Small Business Impact Statement - Attachment A

you believe the adopted regulations will save elease list each regulation and explain the adverse impact. Indicate the your business over one calendar year with an estimated dollar amount, if applicable. Please list each regulation and explain the adverse impact. Indicate the Please explain the indirect beneficial effects NRS 449: Cultural Competency needing to be done annually is costly and time consuming. Takes away from direct patient care. We currently take a cultural competency course through our company and then the State required one. If we can choose our course then it will be more beneficial and cost effective. This will cost our facility about \$1,200 to become fully compliant and ongoing average \$20 per new employee or credentialed provider. The initial and ongoing cultural competency training requirement will impact our facilities through direct costs of training and through wages we must pay staff to take this training and to provide other staff to work with the youth so the staff member can take the training. Estimated to cost the facilities a minimum of four hours of staff time (2 for the staff taking the training, 2 for the staff replacing them) plus the cost of the training itself. If the average wage of an employee is \$25.00 an hour, the training cost will be \$100 per person, plus the cost of the training. If the facility is able to develop and have approved their own training, the cost for training could be captured during the development of the training. This would take several hours of development and review and if needed revision. Content area experts would be needed to do this, so the cost would be quite a bit more than the cost of the persons being trained. The cost of the training would vary depending on the approved format- it The previous regulations required a 9 hour would be higher if the training were in person for example as we would course-or at least that was the length of time have to pay the trainers as well. For a facility with approximately 50 staff- for the courses that were approved. This took we are going to use \$5000 dollars just for the staff costs, not counting the considerable amount of our training time and training itself. The current training options are \$100 dollars per person for of course, the costs of the training, the cost of the training- so that would be another \$5000. An estimate then for 50 the employees time to take the course and the staff, would be \$10,000 a year for training in this one area alone. These cost of the replacement staff so staff could take estimates are for a 2 hour training. If the training were to require longer, the course. The reduction to a two hour course then costs would go up of course. would be beneficial to the programs. NRS 449.103 (Section 13.3) Cultural Competency Training is additional financial burden to small business providers and only the approved Third Party Trainers are making huge amount of money in providing Cultural Competency Training. The lowest fee charged by the DBPH approved Third Party Trainer is \$50 per person and the highest is \$ 100 per Cost Savings for small business providers with 5 person for every training session. Just for 120 home care providers with employees on board: five employees, these providers are spending annually between \$30,000 \$20.00 per hour is the median salary of the to \$ 60,000 for CCT provided by the Third Party Trainers. Here is the staff x 2 hours of training = \$ 40.00 plus \$50.00 simple computation: (\$50 x 5 employees = \$250 x 120 homecare facilities= lowest fee charged by Third Party CCT Trainer \$30,000). The salary / per diem pay for the employee while on training is =\$ 90.00 x 5 employees = \$450.00 is the lowest excluded in this computation. It will be a great help financially to all small cost savings for the facility licensed for 5 beds business providers if DBPH can create a free on line CCT just like Adult over one calendar year. For 120 small business Protective Services training on line provided by Nevada Care Connection. providers, the lowest cost savings per one calendar year is \$ 54,000 (\$450 x 120). NRS 449.103 (Section 13.3) Cultural Competency Training is an additional expenses to our budget for the facility. For 3 employees times 50 dollars equals 150 dollars plus her pay for the day we took the training equals to We will be saving money if DBPH will give 150/ day x 3= 450 dollars. online free training NRS 449.103 (Section 13.3) Cultural Competency Training is additional financial burden to small business providers and only the approved Third Party Trainers are making huge amount of money in providing Cultural Competency Training. The lowest fee charged by the DBPH approved Third Party Trainer is \$50 per person and the highest is \$ 100 per Cost savings for small business provider with 5 person for every training session. Just for 120 home care providers with employees on board: five employees, these providers are spending annually between \$30,000 \$20.00 per hour is the median salary for the to \$ 60,000 for CCT provided by the Third Party Trainers. 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\$54.000.00 (\$450.00 X 120).

NRS 449.103 (Section 13.3)

Cultural Competency Training is additional financial burden to small business providers and only the approved Third Party Trainers are making huge amount of money in providing Cultural Competency Training. The lowest fee charged by the DBPH approved Third Party Trainer is \$50 per person and the highest is \$ 100 per

person for every training session. Just for 120 home care providers with five employees, these providers are spending annually between \$30,000 to \$ 60,000 for CCT provided by the Third Party Trainers. Here is the simple computation: (\$50 x 5 employees = \$250 x 120 homecare facilities = =\$ 90.00 x 5 employees = \$450.00 is the lowest \$30,000). The salary / per diem pay for the employee while on training is excluded in this computation. It will be a great help financially to all small business providers if DBPH can create a free on line CCT just like Adult Protective Services training on line provided by Nevada Care Connection.

Cost Savings for small business providers with 5 employees on board:

\$20.00 per hour is the median salary of the staff x 2 hours of training = \$ 40.00 plus \$50.00 lowest fee charged by Third Party CCT Trainer cost savings for the facility licensed for 5 beds over one calendar year. For 120 small business providers, the lowest cost savings per one calendar year is \$ 54,000 (\$450 x 120).

NRS 449.103 (SECTION 13.3). Cultural Competency Training is additional financial burden to small business providers and only the approved third Party Trainers are making huge amount of money in providing Cultural Competency Training. The lowest fee charged by the DPBH approved Third party trainer is \$50.00 per person and the highest is \$100.00 person every training session. Just for 120 home care providers with five employees, these providers are spending annually between \$30,000,00 to Cost Savings for small business providers with 5 \$60,000.00 for CCT provided by the Third Party Trainers. Here is the simple computation: (\$50.00 X 5 employees = \$250.00 x 120 homeware facilities = \$30,000.00). The salary / per diem pay for the employee while on training is excluded in this computation. It will be a great help financially to all small businesses providers if DBPH can create an online CCT just like Adult Protective Services training on line provided by the Nevada Care Connections

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It's very time consuming and not cost effective, our agencies cannot pay enough for these caregivers to be paid to take this training. This training should be provided by the state for free and should only be an hour long. These caregivers already have to take long trainings annually and it comes out of the little business profits we barely make.

Additional cost of training new and current employees. Cost is based on the number of hours required for new employee training (32 employees x 2 hours x \$17/hour = \$1,088) and annual training (50 employees x 2 hours x \$17/hr = \$1,700)

So far none, again it's very time consuming and expensive for businesses and caregivers because they have to take time off their day to get this training done

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Cost of training. Employees hours during training

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Here's the example: Cost Savings for small business providers with 5

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Cost Savings for small business providers with 5 employees on board: \$20.00 per hour is the median salary of the staff x 2 hours of training = \$40.00 plus \$50.00 lowest fee charged by Third Party CCT Trainer = \$90.00 x 5 employees = \$450.00 is the lowest cost savings for the facility licensed for 5 beds over one calendar year. For 120 small business calendar year is \$54,000 (450 x 120).

Annual Cultural competency Training is an additional financial burden to small business providers and only the approved Third Party Trainer will benefit from this Regulation.

In one calendar year, it will cost me \$ 1500.00. For the class \$100.00 for each employee x3, day salary \$200.00 x 3, salary for the covering employee for the class participant \$200.00 X 3, total of \$1500.00 annually. employees on board. Cultural Competency Training is an additional financial burden to small business providers and only the approved Third Party Trainers are the only

It will cost me \$1500.00 annually with 3

one that will benefit from it. It will cost me \$2000.00 annually, \$400.00 for the class, \$1600.00 for the wages including the wages of the employees covering for the participants
It will save me \$2000.00 annually with 4

of the class. Annual Cultural Competency Training is an additional financial burden to small business providers.

It will cost me \$3000.00 annually, \$600.00 for the class fee, and \$2400.00 for the wages of the class participants and the employee covering for the class participants.

employees on board

Cost savings for small business providers with 6 employees on board will be \$3000.00 annually.

Cultural competency is an additional financial burden to small business providers and only the approved Third Party Trainers are making a huge amount of money in providing Cultural Competency Training. The lowest fee charged by DBPH approved Third Party Trainer is \$50/person and the Cost Savings for small business providers with 5 highest is \$100/person for every training session. Just for 120 home care providers with 5 employees, these providers are spending annually between \$30,000 to \$60,000 for CCT provided by the Third Party Trainers. Here is the simple computation: (\$50 x 5 employees= \$250 x120 homecare fee charged by Third Party Trainer= 4(0.00 x 5 facilities= \$30,000). The salary/per diem pay for the employee while training is excluded from this computation. It will be a great help financially to all small business providers if DBPH can create free online CCT just like Adult Protective Services training online provided by Nevada

employees on board: \$20/hour is the median salary of the staff x 2 hours of training = \$40.00 plus \$50.00 lowest

employees= \$450.00 is the lowest cost savings for the facility licensed for 5 beds over one calendar year. For 120 small business providers, the lowest cost savings per one calendar year is \$54,000 (\$450 x 120)

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Paying \$180 dollars a year

If this is a required annual training the complacency that occurs over an 8 hr course annually can be great. Not to mention the need to take a staff member away from their job for 8 hrs to watch or listen to this will likely begin to loose its effectiveness and subsequently defeat what the overall goal is

		If a pca/applicant already took the CCT from another agency and the approved training from	
		that agency is different from our approved training	
		then the pca will be required to take our approved training.	
		<u> </u>	
The cost of the program is \$100-150 per employee per year with annual			
renewals of the certification. The State has only approved a small number	r		
of educational programs, so we are paying needlessly for this. We should be allowed to purchase a program, teach and renew in house and not pay		We are already in an era of staff shortages in the	
tens of thousands of dollars a year for this. There is no financial relief or		medical field. This is just another cumbersome	
reimbursement for small business to offset the cost of this regulation. Not one single advantage for a pca agency, 8 hours of high level bla bla,		regulatory item for the paper pushers	
nobody listens, just answering the questions. This is designed for ph level			
not pca kevel			
		Spending hours on a useless training for pca s	
		Can use these hours to assist the frail and elderly	
		Already licensed individuals (RNs & MDs) get	
		frustrated they must take additional training when already required from their licensing body.	
		Patients are going to get annoyed by the proposed	
		amount of questions and documentation that they are going to be asked when most of those	
Direct cost of training (sect 13) - \$5,000 - \$7,500		questions have zero to do with their treatment.	
		Financially, for small group homes and commercial, the operating costs are surging with these	
AB267 Cultural Competency training - cost of training for staff/new hires		additional requirements that may result in places	
continues to escalate mixed with hourly labor costs that is making it cost		shutting down as they can no longer afford the	
prohibitive. Requiring training annually is not cost-effective and does not change much from year to year.	None	substantially inflated hiring and operating costs of RFFGs/AGCs.	
The state of the s			
The requirement to find and take an existing class is a significant burden to small businesses that experience turnover in positions or employ part			
time employees. With State "approved" courses costing upwards of \$150			
per employee, it is a significant cost. With current employees and turnove this is easily an additional \$2250 expense. One solution would be for the	r		
State to provide a free course for employees to take. To avoid the cost of		Employees will be upset if they have to participate	
approved courses would require further time away from the business to develop such. Further the requirements for the course provider to have		in the cost of having to take a course to be employed. Why should the employer be the sole	
some type of certification or degree in cultural competency even further		provider in the cost when both parties are affected	
increases the burden and cost.		by the regulation. More expenses for the business and less incentive	
\$700	\$700	for employees	
The state now requires 8 hours of annual training to include OSHA			
required courses. Based on the courses provided by Care Academy 6+			
hours of CCT training plus OSHA plus Elder Abuse and HIPAA training		Caregivers want additional training to serve their	
equals approximately 12 hours of training without adding any needed caregiver training. Caregivers are paid to take assigned training.		clients so to increase the requirements for CCT takes them away from acquiring more knowledge in	
Financially this puts an additional burden of \$7,000.00 to \$10,000.00 per		skill/knowledge.	
year on our business that needs to make decisions based on profitability and ensuring the state mandated training is met and that training serves	There is not cost savings the adopted		
our clients and caregivers.	regulations will provide.		
The currently approved courses are very expensive. We would like to be		This training adds to the already extensive curriculum our employees are required to take each	
able to provide our own training to our employees.		year.	
Financial burden and additional time taken from actual caregiving time from our already very extensive daily labor routine. Cultural competency			
is but a small portion of multicultural diversity training I have been			
exposed to in the past 25 years. Within each culture, different levels of discrimination exists. It is the actual caregivers, owners, and			
administrators that are experts in the field of being discriminated against.		Additional training materials and course training in	
Just ask us.		the future	
Home care agencies, although we don't have a facility with beds and patients, are grouped in the "facility" definition under 449. We employ			
non-medical caregivers to provide amongst other things, assistance with a			
person's ADL's, light housekeeping, or perhaps companionship. This is to			
people wishing to live in their homes as opposed to being admitted to a bed/care facility. Caregiver turnover is typically over 65% per year so			
providing initial and annual cultural competency training is quite costly,			
and with the caregiver leaving my employ within a year means this cost and time of training now becomes a cost with no return on the		I run a private pay business. I will need to increase	
investment. Courses typically cost between \$50 and \$100 plus the 2 hours	s	my rates to pass this cost on to elders needing care	
of training. I hire around 100 caregivers a year (and I am a small agency compared to others). At \$100 per hire x 100 hires = \$10,000 of expense.		to living longer in their homes. Our services are not paid by Medicare as we are non-medical. We are	
65% turnover means that \$6,500 spent annually is essentially money		not covered under a medical benefit program. You	
flushed down the drain. Most home care agencies run on a profit margin of maybe \$3/hour (or much less if they have the majority of their business	There is no cost savings to home care agencies	are simply raising the cost of non-medical home care go people needing care to live. Good on you!	
coming from Medicaid) of what is billed to the client. \$10,000 of expense	= = = = = = = = = = = = = = = = = = = =	For agencies that get most of their business from	
divided by \$3/hour profit margin means that I would have to bill 3,334	because we don't operate a brick and mortal	Medicaid, something will have to give to manage	
hours annually simply to cover this new cost. A client shift for my company can be as little as 3 hours (home based clients typically can't	facility with beds, evacuations routes, hazardous chemicals etc.) This is a pure cost	their margins. Medicaid reimbursement is only slated to go up to \$25/hour and \$16 of that has to	
afford 8 hours a day of home care help). If all shifts were 3 hours in	increase for us. For agencies that work on	go to direct caregiver wages. That leave only	
		burnour to now for modical bandite training office	
length, I need to bill 1,111 shifts to break even on this cost. Now I have to spend this annually? If the course cost was capped at \$20/person and	extremely thin margins, this will put some agencies out of business. This also creates a	\$9/hour to pay for medical benefits, training, office space, schedulers, licensing etc. etc. We are a	
length, I need to bill 1,111 shifts to break even on this cost. Now I have to spend this annually? If the course cost was capped at \$20/person and if the annual retraining requirement were eliminated or changed to biannual, this would substantially reduce the burden to us.	extremely thin margins, this will put some agencies out of business. This also creates a disincentive for me to grow my business because it will just cost me more.	space, schedulers, licensing etc. etc. We are a low margin business and you are killing us with all this non-necessary regulation and costs.	

AB267 is burdensome and cost prohibitive for agencies. As the standard is written now, it would cost me over \$18,000 to train my current employees. For me to train all of the employees I hired last year, it would cost \$39,000. This number was arrived by me paying each employee their hourly wage to complete the training as it is now and does not include me paying for the approved courses.		We are struggling with finding labor as it is and this will be hours upon hours that our employees are not in a home and not caring for people. It also will greatly impact the finances of a small business which result in higher prices for our clients and potentially lower wages for employees.
Wingfield is a nursing home with approximately 120 employees. The regulations, as written, will cost 4 hours for each in training, plus the cost of training. This is equivalent to about 200 dollars per employee (4 hours at \$25 per hour and 100 per course. It will cost approx 20,000 to be in compliance with this regulation. Not to mention, the employees hate the training that is available. They think it is inappropriate.	Zero.	The employees think this training is ridiculous. It seems designed to force a narrow worldview on individuals, some of whom agree, and others who disagree. Regardless, it has not gone over well in the work setting.
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\$9300 or more	Won't save us a dime	in nature and not long lasting
Cultural competency training requirement is costing my facility an additional \$10,000 per year. I will inevitably have to pass this cost on to my clients, therefore adversely impacting the elderly living in NV.		More potential clients will be priced out of my facility due to the cultural competency training necessitating another price increase.
NRS 449.103 (Section 13.3) Cultural Competency Training is additional financial burden to small business providers and only the approved Third Party Trainers are making huge amount of money in providing Cultural Competency Training. The lowest fee charged by the DBPH approved Third Party Trainer is \$50 per person and the highest is \$100 per person for every training session. Just for 120 home care providers with five employees, these providers are spending annually between \$30,000 to \$60,000 for CCT provided by the Third Party Trainers. Here is the simple computation: (\$50 x 5 employees = \$250 x 120 homecare facilities= \$30,000). The salary / per diem pay for the employee while on training is excluded in this computation. It will be a great help financially to all small business providers if DBPH can create a free on line CCT just like Adult Protective Services training on line provided by Nevada Care Connection.	employees on board: \$20.00 per hour is the median salary of the staff x 2 hours of training = \$40.00 plus \$50.00 lowest fee charged by Third Party CCT Trainer =\$90.00 x 5 employees = \$450.00 is the lowest cost savings for the facility licensed for 5 beds	
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Cultural Competency Training. We try to hire as much as possible but with the severe caregiver shortage we may get up to 5 a month. We get them on boarded. Not all stay past 2 months. It's the way is has been since Covid. So, 5 a month at \$40 a pop times the 2 hours it takes to do the class is \$4560 a year. That might seem like little to you, but it is a HUGE chunk of change for our small agency of only 20 caregivers. In my opinion, NON-medical personal care agencies should be exempt from this training.		This training has been met with so much pushback from our staff. They have all gone to it and they all think it is basically for the medical professionals. They are all ready telling us how it makes them feel like we are calling them racist and bigots. WE ensure them that isn't the case, but they are very unhappy. We have a very diverse staff.

As originally proposed, the training requirements for Cultural Competency would create a huge burden on our Personal Care Agency. We already have to pay for approximately 16 hours of initial training and another 8 hours of annual training per employee. We not only pay for all training materials, but compensate the employee with hourly pay. To add 6-8 hours of training for Cultural Competency initially and annually is going to drive many smaller players out of the senior market. Assuming Cultural Competency training is ONLY 6 hours per year, our agency cost would be approximately \$32,800. To arrive at that figure I used the following: 6 hours of class at \$17.50 average hourly pay per employee plus a tuition fee of \$100 per employee for a total of \$205 per employee. We have 80 caregivers but experience a minimum rate of 100% turnover in a given year. Therefore I took the cost of \$205 per employee and multiplied by 160 attendees to come up with my estimate of \$32,800. The numbers assume the class is taken one time and not repeated as an annual requirement.		Many employees resent the barrier to employment the State has already placed upon the non medical caregiver. Between 2step TB tests, physical exams, background checks, 16 hours of initial training, CPR certification, and all the agency-required training, the employee is spending a good deal of money and time to enter a field that pays minimally. They DO NOT treat patients. They provide assistance with the activities of daily living. The State is regulating them and the agencies who employ them out of the business of caring for the elderly.	
	The class itself runs approximately \$150 per person, and each person is required to take the class within 30 days of hire. It is not only the cost of the class per employee but the cost of impacted senior care due to not having the team on the floor. It would be beneficial to have a little more leeway in when the class is due so scheduling is not impacted as much and resident care is put first as it should be.	I assuming the price of classes will increase as there will be a loss of revenue due to the regulation change.	
pencil and it is now up to 470.00. It may not sound like much in your realm, but it is significant to us. We take care of alot of veterans (16) and Medicaid (20) recipients. We have to be very frugal to be able to do this.	Treating people correctly can lead to longevity of residence. Which in turn is good for our revenue. There is the thought if this is something that can be taught, or you have to be born with it in your heart and soul.REferring to Cultural Completency Training.	The cost and turn over rate we have to deal with. We have to pay 8 hours of wages for this in addition to the cost of the course.	
Give Input on Cultural Competency Training Regulations: AB267			
I appreciate this being looked at and the changes being made. We are in favor of the direction that this is headed. My only concern is with the last bullet point: Establish new periodicity and a minimum number of hours of CCT:			
I personally don't like the idea of assigning a set time limit or maximum as every area and facility is very different. Some areas may have a lot more to discuss and others may have less. If a time limit or maximum is set it will reduce the effectiveness of the training. Please focus on the content being taught and not the time.			
An estimate of the cost to the facility would be approximately \$16,000 for every hour of training required for each employee. This was determined by taking all employees hourly rates and adding them together. This is a huge financial impact, especially if an hour requirement is set that is above and beyond what is necessary.			There is potential that a few patients in a year will have a more positive interaction with staff that are more aware.
Any additional cost will have an adverse economic effect.	Although it's important to be culturally competent, being such will not create economic benefit.		Sure, indirectly, if my staff is more culturally competent, I should be able to provider a higher level of person centered care, then what I am able to do now.
	We are currently required to have 8 hours of initial training and 8 hours of annual training thereafter. This will be a significant reduction of employee time required for training. I project the reduction will be over \$1,000 annually.		The training is a good thing. I think that two hours is more than enough to get good results.
caregivers. 40 x 45.00 is 1800.00 a year. We lose caregivers all the time	I propose the time be cut to a 1 hour course. Every two years. That would be a financial benefit		We will be able to provide more service that is needed in our community
because of the amount of training founds that are required to the AB267 - we already have a class online through Relias that provides this topic. We pay our employees to take this class now but additional hours could cost us approximately \$7000 per year. This would be at \$15 per hour for the additional hours for 50 employees and this would increase as wages increase and having to remove employees from working hours to take classes. This does not include the cost of the class or the loss of income.		The loss of income due to employees not working all hours and the cost of the classes and payment to employees for taking the classes.	Employees don't want to give up hours they work.
This regulation is currently costing my agency \$37,500 to train each employee on CC, assuming the use of one of the 8-hour classes that have been approved for use by personal care attendants over the last two years.		Many of the personal care attendants in this state are already marginalized. One of the outcomes of the SB340 process was a unanimous request to redesign the CC training for the personal care industry to teach our caregivers coping skills and how to handle adverse situations where THEY are the people being marginalized. As of this moment, that unanimous request has been ignored.	Both agencies and caregivers suffer from the adverse impacts of bureaucratic overreach, it unites us against people more interested in building departmental infrastructures and not acting the the best interests of our caregivers and clients.

Third Party Trainers. Here is the simple computation: $(\$50 \times 5 \text{ employees} = \$250 \times 120 \text{ homecare facilities} = \$30,000)$. The salary / per diem pay for	\$20.00 per hour is the median salary of the staff $x \ge hours$ of training = \$40.00 plus \$50.00 lowest fee charged by Third Party CCT Trainer \$90.00 x 5 employees = \$450.00 is the lowest cost savings for the facility licensed for 5 beds over one calendar year. For 120 small business	We do not anticipate any indirect adverse effects because if NRS 449.103 (Section 13.1) will be implemented, there will be already direct adverse effect to us as a small business provider.	We do not anticipate beneficial indirect adverse effects because if NRS 449.103 (Section 13.1) will b implemented, there will be already direct adverse effect to us as a small business provider.
NRS 449.103 (Section 13.3) Cultural Competency Training is additional financial burden to small business providers and only the approved Third Party Trainers are making huge amount of money in providing Cultural Competency Training. The lowest fee charged by the DBPH approved Third Party Trainer is \$50 per person and the highest is \$100 per person for every training session. Just for 120 home care providers with five employees, these providers are spending annually between \$30,000 to \$60,000 for CCT provided by the Third Party Trainers. Here is the simple computation: (\$50 x 5 employees = \$250 x 120 homecare facilities = \$30,000). The salary / per diem pay for the employee while on training is excluded in this computation. It will be a great help financially to all small business providers if DBPH can create a free on line CCT just like Adult Protective Services training on line provided by Nevada Care Connection.	\$20.00 per hour is the median salary of the staff $x \ge hours$ of training = \$40.00 plus \$50.00 lowest fee charged by Third Party CCT Trainer \$9.0.00 x 5 employees = \$450.00 is the lowest cost savings for the facility licensed for 5 beds over one calendar year. For 120 small business	We do not anticipate any indirect adverse effects because if NRS 449.103 (Section 13.1) will be implemented, there will be already direct adverse effect to us as a small business provider.	We do not anticipate beneficial indirect adverse effects because if NRS 449.103 (Section 13.1) will b implemented, there will be already direct adverse effect to us as a small business provider.
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NRS 449.103 (Section 13.3) Cultural Competency Training is additional financial burden to small business providers and only the approved Third Party Trainers are making huge amount of money in providing Cultural Competency Training. The lowest fee charged by the DBPH approved Third Party Trainer is \$50 per person and the highest is \$ 100 per person for every training session. Just for 120 home care providers with five employees, these providers are spending annually between \$30,000 to \$ 60,000 for CCT provided by the Third Party Trainers. Here is the simple computation: (\$50 x 5 employees = \$250 x 120 homecare facilities=\$30,000). The salary / per diem pay for the employee while on training is excluded in this computation. It will be a great help financially tall small business providers if DBPH can create a free on line CCT just like Adult Protective Services training on line provided by Nevada Care Connection.		We do not anticipate any indirect adverse effects because if NRS 449.103 (Section 13.1) will be implemented, there will be already direct adverse effect to us as a small business provider.	We do not anticipate beneficial indirect adverse effects because if NRS 449.103 (Section 13.1) will brimplemented, there will be already direct adverse effect to us as a small business provider.
\$52,000 to 75,000 per year depending on CG turnover		Many of our employees are part of a marginalized population and this training is above their education level so they often misunderstand the material and in some case is oppressive in nature.	More awareness of different cultural norms in the clients households
NRS 449.103 (Section 13.3) Cultural Competency Training is additional financial burden to small business providers and only the approved Third Party Trainers are making			

business providers and only the approved Third Party Trainers are making huge amount of money in providing Cultural Competency Training. The lowest fee charged by the DBPH approved Third Party Trainer is \$50 per person and the highest is \$ 100 per person for every training session. Just for 120 home care providers with five employees, these providers are spending annually between \$30,000 to \$60,000 for CCT provided by the Third Party Trainers. Here is the simple computation: (\$50 x 5 employees = lowest fee charged by Third Party CCT Trainer \$250 x 120 homecare facilities= \$30,000). The salary / per diem pay for =\$90.00 x 5 employees = \$450.00 is the lowest the employee while on training is excluded in this computation. It will be a cost savings for the facility licensed for 5 beds We do not anticipate any indirect adverse effects great help financially to all small business providers if DBPH can create a over one calendar year. For 120 small business free on line CCT just like Adult Protective Services training on line provided providers, the lowest cost savings per one by Nevada Care Connection.

Cost Savings for small business providers with 5 employees on board: \$20.00 per hour is the median salary of the staff x 2 hours of training = \$ 40.00 plus \$50.00 calendar year is \$ 54,000 (\$450 x 120).

because if NRS 449.103 (Section 13.1) will be implemented, there will be already direct adverse effect to us as a small business provider.

We do not anticipate beneficial indirect adverse effects because if NRS 449.103 (Section 13.1) will be implemented, there will be already direct adverse effect to us as a small business provider.

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