

tion providing health care services to Indians pursuant to a contract under the Indian Self-Determination Act [25 U.S.C. 5321 et seq.] if such physician or nurse is serving in a position which the Secretary determines is—

- (1) a position for which recruitment or retention is difficult; and
- (2) necessary for providing health care services to Indians.

(Pub. L. 94-437, title I, §117, as added Pub. L. 100-713, title I, §109, Nov. 23, 1988, 102 Stat. 4799; amended Pub. L. 102-573, title I, §104(d), Oct. 29, 1992, 106 Stat. 4533.)

#### REFERENCES IN TEXT

The Indian Self-Determination Act, referred to in subsec. (f), is title I of Pub. L. 93-638, Jan. 4, 1975, 88 Stat. 2206, which is classified principally to subchapter I (§5321 et seq.) of chapter 46 of this title. For complete classification of this Act to the Code, see Short Title note set out under section 5301 of this title and Tables.

#### AMENDMENTS

1992—Subsecs. (b) to (f). Pub. L. 102-573 added subsec. (b), redesignated former subsecs. (b) to (e) as (c) to (f), respectively, and amended subsec. (f) generally, substituting provisions relating to physicians and nurses employed under the Indian Self-Determination Act for provisions which authorized appropriations for fiscal years 1990 to 1992.

### § 1616k. Nursing residency program

#### (a) Establishment

The Secretary, acting through the Service, shall establish a program to enable licensed practical nurses, licensed vocational nurses, and registered nurses who are working in an Indian health program (as defined in section 1616a(a)(2)(A) of this title), and have done so for a period of not less than one year, to pursue advanced training.

#### (b) Program components

Such program shall include a combination of education and work study in an Indian health program (as defined in section 1616a(a)(2)(A) of this title) leading to an associate or bachelor's degree (in the case of a licensed practical nurse or licensed vocational nurse) or a bachelor's degree (in the case of a registered nurse) or a Master's degree.

#### (c) Service obligation of program participant

An individual who participates in a program under subsection (a), where the educational costs are paid by the Service, shall incur an obligation to serve in an Indian health program for a period of obligated service equal to at least three times the period of time during which the individual participates in such program. In the event that the individual fails to complete such obligated service, the United States shall be entitled to recover from such individual an amount determined in accordance with the formula specified in subsection (l) of section 1616a of this title in the manner provided for in such subsection.

(Pub. L. 94-437, title I, §118, as added Pub. L. 102-573, title I, §104(e), Oct. 29, 1992, 106 Stat. 4534; amended Pub. L. 103-435, §16(b), Nov. 2, 1994, 108 Stat. 4573.)

#### AMENDMENTS

1994—Subsec. (b). Pub. L. 103-435 inserted before period at end “or a Master's degree”.

### § 1616l. Community health aide program

#### (a) General purposes of program

Pursuant to section 13 of this title, the Secretary, acting through the Service, shall develop and operate a Community Health Aide Program in the State of Alaska under which the Service—

(1) provides for the training of Alaska Natives as health aides or community health practitioners;

(2) uses those aides or practitioners in the provision of health care, health promotion, and disease prevention services to Alaska Natives living in villages in rural Alaska; and

(3) provides for the establishment of teleconferencing capacity in health clinics located in or near those villages for use by community health aides or community health practitioners.

#### (b) Specific program requirements

The Secretary, acting through the Community Health Aide Program of the Service, shall—

(1) using trainers accredited by the Program, provide a high standard of training to community health aides and community health practitioners to ensure that those aides and practitioners provide quality health care, health promotion, and disease prevention services to the villages served by the Program;

(2) in order to provide such training, develop a curriculum that—

(A) combines education regarding the theory of health care with supervised practical experience in the provision of health care;

(B) provides instruction and practical experience in the provision of acute care, emergency care, health promotion, disease prevention, and the efficient and effective management of clinic pharmacies, supplies, equipment, and facilities; and

(C) promotes the achievement of the health status objectives specified in section 1602(2) of this title;

(3) establish and maintain a Community Health Aide Certification Board to certify as community health aides or community health practitioners individuals who have successfully completed the training described in paragraph (1) or can demonstrate equivalent experience;

(4) develop and maintain a system that identifies the needs of community health aides and community health practitioners for continuing education in the provision of health care, including the areas described in paragraph (2)(B), and develop programs that meet the needs for such continuing education;

(5) develop and maintain a system that provides close supervision of community health aides and community health practitioners;

(6) develop a system under which the work of community health aides and community health practitioners is reviewed and evaluated to ensure the provision of quality health care, health promotion, and disease prevention services; and