0.95356
S027.	XX Skill Test #27	107	131	0.88197
S029.	XX Skill Test #29	88	132	0.95666
S035.	XX Skill Test #35	99	134	0.88469
S036.	XX Skill Test #36	87	140	0.87770

Test Information Functions predict the reliability and performance characteristics of written test instruments before administration. Item response characteristics gathered from around the country projected over a population exhibiting a normal distribution, accurately predict the difficulty of a test instrument and its ability to differentiate as illustrated in the following test information function curve. Generally the steeper the curve the better the test discriminates between candidates that are qualified and those that are not, and nearly identical curves for different test forms equates to comparable test instruments. The curve below would line up with the desired WV cut score of 70% at about -.65 standard deviations below the norm (0) on the ability axis!



The following Testmaster®/WebETest® reports provide additional information for our psychometric staff, and are available securely online, on-demand, for OHFLAC staff, whenever desired:

- **Version Report:** Pass-fail rates of all test versions administered and further delineated by attempt.
- **Observer Skill Diagnostic Report:** Success rates by skill task or skill step for candidates as compared to the statewide norms.
- **Observer/Training Correlation (Inter-Observer Reliability):** observer pass/fail variance from the statewide norm and the norm for candidates trained at the same facility.

The test advisory panel typically reviews the psychometric information that D&SDT provides on an annual, or as desired, basis. OHFLAC staff will likely use recommendations from the TAP to address testing issues. The NACEP review process will be totally dependent on the level of involvement that OHFLAC staff desires.

10 Oral version

Every knowledge test question has its own digital wave file that an authorized WebETest candidate can listen to while reading the question on the screen. We provide digital audio players and ear phones for oral testing with paper/oral test requests.

11 Individual skills performance instruments

D&SDT skill tasks available for inclusion in the West Virginia set of active skill tasks categorized as follows:

§483.152(b)(3) Personal care skills, including, but not limited to
(i) Bathing;

D&SDT Hand Washing Skill Task
D&SDT Tub Bath Skill Task
D&SDT Shower Bath Skill Task
D&SDT Partial Bed Bath Skill Task
D&SDT Perineal Care Male Skill Task
D&SDT Perineal Care Female Skill Task
D&SDT Catheter Care Skill Task



D&SDT Changing a Urinary Bag Skill Task
D&SDT Changing Appends
D&SDT Blood Pressure Skill Task
D&SDT Vital Signs Axillary Temperature, Pulse and Respiration Skill Task
D&SDT Vital Signs Apical Pulse and Respiration Skill Task
D&SDT Pulse and Respiration Skill Task
D&SDT Vital Signs Temperature with Digital Thermometer, Pulse and Respiration Skill Task
D&SDT Height Skill Task
D&SDT Weighing an Ambulatory Resident Skill Task
D&SDT Application of Vest Restraint in Wheel Chair or in Bed Skill Task
D&SDT Abdominal Thrust Skill Task

(ii) Grooming, including mouth care;

D&SDT Brushing Teeth Skill Task
D&SDT Mouth Care – Comatose Resident Skill Task
D&SDT Mouth Care – Aware Resident Skill Task
D&SDT Denture Care Skill Task
D&SDT Nail Care Skill Task
D&SDT Hair Care Skill Task

(iii) Dressing;

D&SDT Dressing Skill Male Task
D&SDT Dressing Skill Female Task
D&SDT Applying Anti-embolic Stockings Skill Task
D&SDT Making an Occupied Bed Skill Task
D&SDT Making an Unoccupied Bed Skill Task

(iv) Toileting;

D&SDT Toileting Skill Task
D&SDT Bed Pan and Output Skill Task

(v) Assisting with eating and hydration;

D&SDT Fluid Intake Skill Task
D&SDT Passing Fresh Water Skill Task

(vi) Proper feeding techniques;

D&SDT Feeding Skill Task
D&SDT Intake and Output Skill Task

(vii) Skin care; and

D&SDT Back Rub Skill Task
D&SDT Foot Care Skill Task
D&SDT Shaving Electric Skill Task
D&SDT Shaving Disposable Razor Skill Task

(viii) Transfers, positioning, and turning.

D&SDT Ambulation Cane Skill Task
D&SDT Ambulation Walker Skill Task

D&SDT Ambulation with Optional Gait Belt Skill Task
D&SDT Transfer from Bed to Wheelchair with Optional Gait belt Skill Task
D&SDT Transfer from Wheelchair to Bed with Optional Gait belt Skill Task
D&SDT Positioning Resident on Side in Bed Skill Task
D&SDT Range of Motion Exercises Upper Extremity Skill Task
D&SDT Range of Motion Exercises Lower Extremity Skill Task
D&SDT Mechanical Lift Skill Task

In addition, D&SDT uses a minimum of fourteen different skill tests, where each skill test is comprised of five skill tasks. Candidates are randomly assigned one of the fourteen comparable skill tests and will never have the same test if they must take a subsequent retest. They will see at least one of the same tasks that they previously failed included on any subsequent skill test plus hand washing and three "new" tasks. No two skill tests administered by an RN observer on a given day are the same.

At least one skill task from each difficulty stratum as required by federal regulations is represented in each D&SDT randomly generated five task skill test. D&SDT has assigned each of the skill tasks a difficulty rating from one (lowest difficulty) to five (highest difficulty). These difficulty ratings as well as weightings for individual task steps are subject to customization by OHFLAC staff or the WV TAP as future needs or philosophy dictate. Any combination of five tasks with the proper federal regulation distribution and with a total difficulty level of fifteen may be randomly selected by Testmaster®/WebETest® during skill test form generation, i.e. $5+3+3+2+2=15$, $2+4+5+2+2=15$, or $5+4+3+2+1=15$ etc.

Comparability of the skill tests is achieved principally by assuring that the sum of the assigned difficulty levels of each of the five tasks comprising a skill test adds up to fifteen, plus or minus one. The skill task difficulties are periodically monitored using as contributing factors: evaluations of a panel of experts, the average time required to complete an individual task, the average time to complete the entire skill test, and past performance levels on the task. (Refer to page 23.)

Continuous psychometric data reviewed by D&SDT staff is used to monitor areas for immediate review on all test forms and provides on-going correlation of test forms.

12 Scoring

We would recommend a cut score that would fall between $-.6$ and $-.8$ standard deviations below the ability scale norm (0) on the test information function (TIF) curve for the set of active questions that end up being approved for the WV active set of test questions. In the situation where the cut score is established in rule (sounds like 70% is the case in WV) then we'd recommend setting the test parameters so the required cut score falls between $-.6$ and $-.8$ standard deviations below the norm on the TIF curve when generating comparable tests. The cut score or entire test information function curve may be shifted, by choosing different parameters, to suit the recommendations of the West Virginia TAP or desires of Agency staff.

Paper knowledge test scoring is first scored by passing through the scantron machine and the machine reads the marks the candidate made on their personalized scantron form. Then all tests are at least double checked by a different member of the scoring team. Discrepancies are resolved by a third person. Each question has a weight of one for scoring purposes. If on site scoring is the agreed upon option then the RN uses a template 'key' on the scantron form to 'unofficially' score the knowledge exam.

Skill test scoring is typically a combination of attaining a needed percentage correct on each of the tasks with no key steps missed. The cut score, step weighting and key steps designated will be TAP recommended and then approved by OHFLAC staff prior to beginning any skill testing.

13 Task analysis and distribution of checklists

All the steps for each task are published in the candidate handbook. OHFLAC staff also has the option to weight individual steps and designate key steps on any task. Each step is individually reported and reviewed at the

yearly TAP 'gathering' that will continue to meet (at least yearly) and 'adjust' the steps, over time, as agreed upon, and approved by Agency staff. This is a critical feedback loop in the complex adaptive testing model.

14 Establish sites and schedule evaluation

Each of the eight regions will have test seats available in the dynamic state wide master test schedule in WebETest© sufficient to handle the demand for testing in each region. Our preferred testing model is to test candidates where they train, moving a test team to the training site for testing as opposed to sending a multitude of candidates to a regional testing site. We also have data showing that candidates perform better when they test where they train. OHFLAC staff will have data available through the Agency portal that will show miles traveled by candidates to test events as well as a myriad of other reports to track test scheduling efficiency at any given moment in time. A sample mileage chart is included next showing one type of information available to Agency staff on demand.

TN Client Report

Travel Summary: Jan 01, 2012 to Jul 20, 2012

Dist (mi) Count %%% Total

0-	9	(1121)	27.6	27.6	*****
10-	19	(1028)	25.3	52.9	*****
20-	29	(592)	14.6	67.5	*****
30-	39	(386)	9.5	77.0	*****
40-	49	(228)	5.6	82.6	*****
50-	59	(325)	8.0	90.6	*****
60-	69	(92)	2.3	92.9	****
70-	79	(67)	1.6	94.5	***
80-	89	(55)	1.4	95.9	**
90-	99	(15)	0.4	96.3	*
100-	109	(33)	0.8	97.1	*
110-	119	(5)	0.1	97.2	
120-	129	(41)	1.0	98.2	**
130-	139	(15)	0.4	98.6	*

Distances are calculated using the central longitude and latitude for the zip codes of the candidate and test site. Some test events do not have the data available for either the candidate or site.

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15 Final form and documentation

Using the TAP process Agency staff will be approving all forms and documentation well before anything is released to the public or used to provide any services. All WebETest© interfaces will be customized and approved by OHFLAC staff.

16 Registration of eligible candidates

D&SDT would propose an automatic interface between WebETest© and the WV registry data base as well as the National Sex Offenders Public Registry to 'clear' potential candidates at the point in time when the instructor enters them into WebETest© upon the candidate enrolling in an approved WV training program. An interface screen similar to the following sample is typical of the candidate information screen.



Edit Candidate Record

Options

Print Certificate Print List

Add Test newcerts.asp

Print History DE_Certificat.html

Submit Records

New Certification Date: 05-17-2009

Apply Transfer Cancel

Transfer Prefix ID: DE*00000010908

Transfer State:

Transfer Certificate:

Current Certification Details

License Number

Certified / Expires: 12/28/1901

Negative Findings ☐ Investigation ☐

Notes

Demographics

ID Pin:

First Middle Last

Maiden (Other name)

Address

Zip (City ST Auto)

Home/Work Phones: (ccc)ppp-####

Email Address

Date of Birth: (mm/dd/yyyy)

Employment

ID Facility View List

Location

Start Date: End Date: (mm/dd/yyyy)

Emp. Notes

Testing/Training Information

☐ Testing successfully completed.

Training program name:

Address:

City, state and zip:

Training completion date: mm/dd/yyyy

Test History

Scored:

Last Updated:

Renewal Notification:

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17 Administration of the evaluation

In our preferred testing model, the test sites would, in fact, be the West Virginia training programs approved by OHFLAC. An independent test team is scheduled into a test event by the training program or by D&SDT staff when the test event is created in WebETest®. We also ramp up, as needed, a regional testing model that we use for retests and any training programs that choose not to test candidates at their training site. Our tablet technology allows secure real time skill testing on any smart phone or tablet that the RN skill test observer might have. The knowledge test is securely proctored by the knowledge test proctor (KTP) on any Internet connected device and our two flight testing model allows for as few as three Internet connected computers/devices to be securely leveraged to handle a full test event. Test events that aren't full can be managed on a single Internet connected device. Our testing model/pricing structure will allow single candidate testing in certain instances!

We can easily set a flag in our software to insure a one month wait before retesting and there are also flags for limits on number of test attempts allowed during a defined training cycle time frame.

Flexible test schedule (in-facility testing): D&SDT has always believed, since the beginning of the OBRA NA training and testing regulations in the early 1990's that the best testing scenario for test candidates is to test them on their own "turf". We believe it is far more efficient to bring one test team to a group of candidates rather than moving scores of candidates to regional sites. D&SDT also has years of statistical data that shows higher pass rates for candidates that test where they train. (Lower anxiety = higher ability to perform.) Facility staffing is not impacted in our in-facility testing model because our independent **three person testing teams** all come from "outside" the facility. (See detailed cost proposal and notice that approximately 30% of the test fees go to support the test teams!) Our **two flight testing model** helps facility staffing because candidates that are testing do not have to take the whole day off to take their test. D&SDT does not have a minimum number of candidates required for a test event to take place. We let the market place drive that number and in some cases a test event might be held for just one candidate by mutual agreement with the testing site and the RN test observer. A test event made up of just a morning or afternoon or condensed evening flight may involve up to eight or fewer than three candidates.

There are no “extra” or hidden costs for facilities to be test sites. RN observers bring consumables with them, so the facility only provides the space and permanent equipment as their contribution to the in-facility testing model.

For either paper or WebETest® in-facility testing, the facility must become a certified test site, contractually bound and subject to relevant West Virginia Administrative Code and ongoing review. See typical forms 1502 & 1503 by browsing to www.hdmaster.com. It is in the best interest of facilities and training programs to become test sites, but it is entirely optional, and the privilege may be revoked for non-compliance with established test site rules and guidelines or facility sanctions by OHFLAC or D&SDT staff. Test sites may choose to become both an in-facility test site and also allow “regional seats” for “extra” test slots not filled with their own candidates. This mode of operation has definite advantages for the facilities choosing to be both fixed and flexible testing sites.

Paper testing: An instructor or facility/training program designee contacts a D&SDT/OHFLAC certified RN observer from the published certified observer list, and they mutually agree to a projected test date. The instructor notifies (toll free phone call, fax or email) his/her **personal** D&SDT staff member (program coordinator) of the agreed upon date, the selected observer, and the test site. Both OHFLAC and D&SDT staff can ‘see’ the candidates in the pipeline through the Agency WebETest® portal. Applicants can then apply for this scheduled test date using form 1101 and Option 1 on form 1402. We will work with OHFLAC staff to ensure the implementation of a suitable and efficient testing model acceptable to West Virginia needs and requirements. (We have available as a value added no cost option for West Virginia a complete online WebETest® training program tracking and application processing model we are using in several states now that is available to be ported for use in West Virginia, if desired. This application model requires only one Internet connected computer at the training program site.) Notification letters or emails are sent to candidates confirming their scheduled test date the same day the application is received in the D&SDT Findlay office or automatically if using WebETest® online application processing.

Electronic testing using WebETest®: An approved test site must first be trained and certified by D&SDT staff to use the on-line WebETest® software. D&SDT has created an on-line web site called Web University (WU) for training purposes. Potential WebETest® users can use the on-line WebU® software in this non-critical “web university” learning environment. The typical electronic test site would have at least three Internet capable computers, if they anticipate WebETest® full flights of up to eight candidates. Three Internet connected computers facilitate simultaneous written/oral and skill exam testing. For oral testing at least one of the computers must have audio capabilities (a sound card) with headphones. As with the paper exam, an instructor or facility/training program designee contacts a D&SDT/OHFLAC certificated RN observer from the published certified observer list, and they establish a test date. The test site designated and trained software administrator uses WebETest® electronic form 1700 to create a test event in WebETest® for the selected date and then can register candidates for that event using electronic form 1101 after successful completion of training. We look forward to working with OHFLAC staff to provide West Virginia with an efficient and seamless process for moving candidates through the training and testing cycle within our proven time frames. We have **Instructor software** originally developed for the Oregon State Board of Nursing and Oregon NA instructors that is available for West Virginia instructors as a **value added no cost addition** which may be of interest to West Virginia training programs and to OHFLAC staff. (Class roster's, candidate demographic proofing form, skill checklists, pre-filled 'official' certificates of completion, online employment verification features and more!) We'd be more than happy to demonstrate the available software options for the RFQ selection panel members at their convenience.

A click of the mouse automatically submits the candidate(s) application(s) and alerts D&SDT staff in the Findlay office. Upon receipt of the electronic test request(s), the candidate demographic information, requested choices of test date and site and test(s) requested are imported into Testmaster®/WebETest®. The demographic and proof of training information is verified and test history merged with any previous records for the candidate. Payment options are verified and payment is secured. D&SDT can invoice approved, credit established, training programs/test sites, or charge the correct amount to a credit card number supplied or apply testing fees to an established credit or hold application processing until some other form of payment is received and verified. Unique tests are created, encrypted and placed on our secure WebETest® server.

Requests for electronic flexible testing are accommodated **the same day** they are received and payment verified. We also have a very efficient walk-in model that we developed for use in Utah that is available and may be applicable in West Virginia at some point. (Works nicely at Vocational or College/University test sites.)

In conjunction with the three person testing team, our unique two flight testing model first ensures that no more than eight candidates are on-site at a time, because half the candidates for the day (up to 16 total) are scheduled into the “morning” flight, and half are scheduled into the “afternoon” flight. Secondly our two flight testing schedule typically guarantees that in any flight, one candidate has no wait time between tests, one candidate has a maximum of 80 minutes of wait time, while the other six candidates have wait times somewhere between zero and forty minutes.

Paper tests and pre-printed scan forms are individually created and mailed to the observer’s home address, arriving at least 48 hours prior to the test date. Oral requests are accompanied by the appropriate cassette tape/audio CD/digital audio device, and it is required that the observer have a cassette/CD player/digital audio device with headphones available. The written test proctor verifies the candidate’s photo ID (proof of identity) before distributing materials. Candidates proof their own demographic data on the pre-printed scan forms and report discrepancies to the proctor as another feedback loop, double check, of all data entry. Test numbers are printed on candidates’ answer scan forms to make certain each candidate is testing from the appropriate test booklet. Note: The **only “bubbles” completed by a candidate** on their scan form are their knowledge test answers.

Electronic Knowledge Tests are stored and encrypted on one of our secure FTP servers, and testing may not begin until the RN observer “unlocks” the tests with a unique ID and secure pin number. The written test proctor verifies candidates’ photo IDs and compares their photo ID signatures to their signatures on the sign in sheet (form 1250) before testing can begin. Any previously made data entry mistakes are trapped at the front end of the testing process by having candidates “proof” their own demographic information prior to beginning the written test. For electronic exams, written test items are presented one at a time on the monitor with redundant and intuitive navigation controls to ensure the most benign testing anxiety levels. The written test proctor must “log” the candidate out with a log out password at the conclusion of the electronic exam, and once logged out; the test and answers are encrypted and further access to the test, by anyone except official D&SDT scoring staff, is denied.

Paper skill test observation results are “slugged / bubbled” onto the backside of the pre-printed answer scan form by the RN observer only after the candidate has recorded their answers for the knowledge test questions on the front side of the scan form. Every incorrectly performed or unperformed step marked by the observer must be accompanied by an explanation as to why the candidate missed that step. Every failed step and its explanation is double checked by the Findlay two person scoring teams when official scoring takes place the same day the test is received back from the test site.

Electronic Skill Tests can be entered in one of two ways.

If a computer, or handheld PDA device or tablet/smart phone connected to the Internet, is available in the skill lab, the observer can go “live” and put his/her, accomplished the step, check marks in each box in front of each step on each task as they watch the candidate perform the steps. Observers must describe (in a text box) any unperformed (unchecked boxes) or incorrectly performed steps, or the software won’t allow him/her to submit the candidate’s results. This is the model we would suggest OHFLAC staff strongly consider for approval with the RN observers using smart phones or tablets in the **all electronic, mobile testing lab, scenario** that certainly should be strongly considered. This conversion to WebETest© could also proceed on a volunteer basis as it has in some of our states.

For skill labs without a computer/tablet, the observer can print out the individual candidate’s skill tests. (Securely, from home, before going to the test site or using one of the test site’s written test computers prior to tests beginning) The observer then marks the printed skill test like it was a paper skill test event. The marks are then transferred into the appropriate check boxes on an Internet connected computer before leaving the test site. The paper skill tests that were used at the test event are then shredded before leaving the test site or taken home and shredded within 24 hours. This is a contractual commitment that the observer must commit to and abide by in order to conduct WebETest© events in this manner.

On-Site Scoring: It is worth noting that the option exists to correct the test(s) on site, though we’d prefer to score all tests using trained D&SDT two person scoring teams in the Findlay office. Even if we did score tests on site the

results would not be considered official until final proofing by our Findlay scoring teams. Given our same day turnaround benchmarks for scoring received tests, we believe any advantage gained by scoring tests on site is more than outweighed by the disadvantages listed below. The scoring bias introduced just isn't offset, in our minds, by the instant "unofficial" gratification for candidates. This **IS** after all a **serious** certification test and process. We are convinced the consistency and reliability of NA and AMAP testing is enhanced by having an 'off test site', independent scoring team, performing all scoring.

To unofficially score paper and pencil tests on-site, the observer must use an answer key template to score the test and this gives rise to many problems including security of answer templates, scoring accuracy, time needed on site to perform the scoring task, taking away from the efficiency of the RN observer. Additional on site scoring issues are added pressure on observers when candidates fail, possibly placing the RN observer at risk in the event of a disgruntled, failing candidate. There is also a general lack of consistency in scoring due to circumstances that may arise at any given test event on any given day.

In the WebETest® electronic version of the test, printing unofficial results on-site for each candidate is accurate and doesn't totally place the observer in the position of scoring the test since the computer scores the test and the observer merely disseminates the unofficial results. Even given this argument, we are still averse to putting any of our observers in a potentially hostile situation. We always stress safety first at the test sites. Costs of paper, printing costs or computer network issues are also known to crop up in this scenario, further impacting the efficiency and consistency of the test event.

Preferred Official Scoring Model: At the conclusion of a paper event, the observer returns testing materials to our Findlay office using a pre-paid envelope, and for West Virginia we will use a two day traceable mail carrier. For an electronic event, return is accomplished with a few mouse clicks, an email is "triggered" to D&SDT staff alerting them to the fact that test event materials are completed, encrypted and secure on our WebETest® server, and official scoring can commence immediately.

Our scoring policies include scoring tests and reporting results the same day testing material is received, and having each score result double checked by trained D&SDT staff. That same day, candidates and training programs are mailed (or emailed a secure link to) official results detailing the tasks failed, all **steps missed** on the skill exam, and subject area breakdown by percentage with a **vocabulary list** pointing out vocabulary weaknesses on the written exam. In addition, a list of successful candidates is available for immediate import into the West Virginia on-line registry system and the results information is immediately available and included in the secure, on line, training program reporting features available to authorized stakeholders that have been given some level of access to their data.

Bottom Line: D&SDT consistently delivers same or next business day electronic or second business day official scoring of paper exams. Anxious candidates, training programs, or employers can call our office using a toll free number, and our staff will answer 100% of the phone calls by the third ring and give callers their results upon verification of the caller, if desired by OHFLAC staff. Test results are securely available on line for candidates with Internet access. Successful candidates could also be confirmed using the online NA registry search capabilities, depending on the timeliness (an automatic script perhaps?) of data being imported into the WV registry. Since official results are mailed the same day D&SDT receives them, printed results typically arrive at the candidates mailing address in no more than three days, dependent on postal delivery service times. Candidates, who have provided us with an email address, receive an email alert the same day official scoring occurs with a link to securely check their results online. Pre-designated training program personnel receive detailed email results for their candidates the same day tests are scored and can access their online composite training reports for any time frame desired.

The complex adaptive system (page 71) that D&SDT brings as its testing model has proven to trap problems and self correct all processes and procedures in exceedingly short turnaround time frames. Please question our references in detail about our ability to be proactive and get ahead of potential problems, rather than reacting to issues that can quickly become unmanageable.

Browse to <http://www.dandsdiversifiedtech.com/cgi-bin/WebPsycho/chart?StateAbbrev=OH> to see a sample of the real time ItemMaster® software portal for Ohio. Desired psychometric information is available securely for all our clients on demand! We are the only testing vendor in the business that offers our clients this level of psychometric information.

We also prefer at least a yearly face-to-face contract review meeting to provide relevant statistical data interpretations for OHFLAC staff along with feedback and recommendations from an ongoing TAP appointed by OHFLAC to look at all ways to improve the NA - AMAP testing and training programs in West Virginia.

- a. As detailed throughout this response D&SDT staff is very security minded and we are proactive in protecting the security of all materials and processes. Our entire testing model is predicated on self correcting feedback loops at all levels of the program. A customized exit survey is developed for each client and results are available through the Agency portal, on demand.
- b. Every candidate proofs their own demographic information prior to successful completion of their training program. Each candidate proofs their own demographic information prior to taking the knowledge exam. Both these interactive feedback points help insure accurate information ultimately is sent to the WV registry.
- c. See the process detailed in 17.
- d. Candidate personnel information is only gathered for and shared with WV state agencies as required under contract. The candidate's information is encrypted whenever stored in any D&SDT data base. Candidates' test ID numbers are utilized for communications with the candidates.
- e. RN observer, actor and KTP certification materials, that must be approved by OHFLAC staff prior to use, emphasize security measures that must be followed before, during and after the test event.
- f. D&SDT reports any alleged security breach within four business hours of discovery to designated OHFLAC staff. Investigation proceeds immediately and all facts are shared with OHFLAC staff as they are gathered. Correction strategies are mutually formulated and implemented to prevent similar conditions causing future issues.
- g. OHFLAC staff will be apprised of quality assurances issues immediately upon discovery and we will always work in concert with OHFLAC staff to insure the highest levels of performance possible.

19	Distribution and transfer of evaluation results
----	---

- a. Program pass/fail data is securely available 24x7 for any time frame entered through the training program portal provided. The Agency has the similar access for state wide data listed by training program for any time frame entered.
- b. Daily results will be securely available, in a suitable format, for the WVDHHR server including all the fields specified.
- c. For electronic results, candidates may securely login and view their test results the same day officially scored. Depending on the time of day when a test was completed this could be the same day the test was taken or no later than the next business day.
- d. See page 33
- e. Official results for backup paper testing are available securely on line the same day scored which is dependent of mail times in the order of two business days.
- f. The results 'score card' and all candidate data is available securely on line for any stakeholder OHFLAC staff authorizes for access, immediately upon completion of official scoring and double checking. We aren't sure why the 30 working day criteria would be pertinent when all data and reports are available 24x7 at the level of access OHFLAC staff deems appropriate for each stakeholder.

20	Reporting Requirements
----	------------------------

Filtered reports are available on demand through the provided secure Agency portal to include the desired 40% or below report, listed by training program, for competency evaluation failures. Additionally, all the requested report information is available 24x7, for any time frame entered by designated Agency staff, through the secure, online Agency portal provided, into the entire data set.

Test results are **immediately**, securely, available online, upon completion of 'official scoring' and double checking, for authorized/designated training program staff, candidates and any others the Agency may

decide to grant some level of data access to. All this is through the stakeholder portals we provide into WebETest. The reports show variances from state wide norms and training details are provided all the way down to the most missed steps on individual skill tasks, as well as, the most missed vocabulary words on the knowledge tests. The training reports can be customized to include whatever information OHFLAC staff would like to release to training programs just by enabling or disabling 'buttons' on the portal screen as seen next and turning on or off data fields for a particular report. Test results are always available 'whenever needed' for Agency staff in a secure, encrypted agreed upon format. We provide all the requested reports securely, 'real time', on demand, 24x7 for Agency staff.

OR CNA Client Login - Microsoft Internet Explorer

File Edit View Favorites Tools Help Links

OREGON
State Board of
NURSING

D&S Diversified Technologies
State Client Login

Nursing Assistant

Please enter your
pin number

Click HERE to select the start date
mm/dd/yyyy

Click HERE to select the end date
mm/dd/yyyy

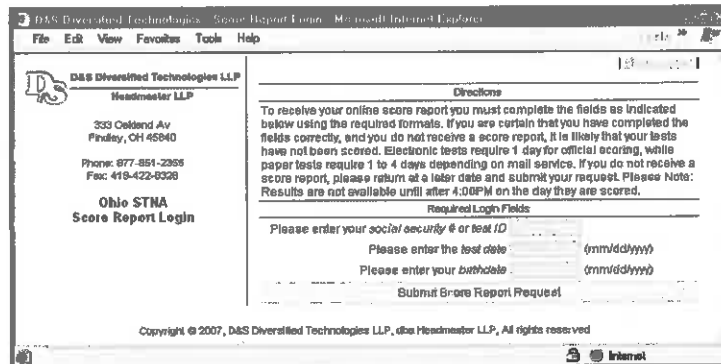
As a client you have been granted read only access to candidate records and reports. The database will be updated nightly during low traffic times.

Retake Summary	Travel Summary
Scheduled Exams	Testing Trends
Cut Score Study	Test Site Summary
Candidate Search/Details	Facility Listing
Recently Scored Results	
No Scores <input type="checkbox"/> Find... All <input checked="" type="radio"/> Passed <input type="radio"/> Failed <input type="radio"/> No Show <input type="radio"/>	
Training Details (ALL=state totals)	
Facility <input type="radio"/> Written <input checked="" type="radio"/> Skills <input type="radio"/>	
Training Breakdown by... Instructor <input checked="" type="radio"/> Program <input type="radio"/>	
Training Summary	Pass/Fail
Exit Survey Summary (by month)	
Unabridged Schedule	
Testing Opportunities	

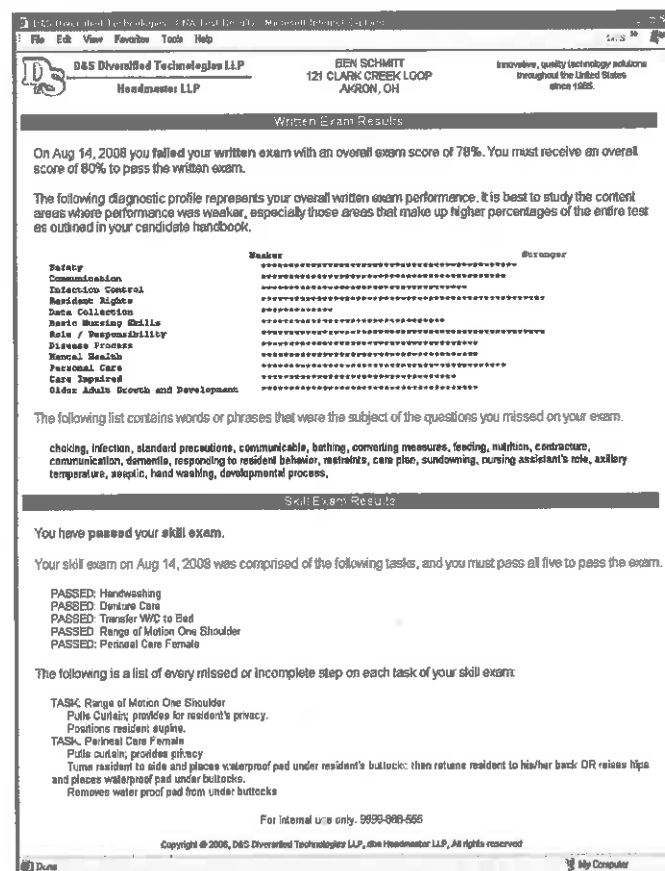
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Internet

Bottom Line: D&SDT consistently delivers same day (electronic) and next day, or second day **official scoring** of paper exams. Anxious candidates, training programs, or employers can call our office using a toll free number, and one of our highly qualified, cross trained, staff will answer the phone by the third ring and, upon verification of the caller, release his/her results. Successful candidates can be confirmed using the OHFLC Registry. Since results are mailed the same day D&SDT receives them, printed results typically arrive at the candidates mailing address the next day or no more than three days, depending on US Postal delivery service times. Candidates with an email address in our system will receive a secure link to their results the **same day scored**, and results are securely available after 5:00PM ET the day scored using the following WebETest® portal



with results presented similar to the following:



Please note that D&SDT prides itself in being able to deliver new reports in a timely fashion to meet the changing needs of regulatory agencies. One such agency needed data to support an argument surrounding whether or not to release skill steps missed on results letters. Within four hours from receipt of the request we provided the interface and our client was able to generate the following report:



**All Training Programs
Skill Retakes: Jan 01, 2012 to Jun 30, 2012**

Handwashing				
###	Step	Att#1	Att#2	Att#3
-----+-----		=====	=====	=====
	1. Knocks on door.	94%	95%	96%
	2. Introduces him/her self to the	92%	93%	93%
	3. Turns on water.	100%	100%	99%
	4. Thoroughly wets hands.	99%	99%	99%
	5. Applies liquid soap to hands.	100%	100%	100%
	6. Rubs hands together for 20 seco	98%	98%	98%
	7. Using friction, rubs interlaced	100%	100%	100%
	8. Cleans under finger nails.	95%	98%	99%
	9. Washes all surfaces of hands an	99%	100%	100%
	10. Rinses hands thoroughly under r	100%	100%	100%
	11. Dries hands on clean paper towe	100%	100%	100%
	12. Turns off faucet with a SECOND	98%	98%	98%
	13. Discards paper towels to trash	100%	100%	100%
	14.*Does not re-contaminate hands at	95%	95%	98%
-----+-----		=====	=====	=====
Number of Candidates		2982	864	188
Pass Rate		95%	95%	98%

OHFLAC staff is also always welcome to call and have D&SDT staff generate and provide any report(s) desired.

The following includes a sampling of the existing reports. If OHFLAC needs a report that we don't currently provide, we can generally provide a new report on existing data in a matter of hours.

Exit Survey Summary: An up to the day view of how candidates have responded to the D&SDT customized and approved exit survey. 2012 survey data for Ohio is summarized as follows:



Client Report

Exit Survey Summary: Jan 2012 to Dec 2012

1. I received my test confirmation card				
1 or 2 days	1614	11.5%	*****	
3 to 5 days	3542	25.3%	*****	
More than 6 days	7137	51.0%	*****	
I did not receive a	803	5.7%	***	
I did not receive a	697	6.4%	***	
2. How many miles ONE WAY did you travel to take the exam?				
Less than 15 miles	7331	52.4%	*****	
Between 15 and 30 mi	4333	31.0%	*****	
Between 30 and 60 mi	1802	12.9%	*****	
Between 60 and 90 mi	400	2.9%	+	
More than 90 miles	122	0.9%		
3. The testing area was comfortable and free from distractions.				
Strongly agree	8733	69.6%	*****	
Agree	3598	25.7%	*****	
No opinion	354	2.5%	+	
Disagree	266	1.9%	+	
Strongly disagree	40	0.3%		
4. The Test Observer was professional, courteous, and respectful.				
Strongly agree	12037	86.0%	*****	
Agree	1779	12.7%	*****	
No opinion	128	0.9%		
Disagree	31	0.2%		
Strongly disagree	14	0.1%		
5. The equipment at the test site was/is in good working condition.				
Strongly agree	10264	73.4%	*****	
Agree	3170	22.7%	*****	
No opinion	377	2.7%	+	
Disagree	138	1.0%	+	
Strongly disagree	36	0.3%		
6. I feel my training program prepared me well for this exam.				
Strongly agree	8617	61.6%	*****	
Agree	4168	29.8%	*****	
No opinion	777	5.6%	***	
Disagree	339	2.4%	+	
Strongly disagree	87	0.6%		
7. I was able to find the Test Site with the directions provided.				
I found it easily.	12891	92.2%	*****	
I required an additi	503	3.6%	++	
I found it on my own	437	3.1%	++	
I arrived just in ti	150	1.1%	+	
8. The facility provided adequate signage to assist me in locating the testing area.				
Strongly agree	9356	66.9%	*****	
Agree	3277	23.4%	*****	
No opinion	901	6.4%	***	
Disagree	289	2.1%	+	
Strongly disagree	161	1.2%	+	

Part 3.4 – Scope of Services



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New Test Results: A list of candidates and their test results, generated between any user selected dates.

Results scored from Feb 27, 2013 to Feb 28, 2013						
####	Candidate	Status	tDate	Site	Scored	Hold
1.	ARMSTRONG, JENNIFER	Passed	02/26	YOUN-Windsor Resourc	02/27/2013 07:42	
2.	BAILEY, SHERRY JO	Failed	02/23	CLEV-TRINITY TRAININ	02/27/2013 10:11	
3.	BASS, BORRY	Passed	02/23	COLU-PREMIER CHOICE	02/27/2013 09:22	
...						
96.	WILLIAMS, COLLEENA	Passed	02/23	CLEV-TRINITY TRAININ	02/27/2013 10:09	
97.	WILLIAMS, DALAYJA TABREE	Passed	02/23	BEAC-Montefiore Home	02/27/2013 09:32	*HOLD
98.	WILLIAMS, TAWNYA A	Failed	02/23	BEAC-Montefiore Home	02/27/2013 09:33	
99.	WOMACK, MEKOL KEYOSHE	Passed	02/23	REYN-FRONTIER HEALTH	02/27/2013 09:42	

Travel Summary: How far candidates have traveled to take the exam based on the central longitude and latitude of their recorded zip code and the zip code of the test site. Note that for the time frame included that nearly 99% of the candidates tested in Ohio tested within 60 miles of their residence.

Travel Summary: Jan 01, 2013 to Feb 28, 2013					
Dist (mi)	Count	****	Total		
0- 9 (1243)	51.1	51.1	*****		
10- 19 (731)	30.1	81.2	*****		
20- 29 (227)	9.3	90.5	*****		
30- 39 (136)	5.6	96.1	*****		
40- 49 (41)	1.7	97.8	**		
50- 59 (21)	0.9	98.6	*		
60- 69 (14)	0.6	99.2	*		
70- 79 (6)	0.2	99.5			
80- 89 (2)	0.1	99.5			
90- 99 (1)	0.0	99.6			
100- 109 (3)	0.1	99.7			
120- 129 (1)	0.0	99.8			
130- 139 (2)	0.1	99.8			
140- 149 (1)	0.0	99.9			
170- 179 (1)	0.0	99.9			
520- 529 (1)	0.0	100.0			
=====	=====	=====	=====		

Test Site Summary: By date, how many candidates have tested at individual test sites, and the number passing, failing or no-showing.

Part 3.4 – Scope of Services



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Test Site Summary: Jan 01, 2013 to Feb 28, 2013								
Facility	ID	Test Date	Written			Skills		
			Pass	Fail	NoSh	Pass	Fail	NoSh
D&M TESTING	9910	01/11/2013	5	3		4	2	
		02/09/2013	2	7		4	5	
		-Sub Totals-	7	10		8	7	
D&S TRAINING CENTER	1659	01/05/2013	2	1			2	
		01/12/2013	5			4	1	
		01/19/2013	1	1		3		
		02/02/2013	4	1	2	3	2	2
		02/16/2013	1		1	2		1
		02/23/2013	3	2	1	1		1
		-Sub Totals-	16	5	4	13	5	4
=====			=====			=====		
= Totals =			1529	725	182	1614	414	156

Retake Summary: By training program, how candidates have fared on their 1st, 2nd, and 3rd written and skill test attempt. We apologize for the size of the following fonts, but reporting massive amounts of data requires significant space allocation!

Retake Summary: Jan 01, 2012 to Dec 31, 2012													
Facility	#ID#	+-----Written-----+						+-----Skills-----+					
		Att1	%%	Att2	%%	Att+	%%	Att1	%%	Att2	%%	Att+	%%
A+ HEALTH CAREER, LLC	1969	24	58	6	50	4	25	24	67	4	100		
AARON ACADEMY	1961	4	50	1	100			4	50	2	100		
Abbone Care, Inc	1914	62	63	7	57	3	33	62	66	9	56	3	33
...													
Whitmer Career & Technology Center	0893	16	69	5	80			16	81				
Woodsfield Nursing & Rehab. Center	1006	14	57	7	43	2	50	14	100	1	0		
YOUTHBUILD COLUMBUS COMMUNITY SCHOOL	2023	6	100					6	100				
Totals		15865	77	2641	48	845	40	15865	82	1885	76	297	72

Training Summary: How individual training program success rates compare to the state wide average (variance from the norm) for the written test, skill test, and overall pass rate.

Training Summary: Jan 01, 2012 to Dec 31, 2012										
Facility Totals	ID#	Written	%%	Var.	Skills	%%	Var.	Total	%%	Var.
A+ HEALTH CAREER, LLC	1969	34	53	-18	28	71	-9	26	69	-10
AARON ACADEMY	1961	5	60	-11	6	67	-14	5	80	+1
Abbone Care, Inc	1914	72	61	-10	74	64	-17	66	64	-15
...										
Whitmer Career & Technology Center	0893	21	71	+0	16	81	+0	17	76	-3
Woodsfield Nursing & Rehab. Center	1006	23	52	-19	15	93	+13	16	75	-4
YOUTHBUILD COLUMBUS COMMUNITY SCHOOL	2023	6	100	+29	6	100	+19	6	100	+21
Totals	xxxx	19351	71		18047	81		16981	79	

Part 3.4 – Scope of Services

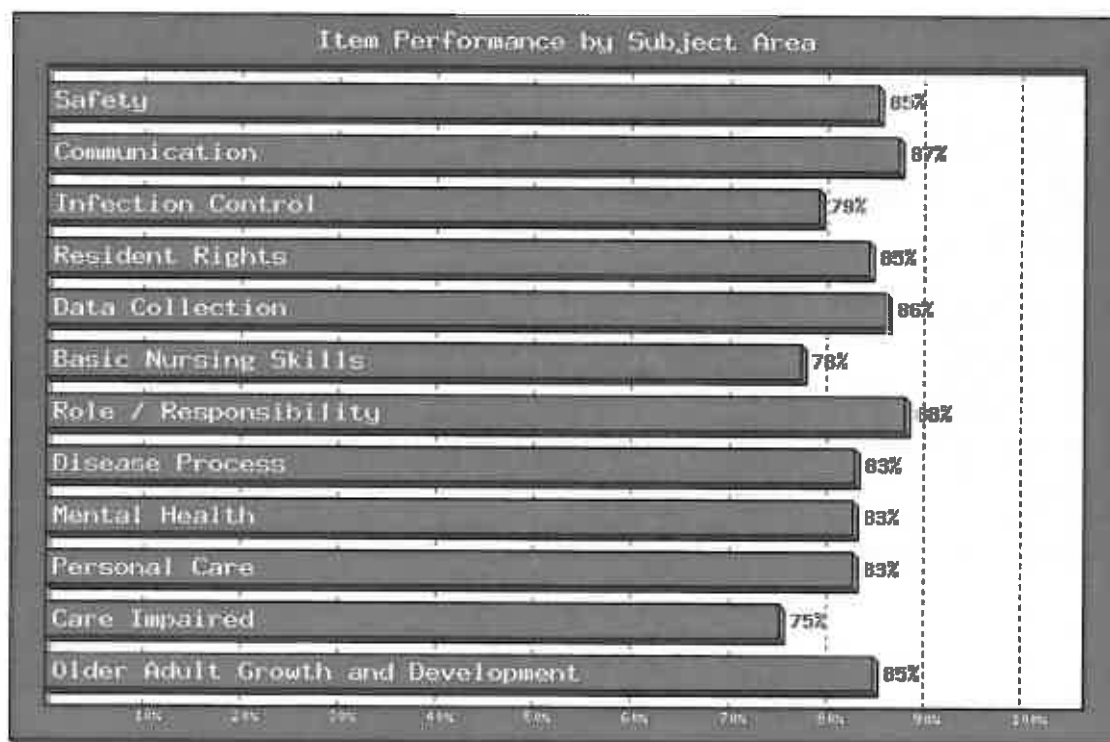


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Written Training Details: This report is also securely available for each training program and is a very important feedback loop in our Complex Adaptive System. Utilizing this feedback improves the level of training and competency of registered long term care nurse aides candidates going into the work force over time. The report shows how candidates for a selected program (or statewide) have fared on each subject area in the approved test plan, and knowledge test vocabulary phrases sorted by how often they have been missed. This is a powerful feedback tool for instructors and training programs and speaks directly to the 1999 Standards for Employment and Credentialing in a way that is unique to our testing model.

<p align="center">1659-SAMPLE TRAINING CENTER 333 OAKLAND AVE FINDLAY, OH 45840 Written Exam Details: Jan 01, 2012 to Feb 28, 2013 Printed: Feb 28, 2013 13:30.41</p>	
Safety	85%
Communication	87%
Infection Control	79%
Resident Rights	85%
Data Collection	86%
Basic Nursing Skills	78%
Role / Responsibility	88%
Disease Process	83%
Mental Health	83%
Personal Care	83%
Care Impaired	75%
Older Adult Growth and Development	85%

Note: Many of our reports can be generated by OHFLAC staff or training programs/instructors in graphics format by simply checking a box.



Number of Candidates have missed test items whose question or correct answer contain, reference, or

Part 3.4 – Scope of Services



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Times Missed	imply these vocabulary words or phrases (n%) = probability of missing that term
19	dying process(20%)
16	range of motion(16%)
14	personal protective equipment(21%)
12	cyanosis(67%), feeding resident(26%), privacy(34%), sterilization(18%)
11	adduction(61%), ambulation(25%), communication(8%), dyspnea(61%), nonverbal communication(35%)
10	personal possessions(34%), responding to resident behavior(17%)
9	abduction pillow(50%), bargaining(53%), diabetes(10%), grieving process(53%), mouth care(21%)
8	emphysema(28%), perineal care(9%), personal care(28%)
7	axillary temperature(21%), blood pressure(11%), charge nurse(7%), CVA(24%), phantom pain(44%), physical needs(41%), resident's families(23%), tendons(39%)
6	apical(38%), dementia(9%), dysphagia(13%), emotional needs(18%), eye glasses(33%), reporting abnormal changes(4%), social well being(33%), transferring(7%), visually impaired(19%)

Skill Training Details: Also available to training programs, this report indicates how candidates for a selected program (or statewide) have performed on each skill task and on **every step** (also unique to our testing model) for each skill task administered, feedback we feel is necessary for training programs to improve over time and directly speaks to the 1999 Standards for Employment and Credentialing.

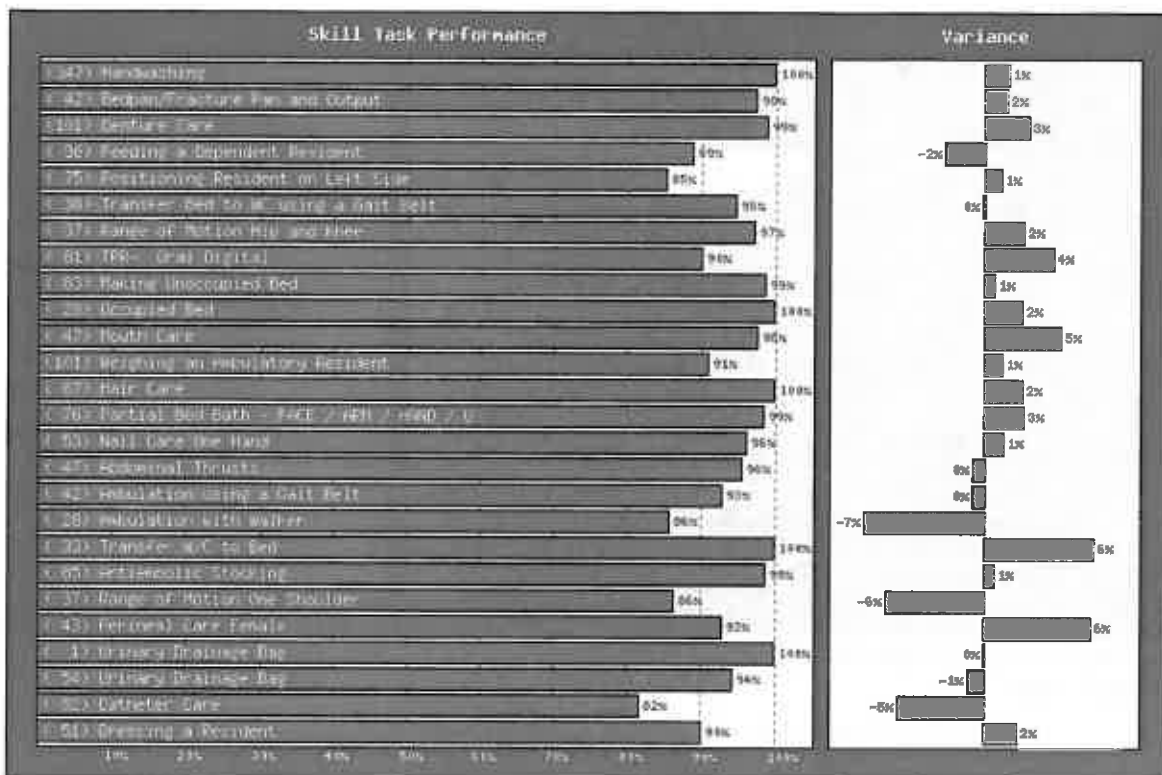
1659-SAMPLE TRAINING CENTER 333 OAKLAND AVE FINDLAY, OH 45840 Skill Exam Details: Jan 01, 2012 to Feb 28, 2013				
Skill Summary	Tested			Var.
Handwashing	(347)	-----100%		+1%
Bedpan/Fracture Pan and Output	(42)	-----98%		+2%
Denture Care	(101)	-----99%		+3%
Feeding a Dependent Resident	(36)	-----89%		-2%
Positioning Resident on Left S	(75)	-----85%		+1%
Transfer Bed to WC using a Gai	(38)	-----95%		0%
Range of Motion Hip & Knee	(37)	-----97%		+2%
TPR, Oral Digital	(81)	-----90%		+4%
Making Unoccupied Bed	(83)	-----99%		+1%
...				
Ambulation using a Gait Belt	(42)	-----93%		0%
Ambulation with Walker	(28)	-----86%		-7%
Transfer W/C to Bed	(33)	-----100%		+6%
Antiembotic Stocking	(85)	-----99%		+1%
Range of Motion One Shoulder	(37)	-----86%		-6%
Perineal Care Female	(43)	-----93%		+6%
Urinary Drainage Bag	(1)	-----100%		0%
Urinary Drainage Bag	(54)	-----94%		-1%
Catheter Care	(82)	-----82%		-5%
Dressing a Resident	(51)	-----90%		+2%

Part 3.4 – Scope of Services



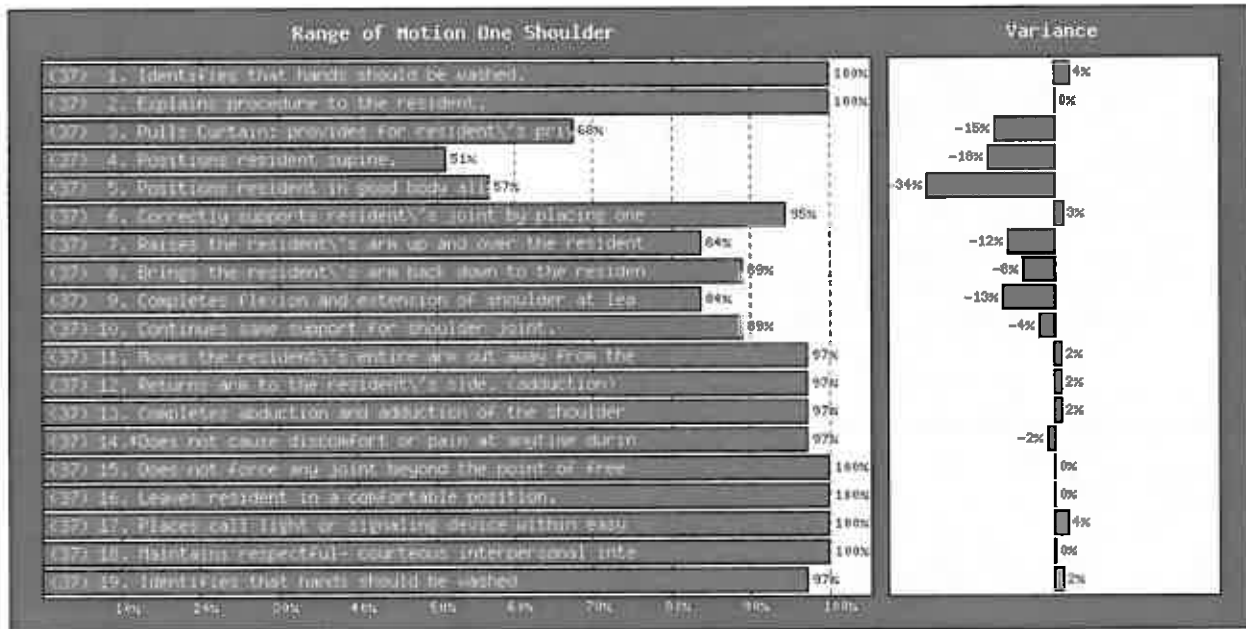
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Range of Motion One Shoulder		
##	Step	Var.
###		=====
1.	Identifies that hands should b	100%
2.	Explains procedure to the resi	100%
3.	Pulls Curtain; provides for re	-15%
4.	Positions resident supine.	-18%
5.	Positions resident in good bod	-34%
6.	Correctly supports resident's	+3%
7.	Raises the resident's arm up a	-12%
8.	Brings the resident's arm back	-8%
9.	Completes flexion and extensio	-13%
10.	Continues same support for sho	-4%
11.	Moves the resident's entire ar	+2%
12.	Returns arm to the resident's	+2%
13.	Completes abduction and adduct	+2%
14.	*Does not cause discomfort or p	-2%
15.	Does not force any joint beyon	0%
16.	Leaves resident in a comfortab	0%
17.	Places call light or signaling	+4%
18.	Maintains respectful, courteou	0%
19.	Identifies that hands should b	+2%
		=====

Note how the steps that have been underperformed "pop" when presented in graphics format.

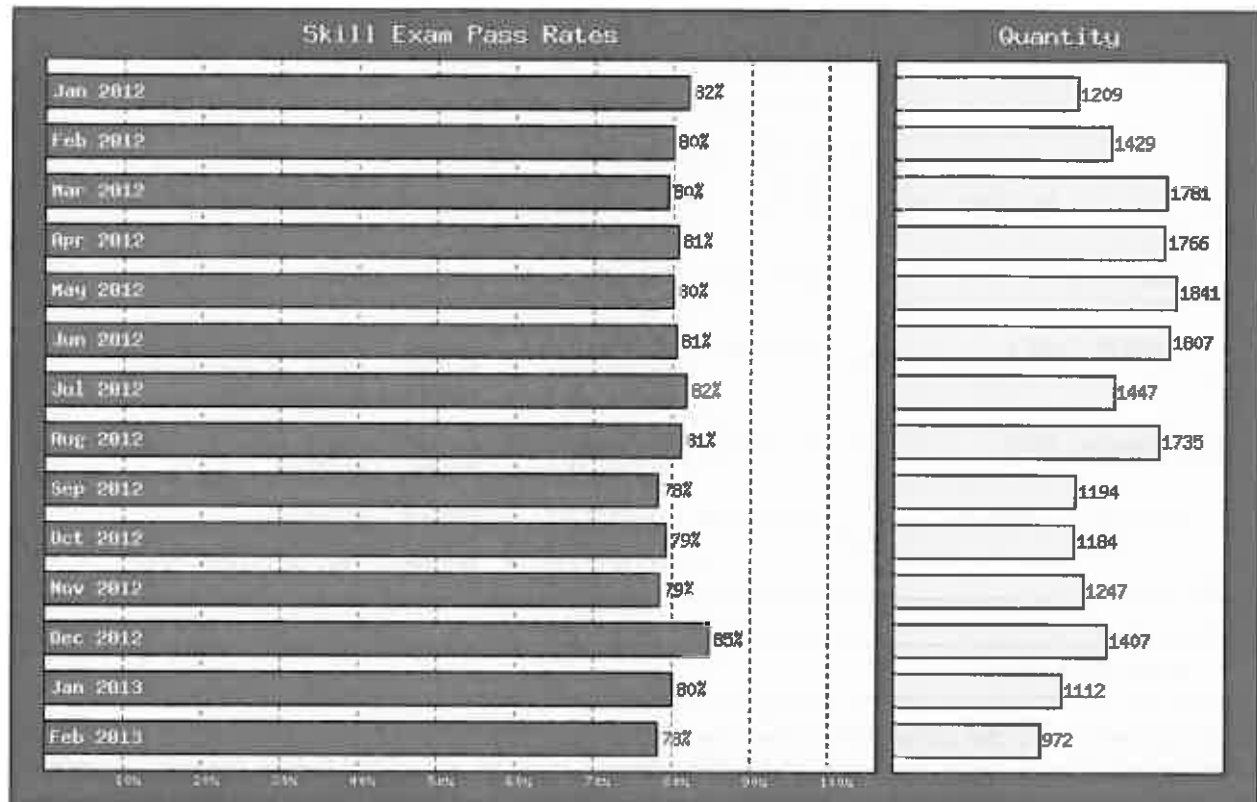


Testing

Trends: How the pass rate for the written and skill components and the no-show rates have fluctuated over any desired period of time.

Skill Exam Pass Rates			
Jan 2012 (1209)	82%	=====	
Feb 2012 (1429)	80%	=====	
Mar 2012 (1781)	80%	=====	
Apr 2012 (1766)	81%	=====	
May 2012 (1841)	80%	=====	
Jun 2012 (1807)	81%	=====	
Jul 2012 (1447)	82%	=====	
Aug 2012 (1735)	81%	=====	
Sep 2012 (1194)	78%	=====	
Oct 2012 (1184)	79%	=====	
Nov 2012 (1247)	79%	=====	
Dec 2012 (1407)	85%	=====	
Jan 2013 (1112)	80%	=====	
Feb 2013 (916)	79%	=====	

Again note how the trends in testing volume are accentuated in graphics mode.



Part 3.4 – Scope of Services



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Candidate Details (Pass Fail Report for training programs): Candidate specific written pass/fail information, skill task pass/fail information, and overall pass rates.

Pass / Fail Report by Training Program						
Testing Period : 01/01/2013 - 02/28/2013						
4012:D&S DT TESTING CENTER						
	Written	%%%	Skill	%%%	Total	%%%
Facility Total	32/36	89%	28/36	78%	26/36	72%
Candidate	Comp. Date	Test Date	Rtk Result	Test		
SCHMITT, BEN L	10/19/2012	01/27/2013	Failed - Positioning Resident			
		01/27/2013	Failed - Range of Motion Hip			
		01/27/2013	Passed Written			
DORRANCE, PAUL	11/15/2012	01/28/2013	Passed Skill			
		01/28/2013	Passed Written			
UNDERWOOD, JENNIFER	11/15/2012	01/28/2013	Passed Written			
		01/28/2013	Y Failed - Handwashing			
		01/28/2013	Y Failed - TPR, Axillary Temp			

21 Repeat Evaluations

We can set parameters in the software for repeat testers, to trap the number of times a candidate can retest for a valid training period and in what time frame the attempts must be completed before the training period expires. No candidate will ever receive the same test a second time. Candidates may reschedule themselves into subsequent test events, for which they qualify, on line by themselves, with their training programs assistance, or by calling our toll free number during regular business hours.

Project B: Educate-the-educator curriculum & workshop.

D&STC (D&S Training Center) has provided TTT (Train-the-trainer) workshops in Ohio using curriculum we developed that meets Federal and Ohio standards for TTT programs. We will provide curriculum, that meets all WV requirements for Educate-the Educator training, for OHFLAC staff to approve prior to providing any Educate-the Educator training services in WV. We will provide the agreed upon number of workshops regardless of enrollment for the first contract year and then provide sufficient workshops to meet the demand in subsequent contract years, which may be more or fewer than the number provided during the first contract year. We will work closely with OHFLAC staff to optimize the sessions needed/desired. Our technology allows us to accurately forecast subsequent demand once we have historical information. Ideally we'd provide a class whenever demand warrants and with our electronic scheduling software we can accurately predict when the next workshop should be conducted! In the interest of open communications we look forward to working with all stakeholders to fill this important training role in West Virginia.

1 Training course for primary instructors and coordinators

The Train-the-trainer course curriculum we developed, have approved and use for instruction in Ohio is 334 pages of information which is the central core of our TTT instruction taught during a four day workshop in our training facility in Findlay, OH. The course is conducted by an Ohio Department of Health approved RN instructor with years of educational background and experience instructing registered long term care registered long term care nurse aides classes. We will customize (will have to take some topics out it appears) those materials to meet the needs of the WV three day Educate-the-educator workshop. We look forward to working with OHFLAC staff to customize a curriculum that specifically meets WV needs and desires covering all eleven listed topics in the time frames specified.

2 Instructional material

We will alter the Ohio regulation section of our curriculum and substitute the specific West Virginia regulations. The Federal regulation information should be good to go as well as the rest of information which is germane to education and specific to our model of testing. The materials are always subject to review and editing on an as needed basis. OHFLAC staff will also be apprised of the exit survey information we track at the end of every workshop and use this feedback loop to continually improve the curriculum after each workshop session is completed. No changes will be made to the approved course outline/curriculum or materials without OHFLAC staff approval. We now have implemented on line training courses (hdmaster.org) for Ohio DSW training and Health Care Montana. This may be a avenue to consider for portions of WV training needs going forward.

3 Certificate of completion

D&SDT will obtain approval from the WV Board of Examiners for Registered Professional Nurses to provide 24 continuing education credits to any registered professional nurse successfully completing our approved Educate-the Educator curriculum and workshop. The Agency portal will give Agency staff access to any and all required licenses, certifications and all other documentation required prior to each workshop.

4 Results

The Agency portal will give Agency staff access to reports, for any timeframe entered, to obtain needed results, on demand, about workshop participants. All required/any needed information will be provided with a few clicks of a mouse or taps on a tablet, by Agency staff. The provided reports will also track participants by status i.e. NA TCEP-Instructor; Non-NACEP-Instructor, Administrator etc.

5	Proposed site schedule
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D&SDT will provide initially provide four workshops annually at 'key' locations in West Virginia and then more or fewer as needed in subsequent years. We will work in concert with Agency staff and the stakeholders requesting workshop participation to provide an agreed upon schedule of workshops at locations minimizing the travel requirements for a majority of the participants. Online training modules for portions of the training may be appropriate under OHFLAC guidelines that may be established in the future.

6	Scheduling responsibilities
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D&SDT will make all arrangements and provide all instructional materials for the workshops as well as provide Agency staff with the results (through the Agency portal) of the approved quality assurance exit survey that we will anonymously administer as workshop participants complete workshop training. We will look to leverage our technology to facilitate participant enrollment in workshops and a myriad of potential tracking/reporting information Agency staff will then conveniently have available 24x7 for any time frame desired.

7	Instructor credentials
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We will contract with at least one instructor meeting the experience requirements as stipulated in the CRFQ. We will also approach any current instructors and ascertain their interest in continuing under contract with D&SDT, pending OHFLAC staff approval of such an approach. The third day will be conducted by D&SDT staff with an RN observer mentor utilized to demonstrate the skill tasks and other relevant information or a designated in State RN Testing Coordinator meeting the specified requirements . We have two current RN observers testing under contract in Ohio that also carry WV RN licensure and we will likely begin by utilizing these RN's as they are familiar with our processes and procedures and move toward finding and having Agency staff approval of the credentials of one or multiple RN's functioning as WV Testing/Training Coordinators.



Project C: Competency evaluation for approved medication assistive personnel (AMAP)

The TAP process will guarantee that the AMAP evaluation will meet WV Code of State Rules 64-60-1 et seq. and be current to the approved AMAP curriculum for West Virginia. We will provide the AMAP knowledge examination in both electronic and paper formats. We will not cancel events for low participation numbers.

The AMAP test will be administered by an OHFLAC certified AMAP instructor under strict security protocols approved by OHFLAC staff and agreed upon during the transition period. It is worth mentioning that one Internet connected device would allow the AMAP test to be securely proctored by a certified AMAP instructor and completely move away from any sealed paper test envelopes as, it appears to us, has been the model used in the past.

This may be a good time to brainstorm other solutions for AMAP testing and we are certainly open to facilitate any model OHFLAC staff could envision. Perhaps, the AMAP exam could be administered by one of the certified RN registered long term care nurse aides test observers or by the KTP (knowledge test proctor) working directly under the RN's direct supervision as part of a three person testing team. AMAP knowledge tests and NA knowledge tests could be administered concurrently at scheduled test events at any of the scores of test sites distributed across the state that will be part of our NA testing model in West Virginia. Test seats would be available all days of the week rather than just Saturday testing as it appears is the case currently for NA testing and the AMAP tests would not be administered by the instructor who trained the AMAP candidate, thereby increasing the confidence in and security of the AMAP test instruments.

1 Registration of eligible candidates

All clearance to test criteria will be 'included as a secure check off list' in WebETest© accessible only by authorized personnel prior to any AMAP test being released for administration. We will use the most efficient process possible and leverage our technology to the fullest to insure all criteria (approved course completion, valid CPR and First Aid certificate and criminal background check) are acceptably verified prior to allowing a candidate to test. This is similar to the approval process we have in place in Oregon. Oregon just renewed their NA and MA testing contracts with us for a SIX year term, in exchange for a price freeze guarantee for the six years!

2 Distribution of evaluation information

An approved AMAP candidate handbook will be available for download from our public web site. Class sets of handbooks will also be provided upon written request from an approved AMAP training program. Authorized AMAP training program personnel will enter candidates into WebETest© as they enroll in an approved AMAP course. D&SDT provides technical support free of charge for all AMAP approved personnel. All the value added tools included for instructors in WebETest© will be available for no extra charge. Upon successful completion of an AMAP training program and authorized completion of the instructor's affidavit, an Agency approved and statewide standardized completion of training certificate will be printed from WebETest© for each candidate to be signed and awarded to the successful candidates by the instructor. The approved completion of training certificate also includes an online verifiable 'security stamp' to prevent forgeries.



3 AMAP - registered nurse (AMAP-RN)

OHFLAC staff will have access to edit and maintain the approved AMAP instructor and facility lists in WebETest, in real time, through the Agency portal, or Agency staff can inform D&SDT staff in some fashion and we will maintain the OHFLAC staff certified AMAP-RN drop down list in WebETest. We also have contracts where our software automatically interfaces with Agency data bases to keep such lists in sync. We look forward to developing an efficient system and using automated technology to keep these lists in sync. In an alternative model where the AMAP instructors are not providing test proctoring services for the AMAP knowledge tests this list would only be needed for AMAP instructors to affirm that a candidate had successfully completed AMAP training in WebETest and then the candidate could immediately be scheduled into any available test seat in the state wide master test schedule, maintained real time in WebETest. In the case where the AMAP instructor continues to provide the AMAP test proctoring service, an unique computer test could be 'released' for proctoring immediately upon the AMAP instructor verifying that the candidate successfully completed training and testing could securely proceed in an efficient and uninterrupted flow of events.

4 Oral Version

D&SDT doesn't currently have digital waves files for any of our 1500 AMAP items. We will be able to produce those wave files before the first AMAP test event takes place and have the oral option for the AMAP



knowledge test in place before the 56 day startup period elapses. We have a skills component of our AMAP test that is used in Arizona, Ohio and Massachusetts. This model would work nicely to validate the AMAP candidate's understanding of job related information on the medication administration record. We look forward to working with OHFLAC staff to come up with a unique solution to validate candidate ability to read and understand the MAR. In Massachusetts we have laminated sheets from a MAR and written questions that reference the sheets. The candidates must be able to 'read' the laminated sheets to pick the correct multiple choice answer for any questions that show up on their knowledge test relating to the laminated sheets. Perhaps this model works well for WV purposes also?

5 Validity of tests

All the quality assurance and validity measures illustrated in Project A will also apply to the AMAP tests and all the psychometric information for AMAP knowledge test items will be available real time for Agency staff. Security of all testing material is tightly controlled from initial creation, through all reviews of materials and during test administration:

Test development takes place only under the direct supervision of a D&SDT test development manager or other designated D&SDT employee. All test development efforts are performed in secure, strictly controlled environments, and developers or reviewers never know the final form of the questions or the complete test bank content.

Each member of the OHFLAC Test Advisory Panel must sign a non-disclosure agreement. All notes and edits are shredded at the end of a test review session or secured under lock and key by D&SDT or OHFLAC personnel.

Test questions reside in a proprietary encrypted format on computers in D&SDT's offices and on our secure Web blade servers.

Individual paper tests created for candidates are mailed in sealed envelopes only to RN observer's (or approved AMAP trainers') home addresses. All paper test materials are securely returned to D&SDT in a sealed, pre-addressed, postage paid mailers. The RN observer (approved AMAP trainer) is contractually bound to only deposit the mailer in an official mail drop, never in a facility or personal mail drop, or other "out box".

WebETest® exams are encrypted and must be "unlocked" by the RN observer. After tests are unlocked by the RN observer a candidate can log into his/her knowledge test by entering his/her social security number or test ID and then two "key" codes given to him/her by the knowledge test proctor. Only one item at a time is displayed on a knowledge test screen. The knowledge test proctor must enter a password in order for a candidate to exit a knowledge test. Passwords for each authorized user are "encrypted", controlled by D&SDT staff in Findlay, and "invisible" to the user when entering a password.

6 Development of pool of written evaluation items

The number of questions on the AMAP test will be determined by the OHFLAC staff approved test plan that typically is recommended by the TAP members toward the end of the third day of initial TAP review meetings. We prefer at least a 10% sample of the active test bank of approved knowledge test questions as approved from our over 1500 active AMAP test questions. These questions have been created by subject matter experts (SME) in yearly test writing workshops conducted since 2005. (This year's session is scheduled for May 16th and 17th in the Helena, MT office building. We'd be honored to have a designated WV SME involved!) We always train the test item creators to impose strict screening parameters, during item creation, with regard to stereotypical, discriminatory or inappropriate language, followed by at least two more screening reviews before the questions even make it to Beta testing. Typically we will have an approved pool of items exceeding 700 questions at the culmination of the TAP review, Agency staff approval process. The resulting, Agency approved, customized West Virginia 'active' bank of test items, will meet the specific needs of West Virginia and be current to West Virginia AMAP practice. Three actual customized test plans for AMAP testing are included next. Notice the difference in approved test plans that resulted from the TAP process. A reading level minimum can be set as one of the

Part 3.4 – Scope of Services

parameters in the test generation software. OHFLAC staff will have final approval of any proposed test plan and the test plan is always subject to future review and refinement. Knowledge test discussions, item review, and test plan recommendations typically take two days of TAP time. We prefer small groups (2 or 3 volunteers) of subject matter experts (SME) for the OHFLAC appointed volunteer test advisory panel (TAP) participants rotated every four hours for two days, so no 'outside' content experts sees any more than 25% of the knowledge test items. Agency staff and HEADMASTER staff are present for the whole process to insure consistency of recommendations across the rotating SMEs. We would propose concurrent NA and AMAP panels working with D&SDT staff (in two separate rooms) to establish both active test banks during the same three day period. (Perhaps switching morning and afternoon participants to give 4 to 6 volunteers a full day of being on site, but looking at different content for each of their four hour sessions. We can provide lunch for the participants in this scenario and thus provide some 'bonding' time providing further benefit to the process.) We did this with four concurrent panels for the NJ startup and it worked quite nicely. All features of the test plans will be customized to OHFLAC staff needs and desires.

Software Designator	OM	KM	Insulin	RM
Attempts before retraining	2 Attempts	3 Attempts	Injection	3 Attempts
Medication Aide Subject Areas	OH	OK	OK/ADV	AR
Test Version #	55	42	42	72
Cut Score	80	70	80	80
OH/OK/AR Questions/Test	50	50	50	50
Six Rights	6	4	3	4
Affects of Medication	10	5	4	9
Allowable Routes	2	3	2	2
Controlled Substances	4	2	2	1
Medication Administration	10	12	4	13
Documentation	2	3	3	4
Error Reporting	2	2	3	4
Role/Responsibilities	8	7	4	6
Terminology	4	10	3	5
State Regulations	2	2	2	2
Advanced Inquiry Act			30	
Reading Level				8.22-8.32
Index Creation Range				83.77-84.15
Last update				5/30/10
Number of active Questions approved for		each Test Bank		
OH/OK/AR	OH	OK	Insulin	AR
Six Rights	83	44		36
Affects of Medication	159	89		103
Allowable Routes	17	32		9
Controlled Substances	44	19		10
Medication Administration	227	133		147

Part 3.4 – Scope of Services



D&S Diversified Technologies LLP
Headmaster LLP

Documentation	28	61		17
Error Reporting	24	31		21
Role/Responsibilities	90	45		55
Terminology	159	169		49
State Regulations	49	25		16
Advanced Health Admin	880	648	783	463
Total Active Questions	10/27/11	1/25/09	811	5/10/10

7 Item editing

Annual item creation workshops are held, to add new questions and to edit previous questions. Each state TAP reviews questions on an ongoing basis to maintain the highest standards for test item composition. We also utilize our online development tool in situations where collaboration without travel is an appropriate to the task at hand. We have used this unique feature of our test development capabilities extensively with the MAP contract in Massachusetts.

8 Item writer qualifications

All our AMAP questions have been developed by Subject Matter Experts (RN's will at least two years of experience in medication administration) from across our ten medication administration states. (Recently won the contract for MA test administration in TN.) We have used a group interaction, workshop format, for much of the AMAP test item creation, supplementing the workshops with our online test question creation and collaboration software for some of the item creation. We have helped most of our states develop their medication administration programs from the beginning and will provide unparalleled AMAP expertise and act as a great resource for the West Virginia AMAP testing program.

9 Approval by OHFLAC

OHFLAC staff will be an integral part of the TAP review process, thus guaranteeing final approval of every test item allowed by OHFLAC staff in the WV active test pool of knowledge questions. Additionally, the AMAP test plan and all materials associated with the AMAP contract will be approved by OHFLAC staff.

10 Final written evaluation instruments

Using our proposed TAP process and all the psychometric tools we provide for Agency staff, all desired knowledge test outcomes will be under complete Agency staff control as never before imagined! See Project A - 7 for a detailed sequence of the process used to establish knowledge test instruments. OHFLAC staff will be provided with enough detailed feedback to fulfill their oversight function and make changes and map future strategies. Further, as historical knowledge test data builds a predictive data base, OHFLAC staff will be able to leverage the data toward desired testing outcomes always meeting the state requirements listed in WV code 16-50-1 et seq. The number of questions agreed upon for the AMAP test plan can change from time to time if desired by Agency staff. The reading level for the MA test typically falls around eighth grade on the Flesch-Kincaid reading level scale. For the paper knowledge test a separate 'personalized and preprinted' scan form answer sheet is utilized. We typically provide 12 test forms and rotate three of the test forms out of the mix each quarter, thus providing a complete changeover of test forms each year. We doubt the test volume is sufficient to warrant monthly rotation of testing but certainly will discuss that strategy with Agency staff upon contract award. We can manage test rotation cycles in any fashion that is prudent to the testing volume and situation. We can also generate a unique test with every test generated if the daily rotation issue is truly a problem. Once we understand what is driving the parameters requested here we will be able to provide a scheme to insure the integrity of the AMAP test.

11 Minimum passing score

Refer to Project A - 11. We believe the 'minimally competent' candidate exists on the ability scale in the -.6 to -.8 range and will recommend a cut score that falls in that ability range based on the average test information function (TIF) curve for comparable tests created from the questions, that are ultimately approved, as the active AMAP questions in WV, all utilizing the TAP review process presented herein and based on the Agency approved test plan for AMAP. All this will become logically clear for OHFLAC staff during the TAP process. Ask any of our references about this process to learn more about the valuable outcomes the process will bring to WV.

12 Evaluation processing

We will use RN observers (or AMAP approved trainers), or KTP under the direct supervision of an RN observer at a scheduled test event. The RN testers/AMAP trainers and their testing teams are certified yearly, to administer the AMAP knowledge tests under approved D&SDT and OHFLAC guidelines and acceptable procedures. We can also 'fit' into the current model for AMAP testing in WV, but would ask for OHFLAC staff to at least consider taking another path toward a more secure model that will reduce inherent testing bias introduced with the current AMAP testing model.

13 Final form and documentation

See proposed startup/transition timeline on page 83. D&SDT will secure OHFLAC staff approval for AMAP test instruments and testing processes and procedures well in advance of the requested four weeks after award of contract. Essentially at the end of the TAP review process we will be ready to proceed with the Agency approved test plan and approved comparable test forms.

14 Certificate of completion

We will provide a WV customized and approved, state standardized, certificate of completion with a security stamp that is verifiable online to eliminate forgeries. The Agency approved certificate of completion will only print out of WebETest for (and by) an instructor after they have verified the accuracy of each candidate's demographic information and securely verified successful completion of training. (See customizable sample certificate as presented previously in 2.) We will provide phone support and training for the 727 approved AMAP RN trainers in the use of WebETest and teach them how to leverage the value added instructor tools built into WebETest as well as support and training for approved AMAP instructors to administer the AMAP knowledge exam, if that is the final agreed upon testing model for AMAP.

15 Registration of eligible unlicensed personnel

Perhaps our RegistryMaster© software could be utilized to provide a statewide 'registry' of successful unlicensed personnel for AMAP, to efficiently meet this requirement. Agency staff would have a secure portal into RegistryMaster© to create reports and verify candidate registry status as well as a public portal into the software if applicable or any other level of stakeholder access desired. Our registry software automatically integrates as the final output of WebETest© so that is a natural progression for us to provide this service for the WV AMAP program. The approved facility AMAP-RN would/could be 'tied' to the eligible unlicensed personnel listed in RegistryMaster©. In Oregon we automatically poll the NA data base when a candidate registered for MA training so the software is verifying eligibility, transparent to the user, in the background before allowing them to register. Perhaps a model along these lines is viable in WV?

16 Distribution of competency evaluation materials



The AMAP knowledge test will be WebETest© based, (while not eliminating a paper test possibility) testing as few as a single candidate at a time using a certified RN proctor or a KTP working under the RN's supervision at a WV approved test site. This will allow the AMAP test to be administered concurrently with NA knowledge tests and make a large testing infrastructure available. We can also test AMAP knowledge test candidates where they trained utilizing in facility certified and Agency approved RN testers. We are certainly flexible here to come up with the optimum and perhaps multi faceted process for testing AMAP candidates during detailed discussions with OHFLAC staff. We can easily adjust to any model OHFLAC staff desires. Secure electronic results are available immediately after official scoring and double checking is completed, either same day or next business day, depending on the time of day the test is completed.

17 & 18 Paper Based Tests & Scoring

Official paper based test results are available the same day officially scored, which is typically only a two day mail time delay. Though we can score on site, we prefer to officially score the test off site and given our same day scoring of all tests received, there is never much time lag between testing and results being available online for candidates completing their WebETest© event for AMAP. See all the arguments put forth in Project A - 19 for not scoring onsite. Scoring bias is a very real concern when scoring on site. See our sample test results feedback on page 36. Notice that not only are the performance areas details on the results feedback, but also detailed vocabulary feedback is given for the candidate to study to improve their knowledge base whether or not they passed or failed.

19 Distribution and transfer of test results

- a. We propose the candidate record be created in WebETest© upon enrollment in an AMAP training course and Agency staff will have access to tracking information and reports from the very beginning of training, through the successful completion of training, test scheduling, test administration and securely transmitting required information to the Agency registry database. The secure Agency portal into our complete data set will always be available to Agency staff.
We would propose a daily automatic upload of AMAP results to the Agency to include all information specified/needed by the Agency in a format agreeable to the Agency. We typically don't use any digits of the social security number, but rather use a unique test ID number, for all information communicated except for securely sending the social security number to the Agency.
- b. We have a secure algorithm that creates a unique ten digit 'test' ID number from the candidate's unique social security number and therefore the social security number is never used/displayed, but can be determined, whenever needed, by running the test ID back through the algorithm. We also can agree to a numbering scheme suitable to Agency staff. We look forward to sharing our unique numbering scheme with Agency staff and providing a solution that is efficient and works for all stakeholders.
- c. Once established the 'test ID number' will follow the candidate in both our data base and the Agency's data base as data is 'shared' with WVDHHR server's in an agreed upon secure fashion.
- d. D&SDT will provide the requested data field's in an agreed upon format in a secure fashion. We are sharing live data with the Oregon State Board of Nursing using secure, automatic, real time, web queries between our data sets. We look forward to sharing this next level of data sharing with West Virginia even as we continue to develop new interfacing with Agencies in other states throughout 2016.

Project D: Registered long term care nurse aides refresher course

D&SDT will provide the refresher course **curriculum** and sufficient interactive workshops each year to train and certify Agency approved and qualified RN's that will then deliver the approved, minimum 16 hour didactic plus skill demonstration (at least 4 hours), refresher course to Registered long term care registered long term care nurse aides falling into one of the four categories qualifying them as eligible to take the refresher course. The refresher course we will certify approved RN's to deliver will be a minimum two day (four 4 hour modules) registered long term care registered long term care nurse aides 'refresher' course, customized to the approved WV registered long term care registered long term care nurse aides curriculum plus an additional (minimum of four hours) skills portion geared to practicing the approved skill set of WV tasks that are eligible to appear on a WV skill test. D&SDT will train and certify RN's across WV to provide the refresher course to eligible NA candidates. Though, to entertain another thought, we could provide the refresher course under our D&S Training Center LLP, utilizing independently contracted and certified WV RN's on a schedule and at locations sufficient to meet the demand for refresher course NA candidates and provide WebETest® software from the time of enrollment in a refresher course and all the value added WebETest® tools to better monitor and report anything refresher course related. This means, tracking the candidates all the way through to successful placement on the WV NA registry. In this scenario, we'd pay the certified RN trainers (or training program sites i.e. facilities) as independent contractors for teaching the approved NA refresher course. We look forward to managing this component of the four project RFQ in close communication with OHFLAC staff, to best accommodate the needs of eligible NA refresher course candidates. We can certainly continue the refresher course project in the current mode, with our technology infused to make scheduling more efficient, if that is what OHFLAC staff ultimately desires. Again this refresher course may lend itself nicely to online training modules as previously described. (hdmaster.org)

1 Registration of eligible candidates

Using WebETest or our newest software tool, TestMaster Universe (TMU), upon request to take a refresher course, and meeting the requirements i.e. National Sex Offenders Public Registry and the OHFLAC website check, a copy of the OHFLAC eligibility letter or D&SDT staff initiated WV NA registry verification along with the approved instructor's visual verification of an original social security card plus verification of an acceptable, signed, government issued, photo ID a candidate will be deemed eligible to enroll into a scheduled NA refresher course.

2 Guidelines and procedure

Refresher course candidates would carry one of the four eligibility path statuses in the registration system which would be determined during the enrollment and eligibility phase of the process. Depending on the original status, the software will track all restrictions and time limits depending on a candidate carrying an [a or b] status or a [c or d] status. The software 'number of attempts flag' will be set at three attempts for all candidates. Successful candidates will be sent to the WV registered long term care nurse aides registry with the daily export, so their working eligibility status can be upgraded in the shortest time possible.

3 Training course for refresher

The refresher course curriculum will be approved by Agency staff and will include at least a minimum of four 4 hour 'modules' (sessions) to include all ten topics referenced in 4. Refresher Course Outline. The skills demonstration portion of the refresher course will be conducted in an approved laboratory setting and will be at least four hours in duration. We have found that interspersing at least four hours of hands on skill demonstration practice throughout the didactic instruction is a very effective way to review the skill tasks and break up the didactic instruction.

4 Skills Demonstration

The skills demonstration part of the evaluation will be performed by or under the general supervision of an RN in a laboratory setting comparable to the environment where the registered long term care nurse aides functions. We also have a video production studio in the Findlay office and can utilize video extensively in on line training if that option becomes viable in some agreed upon fashion.

5	Setting and Equipment
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The classroom will be approved as to size and location and must have the equipment as listed on the Agency approved equipment list

6	Refresher course outline
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The curriculum we will submit for OHFLAC staff approval will contain all ten elements listed in the refresher course outline. We can edit our current D&STC Ohio approved NA curriculum to meet specific needs for the WV refresher course or modify existing OHFLAC standardized curriculum and seek OHFLAC staff suggestions and approval prior to providing any refresher course services. We will then proceed in an agreed upon fashion after OHFLAC staff considers all the possibilities presented in this response for enhancing the efficiency of the refresher course Project D by leveraging our technology to the fullest extent possible. We have recently developed similar curriculum for the Ohio DSW (Direct Service Worker) project and have the in house staffing and experience to provide excellent training curriculum and teaching methodology in WV.

7	Abuse in-service material
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D&SDT will incorporate abuse in-service materials meeting Agency and Federal guidelines all subject to OHFLAC staff final approval and certainly subject to change from time to time, as needed. This will be an important feedback loop to monitor over time to insure its effectiveness.

8	Skills performance record
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Typically the skill performance 'checklist' is printed out of WebETest© as one of the value added tools provided. The checklist is then completed, attested to by the RN 'refresher course' instructor, and filed in the candidates' permanent record. We could also offer to image scan or take a tablet, smart phone image of the completed checklist and attach the digital image to the candidate's WebETest© record, depending on OHFLAC staff desires and need to have a permanent checklist track through the system for each refresher course candidate. We look forward to leveraging our technology to best service the skill performance record requirement/need in WV. We will emphasize, during training, that only the skills listed on the WVNACEP-7 'checklist' may be performed by registered long term care registered long term care nurse aides when working in a nursing home setting.

9	Instructional material
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See 4 above and startup timeline. We will have a draft course ready to present and further edit in concert with OHFLAC staff during the second week of the transition/startup timeline

10	Instructor qualifications
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All instructor RNs will meet at least the minimum qualifications specified. OHFLAC staff shall give final approval before any Registered Nurses are utilized. We will seek out eligible RN's from the pool of RN's

currently active in WV that have completed a Educate-the-Educator training course or qualify for an exemption.

11	Certificate of completion
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An OHFLAC approved, standardized certificate of completion, showing all required information, will be issued to successful NAs completing NA refresher course. The certificate will have an online verifiable security stamp to eliminate possible forgeries. In the case of successful completion of specified Alternative Sanction topics, those topics will be listed on the certificate in addition to all the regular required information.

12	Proposed site schedule
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D&STC will set up a training schedule for the contract term, subject to OHFLAC staff approval, providing at least six workshops each year with three workshop/NA refresher courses in Region 1 and three in Region 2.

13	Distribution of class participation results
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D&SDT would propose a secure electronic (WebETest©) based method emulating the WVNACEP-14 roster process in some fashion. We are eager to work with OHFLAC staff to implement a process to expedite class participation results, on a need to know basis, for stakeholders needing access to the information at appropriate times in a more real time fashion than ten days. Also, through the Agency portal or an automated process, eligibility to test for successful refresher course NA candidates can be accomplished in a secure, timely, fashion all under the control of OHFLAC staff and in fewer than ten days.

8.6 Contract Manager:

Contract Manager: Jennifer Underwood / Paul Dorrance

Telephone: 419-420-1605 / 406-442-8656

Fax: 419-422-8328 / 406-442-3357

Email: hdmastereast@hdmaster.com / hdmaster@hdmaster.com

5. Corporate Experience and References

We present the following client list and encourage the selection panel to call any reference and visit with them at length to really understand the unmatched custom services we bring to each of our contracts.

2001 – 2005: Development and Administration of a Registered long term care nurse aides Competency Evaluation 2006 – Present Program (NACEP) for the Ohio Department of Health

D&SDT processed 13,484 candidates from July 1st, 2001 through December 31st, 2001 in Ohio essentially testing a years worth of candidates in six months, a mission impossible accomplished by the dedicated D&SDT Findlay staff. Ask Shannon why Ohio came back to our testing model as soon as possible, after selecting a different vendor during a State mandatory re-bid process, and her experiences finding her way back!

Ohio Department of Health

246 North High Street

Columbus, Ohio 43266

Dustin Ellinger, Bureau of Long Term Care Quality Chef 614-644-6055

Rick Hoover, NACEP/TAP Supervisor 614-728-7449

Mary Woodyard, Unit Coordinator 614-466-1262

Shannon Richey, Assistant Bureau Chief (614) 728-3329

2003 – Present: Development and Administration of a Registered long term care nurse aides Competency Evaluation Program (NACEP) for the Tennessee Department of Health

D&SDT set a new forty-two day transition record to D&SDT's model for NA testing in Tennessee. D&SDT exceeded all timeline goals and projected number of test sites, observers and workshops that we initially proposed in the Tennessee transition schedule. Tennessee renewed our contract with them for another five years in 2008.

Tennessee Department of Health

227 French Landing, Suite 501

Heritage Place Metrocenter

Nashville, TN 37243

Wanda King, NATP Supervisor (615)532-7841

2011 – Present Development and Administration of MAP-Medication Administration Evaluation Program for the State of Massachusetts

D&SDT helped create valid and defensible Medication Administration test content for the MAP test in Massachusetts. New state of the art RegistryMaster© software was unveiled for the MAP contract. The knowledge test is used as a screening tool in order to qualify candidates to take the Medication Administration and Transcription clinical tests.

Director of Health Services, Office of Quality Management

DDS Central Office

500 Harrison Ave

Boston, MA 02118-2439

Sharon Oxx, RN, CDN Manager 617-624-7792

1999 – Present: Development and Administration of a Registered long term care nurse aides Competency Evaluation Program (NACEP) for the South Dakota Department of Health

Working with the South Dakota Health Care Association, the South Dakota Board of Nursing and the South Dakota Health Department, D&SDT brought our Complex Adaptive System into a state where each of these three South Dakota entities performs a portion of the NACEP. D&SDT has successfully “married” the three. South Dakota now submits 100% of their applications electronically and has fully completed conversion to electronic WebETest®. Ask LuAnn about her electronic conversion experiences!

South Dakota Health Care Association
804 North Western Avenue
Sioux Falls, SD 57104
LuAnn Severson (605)339-2071

South Dakota Health Department
Pierre, SD
Bob Stahl (605)773-7070

South Dakota Board of Nursing
Sioux Falls, SD
Linda Young (605)362-2760

2004 – Present: Development and Administration of an on line testing model and software for the UTAH NACEP

The Utah Health Technology Certification Center conducted a nationwide search to find a software management tool, on line web testing capability, a web site presence for UHTCC, online registry management software, and a psychometrically proven Registered long term care nurse aides knowledge test. D&SDT was the only vendor able to provide all these desirables for UHTCC. Utah is now 100% electronic for the knowledge test.

Utah Health Technology Certification Center
550 E 300 S
Kaysville, UT 84037
Debra Schillman RN, Program Manager (801)593-2422

1991–Present: Development and Administration of a Registered long term care nurse aides Competency Evaluation Program (NACEP) for the State of Montana

D&S Diversified Technologies (D&SDT) gained the invaluable experience of custom designing each and every aspect of a statewide NACEP Program from the ground up for Montana. D&SDT did not perform this function by itself; instead we worked closely with the State of Montana’s Department of Health and a broad spectrum of Montana’s health care community. It is this background of open communication and the search for innovative technological solutions that D&SDT has provided for all subsequent customers.

D&SDT has administered 32,000+ registered long term care nurse aides exams throughout Montana while managing 150+ test sites and 150+ test evaluators. D&SDT utilizes both its paper and electronic testing models in Montana.

State of Montana Department of Public Health and Human Services Quality Assurance Division, Certification Bureau

4.2 - References

PO Box 202951
Helena, MT 59602-2951
Cynthia Galaska, NA Training Program Manager (406) 444-1599
Jill Caldwell, Certification Bureau Chief (406) 444-2099

1999 – 2004: **Development and Administration of a Registered long term care nurse aides Competency Evaluation**

2008 – Present: **Program (NACEP) for the Oregon State Board of Nursing (OSBN)**

2008 – Present: **Development and Administration of a Medication Aide testing program for the Oregon State Board of Nursing.**

Approximately 20,000 registered long term care nurse aides candidates were tested during the initial contract. D&SDT created import and export routines to merge Testmaster®/WebETest® data with the License 2000™ registry system. We credit Oregon with “breaking us out” of our Montana borders and launching our national presence. We unfortunately were underbid by a significant amount when the contract came up for the five year State mandatory re-bid. Of course, Oregon didn't have professional actors any longer or tests administered by three person testing teams, but we certainly respected their decision to change vendors and helped them transition to the new vendor by agreeing to test an extra six months to give the new vendor the time they evidently needed to set up their testing infrastructure. Beginning in May of 2008 Oregon entered into a new contract with D&SDT and gained our technology advances of the previous four years. In December of 2008 OSBN awarded D&SDT their contract for testing **Medication Aides** in Oregon; using the same advanced registration technology we created to manage the Oregon NACEP.

Oregon State Board of Nursing
800 NE Oregon St., Suite 465
Portland, OR 97232-2162
Debra Buck RN, NA Program Consultant (971)673-0636

1999 – Present: **Development and Administration of a Registered long term care nurse aides Competency Evaluation Program (NACEP) for the North Dakota Department of Health**

The North Dakota Department of Health has approved D&SDT to provide registered long term care nurse aides knowledge and skill exams in North Dakota. D&SDT provides North Dakota with in-facility (on-demand), regional (pre-scheduled), and electronic NA testing solutions.

North Dakota Health Department
State Capital Judicial Wing – 2nd Floor
600 E. Boulevard Ave. Dept 301
Bismarck, ND 58505-0200
Lucille Torpen or Cindy Kupfer (701)328-2352

2001 – Present: **Administration of a Lead Abatement Competency Testing Program for the Ohio Department of Health**

D&SDT tests Lead Workers, Contractors, Risk Assessors, Inspectors, and Clearance Technicians for the Ohio Department of Health.

Ohio Department of Health
246 North High Street

4.2 - References

Columbus, Ohio 43266
Dave Holston, Lead Abatement Program Manager (877) 668-5323

2005 – Present: Development and Administration of a Medication Aide Competency Evaluation Program (MACEP) for the Ohio Board of Nursing

Developed a medication aide skill task set for manual skill test administrations, helped Board staff set a nursing aide knowledge test plan for Ohio medication aides and helped Board staff create additional questions to add to the existing medication aide knowledge test bank of 1200+ questions.

OHIO Board of Nursing
17 South High Street
Columbus, OH 43215-7410
Betsy Houchen, Executive Director (614)995-3684

2003 – Present: Development and Administration of an on line testing model and software (WebETest©) for the IOWA NACEP

D&SDT remains on the cutting edge of testing with WebETest©. Iowa has converted registered long term care nurse aides testing in Iowa to the Testmaster©/WebETest© - WebETest© environment using their own test questions but leasing our technology solutions. A recent workforce initiative training grant Iowa received has resulted in the creation of 500+ new questions for the Iowa active test banks utilizing our online collaboration software. Talk to Anita about how that software and process has worked for this innovative Iowa project.

University of Iowa College of Nursing
Iowa City, IA 53342-2500
Anita Stineman (319)335-5475
Erin Drinnin, MSW
Project Manager | Direct Care Workforce Initiative | Division of Health Promotion and Chronic Disease Prevention | Iowa Department of Public Health | Lucas State Office Building | 321 East 12th Street | Des Moines, IA 50319 | P: 515.281.3166 | F: 515.242.6384 | erin.drinnin@idph.iowa.gov

2005 – Present: Development and Administration of a Medication Aide Competency Evaluation Program (MACEP) for the State of Montana

D&S Diversified Technologies (D&SDT) is under contract to administer a statewide MACEP Program for the Montana Department of Labor – Board of Nursing. D&SDT is worked closely with the State of Montana's Board of Nursing to customize an innovative testing program that meets the needs of the Board. D&SDT brings a long history of open, honest communication and the implementation of innovative technological solutions to the table for all our customers.

The MBON has decided not to use a paper model and we will tap into our electronic web based infrastructure at the already existing Montana Registered long term care nurse aides testing sites to provide a completely electronic testing model for the Montana MACEP.

State of Montana Department of Labor and Industry
Business Standards Division - Montana Board of Nursing
301 S. Park Ave
Helena, MT 59620-0513
Cynthia Gustafson, Executive Director (406)841-2380

2005 – Present: Development and Administration of a NACEP and Medication Aide - Certified Testing for Arizona

We also have participated in AZBN annual retreat for Registered long term care nurse aides Instructors for the past seven years as a presenter from the testing side of NA trends in the United States. We also contracted with the AZBN and Arizona Health Care Association to gather data for a medication error rate study, pre and posted utilization of medication “technicians” in Arizona. The study results are now available from the AZBN.

Arizona Board of Nursing
Judy Bontrager, RN, MN, Associate Director of Operations (602)771-7802
Pam Randolph, RN, Education Consultant (602)771-7803
Opal Wagner, RN Nurse Practice Consultant (602)771-7857

2005 – Present: Development and Administration of a NACEP and Medication Aide testing for Oklahoma:

D&SDT partnered with the OSU-OKC Technology Education Center to initially implement our testing model for their model pilot training program.

Oklahoma Department of Health
Director Registered long term care nurse aides Registry
Vicki Kirtley (405)271-5124

2007 – Present: Development and Administration of a MACEP for the Arkansas Board of Nursing

Development and administration of MA knowledge test for ABON. Arkansas content experts contributed 139 questions to our global MA test bank.

AR State Board of Nursing
Sue Tedford, MNsc, RN Director of Nursing Education (501)686-2700
Lori Gephardt, Administrative Assistant (501)686-2700

2008 – Present: Development and Administration of a Facility Administrator Test for Idaho

D&SDT is now testing Facility Administrators in Idaho ramping up, in less than 8 months, this testing program meeting new legislation enacted in Idaho in the spring of 2008 to approve alternate Facility Administrator testing agencies in Idaho. We have worked with the Idaho Health Care Association, the Idaho State Board of Examiners of Residential Care Facility Administrators and the Idaho Bureau of Occupational Licenses (IBOL) as well as with a myriad of content experts to develop a facility administrator test with currency to the new online facility administrator curriculum developed by the IHCA and began delivery during the 1st quarter of 2009.

IHCA
802 W. Bannock St., Suite 304
Boise, ID 83702
Robert ID Vande Merwe Executive Director (208)343-9735

IBOL
1109 Main Street, Suite 220
Boise, Idaho 83702-5642
Tana Cory, Bureau Chief
Carrie Gilstrap, Technical Records Specialist (208)334-3485

2010 – Present: Development and Administration of Registered long term care nurse aides, Medication Aide, Personal Care Assistant and Facility

Administrator exams for New Jersey Department of Health in strategic partnership with PSI electronic knowledge test centers.

Healthcare Services Certification Program
Garlina S. Finn, RN BA
PO Box 358
Trenton, NJ
garlina.finn@Department.state.nj.us (609) 341-3561

Paula Howard, Administrator
PO Box 358
Trenton, NJ
paula.howard@Department.state.nj.us (609) 633-9171

2012 – Present: **Development and Administration of Medication Aide - Certified testing for the Nevada Board of Nursing.**

2015 – Present: **Development and Administration of Registered long term care registered long term care nurse aides - Certified testing for the Nevada Board of Nursing.**

Nevada has decided to utilize our unique medication administration skill test in conjunction with using WebETest to deliver the MA-C knowledge test via computer. We recently won the contract to add NA testing in Nevada.

Roseann Colosimo PhD MSN RN
Education Consultant
Nevada State Board of Nursing
2500 W. Sahara Ave., suite 207
Las Vegas, 89102-4392
702 668-4528

4 – CONTRACT AWARD



D&S Diversified Technologies LLP

Headmaster LLP

4.1 and 4.2 Contract Award & Pricing Pages

Included in separate sealed envelope.

ORGANIZATIONAL CHART:

General Partners: Paul L. Dorrance & Ben L. Schmitt

Montana Office – Helena, Mt.

Ohio Office – Findlay, OH

Tim Petrick

Director of Company Operations

Jennifer Underwood – Director Eastern Regional Operations

Amanda Vulk

Director Company Accounting Operations

Marsha Barth Eastern Regional Accounting Operations

Chad Salois -- Data Integrity - Quality Assurance - Psychometric Data and Report Compilation – Iowa Contract Manager ----- Bobby Sutherlin RN – Job Analysis – NA test currency

Montana NA Program
Manager

South Dakota Program
Manager

Idaho Facility
Administrator Program
Manager

Ohio - Five Regional NA Program
Managers

Ohio - LEAD Testing Program Manager

Montana-Arkansas-
Oklahoma Med Aide
Program Manager

North Dakota Program
Manager

RegistryMaster© RRTP
Service - Utah
Utah - using our National
bank of knowledge test
questions

OH Med Aide Program Manager

New Jersey NA, MA, PCA and Facility
Administrator Program Manager

Oklahoma NA
Program Manager

Arizona Program
Manager

Massachusetts MAP Program Manager

Tennessee NA Program Manager

D&S DT Hardware Sales, Software Sales, Network
Consulting and Installation

Nevada Program Manager

West Virginia Program
Manager

D&S Training Center - NA, MA, CPR, Train
the Trainer, Home Health Aide Training
Programs

Active WEB DATA
Hosting Services

A dynamic NA test bank of 1800+ and over 1500+ NA - AMAP knowledge questions.--All of these questions are available for review and subsequent incorporation into each State's knowledge test or are for lease and may be used by States that are independently testing NA or NA - AMAPs.

Customer Service and Support Staff and over 350 independently contracted RN's --- Appropriately Hold it ALL UP!!!

SAMPLE AMAP Skill test as an alternative possibility at some future time?

Category : Ear/Tablet Administration Drops

Ear/Tablet Administration

Scenario: Please administer Chris Thompson's HS medication.

Note to TO: Actor is bed at 45 degrees. Bed in lowest position. Actor on back close to left edge of bed. Dropper bottle is labeled Polysporin and contains saline and instruction to shake well before using. Also listed on the HS MAR is Zocor 10mg one tablet. Place water filled pitcher in the room in an appropriate location.

- A 1. Candidate uses hand sanitizer to clean hands.
- A 2. Candidate obtains correct medications from the medication cart
- X 3. For each medication verbally identifies the correct drug label for correct resident's MAR
- X 4. Verbalizes right drugs as the candidate obtains the medications from the cart
- X 5. For each medication verbalizes right doses as candidate compares the labels to right resident's MAR
- X 6. Medications selected are for the correct time
- X 7. Medications selected are for the correct routes
- A 8. Opens container. Does not contaminate lid.
- A 9. Pours one tablet into medication cup without touching the medication
- A 10. Locks medication cart
- A 11. Closes MAR
- A 12. Greets resident
- X 13. Verbalizes right resident while using appropriate method of identification. i.e. picture, wrist band, or facility appropriate method of identification
- A 14. Introduces self as a medication technician
- A 15. Explains procedure
- A 16. Gives resident a glass of water
- A 17. Assists the resident to take the medication
- A 18. Lowers head of the bed
- A 19. Shakes Polysporin before use
- A 20. Head is turned toward right with left ear upward
- A 21. Holds external ear flap and pulls up and back

- X 22. Instill two drops of medication into the ear
- A 23. Dropper tip does not touch inside of ear canal
- A 24. Tells resident to not move their head for a few minutes
- A 25. Returns medication to the medication cart
- A 26. Locks medication cart
- X 27. Documents administration on the medication administration record on the correct day
- A 28. Maintains interpersonal communications during administration
- A 29. Places call light within reach or verbalizes verification of call light for wrist/necklace call devices.
- A 30. Candidate uses hand sanitizer to clean hands.

WEST VIRGINIA NA - AMAP Competency Testing Guidelines

D&SDT staff MUST direct any Media communications or questions through OHFLAC.

Test Observers: (TO)

Independent Contractors contracting with and paid by D&SDT who are West Virginia RN's in good standing.

Administer Tests at Fixed Test Sites by signing up for dates with D&SDT (Regional Pre-Scheduled type test schedule)

May agree to test dates with Flexible (In-facility type) test sites and then the facility will note that on when test event is created in WebETest.

May use volunteer Actors and Knowledge Test Proctors that are not test candidates

May use paid Actors and Knowledge Test Proctors

(Hired by TO, scheduled by TO, paid by TO and certified by the TO using D&SDT/OHFLAC approved procedure)

May be an instructor of a training program but MAY NOT test his or her own students.

Testing Sites:

Fixed - Regional – Test dates published on a master test schedule and widely disseminated on Web site and upon request on form 1700 NV 6 to 12 months in advance (also on www.hdmaster.com)

Flexible – In facility Test dates self scheduled by Instructor or Facility in concert with candidates and in agreement with a certified TO.

Candidates or facilities/instructors, on behalf of candidates, request a choice for test dates using WebETest. Applications are scheduled on a first come, first serve basis, available seats are selected using WebETest. Test dates may also be scheduled by calling D&SDT staff toll free. (877-201-0758)

May be at any non-sanctioned site with a OHFLAC/D&SDT approved skills test area and proper equipment.

Knowledge Test Proctors (KTPs) and Actors:

No Test or Training Facility Residents may be used unless they volunteer.

KTPs and Actors are paid by the TO, hired and trained by TO with OHFLAC/D&SDT approved training materials, and are scheduled by TO.

Volunteer KTPs or Actors may be used, but still must be properly trained and sign all documents. (Non-disclosure etc.)

KTPs and Actors May NOT be other test candidates.

Note: If an Actor is currently or becomes a NA - AMAP student they will not be eligible to test for a period of six months.

Rescheduling/Cancellations/No Show Fees:

Tests may be rescheduled any time up to the business day (exclude Saturdays, Sundays and Holidays) preceding a scheduled test day. (Call: 877-201-0758) Reschedules must be requested from D&SDT and are subject to a \$35.00 reschedule fee for each reschedule request. Reschedule fees must be paid in full prior to a reschedule taking place.

All cancellations must be submitted to D&S in writing.

Tests may be cancelled any time up to the business day (exclude Sundays and Holidays) preceding a scheduled test day and qualify for a full refund minus a \$40.00 cancellation fee.

Candidates that **NO SHOW** for their scheduled test will forfeit their entire test fee and **MUST** reapply, remitting a complete new test fee before being scheduled into a new test date.

Reschedule fee is \$35.00, a Cancellation fee of \$40.00 for any candidates that do not test once testing services are requested from D&SDT and not cancelled or rescheduled at least one business day (exclude Sundays and Holidays) prior to a scheduled test date.

These fees partially offset D&SDT costs incurred for services requested and resulting work that is performed because of the work request.

If a reschedule or cancellation request is not received prior to the business day (exclude Sundays and Holidays) preceding a scheduled test date a NO SHOW status will exist and a new application along with a full test fee must be submitted to D&SDT to secure a new test date and time.

Refund Policies:

Candidates may receive a partial refund for cancellations verified by 5 pm the business day (exclude Sundays and Holidays) preceding a scheduled test day. Cancellation refunds are based on the actual amount paid minus a cancellation/processing fee of \$40.00.

In the case of a NO SHOW, if a signed Dr. notice is provided or other acceptable documented proof of an emergency for the reason of the NO SHOW, then the candidate may be entitled to a free reschedule. See guidelines for emergency documentation below.

In situations when D&SDT cancels tests for any reason, every effort will be made to reschedule a candidate to a test location and time mutually agreed to, in the shortest time possible, at no additional charge. D&SDT may also choose to test candidates for no charge on a case-by-case basis.

Guidelines for emergency documentation

Tow Bills need to be in our office within 48 hours of the test date.

Doctors Excuses must in our office within five business day (exclude Saturdays, Sundays and Holidays) of the test date.

Obituaries must be in our office within 14 business day (exclude Saturdays, Sundays and Holidays) of the test date. (Obituaries must be immediate family and the NA - AMAP candidate's name must appear in the obituary. If the candidate's name is not in the obituary, the candidate must have the Funeral Director sign a letter stating they attended the funeral.)

Updated 07-20-??

					Nursing Home 151 of 1000%	Hospital 45 of 1000	Home Health 14 of 1000
					72%	21%	7%
Task	AVERAGE # OF TIMES PER DAY COMBINED	CONFIDENCE INTERVAL		% that perform skill daily	AVERAGE # OF TIMES PER DAY		
		UPPER BOUND	LOWER BOUND				
Assist client to toilet at scheduled times	5.77	6.20	5.33	90.48%	6.34	4.57	3.21
Take temperature, pulse and respirations	4.55	5.03	4.07	88.10%	4.03	7.70	0.57
Hold client's hand while talking with him/her	5.62	6.11	5.13	89.05%	6.24	4.09	3.64
Take blood pressure	4.29	4.77	3.82	85.24%	3.81	7.24	0.64
Report fire hazards	0.18	0.28	0.09	9.52%	0.20	0.14	0.14
Apply ted hose/elastic stockings	1.42	1.67	1.17	62.86%	1.72	0.70	0.38
Try to keep family calm during an emergency	0.35	0.47	0.23	21.43%	0.34	0.40	0.36
Provide simple wound care	0.89	1.12	0.66	37.62%	0.83	1.07	0.93
Empty self suction device	0.42	0.59	0.25	17.62%	0.26	0.98	0.43
Provide cast care	0.21	0.36	0.06	7.62%	0.19	0.35	0.07
Stay with a suicidal or wandering client	1.44	1.75	1.12	48.57%	1.54	1.49	0.14
Give tube feedings	0.22	0.32	0.11	9.05%	0.17	0.26	0.64
Help client deal with anger towards others	1.64	1.93	1.35	62.86%	1.80	1.21	1.29
Change position of bed	5.36	5.87	4.84	83.81%	5.47	5.93	2.36
Help a choking client	0.40	0.58	0.22	18.10%	0.45	0.15	0.62
Help client with dentures, artificial limbs, hearing aid, artificial eye, etc	4.85	5.35	4.34	84.76%	5.66	2.84	2.21
Give medicated suppository	0.33	0.48	0.17	14.29%	0.40	0.16	0.00
Provide or act as interpreter for client who speaks another language	0.15	0.26	0.05	5.24%	0.17	0.07	0.29
Report broken equipment	0.84	1.02	0.65	45.71%	0.95	0.58	0.36
Use Alternative methods other than talking to communicate with a client	1.90	2.27	1.53	58.10%	2.19	1.37	0.43
Explain what you are going to do to the client	8.66	9.03	8.28	95.24%	9.05	8.42	5.21
Irrigate urinary catheter	1.15	1.47	0.83	30.00%	1.14	1.44	0.43
Check for fecal impaction	0.57	0.82	0.33	16.67%	0.71	0.23	0.14
use an artificial airway	0.12	0.18	0.05	6.67%	0.07	0.28	0.07
Assist client to transfer between bed and chair	7.04	7.52	6.56	90.95%	8.03	4.84	3.21
Chart on client's condition	6.86	7.42	6.31	84.29%	6.82	8.07	3.57
Stop a treatment if client says he/she does not want it done	1.64	1.93	1.34	56.67%	1.83	1.23	0.86

Check that IV is working	1.19	1.55	0.82	24.76%	0.76	2.75	0.86
Discontinue IV	0.33	0.59	0.08	6.67%	0.15	0.88	0.71
Report incidents (injuries, falls, errors)	1.56	1.87	1.25	60.95%	1.89	0.77	0.50
Perform CPR (cardiopulmonary resuscitation)	0.08	0.13	0.03	4.29%	0.07	0.11	0.00
Use a gait belt	4.65	5.21	4.09	70.48%	6.05	1.11	0.71
Clean and sanitize instruments and equipment	3.35	3.84	2.86	66.19%	3.41	3.82	1.00
Allow client to choose clothing, food	5.38	5.88	4.87	85.71%	5.99	3.82	3.71
Measure Height and/or weight	1.53	1.85	1.20	51.90%	1.57	1.56	1.00
Remind client to cough and deep breathe	1.58	1.92	1.23	48.10%	1.26	2.70	1.43
Make client's bed	5.79	6.31	5.28	89.05%	6.46	4.59	2.43
Perform urinary catheter care	2.34	2.74	1.94	61.90%	2.28	2.91	1.21
Speak slowly, directly and clearly when dealing with hearing impaired client	5.81	6.32	5.29	90.48%	6.56	3.89	3.71
Label client's belongings	1.41	1.75	1.07	43.81%	1.37	1.89	0.29
Apply restraints	0.67	0.89	0.44	23.81%	0.82	0.34	0.00
Wear gloves, gown, mask or other protective clothing	8.51	8.91	8.10	95.71%	9.11	8.11	3.21
Call for emergency help	0.38	0.55	0.21	18.10%	0.40	0.43	0.07
Check oxygen flow and rate	2.36	2.77	1.95	56.67%	1.87	4.35	1.57
Reapply oxygen equipment, (e.g. nasal cannula, face masks)	2.71	3.11	2.30	65.24%	2.39	4.11	1.64
Talk or sit with depressed client	2.69	3.07	2.31	74.29%	3.01	1.80	2.00
Assist client to change clothes	5.82	6.31	5.32	92.38%	6.83	3.40	2.43
Turn and position client	6.01	6.50	5.53	89.52%	6.59	5.11	2.64
Provide time for client to practice his/her religion	1.64	2.04	1.25	42.38%	1.74	1.58	0.79
Tell a client his/her behavior is causing a problem	1.17	1.47	0.86	39.52%	1.37	0.82	0.07
Orient visually impaired client to surroundings	1.66	2.03	1.30	50.48%	1.91	1.14	0.64
Use client's family/friends as a source of emotional support for client	1.84	2.20	1.49	55.24%	1.93	1.57	1.79
Stop myself from yelling at a client	0.44	0.64	0.24	17.14%	0.57	0.11	0.14
Provide for client privacy (draw curtain around bed, etc.)	8.56	8.93	8.18	97.62%	9.09	8.16	4.07
Test urine for sugar and acetone levels	0.40	0.59	0.21	13.81%	0.30	0.71	0.43
Give oral care	5.77	6.28	5.26	87.14%	6.74	3.78	1.71
Use a glucometer	0.81	1.08	0.53	20.48%	0.24	2.56	1.14

Perform dressing change	0.70	0.96	0.44	21.90%	0.55	1.00	1.36
Suction a client (mouth, nose)	0.44	0.66	0.22	12.38%	0.21	0.96	1.21
Give client chance to express his/her feelings	7.30	7.74	6.87	97.14%	7.56	6.42	7.43
Keep client information confidential	7.78	8.29	7.27	88.10%	8.07	7.64	5.07
Report unusual signs and symptoms or behavior	4.16	4.60	3.72	88.57%	4.32	4.29	2.07
Do laundry for client	0.80	1.10	0.50	19.52%	0.86	0.20	2.00
Remove stitches/staples from wounds	0.22	0.38	0.06	4.29%	0.21	0.20	0.36
Provide skin care	6.14	8.11	4.17	85.71%	7.28	3.39	2.43
Help client with perineal care	6.67	7.18	6.16	88.57%	7.92	3.91	2.00
Reconnect client to heart monitor	0.58	0.84	0.32	16.19%	0.48	0.84	0.79
Reconnect client to pulse oximeter	0.98	1.32	0.65	20.95%	0.27	3.44	0.71
Assist client with foot and nail care	2.02	2.40	1.65	56.67%	2.52	0.60	1.21
Assist client to take medications	0.86	1.16	0.57	24.76%	0.72	0.64	3.07
Report poor care or abuse of client to supervisor	0.63	0.85	0.42	26.67%	0.80	0.24	0.07
Help prepare meals	1.77	2.22	1.31	30.48%	2.03	0.53	2.93
Care for body after death	0.34	0.46	0.21	20.95%	0.42	0.14	0.07
Wash hands	9.69	9.88	9.50	99.05%	9.77	9.73	8.71
Help client with shopping	0.19	0.33	0.05	9.05%	0.15	0.07	1.07
Reorient confused client to his/her surroundings	3.36	3.79	2.93	76.19%	3.91	2.30	0.71
Report changes in a client's skin condition	2.29	2.66	1.91	70.48%	2.70	1.29	1.07
Collect and label specimens	0.82	1.09	0.55	28.57%	0.57	1.62	0.93
Double bag linen	2.55	3.03	2.07	49.52%	2.89	2.05	0.50
Allow client to do things at his/her own pace	7.37	7.81	6.92	95.71%	7.49	7.05	7.07
Encourage interest in recreational activities	4.14	4.63	3.66	76.19%	4.92	1.76	3.54
Help client to improve appearance (e.g. make up, shave, etc)	5.42	5.94	4.91	86.19%	6.32	3.33	2.57
Give an enema	0.32	0.48	0.15	11.90%	0.23	0.62	0.21
Measure intake and output	4.68	5.20	4.16	80.48%	4.21	7.16	1.79
Assist client with bathing	2.43	2.79	2.08	72.86%	2.47	2.48	1.86
Do colostomy or ileostomy care	0.94	1.21	0.67	33.81%	0.95	1.09	0.36
Do range of motion exercises	2.08	2.49	1.67	50.48%	2.41	1.13	1.57

Give snacks or fluids between meals	5.84	7.48	4.20	87.14%	6.00	6.31	2.57
Call client by the name he/she prefers	9.11	9.54	8.68	96.67%	9.47	8.07	8.64
Irrigate NG (nasogastric) tube	0.21	0.35	0.08	7.14%	0.15	0.34	0.43
Assist with care of deceased client	0.44	0.61	0.26	22.86%	0.55	0.14	0.21
Clean (dust and/or mop etc) client's furniture/room/home	1.37	1.71	1.03	37.62%	1.50	0.59	2.43
Give back rub	1.66	1.96	1.36	59.52%	1.70	1.44	1.86
Encourage client to be independent	5.51	5.98	5.05	92.86%	5.83	4.76	4.50
Use mechanical lifts to move client	2.37	2.78	1.95	56.19%	3.14	0.22	1.00
Do trach (tracheostomy) care	0.23	0.37	0.09	7.62%	0.17	0.47	0.14
Position client on a respirator	0.44	0.64	0.25	13.81%	0.45	0.49	0.21
Remove or reapply traction	0.27	0.45	0.10	6.19%	0.29	0.27	0.14
Assist client to use assistive equipment (e.g. cane, walker)	4.42	4.84	3.99	86.19%	4.91	3.13	3.29
Remove or reapply splints/slings	0.76	1.00	0.52	25.24%	0.83	0.70	0.14
Apply warm or cold treatments	0.89	1.14	0.63	30.48%	0.69	1.47	1.07
Adjust care to meet special needs of the client	4.21	4.69	3.73	81.90%	4.41	3.84	3.21
Seek assistance when asked to do a task you don't know how to do	2.78	3.18	2.38	76.19%	2.69	3.47	1.57
Tell nurse when a client refuses to eat foods/drink fluids	2.75	3.14	2.37	75.24%	3.18	1.87	1.07
Help new mother with bathing and feeding an infant	0.16	0.28	0.04	5.24%	0.06	0.31	0.79
Discuss with client his/her feelings about needing help with care	2.07	2.41	1.73	64.29%	2.23	1.53	2.14

56 Day Startup Plan Beginning ??, 2016

Week 1 (beginning ??)

Startup Manager and transition team at OHFLAC offices for transition / brainstorming sessions / final contract details—

Finalize Concrete Startup Ideas in Concert with OHFLAC staff – Startup Schedule approved by OHFLAC -----→Contract finalized and signed prior to transition meetings

Final Wording of Startup Materials Edits

Updated Materials Mailed – Wide Distribution - also available at www.hdmaster.com

Finalization/proofing of NA - AMAP program forms, guidelines and Candidate Handbooks. Customizing/Reviewing/OHFLAC approving any changes to our West Virginia NA - AMAP Web site information

Installation of any New Software at OHFLAC office in concert with OHFLAC IT personnel – AUTOMATIC FTP capability established – Testing Systems – Systems Reliable

Training OHFLAC Personnel in use of any New D&SDT/Agency software-----→Train the trainer and registered long term care registered long term care nurse aides refresher

course curriculums in progress

Appointing D&SDT Contract Manager for WV- _____→_____→ Eastern Region Office employees designated duties assigned to West Virginia as needed for support staff

Test Advisory Panel finalized (no more than five members per session) —→ Test Advisory Panel (TAP) meets: reviews/recommends proposed knowledge and skill tests —→

TAP decides on skill tasks and steps to include on skill tests – a one day activity. Knowledge questions reviewed for currency to West Virginia NA – AMAP curriculum – a two day activity.

Week 2

Startup Team returns Home. Key Setup personnel return to Ohio/Montana

Securing test sites and test dates for 2013 for regional (Fixed) test schedule --> Continue scheduling Regional Test dates -----> Test Schedule – Widely Distributed-->

Daily communication as hanging details are addressed: Toll free number 877-201-0758 to D&SDT available for use ----->----->----->

Interviews ----->----->-----> designated Employee support staff hired and coming up to speed

Securing and certifying in facility test sites (Flexible test sites)

WV RN observer's and training instructors secured, approved by OHFLAC staff, independent contractor agreements signed

Week 4 (Date ??)

Week 5

Training new contract support staff (West Virginia RN oversight manager when found and Ohio office support staff.)

Continue all transition activities *Mass Mailing to facilities- RN's – training programs -- cover letter – guidelines - forms website etc. with new address, phone number, hours, etc*

Train the trainer and registered long term care registered long term care nurse aides refresher course curriculums submitted

Workshops in WV and phone support training as needed to provide guidance as needed for Training Program instructors in the use of WebETest as soon as students enter into approved NA - AMAP training course in West Virginia.

Week 6

Test Scheduling

Receiving Candidate Application information -- paper and Web-->

First paper tests mailed to Observers from Findlay office

Week 8 (Date ??)

First Tests ready to be administered in West Virginia -----→

Ongoing Test Administration----->----->----->

Ongoing Test Scheduling → →

Test Advisory Panel reviews West Virginia selected test questions annually.

Continue finding and certifying RN Observers, Regional Test Sites (Fixed Test Schedule) and Facility Test Sites (Flexible Test Schedule)----->----->

Training instructor sharing sessions, RN Observer workshops - schedule for 2013-2014 utilizing West Virginia RN Oversight Manager once selected→-----→

OHFLAC staff approves curriculum for projects B and D.

Schedule for train-the-trainer and registered long term care registered long term care nurse aides refresher courses agreed upon for contract year.

Startup Time Line NOTES:

CERTIFICATION AND SIGNATURE PAGE

By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

DCS DT

(Company)

[Signature]

(Authorized Signature) (Representative Name, Title)

406-442-8656

406-442-3357

1/18/16

(Phone Number) (Fax Number) (Date)

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.:

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:
(Check the box next to each addendum received)

- | | |
|---|--|
| <input type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

D&S DT
Company


Authorized Signature

1/18/16
Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.



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