

**FLORIDA BOARD OF NURSING HOME ADMINISTRATORS
ADMINISTRATOR-IN-TRAINING PROGRAM**

**Administrator-In-Training (AIT)
And Preceptor
Information Guide**

Updated October 1, 2013

**FLORIDA BOARD OF NURSING HOME ADMINISTRATORS
ADMINISTRATOR-IN-TRAINING PROGRAM**

**Administrator-In-Training (AIT)
And Preceptor
Information Guide**

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**FLORIDA BOARD OF NURSING HOME ADMINISTRATORS
ADMINISTRATOR-IN-TRAINING PROGRAM**

INTRODUCTION

Welcome to the AIT Program! You have made a great decision to become a healthcare professional that makes a difference in the lives of residents, staff and the community everyday.

An AIT Monitor who is a member of the Board of Nursing Home Administrators, will be assigned to work with you during your Program. The Monitor will make contact with you and your Preceptor within 4-6 weeks of starting to review the process, review the Guide and answer any questions you may have.

This Guide was developed to offer general information and samples for writing Narratives, completing the Hours Checklist and that all the required documentation is done to ensure that your Quarterly package is complete.

Please feel free to contact Board staff or your Monitor at any time should you have questions or need assistance.

**BOARD OF NURSING HOME ADMINISTRATORS
ADMINISTRATOR-IN-TRAINING PROGRAM**

**Administrator-in-Training and Preceptor
Quarterly Report Checklist**

(THIS IS YOUR CHECKLIST – DO NOT SEND WITH THE QUARTERLY REPORT)

The following is a list of information and/or actions that are needed for your Quarterly Report to be accepted by staff before it is sent to the Monitor. Failure to complete the Report as indicated may cause unnecessary delays in the review process.

NARRATIVES:

AIT – The name of the AIT, name of Facility, address and the date or quarter should be at the top of each page of the Narrative. The Narrative should be written by Domain of Practice (DOP) and the content should reflect the areas of concentration on the Checklist. (See Attachment A)

Preceptor – The name of the Preceptor, name of Facility, address and the date or quarter should be at the top of each page of the Narrative. The Narrative should be written by Domain of Practice (DOP) and the content should reflect the activities and learning opportunities.

INITIAL EACH PAGE:

The AIT and Preceptor must initial each page of the AIT & Preceptor's Narrative, indicating that it has been read and accurate.

DOMAINS OF PRACTICE QUARTERLY CHECKLIST:

Complete the Administrator-In-Training, Domains of Practice Quarterly Checklist, listing the total hours for the quarter by DOP. Use the same Checklist each quarter adding the new hours by quarter. Each area by DOP should have hours listed by the end of your Program. For your convenience, an Excel document has been created for your use. (See Attachments B and C)

VERIFY MATH:

Recheck your math by re-adding the hours for the quarter by DOP.

INITIAL EACH SECTION/PAGE:

AIT and Preceptor must initial each page of the Checklist.

SIGNATURE and DATE:

AIT and Preceptor must sign and date signature sheet for the appropriate quarter.

DOCUMENTING HOURS between 10:00 PM to 7:00 AM:

On a separate report, indicate if any hours are between 10:00 PM to 7:00 AM. If there are none, please write "No Hours from 10:00 PM to 7:00 AM". If there are hours, write a Narrative indicating what was observed or activities performed by DOP.

MAILING REPORTS:

Mail the report to the Board of Nursing Home Administrators, 4052 Bald Cypress Way, Bin C07, Tallahassee, Florida 32399-3257. Suggest sending certified mail to track receipt.

PERSONNEL 64B10-16.005(2)(a),

- Possesses the ability to plan and develop basic staff development procedures.
 - While working at [REDACTED] I have been involved with helping our staff learn a new scanning program. The scanning program is a process designed to help the nursing and financial departments track the billable goods in the nursing home. When the program was first introduced to the employees the procedures were not clear and we were not able to use the scanners properly. I was able to assess what the problem was and re-write the procedures, along with training the appropriate staff. By implementing step by step procedures for all levels of our nursing staff [REDACTED] now has an effective scanning program.
- Possesses the ability to use audit procedures to evaluate effectiveness of training.
 - The installation of our new scanning system was to implement an audit procedure with supplies used by the nursing staff. Now we are able to track each item dispensed by employee and resident. This has made our inventory and billing more effective. The first month the scanning program was in process the company who installed the program trained our staff how to scan items. The numbers of items scanned by the staff at the end of the month did not add up to the amount of items placed on the floors. I was then asked to assess the problem, and after watching a nurse scan her items she used during the day. I noticed when the nurse had multiple scans of one item the scanning program was not saving the multiple scans of these items. The nurse was manually pressing the items into the scanner. I asked the nurse to actually scan the item in as many times as she used it, and after she scanned in all the items the scanner had saved every item she scanned. After I trained the nurses in this new process the next months print out of inventory had a 100% increase in products used which in turn add to more billable items to our payers.



PRECEPTOR

SAMPLE

FACILITY

- Understands the importance of and proper process for exit interviewing.
 - I have learned that the purpose of the exit interview is to gain any valuable information that can be applied to improve the employee environment of your facility. Questions should be asked in a way that will not evoke arguing or escalate a situation that could already be heated. The questions should be standard and focused on the area where the person worked and also ask for any suggestions on improvement.

64B10-16.005(2)(a)1

- Demonstrates an understanding of how to effectively train individuals to perform their duties.
 - Effective training is going to be different depending on the size of the department and what part of your facility it is. What is important is follow-up after the training to ensure the procedures are being implemented properly. Training can be done in groups, but then the follow up would need to be individually. People learn at different rates and it is important to provide the training to meet the needs of the employee. An example would be in our implementing the scanning system, I demonstrated to a group, but followed up individually with the nursing staff. Some needed to be shown several times before they had mastered the skill. Training should be ongoing and repeated as often as needed.

64B10-16.005(2)(a)3, 4, 5

- Understands the functions of the Nursing Services team and effective management of the Nursing Department.
 - The nursing team has the most interaction with the residents. They are not only responsible for the health, hygiene, and comfort of the patient – they are also the team that would most easily recognize any changes in the resident. Communication among the different nursing staff is vital to residents care. They not only have to communicate with each other but with the other departments as well. Management of this department needs to be fair, consistent, with affirmation, encouragement, and appreciation. I have seen the value of recognizing good care and behavior with letting the nurse know how much you appreciate their work; as well as the need to improve care followed up with recognition when the actions are corrected and affirmation of their efforts.

PRECEPTOR • Understands how to manage ^{SAMPLE} Physical Therapy staff.

FACILITY

- This is a vital department to any facility. PT applies to both long-term residents and short-term rehab residents. It is important that the PT staff equally values the care of both types of residents by staying on top of filling out paper work since some reports may need quarterly attention while others need daily or weekly attention. The PT staff need to work with the other departments so that patients are able to follow a schedule and get to the PT area in a timely manner, Maximizing your PT services benefits not only the residents, but also the effectiveness of your program.
- Possesses an understanding of the various roles and services of Occupational therapy team members.
 - The OT team is vital to a resident's length of stay in a facility. Their objective is to help residents re-learn how to manage daily tasks such as using the restroom, brushing teeth, turning on lights, and many other motor skill activities. The OT team in my facility is involved in the entrance interview to assess the ability of residents and determine what OT or PT services are needed.
- Understands the services provided by Speech Therapy.
 - ST is vital to residents who have usually had some type of brain trauma and can no longer communicate in an effective way. Sometimes is from a stroke our injury where brain swelling has occurred. These residents need help in re-learning how to form words and speak in complete sentences. Another area ST is involved with is swallowing. It often may be common for the elderly to choke when eating after a stroke and ST can assist residents with how to chew their food properly or to put a smaller amount of food in their mouths to avoid choking.
- Understands the role of Audiological Services.
 - Audiological services are for residents who need hearing aids. If a resident is hard of hearing the social services director will call the hearing aid company and have one of their reps come visit with that resident to correctly fit them with a hearing aid. This can be quite an adjustment for some residents as they may have been hearing impaired for many years and aren't used to hearing all the noises in everyday life. It could take several visits to properly fit a patient with a hearing device that works best for them.

AA AIT

SP

WAA

PRECEPTOR • Understands the functions of the Social Services team and the management of Social Services.

FACILITY

- Social Services role begins when a resident is admitted with an interview to ensure that all the needs of the resident are met. They assist the resident with scheduling services while they are in the facility and then also assist with making appointments for follow up care when the residents are discharged. The Social Service team assists the families with making decisions on whether a family member might need hospice, or any other type of care that may be needed at the time of discharge. If additional care is needed in the home by visiting nurses, these arrangements are usually set up by Social Services also. In managing this team, it is important to make sure the paper work is filled out properly and follow up is maintained. It is also important that management ensures that upon admission, the social service team has a thorough interview with resident and family so that issues are addressed and not missed.
- Understands the functions of the Dietary team and how to manage the Dietary department.
 - When working with the nutrition liaison, I observed how to effectively complete the care plans. When completing a care plan for a resident it is important to interview this resident one on one. You need to learn of any food allergies, and also what foods this resident enjoys to eat. Poor appetite is often an issue and nutrition is vital when trying to heal or to improve overall health. Charting must be accurate with how a patient is eating.
- Understands the functions of the Medical Records team.
 - This team is responsible for making sure all documents pertaining to a resident are placed in the correct file. This department is also responsible for maintaining patient confidentiality in compliance with HIPPA laws. Paper trails must be established in the sending and transferring of records between physicians and facilities with proper request documentation.
- Understands the application of employee retention techniques.
 - Retaining employees is good practice. All benefit from this good practice from saving money for training to establishing relationships with residents and families. Employees need to feel valued and respected and be shown opportunities for advancement. There are incentive plans you can implement, or ways to feature employees that

PRECEPTOR

have performed ^{SAMPLE} well such as employee of the month, etc. Employees should be told when hiring what their salaries are and the pattern for increases so there are no surprises and so they know what to expect.

FACILITY

- **Understands proper overtime administration and non-exempt status.**
 - Proper management of non-exempt employees in regards to their time working is very important. This is done by accurate logs of signing in and out. By law, non-exempt employees must be paid for time worked, even if it is over 40 hrs per week. The rate for overtime is 1.5 times their rate of pay. It is also important to be consistent with all non-exempt employees. You cannot pay some for overtime and not others.
- **Possesses knowledge of CNA training requirements.**
 - CNA's must be licensed in the State of Florida and must renew their license every two years. This ensures to the residents and their families that the facility requires a trained and consistent level of care from the nursing staff. This training shows them how to care for patients from infants to elderly in all aspects of bathing, feeding, and cleaning, sanitizing rooms.
- **Demonstrates a working knowledge of risk management policies.**
 - Risk management is a function of minimizing situations that could lead to injury, illness, accidents or hazards in the work place for residents and employees. By implementing standards of safety in all departments and training employees to perform their duties with the proper equipment and safe behavior this will minimize accidents and injury. Usually having employees sign a document agreeing to use proper safety techniques and equipment is a good practice. Holding trainings on how to lift patients properly and safe food handling is also a good practice.
- **Fully understands the process of physician credentialing.**
 - Physician credentialing is a way to verify that the physicians are adequately trained and experts in their fields. It is a legal obligation for a facility to provide competent physicians for the residents so you would need to ask for credentials before granting privileges to your facility. Physician credentials are collected and kept on sight for review for accreditation and licensure including DEA numbers, physician license, and insurances.

ATTACHMENT A

AIT NAME & FACILITY ON EACH PAGE

QUARTER: 1 2 3 4
(circle one)

SAMPLE

This narrative describes relevant learning experiences including (1) on-the-job experience, (2) meetings attended, (3) surveys completed, (4) written reports, (5) texts or periodicals, (6) visits to other facilities, (7) academic programs, (8) college or (9) continuing education seminars, 64B10-16.005(8)(d) F.A.C.

1 PERSONNEL; 64B10-16.005(1) F.A.C. [15%]

- 1.1 On-The-Job Experience: I attend Staff meetings every morning at 9:00 AM, which includes all department heads. Various items are discussed including daily census, new admissions, rehab issues, marketing initiatives, infection control, risk management, maintenance items, social services / activities and human resource items.
- 1.2 On-The-Job Experience: Several times each day, I conduct Management-By-Walking-Around (MBWA) trips throughout the facility. Initially this was with my preceptor ~~however~~ however, now I usually go alone to supplement his MBWA trips.
- 1.3 Domain / Sub-functions: Possesses the ability to use audit procedures to evaluate effectiveness of training. On a regular basis, I discuss the effectiveness of training with the Administrator and the Staff Development Coordinator. They use both audit procedures and expected outcomes results to gauge the effectiveness of training provided. On all occasions when In-Service (internal training) is conducted, sign-up sheets are used to ensure all required personnel are present.

64B10-16.005(1)(a)

- 1.4 Domain / Sub-functions: Demonstrates an understanding of how to effectively train individuals to perform their duties. On a regular basis, I discuss how to effectively train individuals with the Administrator, Director of Nursing, Rehab Manager, Human Resource Manager, and the Staff Development Coordinator. Different strategies and techniques are employed including hands-on training, video and webinar training, written documentation and verbal training. I have also studied this topic via reference material including "Effective Management of Long Term Care Facilities" (by Douglas Singh; 2010 edition) and "Nursing Home Administration" (by James E. Allen; 2003 edition)

64B10-16.005(1)(b)

- 1.5 Domain / Sub-functions: Able to apply proper staff disciplinary procedures. On a regular basis, I discuss how to effectively apply proper staff disciplinary procedures with the Administrator, Director of Nursing, Human Resource Manager, and the Staff Development Coordinator. This is an unfortunate, but very important function within the facility. An inability to properly discipline personnel can cause greater harm to the employee or others, depending on the situation. I have also studied this topic via reference material including "Effective Management of Long



AIT NAME & FACILITY ON EACH PAGE

QUARTER: 1 2 3 4
(circle one)

SAMPLE

MEETINGS ATTENDED:

I attended the following meetings:

Daily Prospective Payment System- to discuss Medicare residents receiving Rehabilitation Therapy and what Resource Utility Group each resident was on.
Care Plans on Tuesday's / Thursday's - to discuss ongoing individual resident care
Daily Department Managers Morning meeting -review on what each department was working on
Monthly Performance Improvement / Quality Improvement- review compliance for improvements in federal/ state regulations and quality measures.
Monthly Safety Committee - improve health and safety in the workplace.
Regional Directors meeting with Operations, Environmental/ Laundry, Admissions- open discussion of facility issues.
Human Resources regarding missed punches and how it relates to the Per Patient Day staffing.
Regional Directors for Rehabilitation- attend Prospective Payment System and RUG levels.

FACILITY CONFERENCE CALLS ATTENDED:

Workers compensation calls- general overview of facility employee's compensation.
Company Medicare call regarding Prospective Payment System/ Medicare RUG levels.
Resident Satisfaction Survey preparation- improve resident service and quality of care.
New employee handbook discussion/ changes to the old handbook relating to employees.
New MDS 3.0 -changes and comparison to current 2.0 MDS.

PROJECTS COMPLETED

I worked on a project that was related to Certified Nursing Assistants skills and qualifications, and what unit they may be best suited to, either sub-acute care or long term care.
The same project was applied to Licensed Practical Nurses.

I worked on a new policy/ procedure regarding resident discharges and creating new packaged containers that would be given to the residents who were being discharged.



AIT NAME & FACILITY ON EACH PAGE

QUARTER: 1 2 3 4
(circle one)

SAMPLE

PERIODICALS

I reviewed articles relating to:

Article review from FHCA "Pulse: a Long Term Care Monitor of Nursing Home and Assisted Living", April, 2010 Ed. : "Five Star Q & A".

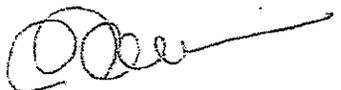
Review from Provider "Culture Change Picks Up Speed", May, 2010 Ed. "*Loving Touch Makes A Difference: An innovative Alzheimer's care program provides meaningful activities to residents with advanced dementia*".

Article review from FHCA "Pulse: a Long Term Care Monitor of Nursing Home and Assisted Living Issues", June, 2010 Ed. The article I reviewed was called "Documenting fall prevention" by Karen Goldsmith.

Article review from "Mc Knight's Long-Term Care News, "Cut the puppet strings" by Dave Sedgwick, June, 2010 Ed.

ASSIGNMENT

Completed assignment on "Patton on Leadership: Strategic Lessons for Corporate Warfare" by Alan Axelrod- related to corporate leadership and management strategies.



PRECEPTOR SAMPLE REPORT

Page 1 of 2

SAMPLE

May 5, 2011

Dear Ms. Freeman,

██████████ has now completed his third quarter of AIT Program towards his 2,000 Hour Program. In the third quarter, ██████████ has spent time in all areas of the Domains of Practice:

Personnel

Some of the highlights of his time in this area were being involved with unemployment claim conference calls, observed an internal investigation and eventual termination of a stakeholder. He was also received training in Predictive Index Personality Profile Training and LEAN Training on process improvement.

Finance

I continue to work with ██████████ on how to critically analyze the P&L Statements, and have made him responsible for a weekly report that looks at our key factors that drive our business. This report includes analysis on staffing/payroll, cash collections month to date, therapy caseload both from Part A and Part B and spend down sheets. Additionally he worked in therapy on triple check process and the Medicaid Pending process and the complications related with attaining approvals.

Marketing

██████████ has been working with outside vendors to coordinate a grand re-opening that will include a name change. Additionally I have taught him how to analyze the Health Planning Council Data. We have also been learning together a great deal about ACO's and he has seen my attempts to schedule appointments with our referring hospitals to discuss.

Physical Resource Management

██████████ spent some time learning about some of the regular inspections that must be done a part from annual survey (generators, hoods, fire extinguishers, etc...). He has also coordinated with vendors to assure parts needed for room moves etc were available when needed to ensure a smooth transition as we made over 30 room changes over two days.

Regulatory

██████████ got to accompany me to Tallahassee where we spent a day visiting state legislators and he got to see first-hand how laws that effect our business come into being and the importance of establishing relationships with our state legislators. We also visited the Florida Health Care Association while we were there. He has also been a part of QA rounding and checklists to ensure on-going compliance.

Administrator Initials

AIT Initials

— PRECEPTOR SAMPLE REPORT

Page 2 of 2

SAMPLE

Additionally, [redacted] is becoming more versed in the state and federal regulations as he begins to prepare to take his state and NAB tests.

Resident Care

[redacted] has spent a great deal more time on the hands on portion of patient care this month both from a nursing and therapy perspective. He continues to grow in his knowledge of skin integrity, restraint elimination, falls reduction and proper interventions and weight loss avoidance.

[redacted] is learning more and more each day, we are really working on regulation knowledge and deeper P&L Analysis for the last quarter. He is still working on slowing down and getting all the facts before he arrives at a conclusion/solution to the issues being presented. I know that we will continue to work on that as well in our final quarter.

Administrator Signature

AIT Signature

PRECEPTOR SAMPLE REPORT

SAMPLE

[REDACTED]
[REDACTED]
Jacksonville, FL 32217

First Quarter report for [REDACTED] AIT
Date: November 1, 2010
From: [REDACTED] Preceptor [REDACTED]

FINN JAGS
NOV 17 2010

[REDACTED] started his AIT program on August 1, 2010. He spent some time in all departments and reviewed the requirements of each domain of practice. David completed the Marketing domain of practice (DOP). He accomplished this by shadowing the admissions director in all aspects of her job responsibilities. He accompanied her to hospitals and other nursing facilities for meetings and resident assessments. He observed signing admissions contracts, giving tours and reviewed marketing materials. He also observed verification of financial information. Marketing plans were discussed with the administrator, as well as census goals and reports from the NE FL Health Planning Council.

In the resident care DOP [REDACTED] familiarized himself in the medical records department with all aspects of chart administration, such as audits, opening and closing charts and the chart order, including HIPPA requirements. He spent time in the activities department and accompanied a group of residents to an outing. He sat in on care plan meetings and MDS meeting with the care team. He familiarized himself with the MDS 3.0 instrument. He spent time in the dining room during meal times and learned the regulations governing the dietary department. He shadowed the administrator making rounds in the kitchen and the resident rooms and areas.

[REDACTED] also spent time in the physical resource domain of practice reviewing its requirements. He assisted in the updating of the MSDS folders and assisted in making safety rounds.

The DOP of laws, regulatory codes and governing boards was addressed by the administrator. [REDACTED] continues to review the Code of Federal Regulations and other applicable Rules and Statutes concerning operation of nursing facilities. His reading is supplemented with frequent and periodic discussions with the administrator. [REDACTED] participated in an OSHA inspection and observed reporting of incidents to DCF. [REDACTED] is encouraged to supplement his practical experience with concurrent review of the codes and regulations governing each department for in-depth comprehension. Additional reading materials have been made available to [REDACTED] such as the professional periodical publications, new developments available on websites and professional associations and the Principles of Health Care Administration textbook. In addition, [REDACTED] attended a Florida Health Care Association meeting and a Florida Association of Homes and Services for the Aging meeting. He also participated in the conference call of the Board of Nursing Home Administrators meeting on October 29, 2010.

In the financial DOP, [REDACTED] had the opportunity to observe the training and orientation of a new business office manager. Therefore he learned the basics of billing and financial administration. He reviewed the budget with the administrator and became familiar with the concept of PPD budgeting and staffing calculations. He also participates in weekly meetings with staff and administrator regarding management of Medicare and Medicaid payer sources.

Overall, [REDACTED] is diligently accomplishing the tasks he is presented with, having completed 600 hours of

[REDACTED] [REDACTED]

CHECKLIST FOR 2,000 HOUR PROGRAM

SAMPLE ONLY

AIT Name :

PRECEPTOR Name :

64B10-16.001(5), F.A.C. The AIT shall serve his/her training in a normal work-week, containing a minimum of 30 hours and a maximum of 50 hours, with not less than six hours to be served daily between the hours of 7:00 a.m. and 10:00 p.m., except that during the year a minimum of 40 hours and a maximum of 160 hours are to be served between 10:00 p.m. and 7:00 a.m.

Please complete each section as it reflects the work of the AIT. The reporting requires completion of three quarters for the 1000 hour program, s. 468.1695(2)(a) F.S. and four quarters for the 2000 hour program, s. 468.1695(2)(b) F.S., with the total column completed for the final reporting. The checklist contains sub functions which summarize the overall domains and serve as a synopsis of work completed. Please use the same checklist for each reporting quarter. Copies with original signatures are acceptable.

NOTE: In addition to submitting this checklist as part of a quarterly report, the AIT shall also submit narrative describing relevant learning experiences. This narrative should show how the trainees may have used the following methods to further his/her training: on-the-job experience, meetings attended, surveys completed, written reports, texts or periodicals, visits to other facilities, academic programs, college, or continuing education seminars, Rule 64B10-16.005(1)(d) F.A.C.

State of Florida
 Administrator - In - Training
 AIT Domains of Practice Quarterly Checklist

PERSONNEL

SAMPLE ONLY

AIT Name _____

PRECEPTOR Name _____

Domain/Subfunctions/Quarter	Q1	Q2	Q3	Q4	TOTAL
PERSONNEL 64B10-16.005(2)(a), F.A.C. 115%					
Demonstrates an understanding of job descriptions and job-specific competencies.	9		4	4	17
Possesses the ability to plan and develop basic staff development procedures.	7	4		5	16
Possesses the ability to use audit procedures to evaluate effectiveness of training.	6	4		3	13
Demonstrates the ability to plan, implement, and evaluate associate health and safety programs.	5	4		4	13
Understands the importance of and proper process for exit interviewing.			3	1	4
64B10-16.005(2)(a)1					
Understands proper interviewing techniques.	7		7		14
Demonstrates an understanding of how to effectively train individuals to perform their duties.	5			4	9
Demonstrates an understanding of effective recruiting procedures.		2		3	5
Possess knowledge of workplace culture as it relates to the prevention of workplace violence, harassment, & hostility.	6	3		8	17
64B10-16.005(2)(a)2					
Demonstrates the ability to implement effective human resource management in a facility.	10		7	7	24
Demonstrates a working knowledge of staff professional development.	6	4		6	16
Demonstrates knowledge of performance based evaluation procedures.				5	5
Possesses the ability to plan, implement, and evaluate personnel policies.	4	5		4	13
Able to apply proper staff disciplinary procedures.	8		3	4	15
Demonstrates the ability to predict the overall effect of personnel policies on the organization.				4	4
64B10-16.005(2)(a)3, 4, 5					
Displays an understanding of how to manage a diverse workforce.				20	20
Possesses the ability to negotiate wages, salaries, and benefits.		1		2	3
Understands how to match qualifications of candidates to job requirements.		3		6	9
Understands the functions of the Nursing Services team and effective management of the Nursing Department.	10			8	18
Understands the function of the Activities Department.	10		7	16	33
Demonstrates an understanding of the various clinical pathways in rehabilitation.			7		7
Understands how to manage Physical Therapy staff.			7	4	11
Possesses an understanding of the various roles and services of Occupational therapy team members.			7		7
Understands the services provided by Speech Therapy.			7		7
Understands the role of Audiological Services.			5		5
Understands the functions of the Social Services team and the management of Social Services.	10	8		23	41
Understands the functions of the Dietary team and how to manage the Dietary department.	5	1	16		22

State of Florida
 Administrator - In - Training
 AIT Domains of Practice Quarterly Checklist

AIT Name :

PRECEPTOR Name :

SAMPLE ONLY

Understands the functions of the Housekeeping team, and how to effectively manage the Housekeeping department.	2	2		7	11
Possesses a working knowledge of the organization and management of Laundry services.	1	2		5	8
Understands the functions of the Maintenance team.	3	3		6	12
Demonstrates a working knowledge of the functions and management of Maintenance personnel.	1	3			4
Understands the functions of the Medical Records team.		1	5	8	14
Displays a working knowledge of pay scale administration.				6	6
Understands the application of employee retention techniques.				4	4
Understands proper overtime administration and non-exempt status.	4			4	8
Possesses knowledge of CNA training requirements.	4	2	6	10	22
Demonstrates a working knowledge of risk management policies.	16	4	10	13	43
Fully understands the process of physician credentialing.		1		4	5
Understands the Americans with Disabilities (ADA) law and its application.			3		3

Domain/Subfunctions Quarter - 2,000 Hr Program	Q1	Q2	Q3	Q4	TOTAL
PERSONNEL [15%] (Minimum = 300 hours)					508
QUARTERLY TOTALS	139	57	104	208	508

INITIALS	Q1	Q2	Q3	Q4
AIT	NZ	NZ	NZ	NZ
PRECEPTOR	SL	SB	SB	SB

State of Florida
 Administrator - In - Training
 AIT Domains of Practice Quarterly Checklist

AIT Name :

PRECEPTOR Name :

FINANCE

SAMPLE ONLY

Domain/Subfunctions Quarter	Q1	Q2	Q3	Q4	TOTAL
FINANCE 64B10-16.005(2)(b), F.A.C. [15%]					
Possesses a working knowledge of key financial indicators.	8		12		20
Understands the difference between cash and the financial statements.	8		10		18
Possesses a working knowledge of financial planning and interdepartmental financial/budgetary management.	8				8
Demonstrates a working knowledge of capital purchases.			10		10
Understands billing systems and methods.	16	2	14		32
Demonstrates the ability to perform payroll analysis.			5	4	9
Demonstrates a working knowledge of proper inventory management.			24		24
Demonstrates a working knowledge of the interconnectedness of the Prospective Payment System (PPS), the Minimum Data Set (MDS), and Resource Utilization Groups (RUGs).	8		14		22
64B10-16.005(2)(b)1					
Understands accounting procedures, including the chart of accounts	8		16		24
Understands profit and loss statements, and balance sheets			6		6
Understands policies relating to accounts payable and collection of accounts receivable	8		21		29
Understands Medicaid & Medicare methods and systems, cost reports	8		20		28
Understands business office segregation of duties and internal controls.	8		10		18
64B10-16.005(2)(b)2					
Demonstrates knowledge of budget process.		8	4		12
64B10-16.005(2)(b)3					
Understands how and possesses the ability to manage cash.	8		8		16
Demonstrates understanding of cash forecasting.			8		8
64B10-16.005(2)(b)4					
Possesses an understanding of third party payment organizations.	12				12
64B10-16.005(2)(b)5					
Possesses the ability to prepare a business plan, a feasibility study, and a return on investment (ROI) proposal.					
64B10-16.005(2)(b)6					
Understands how to develop, plan, and manage an interdisciplinary budget.					8

State of Florida
 Administrator - In - Training
 AIT Domains of Practice Quarterly Checklist

AIT Name :

PRECEPTOR Name

SAMPLE ONLY

Domain/Subfunctions Quarter - 2,000 Hr Program	Q1	Q2	Q3	Q4	TOTAL
FINANCE [15%] (Minimum = 300 hours)					304
QUARTERLY TOTALS	100	10	190	4	304

INITIALS	Q1	Q2	Q3	Q4
AIT	NZ	NZ	NZ	NZ
PRECEPTOR	SB	SB	SB	SB

State of Florida
 Administrator - In - Training
 AIT Domains of Practice Quarterly Checklist

AIT Name :

PRECEPTOR Name :

MARKETING

SAMPLE ONLY

Domain/Subfunctions/Quarter	Q1	Q2	Q3	Q4	TOTAL
MARKETING 64B10-16.005(2)(c), F.A.C. [5%]					
Possess knowledge of referral patterns.		16		4	20
Demonstrates a working knowledge of referral conversion rates.			2		2
Demonstrates the ability to lead facility tours.	6	2	6		14
Possesses the skills to identify needs in the community and develop services to meet the needs.	8	3			11
Possess a knowledge of contract negotiations, contract management, and purchasing agreements.	7				7
64B10-16.005(2)(c)1					
Demonstrates knowledge of primary and secondary customer groups.		8			8
Has a working knowledge of the process for developing and implementing a marketing plan.				16	16
64B10-16.005(2)(c)2					
Displays an understanding of community volunteer agencies.			2	16	18
Demonstrates the ability to utilize community volunteer agencies' resources in the care of residents.		2		5	7
Has a working knowledge of community liaisons (e.g. hospice) and resources.	3	19			22
64B10-16.005(2)(c)3					
Understands the importance of receiving and interpreting customer feedback.		12		18	30
Knows the most effective techniques for soliciting, receiving, and integrating customer feedback.	2	2		5	9

Domain/Subfunctions/Quarter - 2,000 Hr. Program	Q1	Q2	Q3	Q4	TOTAL
MARKETING [5%] (Minimum = 100 hours)					164
QUARTERLY TOTALS	26	64	10	64	164

INITIALS	Q1	Q2	Q3	Q4
AIT	NZ	NZ	NZ	NZ
PRECEPTOR	SB	ST	SR	ST

State of Florida
 Administrator - In - Training
 AIT Domains of Practice Quarterly Checklist

AIT Name :

PRECEPTOR Name :

PHYSICAL RESOURCE MANAGEMENT

SAMPLE ONLY

Domain/Subfunctions/Quarter	Q1	Q2	Q3	Q4	TOTAL
PHYSICAL RESOURCE MANAGEMENT 64B10-16.005(2)(a), F.A.C. [10%]					
Demonstrates the knowledge of practices to control mold and water damage, and the implications of water damage and mold contamination.	1		6		7
Understands the requirements for proper ventilation and climate control (heating, ventilation, and air conditioning -- HVAC -- systems).		16	6		22
Understands the proper maintenance needs and storage requirements for complex medical equipment.			6		6
Possesses the ability to run and assess disaster drills (internal and external).		16	8		24
Has the ability to develop, implement, and enforce a missing item policy.		16	6	3	25
64B10-16.005(2)(d)1					
Demonstrates ability to develop an equipment inventory.			4		4
64B10-16.005(2)(d)2					
Demonstrates the knowledge of and ability to apply infection control practices.		8	5		13
Possesses the ability to apply proper sanitation practices.	1	5	4		10
Demonstrates a working understanding of facility equipment and related safety practices/ procedures.		10	5		15
Understands and can apply proper practices for linens and infection control.		8	4		12
Demonstrates a working knowledge of drug resistant bacteria (C.Dif, MRSA, and VRE).		8	4		12
Understands housekeeping safety and fire prevention.	9	14	6	12	41
64B10-16.005(2)(d)3					
Has a working knowledge of appropriate laundry equipment.		5			5
Demonstrates a working knowledge of preventative maintenance needs.	3	6	10		19

Domain/Subfunctions/Quarter - 2,000 Hr Program	Q1	Q2	Q3	Q4	TOTAL
PHYSICAL RESOURCE MANAGEMENT [10%] (Minimum = 200 hours)					215
QUARTERLY TOTALS	14	112	74	15	215

INITIALS	Q1	Q2	Q3	Q4
AIT				
PRECEPTOR	SA	ES	SA	SA

State of Florida
 Administrator - In - Training
 AIT Domains of Practice Quarterly Checklist

AIT Name :

PRECEPTOR Name :

LAWS, REGULATORY CODES, AND GOVERNING BOARDS

SAMPLE ONLY

Domain/Subfunctions/Quarter	Q1	Q2	Q3	Q4	TOTAL
LAWS, REGULATORY CODES, AND GOVERNING BOARDS 64B10-16.005(2)(c), F.A.C. (10%)					
7 Survey Tasks					
I. Demonstrates an understanding of offsite survey preparations.			6		6
II. Understands the entrance conference and onsite preparatory activities.			2		2
III. Demonstrates an understanding of the initial tour.			2		2
IV. Demonstrates an understanding of the process of sample selection.	7	8	3		18
V. Demonstrates a working knowledge of the process of information gathering.			4		4
VI. Understands the process of information analysis for deficiency determination.	3				3
VII. Understands the exit conference process.			1		1
Demonstrates an understanding of the medical records timeline and documentation standards.			5		5
Demonstrates a working knowledge of the Health Insurance Portability and Accountability Act (HIPAA).		2	6		8
Understands the plan for communicating HIPAA requirements.			2		2
Understands the Americans with Disabilities (ADA) law and its application.			5		5
Possesses an understanding of the impact of local (municipal, county, and special tax district) codes and rules.				2	2
64B10-16.005(2)(c)1					
Understands the survey process.	14	18	7		39
Demonstrates the knowledge of infection control regulations.	8		5		13
Knows the state's (Florida) governing bodies and how they impact the facility and staff.			3		3
64B10-16.005(2)(c)2					
Understands and can apply federal regulations regarding in-servicing.				8	8
Understands federal requirements regarding content of personnel files.			1		1
Understands and can apply federal regulations for nursing functions.		2		2	4
Understands and can apply federal regulations for resident Activities Department.			1	3	4
Understands and can apply federal regulations for Social Services.	10	15			25
Demonstrates an understanding of federal regulations for Dietary in-service education.			4		4
Understands and can apply federal regulations for Dietary.	2		12	10	24
Understands and can apply federal regulations for Laundry services.		16			16
Understands and can apply federal regulations for Maintenance.		16			16

State of Florida
 Administrator - In - Training
 AIT Domains of Practice Quarterly Checklist

AIT Name : *

PRECEPTOR Name

SAMPLE ONLY

Knows the federal governing bodies and how they impact the facility and staff. 64B10-16.005(2)(c)3			2		2
Demonstrates a working knowledge and understanding of Medicare calculation. 64B10-16.005(2)(c)4				4	4
Understands the reimbursement basics for respiratory therapy. 64B10-16.005(2)(c)5				3	3
Understands basic insurance coverages.	6				6
Possesses a functional understanding of the legal implications of various activities, procedures, or decisions routinely taken or performed in the facility.			2		2
Understands the reporting requirements of health care licensees.				2	2

Domain/Subfunctions Quarter - 2,000 Hr Program	Q1	Q2	Q3	Q4	TOTAL
LAWS, REGULATORY CODES, AND GOVERNING BOARDS [10%] (Minimum = 200 hours)					234
QUARTERLY TOTALS	50	77	73	34	234

INITIALS	Q1	Q2	Q3	Q4
AIT	NZ	NZ	NZ	NZ
PRECEPTOR	SA	SO	SA	RB

State of Florida
 Administrator - In - Training
 AIT Domains of Practice Quarterly Checklist

AIT Name :

PRECEPTOR Name :

RESIDENT CARE

SAMPLE ONLY

Domain/Subfunctions Quarter	Q1	Q2	Q3	Q4	TOTAL
RESIDENT CARE 64B10-16.005(2)(f) F.A.C [20%]					
Possesses an understanding of the demographics of the resident population and how resident services are affected.	12	9		13	34
Understands the role of Social Services in resident care.		15	3	12	30
Understands the role of Dietary services in resident care.	8	5		6	19
Understands the role of Dining services in resident care.	10	5		3	18
Possesses an understanding of the purpose of dietary resident rounds.		6		4	10
Possesses a working knowledge of dietary documentation.		4		5	9
Understands the role of Laundry in resident care.	10	6		8	24
Understands the role of Medical Records in resident care.				9	9
Demonstrates a working knowledge of a records retention schedule.				3	3
64B10-16.005(2)(f)1					
Possesses the ability to differentiate between the scopes of practice for RNs, LPNs, and CNAs.	12			4	16
Demonstrates an understanding of the role of the gerontological nurse in caring for aging residents in long-term care, and their families.	10	14	6		30
64B10-16.005(2)(f)2					
Possesses a working understanding of customers and programming.		9		11	20
Demonstrates an understanding of the components of Rehabilitation Services and their application to residents.		4			4
Understands the relationship of Occupational Therapy and Physical Therapy and co-treatment options for the residents.			2		2
Demonstrates knowledge of the preadmission and admission process service path.				8	8
Understands the relationship of Nursing to other departments.	12		12	18	42
Understands the relationship of Social Services to other departments.	18	19			37
Understands the relationship of Dietary to other departments.				10	10
Understands the relationship of Laundry to other departments.			4		4
Understands the relationship of Maintenance to other departments.		8	5		13
Possesses knowledge of discharge planning and the appeal process.	11	7	3		21
Understands proper therapy services utilization.		3		2	5
64B10-16.005(2)(f)3					
Possess the ability to facilitate the development and application of volunteer programs.	7	3			10
Understand resident care policies for restorative and rehabilitative services.		4			4
Demonstrates knowledge of the customers of Physical Therapy.	6	1	6	2	15
Demonstrates knowledge of the customers of Occupational Therapy.	4	1	5	2	12

State of Florida
 Administrator - In - Training
 AIT Domains of Practice Quarterly Checklist

AIT Name :

PRECEPTOR Name :

SAMPLE ONLY

Demonstrates knowledge of the customers of Speech Therapy.			4	2	6
Possesses knowledge of the customer service function.	25	10	6	20	61
64B10-16.005(2)(f)4					
Demonstrates an understanding of the emotional problems of aging in the lives of residents.		16	3		19
Understands the administrator's role in interacting with family, friends, and loved ones.	4	10	5	18	37
64B10-16.005(2)(f)5					
Is able to discuss end-of-life issues and the role of the administrator in relating to the resident and their family when faced with death.	2	16			18
64B10-16.005(2)(f)6					
Understands the interrelationship in a resident's behavior and their environment, including their intra-psychoic and/or physical state.		2			2
Possesses the ability to discuss resident behavior under different environmental or physiological conditions.	5	2			7
Understands methods for assessing differential functioning (DIF) in the dementia population.				16	16
64B10-16.005(2)(f)7					
Demonstrates an understanding of how to access and interpret facility quality indicators and measures.			1		1
64B10-16.005(2)(f)8					
Understands concepts of benchmarking.				1	1
64B10-16.005(2)(f)9					
Possesses the ability to utilize self-assessment tools to assess facility performance.				6	6

Domain/Subfunctions Quarter - 2,000 Hr Program	Q1	Q2	Q3	Q4	TOTAL
RESIDENT CARE [20%] (Minimum = 400 hours)					583
QUARTERLY TOTALS	156	179	65	183	583

INITIALS	Q1	Q2	Q3	Q4
AIT	NZ	NZ	NZ	NZ
PRECEPTOR	Jb	CB	SB	DB

State of Florida
 Administrator - In - Training
 AIT Domains of Practice Quarterly Checklist

AIT Name :

PRECEPTOR Name :

SAMPLE ONLY

AIT PROGRAM HOURS SUBMITTED/COMPLETED

AIT - 2000 HOURS

Domain/Subfunctions Quarter	Q1	Q2	Q3	Q4	TOTAL
PERSONNEL [15%] (Minimum = 300 hours)	139	57	104	208	508
FINANCE [15%] (Minimum = 300 hours)	100	10	190	4	304
MARKETING [5%] (Minimum = 100 hours)	26	64	10	64	164
PHYSICAL RESOURCE MANAGEMENT [10%] (Minimum = 200 hours)	14	112	74	15	215
LAWS, REGULATORY CODES, AND GOVERNING BOARDS [10%] (Minimum = 200 hours)	50	77	73	34	234
RESIDENT CARE [20%] (Minimum = 400 hours)	156	179	65	183	583
QUARTERLY TOTALS	485	499	516	508	2008

State of Florida
 Administrator - In - Training
 AIT Domains of Practice Quarterly Checklist

AIT Name :

PRECEPTOR Name :

NARRATIVE

SAMPLE ONLY

Indicate the AIT Program and the Quarterly Report completed for the reporting period.

	Q1	Q2	Q3	Q4
2000 Hour Program:	485	499	516	508

Please complete the following questions when submitting each quarterly report:

1. Did your work week consist of at least 30 hours a week but no more than 50 hours a week?
2. Did you work a minimum of 6 hours daily between 7 a.m and 10 p.m.?
3. Did you fill a specific position in the facility during normal working hours of the AIT Program?
4. Are you rotating through various departments during the AIT Program?
5. Over the course of one year, have you worked a minimum of 40 hours, but not more than 160 hours, between the hours of 10 p.m. and 7 a.m.?

YES	NO
x	
x	
	x
x	
x	

The domains of practices are: Personnel; Finance; Marketing; Physical Resource Management; Laws, Regulatory Codes, & Governing Boards; Resident Care

Please write a brief narrative describing relevant learning experiences for the last quarter. Pages should be typed or printed. Use a new sheet for each domain; add additional sheets if more space is needed. This narrative should show how the Administrator-in-Training used the following methods to further his/her training: on-the-job experience, practical work experience within the various departments (# of hours worked in the dept.), meetings attended, surveys completed, written reports, texts or periodicals, visits to other facilities, and academic programs, college, or continuing education seminars. The purpose of this narrative is to demonstrate how you have had meaningful experiences and participated in projects that relate to the domains of practice.

AIT Signature: _____

DATE:

9/9/99

PRECEPTOR Signature: _____

DATE:

9/9/99

ATTACHMENT D

Name _____

Quarter _____

Facility _____

Address _____

NIGHT SHIFT STATEMENT

While performing my training hours this Quarter,
I did complete _____ hours and the Narrative by DOP is attached
OR I did not complete hours (choose one of the statements)
between 10 pm and 7 am.

AIT Signature

Preceptor Signature

Hours Between 10pm and 7am

- Should be on a separate report. Indicate hours if any or write "None"
- Write separate Narrative if applicable.
- Activities to consider:
 - Make rounds with nursing staff, observe care
 - ...is care delivery or patients different at night? How do staff handle changes in condition – contact physicians?
 - How would staff respond to a fire or other emergency?
 - Spend time in Dietary and Laundry
 - Security measures

SAMPLE NIGHT SHIFT NARRATIVE

PRECEPTOR-

FACILITY-

SAMPLE

Fourth Quarter Narrative

During the hours of 11-7 shift I worked a total of 42 hours. I had the opportunity to shadow the nursing department, laundry, dietary, and housekeeping department.

RESIDENT CARE 64B10-16.005(2)(D)*Understands and can apply federal regulations for Dietary*

The dietary staff members usually come into the facility at 5:00am. This gives them just enough time to prepare breakfast, place the food on the line in steam tables, put it on the trays, and on the floor before 8:00am. The Dietary Manager expressed the importance of insuring everyone coming to work on time to ensure we have the food cooked and ready to be served before the 14th hour. This means, the dietary department has 14 hours from the time the last meal was served to have the morning meal prepared for the residents. The exception to the rule is 16 hours between the last meal and the first meal of the day only if the residents had a snack in between the last meal and the first meal of the day. However, just to stay on the safe side the Dietary Manager stays in compliance with the 14hour guideline.

Dietary department is also responsible for ensuring the residents have 3 prepared meals per day. Each meal must have nutritional value and must have flavor, must be palatable, and served at the correct temperature. I said that to say, although it may be 5 o'clock in the morning the preparation for all meals begins at five o'clock in the morning. For an example, although it was breakfast time, I was assisting with getting the lunch items prepared such as the puddings.



PRECEPTOR-

FACILITY-
.....

fruit cocktail, and drinks so that each of them could be refrigerated and served at proper serving temperature so that they are presentable during serving times.

Understands the relationship of Laundry to other departments.

While working the 11-7 shift, it allowed me get some insight on how the laundry department operates during that time. The first person usually comes into the facility around 4:30am to start the day off. Therefore, we immediately start a load of linens to insure we have enough for nursing and therapy departments. This is important, because neither department can function properly without having the necessary tools to perform their job tasks. After starting the first load of linens we then did rounds on the floor to pick up all dirty linens to provide additional space for the nursing staff members. Usually when we come in, the soiled linen room is over flowing; therefore it is important for the laundry personnel to complete their tasks within the first hour of them coming in to the facility. Until now, I didn't understand why the Therapy Department complained about not having linen first thing in the morning. Now I understand, the Occupational Therapists assist the residents with their ADL's and making their beds and in order to do so, they must have their linens when the 7-3 shift begins.

64B10-16.005(2)(f)1

mf h

Possesses the ability to differentiate between the scopes of practice for RNs, LPNs, and CNAs.

RN's & LPN's for the 11-7 shift

A.I.T.

SAMPLE NIGHT SHIFT NARRATIVE

Quarter

PRECEPTOR-

FACILITY-

fruit cocktail, and drinks so that each of them could be refrigerated and served at proper serving temperature so that they are presentable during serving times.

Understands the relationship of Laundry to other departments.

While working the 11-7 shift, it allowed me get some insight on how the laundry department operates during that time. The first person usually comes into the facility around 4:30am to start the day off. Therefore, we immediately start a load of linens to insure we have enough for nursing and therapy departments. This is important, because neither department can function properly without having the necessary tools to perform their job tasks. After starting the first load of linens we then did rounds on the floor to pick up all dirty linens to provide additional space for the nursing staff members. Usually when we come in, the soiled linen room is over flowing; therefore it is important for the laundry personnel to complete their tasks within the first hour of them coming in to the facility. Until now, I didn't understand why the Therapy Department complained about not having linen first thing in the morning. Now I understand, the Occupational Therapists assist the residents with their ADL's and making their beds and in order to do so, they must have their linens when the 7-3 shift begins.

64B10-16.005(2)(f)1

mf n

Possesses the ability to differentiate between the scopes of practice for RNs, LPNs, and CNAs.

RN's & LPN's for the 11-7 shift

PRECEPTOR-

FACILITY-
.....

Throughout the 11-7 shift, the RN's and the LPN's have similar job tasks. During my 11-7 AIT rotation just so happen it was end of the month and the nurses had to do the changeover. For change over, the nurses are responsible for verifying all physician orders and ensuring all orders are correct and carried over into the new month. I shadowed the nurses as they conducted the 24 hour chart checks. This is done daily on the 11-7 shift. Each nurse is responsible for ensuring all orders written have been followed. They are also responsible for completing all new admission paper work. For an example, the 3-11 shift received an admission later in the shift, therefore the 11-7 nurse was responsible for completing the six page assessment. I assisted the nurse with doing the skin assessments. The skin assessment is conducted to ensure the resident does not have any skin break downs, rashes, blisters, skin tears etc. If a resident is found to have any of the above listed concerns the wound nurse and or the assigned physician would follow up with specified concerns.

Other duties shadowed and or completed:

- o I also helped the 11-7 nurses check the Accu-check machines. The accu-check machines have to be checked daily, therefore there is a code that is ran to ensure the machine is running safely and accurately before the start of the next shift.
- o I also shadowed the nurses while they verified labs in the treatment book. Therefore, I would watch the nurses go through the book and complete the lab requisition forms so that they are ready for the phlebotomists first thing in the morning.
- o I shadowed the nurse as she administered medications and treatments to the residents



SAMPLE NIGHT SHIFT NARRATIVE

PRECEPTOR-

FACILITY-
.....

- Checked the temperature of the refrigerators in the med room at each nurses station.
- Audited the crash carts.
- Assisted the nurses with changing out the tubing on nebulizers and Oxygen concentrators, and cleaning all of the medical equipment.
- Assisting the nurses do their weekly, monthly, quarterly, and annual assessments.
- Checked for resident appointments, and informs the CNA's so that the residents can get the residents up.
- Checked sharps containers. If they were full remove, label and properly dispose of the containers.

CNA's on 11-7

During the 11-7 shift, I had the opportunity to shadow the certified nursing assistants. While shadowing the certified nursing assistants, we performed tasks such as:

- Weekly, monthly, quarterly, annual vitals, so that the nurses can complete their assessments
- Change and turn residents every two hours
- Get the residents showered/bathed and dressed
- Complete daily tasks, checking the temperatures on the refrigerators, clean the pantry, shower rooms, sitting rooms,
- Supervise residents, that are up and wondering around the facility

Personnel 64B10-16.005(2)(a)3, 4, 5



A.I.T.

SAMPLE NIGHT SHIFT NARRATIVE

Quarter

PRECEPTOR-

FACILITY-
.....

Understands the functions of the Housekeeping team, and how to effectively manage the Housekeeping department.

The objective of the housekeeping department is to keep a clean and healthy living environment for residents. With that being said, when I shadowed the house keeping staff the first task we did was rounds removing all of the trash from the soiled utility rooms (left from the 3-11, and part of the 11-7 shift) and properly disposing of it. By properly disposing the trash on a routine schedule, assists with reducing the odors nursing facilities often have. The housekeeping Director usually comes in early to make certain all of his staff members are following proper daily schedules he has prepared for them.



SAMPLE NIGHT SHIFT NARRATIVE

PRECEPTOR-

FACILITY-

SAMPLE

Night Shift Hours between 10pm and 7 am

I have completed 24 of the 40 night shift hours during this 3rd quarter. I intend to complete the remaining 16 hours during the upcoming fourth quarter.

I answered phone at the nurses' station during the night shift. All phone calls that would go to the receptionist during the day are transferred to one of the nurses' station at night.

Some of the phone calls that I picked up were Physicians who wanted to know their patients lab results. Other times, a family member would call to check on their loved one or ask to speak with a nurse or CNA.

I assisted a CNA in switching a vacant bed to a patient's room upon his admission. The patient was very tall and needed a longer bed than the one which was first in his room.

I participated in an initial assessment of a new admission.

I observed as the nurses inputted the physicians orders that were received from the hospital. In one case that I observed, the resident was a readmission. In this scenario the nurse had to review the resident's previous orders on his chart from his previous admission and modify and add new orders. Additionally, the resident was a dialysis patient and the medication had to be given on a schedule that worked around his dialysis appointments.

I would open the service door entrance at night for family members. The main entrances are locked at night for security and safety and the service entrance which is also used for paramedics is the one that is utilized. The door can be opened from the inside but there is a punch code required to enter the door when coming from the outside.

I have found that between 3 and 4 AM seemed to be the quietest time in the nursing home. The night supervisor explained that this is when most residents are in their weakest state through sleep and is also the time that its most likely for a resident to expire.

On one particular night, there was only one desk nurse that was switching off between different 2 units on the 3-11 shifts. On this night, however, there was an admission on each

PRECEPTOR-

FACILITY-

wing and someone had to go out on 911 calls and there was a fall and the lab results for the pt's and inr's were coming in.

The newspaper gets delivered at 4 30 Am. The activities department distributes the paper in the morning.

The night time nurse was working on that day's discharges arrainging the discharge packet for that coming morning. By getting the discharge ready, this helps out the desk nurse on the following 7-3 shift, who is actually responsible for the discharge which generally takes place at 11 Am. The nighttime desk nurse, went through a list which was left by Social Services of the residents who were scheduled to be discharged later that day.

I observed the first med passes of the morning which began around 5:30 Am. This is the first time the residents are woken up unless they had a lab drawn which is typically done earlier by a lab technician.

The lab technician arrives between 3 and 3:30.

The night supervisor orders necessary medical equipment from the lab. He faxes a list to the lab of equipment that he needs such as tubes and biohazard bags. I had discussion with him regarding labs. He explained to me that a flabodomy is done by the lab technicians but for a pick line, an RN is necessary. He showed me how the blood is kept in the refrigerator.

I watched as the CNA's made rounds every 2 hours. One CNA explained to me that if they find a resident wet or needing assistance than they assist them during that time. She explained how the CNA's come in at 4 to change all the residents and then again at 5 to get them dressed and then they get up around 6 or 6 30 for a 7 am breakfast.

I observed the laundry cart being brought out in the morning.

SAMPLE NIGHT SHIFT NARRATIVE

PRECEPTOR-

FACILITY-

I observed CNA's as they passed around towels in the morning giving them to residents for personal use. This began around 6:30 AM.

Assignments should be evenly distributed. There are issues when one CNA has 7 assignments while another has 8 or 9. I learned that it is important to try to make assignments as "fair" as possible.

I walked into a room of a resident who was yelling and cursing. The resident had asked for a supervisor and I happened to be nearby so I entered the room. The resident claimed that he has been calling for 45 minutes on his room phone to the nursing station but no one picked up. (I had been sitting at the nursing station prior to entering the room and the phone was not ringing.) The resident wanted to be lifted up higher on his bed.

The resident went on venting for a few minutes, and after I heard him out, I asked him how I could help him right now. The gentleman responded that he wanted to be lifted up in his bed. I told him that I would help and I brought in 2 nursing assistance that helped this gentleman sit up. After the resident was adjusted, his mood changed completely and he later apologized to me for his outburst.

I observed the night supervisor as he and faxed list Tubes and Biohazard bags that he needed to be delivered.