



2015

Practicum Guidance Document

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Practicum Definition: a course of study designed especially for the preparation of clinicians that involves the supervised [practical](#) application of previously studied theory.

Minnesota Requirement = 400 Hour Practicum

The practicum experience must be completed for academic credit at an accredited post-secondary institution. A reduction in hours or waiver of the 400 hour requirement can be obtained by providing evidence of documented health care experience. The practicum must be coordinated through a faculty member of an accredited academic program providing a signed learning agreement coordinated with the preceptor and student. Specific requirements are found in Minn. Rules [6400.6600](#)

The final component of the Long Term Care Administrator's education should be the practicum. Currently, Minnesota's requirement of 400 hours is less than the national average of 1000 hours, indicating that all educational hours are critical for the student to be successful in their first assignment as the administrator. Generally completed in the senior year, or near completion of the class room courses, and focused on applying classroom knowledge with real life experiences, students need to access what strengths and improvements they witness during their time spent at a practicum site. They should apply the classroom knowledge, to the 'real world' settings and prepare for their national and state exams to culminate the entire learning experience. Not required, but highly recommended is the completion of a national practice examination prior to or upon initial placement at the practicum to assist in the self- assessment of the applicant's growth and success as a long term care administrator. This document is built around the five domains of knowledge, skills, and abilities identified by the national research around the practice analysis completed by NAB in 2014.

Intent and Purposes of the Practicum

The basic purposes of the practicum are to:

- Provide Long Term Care Administration students professional exposure with an experienced administrator and to provide an opportunity for career orientation.
- Provide students the opportunity to apply their classroom knowledge, integrate that knowledge into practice across the continuum of long term care administration.
- Offers introductions and networking with the service community and identify the student's niche in long term care administration.
- Allow individuals with validated long term/health care experience a potential reduction in the 400 hour requirement.
- Outline and direct exposure to all the areas of the practicum checklist provided to each approved academic program. The student, preceptor and advisor are expected to strengthen or reduce the focus depending on the student's prior exposure to the core competency.
- The learning agreement should be completed by all parties and maintained by the academic faculty advisor.
- The practicum checklist is meant to be a tool for the student introduction to the entry level knowledge of the core competency. The preceptor, student and faculty advisor are encouraged to contact the BENHA office with updated requirements to assure contemporary practice standards.

Domain 10:

Customer Care, Supports and Services

A student will demonstrate their understanding of :

Nursing- Clinical Supports and Services:

| Core Competency –Learning Objective | Date Completed | Observations |
|---|----------------|--------------|
| <p>Team building; Professional Nursing Staffing:</p> <ol style="list-style-type: none">1. Importance of the partnership with the Director of Nursing/Clinical Services position description, background and education and the state/federal minimum educational requirements.2. Nursing/clinical services organizational chart and determination of the importance and role of each position.3. Nursing hours; how are they budgeted and the process used for staffing each day.4. staffing ratios are calculated using facility models for comparison to state or national ratios and federal standards. Review CMS 483.30 F 3535. Nursing Practice Act; review and understand the role of each licensee/credentialed nursing department member, RN, LPN, NAR6. Daily nursing schedule; review and determine systems for staff replacement include any organization work towards self-scheduling, replacement for illness etc. | | |
| <p>Nursing Procedures:</p> <ol style="list-style-type: none">1. Importance of ‘rounds’ using organization model; how does the Chief Nursing Officer (CNO) assure quality?2. Concept of Central Supply, supply chain, ordering products and maintaining “par” levels at the point of service for the customer.3. Emergency Medication Kit; review its contents, purpose of, and compliance requirements. | | |
| <p>Quality Assurance and Assessment Committees</p> <ol style="list-style-type: none">1. Review current data collected on key indicators within OSCAR or current data collection models; i.e. pressure ulcers, urinary incontinence, unintended weight loss, and accidents. | | |

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| <p>Infection Control</p> <ol style="list-style-type: none"> 1. Review of infection control policies and procedures 2. Evaluation of the effectiveness of data collection, monitoring of infections and the effectiveness of the infection control committee. 3. Review of aseptic and isolation techniques to care for customers and staff with contemporary clinical management: i.e. MSRA, Tuberculosis, C.difficile, or influenza. | | |
| <p>Pharmacy and the Nurse:</p> <ol style="list-style-type: none"> 1. Review Pharmaceutical services policy and procedures. 2. Review medication/drug ordering, systems to assure physician's orders are delivered as indicated to the client, security of narcotics, storage, controls, and distribution, recording and destruction policies. 3. Review the prior monthly Pharmaceutical Consultants reports, discuss with nursing, and review those findings at the quarterly meeting to see the cycle of observation, review, alteration and implementation. 4. Review medication reduction efforts, unnecessary drugs and adverse drug reaction reports for individual customers. | | |
| <p>Nursing Documentation</p> <ol style="list-style-type: none"> 1. Observe and participate in the admission, assessment, care planning, and MDS preparation of one resident. Create or assess one cycle of nursing documentation for one customer to understand the importance and value of each step. Review CMS 483.20 F 271-285 | | |
| <p>In-service/Education</p> <ol style="list-style-type: none"> 1. Participate in an in-service or staff education. 2. Review models of communication when new/revised policies are required to be implemented 3. Assess the training conducted in the Nursing Assistant Course content for baseline mastery/(if never employed in LTC consider enrolling) to review the basic core instruction on the human body, normal aging, physical changes and disease processes with identified interventions | | |

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| <p>Consultants/Support Professionals</p> <ol style="list-style-type: none"> 1. Review contacts of other consultants on staff; Clinical Medical Records, Registered Dietitian, Activity Consultants, et al. 2. Review strategies with those consultants to implement their recommendations. | | |
| <p>Culture Change Activities</p> <ol style="list-style-type: none"> 1. Describe a 'customer centered' implementation activity. | | |
| <p>Evidence of Therapy Involvement Complimenting Nursing</p> <ol style="list-style-type: none"> 1. Review Restorative Nursing Program policies and procedures 2. Assess and shadow the work of the Physical Therapist, and if available Occupational Therapy and Speech Therapy. | | |
| <p>Dietary/Nutritional Services</p> <ol style="list-style-type: none"> 1. Review staffing credentials, position descriptions and organizational chart, staffing. Is a Registered Dietitian employed or under contract? 2. Review menu planning, dining alternatives and meal service. 3. Review unintended weight loss policy and potential approaches to address weight loss. 4. Review sanitation standards, equipment, food temperatures, and previous CMS surveys related to nutritional services. 5. Review CMS 483.35 F 360-373 | | |
| <p>Physician Services</p> <ol style="list-style-type: none"> 1. Review the Medical Director contract. Attend as many meetings as possible with the Medical Director and Director of Nursing to review best practices for communication and implementation of nursing systems which affect the customer. 2. Review Physician services; rounds, required physician visits, communications upon a significant change and communication models with the Chief Nursing Officer (CNO, DNS, DON) and Administrator. 3. Review CMS 483.75 F385- F390, CMS 483.40, F157 | | |

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| <p>Rehabilitation Services:</p> <ol style="list-style-type: none"> 1. Assess Rehabilitative Services if provided by contract or in-house? Review care plan for assessment, goals, progress notes, care planning, evaluations and discharge from the customer perspective. 2. Review CMS 483.45 F 406 | | |
| <p>Dental Services:</p> <ol style="list-style-type: none"> 1. Review contract services for dental care. 2. Review CMS 483.55 F 411- F12 | | |
| <p>Pharmacy Services:</p> <ol style="list-style-type: none"> 1. Review Contract for pharmacy services. 2. Review Drug Regimen monthly report reviews, labeling, and storage of drugs 3. Review CMS 483.60 (F 425-432) | | |
| <p>Infection Control:</p> <ol style="list-style-type: none"> 1. Review the infection control policies and procedures; 2. Evaluate the effectiveness of data, the monitoring of infections and the effectiveness of the infection control committee. 3. Review aseptic and isolation techniques to care for customers and staff with MSRA, Tuberculosis, C.difficile, or influenza, 4. Review CMS 483.65 F 441-F 445 | | |
| <p>Move In/Out Admission/Discharge Procedures:</p> <ol style="list-style-type: none"> 1. Assess who completes the pre-admission medical interview and assessment and participate in actual assessment. 2. Review Case Mix assessment and assignment and family involvement in financial discussions. | | |

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| 3. Participate in campus tour with prospective consumers and assess strengths and effectiveness of the various roles within the process. | | |
| 4. Interview hospital discharge coordinator/other key partners to evaluate move in process. | | |
| 5. Review Resident Bill of Right's with family member and gain clear understanding of all rights and related compliance procedures. | | |
| 6. Review move out procedures with emphasis on discharge orders/instructions/education and directives for the safe, effective return to alternative placement. | | |
| 7. Measure move out effectiveness as assessed by survey or other tools. | | |
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Domain 20:

Human Resource Management

A student will demonstrate their understanding of the:

| Core Competency –Learning Objective | Time Spent | Observations |
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| 1. HR Policies; the Recruitment, Selection and Retention goals, objectives and measurements | | |
| 2. Staffing/service levels by each service function/department | | |
| 3. Position/job descriptions, including specific areas of: a. ADA requirements, b. FLSA, c. OSHA, d. civil rights act | | |
| 4. Interview questions and procedures for hiring | | |
| 5. Workers compensation /safety/AWARE/ | | |
| 6. Job offer letter to orientation procedures including by not limited to such processes as I9, criminal background checks, and licensing-certification validation | | |
| 7. Employee handbook or personnel policies and assess for completeness, accuracy, and how it addresses the identified local labor market pool. | | |
| 8. Review and assess the contents of an employee personnel file for compliance and completeness; required initial and ongoing employment data . | | |
| 9. Review and evaluate payroll plans (i.e. steps, longevity) compensation plans, and benefit packages | | |
| 10. Review and assess associate surveys, exit interviews, and employee grievance history | | |

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| 11. Review and assess employee evaluations, plan for corrective action and mission improvement | | |
| 12. Review culture change activities i.e. self-directed work teams or other contemporary approaches to care for the customer through engaged staff. | | |

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| Domain 30: | Financial Management: A student will demonstrate their understanding of: | |
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| Core Competency –Learning Objective | Time Spent | Observations |
| 1. Review and assess financial management policies, procedures and practices to comply with federal and state rules and regulations: | | |
| 2. Review Chief Financial/accountant/bookkeeper job description at the organization; <ul style="list-style-type: none"> a. Review position description reviewing areas unknown to student b. Education and background of incumbent | | |
| 3. Billing Procedures <ul style="list-style-type: none"> a. Explain private pay billing processes/review service census b. Explain Medicare Billing processes | | |
| 4. Budget and Cost Accounting <ul style="list-style-type: none"> a. Review, assess and evaluate current budget preparation, implementation, reporting and accountability during the year and year end comparisons. b. If possible, with the preceptor, assist a service line for initial budget preparation. c. Describe and review the chart of accounts, bookkeeping procedures, income and expense statements and balance sheets. d. Review and assess the existing performance ratio; working capital, asset to liability/asset to debt/ | | |
| 5. Financial Reporting <ul style="list-style-type: none"> a. Describe and review monthly financial reports, board reports and processes which involve individuals required to participate in preparing, implementing and monitoring the budget. b. Review financial viability models; what service lines produce revenue that exceed expenses c. Review key reports required of the LNHA/Executive to make financial decisions and respond to the board/owner. | | |

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| <ul style="list-style-type: none"> d. Assess what spending authority exists for the LNHA. e. Review financial reports required for the management team, governing board, etc. f. Review financial data collection and monitoring for Medicaid and Medicare cost reports | | |
| <p>6. Asset Protection and Auditing</p> <ul style="list-style-type: none"> a. Review Generally Accepted Accounting Principles (GAAP) b. Review prior audit findings and recommendations c. Review asset protection policies: insurance programs, security, risk management from the finance perspective | | |
| <p>7. Customer Accounting Trust Fund</p> <ul style="list-style-type: none"> a. Review, assess and evaluate policies and procedures b. Review, assess and evaluate state/federal requirements for fund c. Review requirements such as surety bond, quarterly statements Review CMS 483.10 F158-162. | | |
| <p>8. Payroll/Wage and Benefit Administration</p> <ul style="list-style-type: none"> a. Review and assess payroll processing whether in-house or via contract. b. Participate in all steps of payroll processing c. Review procedures to assure accuracy of payroll for the team/employees and compliance in reporting to FICA/state of Minnesota, etc. d. Review tools used by management to ascertain budget compliance | | |
| <p>9. Ancillary Financial Management Tasks</p> <ul style="list-style-type: none"> a. Describe, review and assess Inventory Control, Asset Management, Depreciation Schedules, and Capital Purchases/Expense. | | |
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| Domain 40: | Environment: A student will demonstrate their understanding of: | |
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| Core Competency –Learning Objective | Time Spent | Observations |
| 1. Review and assess elopement procedures and security of both customers exiting and outside intruders entering premises. | | |
| 2. Review Laundry procedures <ul style="list-style-type: none"> a. Review Laundry team and manager work background; staffing levels and skills required. b. Review and assess position descriptions in laundry, maintenance, and housekeeping c. Review procedures that promote infection control and infection control reports d. Complete a shift in laundry reviewing process of <ul style="list-style-type: none"> i. personal clothing ii. collection of soiled to distribution of clean linens iii. equipment used, contracts, maintenance and replacement schedules iv. Expense per customer day for laundry (PPD) v. Linen supply ‘par’ levels | | |
| 3. Review Housekeeping procedures <ul style="list-style-type: none"> a. Review staffing background and skills required b. Review and assess procedures that promote safety and sanitation c. Review Material Safety Data Sheets and systems for an emergency response d. Complete a work assignment within the housekeeping department e. Review how team creates a clean, safe and secure home like environment f. Procedures for hazardous waste g. Review expense: price per customer/customer day (PRD) and HPRD (Hours Per Customer/Customer Day) | | |

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| <p>4. Review Maintenance/Plant Operations</p> <ul style="list-style-type: none"> a. Review and describe emergency generators b. Review, participate in and assess fire and safety drills; c. Review and assess emergency and disaster preparedness programs including all contracts with outside vendors pertinent to the community. d. Review Life Safety Code www.lifesafetycode e. Review Pest Control f. Review CMS 483.70 F 454-469 | | |
| <p>5. Explain and identify the essential components related to customer satisfaction from the Administrator's perspective:</p> <ul style="list-style-type: none"> a. Heating/Ventilation/Air Conditioning (HVAC) b. Plumbing c. Electrical d. Lighting needs of the elderly e. Emergency Generators f. Oxygen (ancillary supply, storage and safety issues) g. Security Systems (elopement of customer and building security from outsiders) h. Customer call system i. Fire alarm system and sprinkler systems j. ANSI Equipment purchases and requirements k. OSHA policies and requirements l. External contracts for emergency water, off site emergency transfer agreements m. Assess the contents of the Pest Control contracts n. Assess garbage removal o. Assess seasonal issues; snow removal from safety exits, heating elements exposed that may burn an elder. p. Conduct environmental rounds; assess safety issues or maintenance items. | | |

| Domain 50: | Administration/Leadership/Management A student will demonstrate their understanding of: | |
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| Core Competency –Learning Objective | Time Spent | Observations |
| <p>Composition of Boards and Governance:</p> <ol style="list-style-type: none"> 1. Review and understand the mission statement of the organization 2. Review the history of the organization, how the governing board functions; board standing committees, strategic advisory committees or task force(s) focused on specific projects 3. As feasible, develop board preparation packet(s) agenda with LNHA and attend board meeting 4. Evaluate the effectiveness of the board and their governance. 5. Review the Articles of Incorporation, Bylaws and state organizational licenses for all business units within the organization. 6. Review Organizational Chart 7. Evaluate the relationship of the board to the LNHA. | | |
| <p>Administrator Job/Position Requirements:</p> <ol style="list-style-type: none"> 1. Review the Minnesota BENHA website and application for licensing and continued competency requirements. (www.benha.state.mn.us.) 2. Review the position description and the roles, responsibilities, functions and daily routine of the administrator of record. 3. Leadership and management principles and philosophies (such as planning, organizing, directing, delegating, motivating, and evaluating) 4. Review the Code of Ethics for Administrators provided by the American College of Health Care Administrators (www.achca.org) 5. Review the current education and experience of the LNHA. | | |

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| <p>6. Review “Change Package” from CMS “National Nursing Home Quality Care Collaborative” for seven strategies in creating quality work and living cultures. Within the final report to the faculty advisor, outline what action items you would implement as the Administrator of Record. (www.benha.state.mn.us)</p> | | |
| <p>Operational – Strategic Planning</p> <p>1. Participate in any strategic planning exercise; minimally review current long term and short term planning processes. Assess how regular goal assessments assist the organization with state and national trends.</p> | | |
| <p>Leadership and Management:</p> <p>1. Understand various leadership skills and management techniques; interview the preceptor and department managers about their management philosophy and acquired best practices in dealing with staff communications, conflict resolution, and team dynamics.</p> <p>2. List formal and informal communication channels at the organization and identify strengths and improvements.</p> <p>3. Review and participate in Department Manager meetings, staff meetings, stand up meetings and QAA meetings.</p> <p>4. Federal Rules/Regulations; Review and assess for current effectiveness of Federal CMS guidelines pertaining to Administration; Review CMS 483.75 F 490- 551</p> <p>5. Obtain and read Minnesota Department of Health Nursing Home and Boarding Care Statutes; and MDH Rules Chapter 4658. (Location of these items are found on BENHA website)</p> <p>6.</p> | | |
| <p>Information Management Systems</p> <p>1. Review information technology safeguards related to such issues as data security, social media, email, voice mail, computer software, cell phones, photography, video and texting.</p> <p>2. Review Electronic Health Record policies and procedures</p> | | |

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| <p>Community Resources</p> <ol style="list-style-type: none"> 1. Review Community Based Services within your service area. Arrange a minimum of (X) days to spend shadowing a manager. 2. Review Assisted Living Communities within your service area. Arrange a minimum of (X) days to spend shadowing a housing manager. 3. Describe the continuum of care provided from a consumer perspective; what additional services could be added? | | |
| <ol style="list-style-type: none"> 4. Determine what community partners such as area service groups or clubs exist that would be beneficial to the organization. | | |
| <p>Risk Management</p> <ol style="list-style-type: none"> 1. Assess the strength of the risk management policies and procedures 2. Assess the strength of the safety program, safety committee, OSHA Log 200, disaster planning, and fire drills. 3. Identify safety hazards and perform safety inspection-walking rounds with report to the LNHA. 4. Review all insurance policies with LNHA 5. Review all contracts; responsibilities, mutual obligations, effective service dates, delegated authority to enter into contracts. Assess with the LNHA the effectiveness of the contracts following the review. | | |
| <p>Marketing</p> <ol style="list-style-type: none"> 1. Review and evaluate data on move in (admission) move out (discharge), community demographics, customer and family satisfaction. 2. Review formal marketing, advertising plans and budget, review printed marketing material. | | |
| <p>Organization; Legal and Function:</p> <ol style="list-style-type: none"> 1. Review all Professional licenses within the organization, which monitors current license and any sanctions, understand other professional roles and responsibilities in their scope of practice. | | |

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| <p>Stakeholders and Partnership Development:</p> <ol style="list-style-type: none"> 1. Identify regional office and key Minnesota Department of Health personnel that influence the organization and their role in public protection. <ol style="list-style-type: none"> a. Describe the number of cited deficiencies, if any, from the most recent survey. Review the provider response. b. If possible, review the prior 3-5 years of surveys and determine any trends. 2. Identify area Ombudsman and interview the individual as to their role and how you can partner with them. | |
| <ol style="list-style-type: none"> 3. Identify a provider association and interview a staff member as to their role in provider advocacy. | |
| <p>Review F 490-522 Federal Compliance Specific Issues:</p> <ol style="list-style-type: none"> 1. Review contract preparation and contents for: <ol style="list-style-type: none"> a. Medical Director b. Laboratory Services c. Consulting Pharmacy d. Radiology and other Diagnostic Services 2. Participation in In-service Training and assurance of regular education for all staff 3. Explore how staff evaluations create potential training-in-service education opportunities 4. Review Disaster and Emergency Preparedness; review client elopement policies and procedures 5. Review Quality Assurance and Assessment meetings and minutes | |
| <ol style="list-style-type: none"> 6. Review how communication networks are created for work areas and all job descriptions, i.e. Department Managers Meetings 7. Conduct Root Cause Analysis of an identified issue 8. Federal Rules/Regulations; Review and assess for current effectiveness of Federal CMS guidelines pertaining to Administration; CMS 483.75 F 490- 551 | |

| Projects and Additional Study Areas | | Observations |
|---|---|--------------|
| Administration/Leadership/Management | | |
| <ol style="list-style-type: none"> 1. Review the CMS “National Nursing Home Quality Care Collaborative” Change Package for possible project selection. At a minimum, read through the Change Concept action items. 2. Root Cause Analysis Tool; Stratis | | |
| Website: | Resource Description | |
| http://www.ok.gov/osbeltca/Preceptor_and_AIT_Help/ | Flash card tutorial for national (NAB) exam Oklahoma BENHA | |
| www.Minnesotabookstore.gov | Purchase State Exam Materials | |
| http://www.stratishealth.org/index.html | Regional Quality Improvement Organization | |
| http://www.health.state.mn.us/ | Minnesota Department of Health | |
| http://www.mnaging.net/Advocate/OLTC.aspx | MN Board on Aging, MN Ombudsman for Long-Term Care | |
| www.careprovidersmn.org | Provider Advocate for Minnesota Facilities | |
| www.leadingagemn.com | Provider Advocate for Minnesota Facilities | |
| www.lifesafetycode | National Life Safety Code Standards | |
| www.nabweb.org | National Association of Long-Term Care Administrator Boards | |
| www.cms.gov | Centers for Medicare and Medicaid | |
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