

Alabama Board of Examiners of Nursing Home Administrators
4156 Carmichael Road, Montgomery, Alabama 36106
(334) 271-2342

AIT PROGRAM OUTLINE - 2000 HOUR

(Please print clearly or type all answers - if there is not sufficient space, use additional sheets and number accordingly).

NAME OF AIT: \_\_\_\_\_ Date \_\_\_\_\_
(Title) (Last) (First) (Middle)

NAME OF FACILITY WHERE TRAINING IS TAKING PLACE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

Proposed AIT Beginning Date: \_\_\_\_\_ Proposed date of Completion: \_\_\_\_\_

CUSTOMER CARE, SUPPORTS, AND SERVICES: (A minimum of 660 hours) TOTAL HOURS \_\_\_\_\_

Topics in this area should include nursing services, social services, food service, medical services, therapeutic services, recreational and activity programs, medical records, pharmaceutical program and rehabilitation services.

NURSING \_\_\_\_\_ SOCIAL SERVICES \_\_\_\_\_
DIETARY \_\_\_\_\_ RECREATION/VOLUNTEERS \_\_\_\_\_
MEDICAL RECORDS \_\_\_\_\_ REHABILITATION SERVICES \_\_\_\_\_
MEDICAL/ALLIED HEALTH \_\_\_\_\_ PHARMACEUTICAL PROGRAM \_\_\_\_\_

HUMAN RESOURCES: (A minimum of 270 hours) TOTAL HOURS \_\_\_\_\_

Topics in this area should include recruitment, interviewing, employee selection, training, personnel policies, employee health and safety program, and employee retention.

ADMINISTRATION \_\_\_\_\_

FINANCE: (A minimum of 270 hours) TOTAL HOURS \_\_\_\_\_

Topics in this area should include accounting, budgeting, financial planning and asset managing, and auditing.

BUSINESS \_\_\_\_\_

ENVIRONMENT: (A minimum of 250 hours) TOTAL HOURS \_\_\_\_\_

Topics in this area should include safety procedures, fire, disaster and emergency programs, and building and environmental management.

HOUSEKEEPING/LAUNDRY \_\_\_\_\_ MAINTENANCE \_\_\_\_\_

LEADERSHIP AND MANAGEMENT: (A minimum of 490 hours) TOTAL HOURS \_\_\_\_\_

Topics in this area should include compliance with laws and regulations and governing entities, risk management, communication, survey, certification, enforcement, quality improvement models and management information systems.

OTHER (60 hours): \_\_\_\_\_ TOTAL HOURS \_\_\_\_\_

TOTAL NUMBER OF HOURS IN AIT TRAINING PROGRAM \_\_\_\_\_

TO BE COMPLETED BY THE SUPERVISING LICENSED NURSING HOME ADMINISTRATOR:

I certify that the AIT whose signature appears below has agreed to complete this AIT program of \_\_\_\_\_ hours under my personal supervision.

(Signature of Preceptor)

AL NHA License # \_\_\_\_\_

(Signature of AIT)