Master of Health Administration Online Program

APPLIED PRACTICAL EXPERIENCE MANUAL

Administrative Internship (HAD 580)

Department of Health Administration & Human Resources

University of Scranton Scranton, Pennsylvania



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I. INTRODUCTION

A. COURSE DESCRIPTION – INTERNSHIP IN HEALTH ADMINISTRATION (Requires Instructor Approval)

Prerequisite: Completion of all other MHA Degree courses. In select cases and with Instructor approval, HAD 509 can be taken simultaneously with HAD 580.

A 150-hour fieldwork placement in a staff or administrative position in a healthcare facility/organization. A Site identification and Preceptor contact information must be received at least 8 weeks prior to enrollment. A fully executed Affiliation Agreement must be in place four (4) weeks prior to enrollment.

A detailed Work Plan must be approved at least one (1) week prior to the start of the Internship. Please note that the start date for any internship must coincide with the start date of an on-line course term.

Note: For those students who meet the requirements and are selected for either HAD 581 or HAD 582 (in lieu of HAD 580), those manuals are available under separate cover.

HAD 581 Administrative Residency

A 1,000-hour fieldwork experience in a senior management position. Normally involves exposure to all major operating functions and contacts with department heads, administrative staff and medical staff. Includes exposure to governing-board functions, governmental forces and community influences. The resident is assigned projects of increasing complexity and importance and is expected to have an assigned preceptor. A major project is required. The residency is usually completed during two semesters. Prerequisite, 44 core credits completed.

HAD 582 Directed Study

Allows the student to pursue an area of interest under the guidance of a faculty member. Approval by the Program Director is required. Prerequisite, six core credits completed.

B. PROGRAM OVERVIEW

Emphasis is placed on the development of analytical, technical and human skills essential to successful practice as a health care executive. The MHA Degree is a practitioner's degree, requiring skills and exposure beyond the classroom. Therefore, the program requires an Applied Practical Experience to help ensure that graduates have mastered and can apply the requisite theory, knowledge, skills and values essential to their future career. These help the student develop essential competencies (see pgs. 4-5) required in the MHA Program. This Manual provides information about the Applied Practical Experience for HAD 580 Internship requirements and how to fulfill them. The manual is reviewed annually.

C. PHILOSOPHY OF FIELDWORK

The cornerstone of professional education for a career in health care administration is a learning process that effectively couples the online didactic and field experience components of the educational program. Through Applied Practical Experience during an Internship, faculty and experienced health care executives pool their expertise for the benefit of students who are preparing for future leadership positions in the health care industry.

In addition to the obvious benefits for students pursuing these experiences, both faculty and preceptors benefit through such an affiliation. Faculty gains an additional opportunity to keep abreast of changes in the field of practice. Preceptors gain benefit and satisfaction in fulfilling their professional duty as teachers or mentors while their organizations realize the many contributions that graduate students in training can make.

With the guidance of a preceptor and the fieldwork coordinator, the Applied Practical Experience allows students the opportunity to apply theories, concepts, principles, and skills learned during the online phase of their education in a real work setting. Furthermore, students are offered the opportunity to prove themselves to potential employers, an opportunity not available in the traditional employment search process. The structured exposure to the field of practice is the real distinction between an academic and a professional degree. It is the means by which graduate students may become adequately prepared to competently fill management positions upon graduation.

D. ADDITIONAL REQUIREMENTS

There are five additional requirements, which help prepare students for healthcare administration jobs and must be completed to graduate. First, all students are expected to join the American College of Healthcare Executives (ACHE) and the Program's Student Health Administration Association, or join a comparable professional association. Second, students must have and interact regularly with an identified external mentor identified in HAD 504 and logs reflecting meetings with the external mentor are submitted in HAD 509. Third, all students must perform 24 hours of community service with a healthcare organization or healthcare related organization. The community service is not service-learning, but it should involve and apply skills, knowledge, or competencies learned in MHA courses, such as helping a local organization survey clients or helping elderly people understand Medicare. The completion of the community service hours requires a written confirmation from an organizational supervisor submitted in HAD 509 (For students who started in Fall 2020 or later, Community Service hours will be reported in HAD 515). Fourth, students must complete the University's online academic integrity tutorial. These requirements are further explained in the Additional Requirements Manual. Student should complete Section I of Appendix A-1 to track this requirement. Fifth, all students will participate in two professional organization meetings at the national or regional level and provide proof of meeting attendance in HAD 509.

E. MHA COMPETENCY MODEL & COURSE OBJECTIVES

The MHA program utilizes the ACHE Healthcare Leadership Alliance (HLA) domains/competencies and input from key stakeholders to develop and adopt twenty-seven (27) core comprehensive standards expected to be developed throughout the curriculum progress. Various assessment measures are used throughout the program.

Though students will be required to complete a Competency Assessment Tool two times throughout the Program, in HAD 519 in the beginning of the first year and, HAD 508 at the mid-point of the program. The student will also be required to address the twenty-seven (27) MHA Competencies (found in Appendix C-3) at the end of HAD 580.

F. ADOPTED MHA CORE COMPETENCIES

1. COMMUNICATION AND RELATIONSHIP MANAGEMENT

- A. Demonstrate effective interpersonal relations.
- B. Identify Stakeholder needs/expectations.
- C. Sensitivity to what is correct behavior when communicating with diverse cultures, internal and external.
- D. Present results of data analysis to decision makers.
- E. Provide and receive constructive feedback.
- F. Use factual data to produce and deliver credible and understandable reports.
- G. Facilitate group dynamics, process, meetings and discussions

2. LEADERSHIP

- A. Explain Potential impacts and consequences of decision making in situations both internal and external
- B. Foster an environment of mutual trust.
- C. Create an organizational climate that encourages teamwork.
- D. Knowledge of own and others' cultural n o r m.
- E. Encourage a high level of commitment to the purpose and values of the organization.
- F. Build trust and cooperation between/among stakeholders.

3. PROFESSIONALISM

- A. Understand, uphold and act upon ethical and professional standards.
- B. Professional societies and memberships.
- C. Network with colleagues.
- D. Participate in community service.

4. KNOWLEDGE OF THE HEALTHCARE ENVIRONMENT

- A. Recognize and address the interdependency, integration and competition among healthcare sectors.
- B. Access the interrelationships among access, quality, cost, resource allocation, accountability and community.
- C. Use business techniques to support program development in alignment with health care trends and health policy.
- D. Make recommendations and take actions compatible with Governmental, regulatory, professional and accreditation agencies.

5. BUSINESS SKILLS AND KNOWLEDGE

- A. Ability to integrate information from various sources to make decisions or recommendations.
- B. Demonstrate critical thinking and analysis.
- C. Use project management techniques.
- D. Financial management and analysis principles.
- E. Reimbursement principles, ramifications and techniques, including rate setting and contracts.
- F. Principles of operating, project and capital budgeting.

SECTION II - FIELDWORK SITE SELECTION AND COURSE REQUIREMENTS

A. OVERVIEW

The Applied Practical Experience in the MHA Program allows the student the opportunity to apply theories and skills learned in the classroom under the supervision of a qualified preceptor in an organizational setting. The primary objective of the internship is to provide practical training experience to augment the On-Line classroom teachings. The experience is designed to help the student acquire proficiency and gain competence by integrating applied skills while under the supervision and guidance of an experienced and qualified health care professional. Additionally, the internship offers an opportunity to experience the realities of health care management, becoming acquainted with organizational structure, protocol, professional relationships, working conditions, and to stimulate the formation of and identification with a professional role.

The intern will complete one hundred fifty (150) hours at the host institution, and will earn three (3) credits. The distribution of hours will be developed between the student, preceptor and the fieldwork coordinator. The student will work cooperatively with the preceptor and other members of the organizational staff toward the completion of goals and objectives set forth in the Internship Work Plan.

B. CONSIDERATIONS IN SELECTING AN INTERNSHIP SITE

The following guidelines will help in assessing various internship sites, and will help the student make a prudent decision resulting in a rewarding and fulfilling fieldwork experience:

- Clarify your goals and objectives to help determine exactly what it is you want to accomplish and what skills you want to develop from the internship.
- Assess your academic preparation, work experience, and MHA Competency Assessments. Determine the quantity of knowledge you possess in the particular area of health care you are hoping to do an internship in, and how successfully you will be able to apply that knowledge to projects or tasks given by the preceptor in the work environment. This self-assessment is important when considering internship experience.
- Assess your interpersonal skills. Determine the amount of interpersonal communication experience you have, and the sufficiency of that relative to the prospective internship setting. Remember that you may be involved in situations where interviewing, group leadership, group presentations, crisis management, and other types of personal interaction will be required.
- Consider the time commitment involved. Evaluate your present workload and the number of hours per week that could be devoted to the internship. Weigh these variables with the requirements of the program and the expectations of the preceptor to determine if indeed an internship is feasible.
- Discuss internship logistics, for example, work requirements, stipends and/or wages (if any), office space, mileage reimbursement (if any), and other related issues.
- Consider geographic preference and limitations.

SECTION III – RESPONSIBLE PARTIES DUTIES AND RESPONSIBILITIES

A. <u>STUDENT RESPONSIBILITIES</u>

1. PRELIMINARY RESPONSIBILITIES OF THE STUDENT (PRE-FIELDWORK)

The student interested in pursuing a fieldwork experience should complete the following activities before beginning the experience.

- Completion of all MHA coursework: With pre-approval, student may simultaneously enroll in 509.
- Review this Fieldwork Manual.
- Up-date or develop resume to review with fieldwork coordinator.
- At least 8 weeks prior to the start of the Internship, provide the Site, Preceptor and, Contact Information to the Fieldwork Coordinator so that the Affiliation Agreement can be initiated.
- <u>An executed Affiliation Agreement is required to be in place at least four (4) weeks prior to registration.</u> (Time frame may be longer if the Internship Site requires use of their own Affiliation Agreement).
- A detailed Work Plan must be submitted and approved at least one (1) week prior to start of Internship (Reference Sample Work Plan which will be provided by Fieldwork Coordinator and, Appendix A-2 for suggested rotations and areas of exposure for Section V of the Work Plan) to include at a minimum:
 - Part I Contact Information
 - Part II Executive Summary
 - Part III Strategic Action Plan to include: Mission and Vision, Goals for the Next 12 months, and Goals for the next 3-5 years.
 - Part IV Self-Assessment and, Strengths and Weaknesses analysis
 - Part V Work Plan Hours Allocation, Goals and Objectives, Expected Outcomes
 - Part VI Copy of MHA Competency Assessment either from HAD 508 or HAD 519 and Current Resume.
- Registration for HAD 580 is completed by the Fieldwork Coordinator once all Pre-Fieldwork actions are complete.

2. STUDENT FIELDWORK RESPONSIBILITIES (On-Site) DURING THE INTERNSHIP

Each intern must fulfill the following responsibilities to earn credit for the internship:

- Provide Preceptor with a copy of Evaluation Form (Appendix C-1) prior to the start of the Internship.
- Maintain a Daily Log with dates and times worked and journal entries of significant activities. Time Logs and Journal Reflections must be submitted on a <u>WEEKLY</u> basis during the internship. (**Appendix B-1**)
- Follow the organization's policies and procedures.
- Communicate regularly with fieldwork coordinator. Request fieldwork coordinator input when useful.
- AT THE MIDPOINT (75 Hours), the student will arrange for a conference call among the Fieldwork Coordinator, Preceptor and student.
- If requested, schedule one site visit with the Fieldwork Coordinator during the internship.
- Maintain student membership with the ACHE or similar professional organization.
- Adhere to code of ethics and confidentiality requirements.
- Complete required reading assignments if designated by the internship preceptor.
- Complete projects as assigned by the preceptor. To include at a minimum:
 - One (1) Major project
 - Two (2) Minor projects as approved by fieldwork coordinator
 - Deliverables as discussed with fieldwork coordinator and maintained in project documentation file.
 - Refer to Appendix B-2 and B-3 for examples of Project Related Reporting at onset of each project.
- Have regular communication with preceptor and seek feedback on a regular basis. Ask for clarification of unclear instructions and ask for preceptor input when encountering new problem situations.
 - Complete one hundred fifty (150) Internship hours.

3. STUDENT FIELDWORK RESPONSIBILITIES POST INTERNSIP

Student will prepare documentation Binder to include at a minimum:

- Summary Journal Reflection on the entire Internship experience to include an assessment of the student against the Goals set in the Work Plan.
- 1 Major and 2 minor projects including, project summaries, Intern involvement, and all Deliverables (supporting documentation).
- Completion of MHA Adopted Core Competencies (See Appendix C-3)
- Preceptor Evaluation Form Completed

Course Program Survey (To be submitted electronically post Internship to Professor Michael Costello).

B. <u>FIELDWORK COORDINATOR RESPONSIBILITIES</u>

1. FIELDWORK COORDINATOR RESPONSIBILITIES PRE-FIELDWORK START DATE

- Advise and assist the student in identifying an appropriate site that will meet professional growth and learning requirements identified by the student.
- Facilitate an effective transition for the student from the online coursework to fieldworksite.
- Execute Affiliation Agreement for Internship.
- Approve course registration.
- Approve final Work plan as prepared by the student.

2. FIELDWORK COORDINATOR RESPONSIBILITIES DURING-FIELDWORK

- Maintain open communication with preceptor and student during the internship experience; review and monitor weekly reports.
- Resolve any problems that may occur in the experience.
- Ensure that the student understands what is expected during the fieldwork experience and assignments.
- Review and provide feedback to students on weekly-reports on a timely basis.
- Maintain contact with student and preceptor through phone calls, emails, and potential site visit.
- Complete site visit(s), where appropriate.

2. FIELDWORK COORDINATOR RESPONSIBILITIES POST-FIELDWORK

- Complete Student Grade.
- Collect and file all fieldwork documentation related to student's fieldwork experience.

C. PRECEPTOR RESPONSIBILITIES

1. PRECEPTOR RESPONSIBILITIES PRE-FIELDWORK

The preceptor's role in preparing students for their careers is essential. As educators, they transmit ideas, stimulate thinking, guide the fieldwork, and help with professional growth. The preceptor has the following responsibilities:

- Meet with student to determine if the site will proceed in offering the fieldwork experience.
- Help the student clarify goals and objectives for the fieldwork experience and hours allocation.
- Assist in preparation of Work Plan.
- Work with fieldwork coordinator to assure final Affiliation Agreement is signed and in place prior to the start of any student fieldwork experience.
- Complete and Sign Appendix A-3 if appropriate.

2. PRECEPTOR RESPONSIBILITIES DURING FIELDWORK

- Create and maintain a supportive learning environment that includes resources needed, accessibility to all aspects of the organization, instructive assignments, challenging experience, responsive feedback and professional guidance.
- If warranted, assign appropriate reading materials, journals, and/or books during the fieldwork
- experience to augment appropriate learning.
- Monitor student progress in meeting Fieldwork requirements.
- Interact with the graduate program through providing constructive feedback in the individual's academic preparation, by advising the faculty regarding the curriculum, and by taking an active role in teaching the student at the fieldwork site.
- Review all project assignments and reports for accuracy and adequacy.
- Assign meaningful and relevant projects.
- Provide the student with an initial orientation to the organization, history, policies, procedures and
- personnel requirements of the health care facility.
- Introduce the student to staff and members of the community and members of the organization who may be
- participating in the student's fieldwork experience through shadowing or project that are required to be completed pursuant to the student responsibilities under Section III A.2 hereof.
- Arrange meetings with the student to discuss work related issues, progress of the fieldwork experience, projects and assignments.
- Provide exposure to learning experience in the community and other health-related agencies.
- Participate in Phone call at the Mid-Point (75 hour) of the internship with student and Fieldwork Coordinator.
- Evaluate the student, recommend course grade, and forward documentation to the faculty coordinator.

3. PRECEPTOR RESPONSIBILITIES POST FIELDWORK

• Complete Evaluation – **Appendix C-1**.

SECTION IV - OTHER/GENERAL INFORMATION

General Responsibilities of the University

A. Students with disabilities need to register with the Center for Teaching and Learning Excellence (CTLE) at least one to three months prior to the academic year if they anticipate needing disability-related accommodations and/or support services. In order to register with the office, the student must self-disclose the presence of a specific disability and provide the appropriate documentation complete with diagnosis and specific limitations.

B. Non-discrimination Statement

The University is committed to providing an educational, residential, and working environment that is free from harassment and discrimination. Members of the University community, applicants for employment or admissions, guests, and visitors have the right to be free from harassment or discrimination based on race, color, religion, ancestry, gender, sex, pregnancy, sexual orientation, gender identity or expression, age, disability, genetic information, national origin, veteran status, or any other status protected by applicable law.

Students who believe they have been subject to harassment or discrimination based on any of the above class of characteristics, or experience sexual harassment, sexual misconduct or gender discrimination should contact Elizabeth M. Garcia, Title IX Coordinator, (570) 941-6645 elizabeth.garcia2@scranton.edu. The United States Department of Education's Office for Civil Rights (OCR) enforces Title IX. Information regarding OCR may be found at www.ed.gov/about/offices/list/ocr/index.html

C. Resolution of Problems

Problems, which arise during the internship experience, should be resolved immediately and at the lowest level possible. Normally, the student and preceptor will resolve most issues. If, however, problems cannot be resolved at the first level, then the fieldwork coordinator should be contacted to assist in the problem-solving process. The preceptor and host site have the option of terminating the student's internship experience if serious problems cannot be resolved. The fieldwork coordinator may consider transferring the student to another internship site if so, requested by the student, assuming an acceptable site is available.

D. Evaluating Performance and Grading

Appraisal of the internship experience by the preceptor, student, and fieldwork coordinator should be a continuous

process based on the satisfactory completion of the activities outlined in the fieldwork work plan, the internship course requirements, and all other projects, reports, and duties that are assigned to the student by the preceptor and faculty coordinator. The student is graded using the academic regulations of the University of Scranton as follows: (Reference Appendix D)

Grading Distribution

| A = 95-100% | B - = 83 - 85% |
|-------------|----------------|
| A = 92-94% | C+ = 80-82% |
| B+ = 89-91 | C = 70-79% |
| B = 86-88% | F = Below 70 |

The fieldwork coordinator will monitor the student's progress during the experience through site visit, telephone contacts, email, fieldwork experience reports, and preceptor's evaluation. The Fieldwork Coordinator assigns the final grade.

It is common for a student to initially receive an "Incomplete Pending" by the Fieldwork Coordinator. "IP" is given at the discretion of the instructor to a student who is doing satisfactory work but who has not completed all the course requirements at the end of a given semester. Given such an extension, the student must complete all the required work, unless otherwise agreed. Failure to complete the necessary work within the stipulated time results in automatic conversion of the "Incomplete Pending" to a permanent grade of F.

Department of Health Administration and Human Resources HAD 580 – Internship Program

Student Checklist

| Student Name: | | |
|--|------------------------------------|---------------------------------------|
| | Section I – Student | |
| MHA "Other Requirements" Checklist (A | all must be completed prior to Int | ernship start date): |
| | | Yes |
| ACHE Competency Assessment as of Date: | | |
| Integrity Tutorial | | |
| Community Service | | |
| External Mentor (Name: |) | |
| Professional Association | | |
| Excel Proficiency | | |
| · | Section II - Student | |
| Fieldwork Requirements Checklist (All to | be completed pre-start date): | |
| Resume (updated as of date: |) | |
| Fieldwork Assignment Form | | |
| (Site Name: |) | |
| (Site Location: |) | |
| (Preceptor Name: |) | |
| Work plan Hours Submitted and Ag | greed with Preceptor | |
| Work plan Goals & Objective Subn | nitted & approved by Fieldwork Co | ordinator |
| HAD 580 Course Registration with | Registrar | <u> </u> |
| | - | · · · · · · · · · · · · · · · · · · · |

Section III - Student

Post Internship Final Documentation Requirements (All to be completed after 150 internship hours are completed) Student will prepare documentation Binder to include:

- Summary Journal Reflection on the entire Internship experience to include an assessment of the student against the Goals set in the Work Plan.
- 1 Major and 2 minor projects including, project summaries, Intern involvement, and all Deliverables (supporting documentation).
- Completion of MHA Adopted Core Competencies (See Appendix C-3)
- Preceptor Evaluation Form Completed

<u>SUGGESTED FIELDWORK ACTIVITIES</u> (Consider while developing Rotations and Hours Allocation in Work Plan)

Rotation through multiple departments is highly recommended as part of any internship experience. The length of time spent in each area will depend on the student's prior experience, fieldwork goals, work assignments, and preceptor's recommendations. In addition to rotation through the organization, the following activities are just some examples of suggested exposures during the fieldwork experience.

- 1. Proper orientation to facility and senior management.
- 2. Review organizational policies and procedures, and medical staff bylaws, rules and regulations, most recent DoH/JCAHO survey results, etc.
- 3. Participate in a survey by any applicable surveying or accrediting body. (If Applicable)
- 4. Attend corporate board, medical staff, management staff, and respective committee meetings. Attendance as an observer (or member) and recorder is recommended for a wide range of meetings such as the following and depending on the type of organization:
 - Management staff meetings, at all levels of the Organization.
 - Executive Committee.
 - Medical Records Committee.
 - Utilization Committee.
 - Infection Control Committee.
 - Tissue Committee.
 - Monthly Professional Staff Conference.
 - Fire, Safety, and Disaster Committee.
 - Budget Committees.
 - Strategic Planning Committee.

- Medical Staff Meetings
- Board of Trustees and its committees.
- Joint Conference Committee.
- Public Relations Committee.
- •Quality Assurance Committee.
- Pharmacy Committee.
- Ethics Committee
- IRB Committee
- Performance Improvement Committee
- Other related Committees
- 5. The student may have an opportunity to observe other institutions and organizations such as:
 - A third-party insurance payer.
 - The local medical society.
 - State Hospital Association.
 - Local and/or state health planning councils.
 - Skilled nursing facility.
 - Public Health Department.
 - Home Health Agency/Hospice.
 - Neighborhood health center.

- Health Maintenance Organization, IPA, ACO.
- Mental health center.
- Hospital.
- Physician's office (Single/Multi Specialty).
- MSO, PHO, ACO, etc.
- Safety-net program.
- Health promotion organization.
- Other appropriate health agencies and organizations.
- 6. Attend association meetings, conventions, educational seminars and institutes.
- 7. Prepare a summary of activities, studies, and investigations.
- 8. Participate in-patient rounds and administrative rounds.
- 9. Share rotational operational assignments (i.e., administrative call) with other administrative personnel.
- 10. The preceptor may assign other activities as part of the internship experience.
- 11. Submit progress reports on a weekly basis to faculty as noted in course syllabus.

The extent of this involvement will be indicated in the fieldwork plan.

APPENDIX A-2 (cont.)

SUGGESTED FORMAT OPTION FOR MHA WORKPLAN (Part V): HOURS ALLOCATION, GOALS AND OBJECTIVES

1. Orientation

• Employee Mandatory Education

2. Accreditation/Licensure/Regulatory

- JCAHO
- DOH
- CMS (Core Measures)
- HEDIS/Other Insurance Related
- CLIA

3. Administrative/Senior Management

4. Ambulatory/Outpatient

- Freestanding and On-site Clinics
- Ambulance/First Responders
- Home Health Care/Hospice

5. Ancillary Services

- Dietary/Nutrition
- Patient Transport
- Pharmacy
- Radiology
- Laboratory
- Cath/Endo

6. Emergency Services/Urgent Care

7. Ethics/Corporate Compliance/ Legal (Health Care Reform)

8. Finance

- General Accounting/Revenue Cycle (accounts payable, accounts receivable, general ledger, cost accounting/reporting, payer mix)
- Treasury Management (investment management, bank and bond financing, cash management, Pension management)
- Budget (annual, capital, and project related)
- Insurance/Third Party Contracting/Reimbursement

9. Governance

• Board and Medical Staff Meetings

10. Human Resources

- Salary and Benefits
- Hiring, Promotion and Discipline
- Performance Evaluation and Review
- Employee Satisfaction Survey's and Initiatives
- Training and Development

11. Management Information Systems

- Administrative Systems
- Clinical Systems/ Electronic Health Record
- System Integration/Connectivity
- Infrastructure
- In-house/Outsourced

12. Marketing/Philanthropy

- Mode/Media
- Fundraising/Foundation
- Community Events/Support

13. Medical/Clinical Operations

- Hospitalist Services
- Nursing Services
- Operating Room/Anesthesia
- Special Units (Catheterization Lab, Endoscopy, Intensive Care, Cardiac Intensive Care, Stepdown, Telemetry)
- Physical Therapy/Rehabilitation (including distinct part units)
- Admitting and Medical Records
- Disease and Case Management
- Discharge/Continuum of Care Planning

14. Patient Relations

- Patient Advocacy
- Financial Assistance
- Patient Satisfaction Processes
- Community Outreach

15. Physician Relations

- Credentialing
- Physician Integration (joint ventures, employment, contracting)
- Physician Satisfaction
- Physician Liaison

16. Quality

- LEAN
- Continuous Quality Improvement
- Clinical Benchmarking
- Financial Benchmarking

17. Strategic Planning

- Community Needs Assessment
- Population Health Initiatives
- Project Planning/Capital Planning

18. Support Services

- Plant and Facilities/Engineering
- Security
- Parking

Administrative Rounds

Continuous (Do Not Assign Hours)

ATTESTATION

(To be completed if HAD 580 is to be completed at regular place of employment or duty station)

| I will be serving as the fieldwork preceptor for | a student in the online MHA |
|---|---|
| Degree Program at the University of Scranton who is registering for HAD 5 | 580 – Administrative Internship. |
| I understand that the required 150 hours of fieldwork, taken in HAD 580, compensated employment. As such, I agree that he/she will be | annot be comprised by duties that are part of his/her |
| performing his/her responsibilities as delineated in the Fieldwork Plan outsi | ide the scope of those regularly compensated |
| work hours. | |
| | |
| | |
| _ | Fieldwork Preceptor (Internship site) |
| | |
| - | Fieldwork Mentor (University of Scranton) |

WEEKLY REPORT SAMPLE

| | Hospital |
|------------------------|-----------------------------|
| | _ Administrative Internship |
| Daily Log and Journal: | Week 11 (9/12/16 – 9/16/16) |

Monday, September 12the, 2016

| Time | Area | Description |
|------------------|--------------------|--|
| | | Morning prep time to work on weekly report, confirm meetings for the day, |
| 8:00 – 8:30 AM | | look at residency requirements and book assignment questions. |
| | | Attended the morning nursing lean management and bed huddle with the |
| | | nursing director's staff. The team discussed the normal quality and safety |
| 8:30 – 9:00 AM | Clinical/ Nursing | metrics, ER/ED numbers and patient volume, and EVS turnaround times/ |
| | & Quality | issues. |
| | | Continued to work on preparation materials for the Heart Walk, researching |
| 0.00 11.00 13.6 | 36.1 / | incentive options, following up with floor directors in terms of creating teams |
| 9:00 – 11:00 AM | Marketing/ | and fundraising. Also, need to follow up with graphic designer and t-shirt |
| | Planning | company. |
| | | Attended the bi-monthly Emergency Preparedness Committee meeting. |
| | | Leading the discussion was (head of security and safety operations) as well as the director of quality, public relations, ER director/ |
| | | clinical manager, patient services, medical/ surgical staff members, and other |
| | | members of the committee. The team discussed: |
| | | my analysis of the code rover drill and gave updates to the policy |
| | | and areas for improvement |
| 11:00 – 12:00 PM | Quality | mass vaccination for flu |
| | | In addition, various planning processes for other safety and |
| | | security demonstrations within the hospital. |
| | | Lunch break. Working on some residency requirements and scanning the |
| 12:00 – 1:15 PM | | culture ship book. Call with Professor Holland. |
| | | Attended the Hospital Kidney Program Transplant Evaluation Team Meeting. |
| | | The group consisted of members from the quality team, the transplant |
| 1:30 – 2:30 PM | Quality* | surgeons, patient services, and other members of the team. The team |
| | | discussed: |
| | | current wait/ patient list and criteria metrics for qualification |
| | | recorded number of current transplants this year |
| | | UNOS site visit |
| | | Spent an hour with, the director of patient services/ quality. |
| | | Took me through the shell of the process in which the hospital preps |
| | | for a JC visit. She showed me how she records data/ metrics, pulls together reports, discussed areas of responsibility of the staff, and invited me to a |
| | | number of meetings to attend with her for some exposure. This week and into |
| | | next week I will attend: |
| | | Root-Cause analysis meetings |
| | | Critical evaluation of the current process/ protocol and its utilization |
| 2:30 – 3:30 PM | Quality | Medicine PI meeting |
| | | Environment of care – Shadowing |
| | | Patient Safety Meeting |
| | | Continued to work on the operational guidelines, creating action plan, task |
| 3:30 – 5:00 PM | Clinical/ Nursing | list, editing sections, and including changes. |
| | & Patient Services | Meeting tomorrow with CNO to discuss updates. |

| Time | Area | Description |
|------------------|---------------------|---|
| | | Attended a Root-Cause- Analysis with(quality/ |
| | | patient services), the CMO, the OR scheduler, and members |
| 8:00 – 8:30 AM | Quality | of the ophthalmology team to discuss action plans. |
| | | Attended the morning nursing lean management and bed |
| | | huddle with the nursing director's staff. The team discussed |
| | | the normal quality and safety metrics, the ED, and EVS/ |
| 8:30 – 9:00 AM | Clinical/ Nursing & | Dietary. The team also discussed the placement/ disposal of |
| | Quality | some equipment on the floors that is no longer needed. |
| | | Briefly met withto discuss some progress |
| | | made on the planning process for the AHA heart walk. Our |
| | | AHA rep will be with us on Thursday so we talked about |
| 9:00 – 10:00 AM | Marketing/ Planning | areas that we need help in, current progress, incentives, |
| | | fundraising, and next steps. |
| | | Followed up with rep on unit directors, getting the staff |
| | | involved, and coordinating steps to move forward. |
| | | Prepping for meeting with CNO to update her on the current |
| 10:00 – 11:00 AM | Clinical/ Nursing & | processes in place, meetings and individuals to pull together |
| | Patient Services | from the various departments, and current timeline in terms |
| | | of the discharge lounge planning process. |
| | | Meeting with the CNO to discuss current progress on the |
| | | discharge lounge pilot program. We talked about meetings |
| 11:00 – 11:30 AM | Clinical/ Nursing & | that we need to have, who needs to be pulled in from the |
| | Patient Services | ancillary/ support services, and some of the regulatory and |
| | | state approval needs. |
| | | Lunch break. Working on setting up meetings, edits to logs, |
| 12:00 – 1:00 PM | | confirming afternoon meetings, looking at residency |
| | | requirements. |
| | | Worked on some of the discharge lounge preparation |
| | Clinical/ Nursing & | materials. Mapped out meetings needed, who to contact, all |
| | Patient Services | the departments involved. |
| 1:00 – 3:00 PM | | |
| | Marketing/ Planning | Continued to work on the preparation for the AHA heart |
| | | walk. Fundraisers, incentives, monitoring goals and |
| | | objectives. |
| | | Attended Root-Cause-Analysis for a more in-depth analysis |
| | | regarding the Massive Transfusion Protocol for patients with |
| | | identified ailments. This was a great, great learning |
| 3:30 – 4:30 PM | Quality | experience. The group will follow up with proposed changes |
| | | and report with any additions, comments, or concerns. |
| 4.00 | | Discussion with quality director concerning the root-cause- |
| 4:30 – 5:00 PM | Quality | analysis and hospital policies and how they have developed |
| | | over time. Very much enjoyed the exposure. |

Wednesday, September 14the, 2016

| Time | Area | Description |
|----------------|-------------------|--|
| 8:00 – 8:30 AM | | Morning prep time to check and respond to emails, confirm meetings for the day, look at residency requirements and |
| | | book assignment questions. |
| | | Attended the morning nursing lean management and bed |
| | | huddle with the nursing director's staff. The team discussed |
| 8:30 – 9:30 AM | Clinical/ Nursing | the normal quality and safety metrics, ER/ED numbers and |
| | & Quality | patient volume, and EVS turnaround times/ issues. |
| | | Attended the CCU as well as the Cardiology/ Telemetry |
| | | units morning bed huddles with the PMI team from the home |

| 9:30 – 11:00 AM | Quality | Office. I watched the team make suggestions to improve how to identify and move barriers to enhance patient flow throughout the hospital and the discharge/ excess days. |
|------------------|---|---|
| 11:00 – 12:00 PM | Contract Compliance | Follow up with patient care contract binder materials/ letters of approval. Identified item addendum and sent additional letters out/ scheduled a time to meet with Sharon to finalize the binder once all the physicians respond. |
| 12:00 – 1:00 PM | | Lunch break. Working on residency requirements, drafting up emails, printing materials, etc. |
| 1:00 – 2:00 PM | Marketing/ Planning | Working on updates for the AHA heart walk. Working with PRM to help organize company-wide shirts, researching incentives and fundraising activities, and prepping for visit from the AHA rep |
| 2:00 – 3:00 PM | Quality | Meeting with the executive team (CEO, CMO, CNO, ED department director, practice plan COO, quality director) for an update with the PMI team looking patient flow, discharge times, excess days, and ED throughput metrics. The team will be returning in the fall. |
| 3:00 – 4:30 PM | Nursing/ Clinical & Patient Services | Working on documents, continuing to work on screening questions, nursing scripting, creating document to record metrics/ identify barriers and organize them, pulling more research. Mapping out needed meetings with the team. |

Thursday, September 15^{the}, 2016

| Time | Area | Description |
|------------------|--|---|
| 7:30 – 8:30 AM | Quality & Cardiac Catheterization/ Team | Attended the monthly review conference with, the CMO, the director for the ED, the director for the Cardiac Services, docs, nurses, and all other team members involved with the STEMI transmissions and protocols. The team strives to meet metrics established by both CMS as well as AHA for the STEMI services. |
| 8:30 – 9:30 AM | Clinical/ Nursing & Quality | Attended the morning nursing lean management and bed huddle with the nursing director's staff. The team discussed the normal quality and safety metrics, ER/ED numbers and patient volume, and EVS turnaround times/ issues. The educational materials for the JC prep will be given to the nursing directors as the team formulates a strategy to help prep the staff for the visit/ potential questions. |
| 10:00 – 11:00 AM | Quality | Shadowed during environment of care rounds with a member from the quality department, infection control, safety officer & plant operations director. The team surveyed two floors in the hospital (dialysis & the OR suite/STICU) looking for current dates on all equipment, plant and operation regulations, inventory with current expiration dates, and other regulator items the joint commission would look at. |
| 11:00- 12:00 PM | Quality | Attended a meeting with, the CMO, floor directors,(From safety and security),(both nursing leadership) and other members of the hospital team to discuss possible improvements that could be added to the code rover policy to help improve patient/ staff safety. It was interesting to hear from frontline nursing staff members. |
| 12:00 – 1:00 PM | Quality | Attended the monthly Medicine PI meeting with, the nursing senior leadership, the CMO, unit-nursing directors, and leadership from Drexel. The group discusses current process improvements in the medical/clinical areas of the hospital etc. |

| 1:00 – 3:00 PM | Clinical/ Nursing & Quality | Attended the Nursing Directors Operations Meeting with the senior nursing staff, all the directors' staff, clinical managers, and other members of the nursing/ hospital team. The group discussed staff development, quality, and implemented a new core competency for the nursing staff to maintain throughout their practice. |
|----------------|---|---|
| 3:00 – 4:30 PM | Clinical/ Nursing & Patient Services | Worked on discharge lounge materials, mapping out meetings needed to launch the pilot program by early/ mid-October. |

Friday, September 16^{the}, 2016

| Time | Area | Description |
|------------------|--------------------------------------|---|
| | | Morning prep time to work on monthly report and looking at |
| 8:00 – 8:30 AM | | residency requirements and book assignment questions. |
| | | Attended the morning/ daily bed huddle with the nursing |
| | | director's staff. The team discussed the standard metrics. The |
| 8:30 – 9:00 AM | Clinical/ Nursing & | team went through the floor quality measures and discussed |
| | Quality | staffing numbers for the weekend with the staff. |
| | | Announced that Joint Commission educational |
| | | booklets prepared for the staff were on campus and will be |
| | | distributed to the various departments depending on the |
| | | number of staff/ clinical staff. |
| | | Working withto coordinate the distribution of the |
| | | educational materials for the Joint Commission visit. Drafted |
| 9:00 – 11:00 AM | Quality | up emails to the department directors to organize groupings |
| | | of booklets for each department within the hospital. |
| | 44 | Working withto finalize patient care contract binder |
| 11.00 12.00 71.6 | Accreditation, | while waiting for the last few physician approval letters to be |
| 11:00 – 12:00 PM | Licensure, Regulatory | returned. Drafted up follow-up emails to send out to the |
| | | physicians. The binder will be presented at the next MEC |
| 12.00 1.00 DM | | meeting. |
| 12:00 – 1:00 PM | | Lunch break. |
| | | Meeting with and to discuss current |
| 2.00 2.20 PM | N. 1 .: /DI : | updates for the Heart Walk planning. We are continuing to |
| 2:00 – 2:30 PM | Marketing/ Planning | promote hospital wide fundraising and coordinate that for |
| | | the staff. We also made headway on t-shirt options that we |
| | | will utilize as another fundraising option. |
| | | Worked on some planning for the discharge lounge. |
| 2:30 – 4:30 PM | Clinical/Numain = 0 | Working to set up a meeting with a hospital in the network |
| 2:30 - 4:30 PM | Clinical/ Nursing & Patient Services | that currently/ did support a lounge. Researching other key |
| | Patient Services | points to support the lounge needed internal meetings with |
| | | the planning group, and continuing to work on guidelines. |

WEEK 11: JOURNAL REFLECTION

- During Week 11 of the fieldwork experience, I can say that this may have been my favorite week yet. I worked with ________, the Director of Quality and Patient Safety, along with some of the members of her department. I was able to attend some Root-Cause-Analysis meetings, performance improvement committee meetings, transplant program coordination meetings and learned about how the hospital preps for potential visits from the Joint Commission and other accrediting bodies. The team is in the very early stages of the preparation process and I would love to get more involved as the team dives into some of the reporting, data collection/ analyzation, and education to prepare some of the clinical staffmembers.
- As stated within the report, I had the opportunity to shadow as the environment of care team rounded on two clinical floors within the hospital. The members of the quality department are willing to teach, and I learned what a mock Joint Commission survey would look like as the team would analyze every aspect of a particular floor. The clinical staff members seemed to be very receptive of suggestions to help improve areas that the Joint Commission would look at, and I was humbled to have the opportunity to shadow in the OR suite and to learn about how the department functions. It was an eye-opening experience and I plan to shadow more of the environment of care surveys on different floors in the hospital.

APPENDIX B-2 PROJECT OVERVIEW

| Major Project (EXAMPLE) |
|---|
| Project Title: Implementation of a Pilot Discharge Lounge |
| |

| Title: Implementation of a Pilot Discharge Lounge |
|--|
| Start Date: |
| End Date: |
| Description of Project: The management team at Hospital is interested in implementing a new patient discharge lounge on the first floor of the hospital. This initiative consists of a number of smaller projects. In the effort to improve patient throughput and discharge times, the team wants to use available space in the hospital and allocate resources to supporting a discharge lounge for patients. The lounge is a tool to get patients who are ready for discharge out of floor beds and into a comfortable space where individuals can sit, use the restroom, and snack while waiting for transportation from the hospital. I have been asked to work alongside the team to organize the pilot for the lounge as well as develop patient use criteria and operational guidelines to use during the pilot timeframe. |
| Team Members: (Case Manager, COO, Senior VP Nursing, Social Worker, PT/OT, Ancillary Staff, Environmental Services) |

Intern Responsibilities: To review literature and research for the discharge lounge, establish simple patient criteria metrics for pilot launch; establish Discharge Lounge Operational Guidelines applicable to the pilot period of the lounge. Develop nurse/tech scripting. Serve as the Project Manager.

Tasks/ Activities:

- Meet regularly with the Discharge Lounge team members to discuss plan and progress
- Review PA rules, regulations, and liability/ license rules in hosting a discharge lounge
- Review current literature for model programs, pilots, guidelines, criteria, and communications to patient and staff
- Become familiar with Discharge Lounge programs at other facilities & reach out to Tenet leadership for similar models
- Establish Criteria Patient use, medication management, patient discharge education, nutrition/ dietary support
- Create running Discharge Lounge Operational Guidelines for pilot launch
- Gather data about the progress, usage, influence the lounge has on the hospital's discharge throughput since the implementation of the pilot

<u>**DELIVERABLES:**</u> (Include the results of the project. Provide appropriate documentation, pamphlets, policies, etc., when appropriate.)

| Minor Project (EXAMPLE) Project Title: Lab Test | |
|---|--|
| Centralization Start Date: | <u> </u> |
| End Date: TBD | |
| | |
| functioning lab, until recently the lab are assigned to the When all costs are assigned to centralizing the "Core Lab" at hospital, it is even more critic methodology to determine when the control of the control | campus. It is important that we assign all costs to the appropriate campuses. It has a fully the propriate campuses, we will be able to realize the cost savings achieved by the Campus. Since the network is growing and currently building a new all that all costs are associated with the correct campus. It will be important to develop a next should be charged back to each campus for lab services. |
| Team Members: | Administrative Intern |
| | Director of Finance,Campus |
| | VP, Operations |
| | Manager, Management Engineering |
| Intern Responsibilities: | |
| Align costs of the lab Meet with Meet with Meet with costing | by to cost specific campuses in |

Tasks/Activities:

| | APPENDIX C-1 | | | | | | |
|---|------------------|--------------|-------------|----------|--------|---------|--|
| | ersity of Scrar | | | | | | |
| Master of Heal | | | | | | | |
| Evaluation Rep | | | tern | | | | |
| Name of Preceptor | | of Intern | | | | | |
| Organization | Date | | | | | | |
| Please evaluate the resident's knowle | edge, skills, al | oilities, an | d quality (| of perfo | rmance | e | |
| | Outstanding | High | Avaraga | Weak | Poor | Did not | |
| | Outstanding | Average | Average | Weak | 1 001 | Observe | |
| | | iiiige | | | | 3330110 | |
| DOMAIN #1: Communication & Relationship | 5 | 4 | 3 | 2 | 1 | | |
| Management | | | | | | | |
| | | | | | | | |
| A. Apply Principles of communication and | | | | | | | |
| demonstration specific applications B. Present results of data analysis to decision-makers | | | | | | | |
| C. Use Factual data to produce and deliver credible | | | | | | | |
| and understandable results. | | | | | | | |
| D. Facilitate group dynamics, process, meetings, and | | | | | | | |
| discussion | | | | | | | |
| E. Utilize effective interpersonal skills. | | | | | | | |
| | | | | | | | |
| | Outstanding | High | Average | Weak | Poor | Did not | |
| | | Average | | | | Observe | |
| DOMAIN #2: Leadership | 5 | 4 | 3 | 2 | 1 | | |
| DOMAIN #2. Deadership | 3 | 7 | 3 | | 1 | | |
| A. Explain potential impacts and consequences of | | | | | | | |
| decision-making in situations both internal and | | | | | | | |
| external | | | | | | | |
| B. Encourage a high level of commitment to the | | | | | | | |
| mission, and values of the organization | | | | | | | |
| C. Gain physician buy-in to accept risk and support new business ventures | | | | | | | |
| D. Accurately assess individual strengths | | | | | | | |
| and weaknesses | | | | | | | |
| | | | | | | | |
| | Outstanding | High | Average | Weak | Poor | Did not | |
| | | Average | | | | Observe | |
| DOMAIN #3: Professionalism | 5 | 4 | 3 | 2 | 1 | | |
| DOMAIN #3: Frotessionalism | 3 | 4 | 3 | | 1 | | |
| A.Understand professional standards and codes of | | | | | | | |
| ethical behavior | | | | | | | |
| B. Uphold and act upon ethical and | | | | | | | |
| professional standards | | | | | | | |
| C. Demonstrate professional norms and behaviors | | | | | | | |
| D. Engage in continued professional | | | | | | | |
| development including reflection and self- | | | | | | | |
| | | | | | | | |
| | | | | | | | |
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| | | | | | | | |
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| | | | | | | | |
| | | | | | | | |
| | | <u> </u> | <u> </u> | | | | |

| | Outstanding | High Average | Average | Weak | Poor | Did not Observe |
|--|-------------|-----------------|---------|------|------|--------------------|
| DOMAIN #4: Knowledge of the Healthcare Environment | 5 | 4 | 3 | 2 | 1 | |
| A. Assess the interrelationships among access, quality, cost, resource allocation, accountability, and community B. Prepare projects that are credible to governmental, | | | | | | |
| regulatory, professional, and accreditation agencies C. Use marketing and needs assessment techniques in support of healthcare program development and | | | | | | |
| implementation D. Apply principles and methods of health policy analysis | | | | | | |
| E. Analyze and apply funding and payment mechanisms of the healthcare system | | | | | | |
| | Outstanding | High Average | Average | Weak | Poor | Did not Observe |
| DOMAIN #5: Business Skills and Knowledge | 5 | 4 | 3 | 2 | 1 | |
| A.Integrate information from various sources to make decisions and recommendations | | | | | | |
| B. Demonstrate critical thinking, analysis, and problem solving | | | | | | |
| C .Apply basic financial management and analysis principles | | | | | | |
| D. Apply reimbursement principles, ramifications and techniques including rate setting and contracts | | | | | | |
| E. Apply principles of operating, project, and capital budgeting | | | | | | |
| F. Use project management techniques G. Use statistical and analytic tools to measure and improve performance | | | | | | |

| 1. | General overall estimate (discussing strengths and weaknesses, level of achievement, willingness to devot time and energy, sense of purpose and commitment, emotional stability, etc.): |
|----------|---|
| | |
| | |
| | |
| 2. | Specific problems and recommendations |
| | |
| | |
| 3. | Suggestions for post-graduate opportunities/direction: |
| | |
| | |
| | |
| 4. | Recommended Course Grade (Circle) |
| | A A- B+ B- B C F |
| Student | Signature Date |
| Precepto | r Signature Date |
| Fieldwo | 'k Coordinator Signature Date |

REFLECTION SUMMARY AND GOALS/OBJECTIVES ANALYSIS

Prepare an Internship Summary Paper, which summarizes the Intern analysis of his/her experience and discusses the significance of specific activities contained in the Log. This summary paper must include a reflection that illustrates cura personalis and Magis.

MHA COMPETENCY ASSESSMENT FORM

| Student Name | Date |
|--------------|------|
| | |

| | Adopted MHA Program Core Competencies [1-Novice; 2-Emerging; 3-Competent; 4-Proficient; 5-Expert] | 1 | 2 | 3 | 4 | 5 |
|----|--|---|---|---|---|---|
| | 1. COMMUNICATION AND RELATIONSHIP MANAGEMENT | | | | | |
| Α. | Demonstrate effective interpersonal relations. | 1 | 2 | 3 | 4 | 5 |
| В. | Identify Stakeholder needs/expectations | 1 | 2 | 3 | 4 | 5 |
| C. | Sensitivity to what is correct behavior when communicating with diverse cultures, internal and external. | 1 | 2 | 3 | 4 | 5 |
| D. | Present results of data analysis to decision makers. | 1 | 2 | 3 | 4 | 5 |
| E. | Provide and receive constructive feedback. | 1 | 2 | 3 | 4 | 5 |
| F. | Use factual data to produce and deliver credible and understandable reports | 1 | 2 | 3 | 4 | 5 |
| G. | Facilitate group dynamics, process, meetings and discussions. | 1 | 2 | 3 | 4 | 5 |
| | 2. LEADERSHIP | | | | | |
| A. | Explain Potential impacts and consequences of decision making in situations both internal and external | 1 | 2 | 3 | 4 | 5 |
| B. | Foster an environment of mutual trust. | 1 | 2 | 3 | 4 | 5 |
| C. | Create an organizational climate that encourages teamwork. | 1 | 2 | 3 | 4 | 5 |
| D. | Knowledge of own and others' cultural norm | 1 | 2 | 3 | 4 | 5 |
| E. | Encourage a high level of commitment to the purpose and values of the organization. | 1 | 2 | 3 | 4 | 5 |
| F. | Build trust and cooperation between/among stakeholders | 1 | 2 | 3 | 4 | 5 |
| | 3. PROFESSIONALISM | | | 2 | | _ |
| A. | Understand, uphold and act upon ethical and professional standards. | 1 | 2 | 3 | 4 | 5 |
| B. | Professional societies and memberships. | 1 | 2 | 3 | 4 | 5 |
| C. | Network with colleagues. | 1 | 2 | 3 | 4 | 5 |
| D. | Participate in community service | 1 | 2 | 3 | 4 | 5 |
| | 4. KNOWLEDGE OF THE HEALTHCARE ENVIRONMENT | | | | | |
| A. | Recognize and address the interdependency, integration and competition among healthcare sectors | 1 | 2 | 3 | 4 | 5 |
| В. | Access the interrelationships among access, quality, cost, resource allocation, accountability and community. | 1 | 2 | 3 | 4 | 5 |
| C. | Use business techniques to support program development in alignment with health care trends and health policy. | 1 | 2 | 3 | 4 | 5 |
| D. | Make recommendations and take actions compatible with Governmental, regulatory, professional and accreditation agencies. | 1 | 2 | 3 | 4 | 5 |
| | 5. BUSINESS SKILLS AND KNOWLEDGE | | | | | |
| A. | Ability to integrate information from various sources to make decisions or recommendations. | 1 | 2 | 3 | 4 | 5 |
| B. | Demonstrate critical thinking and analysis. | 1 | 2 | 3 | 4 | 5 |
| C. | Use project management techniques. | 1 | 2 | 3 | 4 | 5 |
| D. | Financial management and analysis principles. | 1 | 2 | 3 | 4 | 5 |
| E. | Reimbursement principles, ramifications and techniques, including rate setting and contracts. | 1 | 2 | 3 | 4 | 5 |
| F. | Principles of operating, project and capital budgeting. | 1 | 2 | 3 | 4 | 5 |

COURSE SURVEY

University of Scranton HAD 580 – Administrative Internship – Administrative Internship Course Evaluation Survey Form

| Instructor: | Term: | | | | | | | |
|--|---------|---------------------|-------|------------|------|----|--|--|
| Circle the number, which indicates your opinion. Describe the frequency of your instructor's teaching procedures using the following the foll | | scale: requently | · 5-A | Almost Alw | ⁄ays | | | |
| Instructor | | | | | | _ | | |
| Overall, I rate this instructor an excellent teacher. | 1 | 2 | 3 | 4 | 5 | NR | | |
| Course Overall, I rate this course as excellent. | 1 | 2 | 3 | 4 | 5 | NR | | |
| Instructional Methods | | | | | | | | |
| Question: Was enthusiastic about overseeing your Internship | 1 | 2 | 3 | 4 | 5 | NR | | |
| (for example, was dynamic and energetic in discussion about your Internship site, selection and as it relates to your career goals and personal/professional objectives). | | | | | | | | |
| Question: Used evaluation methods which were fair and appropriate (for (example, reviewed the grading rubric with you and clarified course expectations and requirements prior to the start of your Internship | 1 | 2 | 3 | 4 | 5 | NR | | |
| Question: Provided clear and well-organized fieldwork manual materials and met with you regarding the fieldwork manual. | 1 | 2 | 3 | 4 | 5 | NR | | |
| Question: Gave valuable career guidance in relationship to healthcare employment and selection of a meaningful Internship experience. | 1 | 2 | 3 | 4 | 5 | NR | | |
| Question: Was the process of developing a work plan prior to Internship helpful to you in focusing your learning and experiential expectations for your Internship. | 1 | 2 | 3 | 4 | 5 | NR | | |
| Question: Was readily accessible for assisting the student pre-Internship (for example, the instructor made themselves available by at least one means of communication such as in person, by phone or by email) to answer any of the student's questions or concerns. | 1 | 2 | 3 | 4 | 5 | NR | | |
| Question: Was readily accessible for assisting the student <u>during the</u> <u>Internship</u> (for example, the instructor made themselves available by at leas one means of communication such as in person, by phone or by email) to answer any of the student's questions or concerns. | 1 st | 2 | 3 | 4 | 5 | NR | | |

| Question: Was timely in responding to emails or other communication means and messages (namely, the instructor set expectations of response time and complied with those predefined parameters of instructor response time) | 1 | 2 | 3 | 4 | 5 | NR |
|---|---|---|---|---|---|----|
| Question: Gave sufficient feedback on Weekly and Monthly Reports | 1 | 2 | 3 | 4 | 5 | NR |
| Question: Gave sufficient support and feedback at the mid-point visit regarding the students projects and overall student progress (for example, the instructor demonstrated sufficient knowledge about your project scope or content to make meaningful suggestions and assessment of the project quality) | 1 | 2 | 3 | 4 | 5 | NR |
| Question: Gave sufficient support and feedback at the final site visit regarding the students projects as completed and presented to the instructor (for example, discussed the quality and sufficiency of project documentation, outcomes and deliverables) | 1 | 2 | 3 | 4 | 5 | NR |
| Question: Did the work plan assist you in assessing your final Competencies and assessing your attainment of your previously Established goals and objectives of your overall Internship experience. | 1 | 2 | 3 | 4 | 5 | NR |
| Workload Average number of hours per week I spent outside of class on work for this course | 1 | 2 | 3 | 4 | 5 | NR |

What would you suggest to improve this course?

What aspects were good and should not be changed?

EXIT SURVEY

UNIVERSITY OF SCRANTON GRADUATE HEALTH ADMINISTRATION PROGRAM MHA Degree

EXIT SURVEY

[Administered to graduating students upon exit from the MHA program.]

| I. | ED | U | $\mathbf{C}\mathbf{A}$ | П | UN | E١ | $/\mathbf{A}$ | LU | ΑΊ | П | Uľ | ٧ |
|----|----|---|------------------------|---|----|----|---------------|----|----|---|----|---|
|----|----|---|------------------------|---|----|----|---------------|----|----|---|----|---|

| 1. | Year of graduation from MHA Program. | | | | | | | | |
|----|---|--|--|--|--|--|--|--|--|
| 2. | Year of first course in the MHA Program. | | | | | | | | |
| 3. | Which 3 courses have you found to be of most value? (Explain) | | | | | | | | |
| 4. | Which topics not currently taught in the MHA Program would be beneficial? | | | | | | | | |
| 5. | Please evaluate the usefulness of the following classroom experiences: | | | | | | | | |
| 6. | Case Studies Reaction Critiques Group Projects Group Discussions HAD 509-Comprehensive Project Class Debates Class Discussion of Cases Was your fieldwork experience an: Internship Externship Administrative Internship Directed Study Please comment on your fieldwork experience: | | | | | | | | |
| 7. | Do you feel prepared to function in the workplace? (If not, please explain on other side of this page) | | | | | | | | |
| 8. | Do you feel satisfied with your MHA education? (If not, please explain on other side of this page) | | | | | | | | |
| 9. | Are there any strengths or skills not emphasized in the program that should be? (If so, please explain on other side of this page) | | | | | | | | |

10. Indicate the extent to which you feel the program develops the following strengths or skills:

| | Very Mu | ıch | | | Very Little |
|--------------------------------------|---------|-----|---|---|-------------|
| Health Status Improvement | 5 | 4 | 3 | 2 | ĺ |
| Conflict Management | 5 | 4 | 3 | 2 | 1 |
| Conceptual Skills | 5 | 4 | 3 | 2 | 1 |
| Financial Analysis | 5 | 4 | 3 | 2 | 1 |
| Problem-Solving/Making Decisions | 5 | 4 | 3 | 2 | 1 |
| Critical Thinking | 5 | 4 | 3 | 2 | 1 |
| Management/Strategy | 5 | 4 | 3 | 2 | 1 |
| Change Management | 5 | 4 | 3 | 2 | 1 |
| Managing Change | 5 | 4 | 3 | 2 | 1 |
| Analytical/Quantitative Skills | 5 | 4 | 3 | 2 | 1 |
| Computer Skills | 5 | 4 | 3 | 2 | 1 |
| Information Management Skills | 5 | 4 | 3 | 2 | 1 |
| Decision-Making Ability (Managerial) | 5 | 4 | 3 | 2 | 1 |
| Decision-Making Ability (Ethical) | 5 | 4 | 3 | 2 | 1 |
| Ethical Analysis Skills | 5 | 4 | 3 | 2 | 1 |
| Written Communication Skills | 5 | 4 | 3 | 2 | 1 |
| Oral Communication Skills | 5 | 4 | 3 | 2 | 1 |
| Systems/Integrative Skills | 5 | 4 | 3 | 2 | 1 |
| Managed Care Knowledge | 5 | 4 | 3 | 2 | 1 |
| Interpersonal/Personal Skills | 5 | 4 | 3 | 2 | 1 |
| Leadership | 5 | 4 | 3 | 2 | 1 |
| Team Work Skills | 5 | 4 | 3 | 2 | 1 |
| Marketing Knowledge | 5 | 4 | 3 | 2 | 1 |
| Health Care Industry Knowledge | 5 | 4 | 3 | 2 | 1 |
| Career Marketability | 5 | 4 | 3 | 2 | 1 |
| Health Professions Relations | 5 | 4 | 3 | 2 | 1 |
| Customer Relations | 5 | 4 | 3 | 2 | 1 |
| Quality Knowledge | 5 | 4 | 3 | 2 | 1 |
| Strategic Planning Skills | 5 | 4 | 3 | 2 | 1 |
| Legal Knowledge | 5 | 4 | 3 | 2 | 1 |
| Global Health Knowledge | 5 | 4 | 3 | 2 | 1 |

II. FACULTY and PROGRAM ADMINISTRATION EVALUATION

1. Please evaluate how valuable each of the following were to you during your graduate studies: (Please circle)

| | Great Value | | | | No Valı | ıe |
|---------------------------------|-------------|---|---|---|---------|----|
| Faculty Accessibility | 5 | 4 | 3 | 2 | 1 | |
| Faculty Expertise | 5 | 4 | 3 | 2 | 1 | |
| Faculty Interaction | 5 | 4 | 3 | 2 | 1 | |
| Teaching Proficiency | 5 | 4 | 3 | 2 | 1 | |
| Director of MHA Program | 5 | 4 | 3 | 2 | 1 | |
| Chairperson of Department | 5 | 4 | 3 | 2 | 1 | |
| Graduate School | 5 | 4 | 3 | 2 | 1 | |
| Academic Advising/Mentor | 5 | 4 | 3 | 2 | 1 | |
| Student Input into Program | 5 | 4 | 3 | 2 | 1 | |
| Quality of Fellow Students | 5 | 4 | 3 | 2 | 1 | |
| Adequacy of Library | 5 | 4 | 3 | 2 | 1 | |
| Adequacy of Computer Facilities | 5 | 4 | 3 | 2 | 1 | |
| Adequacy of Academic Advising | 5 | 4 | 3 | 2 | 1 | |
| Adequacy of Career Advising | 5 | 4 | 3 | 2 | 1 | |

2. Was the MHA faculty available to discuss your academic progress?

Yes No (please explain)

| 3. | Was the MHA | faculty available | ss your o | career progress? | | |
|--------|--|---|---------------|------------------|---------------------------|------------------|
| | Yes | No (please exp | lain) | | | |
| 4. | Do you have a | ny suggestions to | improve | academ | ic advising or career ad | lvising? |
| 5. | Did you use: The Office of C Counseling Cer Other Universit (Speci | nter ty Services | Yes | No | Reason (Why or Why | |
| 6. | Please evaluat | e the following M | IHA Prog | ram rec | quirements in terms of t | heir usefulness: |
| | External Mento ACHE or other ACHE Student Computer Skill Community Ser | Membership Chapter s | <u>Useful</u> | | <u>Somewhat Useful</u> | Not Useful |
| III. | OVERALL EV | 'ALUATION/FU' | ΓURE PR | OJECTI | ONS | |
| 1. | Did the course | id the courses offered in the program adequately prepare you for your desired career? | | | | |
| | Yes | No (please exp | lain) | | | |
| 2. | Do you feel the | e M.H.A. degree | was a wo | rthwhile | e investment of time and | l money? |
| | Yes | No (please exp | lain) | | | |
| 3. | Would you red | commend this pro | ogram to | other p | rofessional people/collea | igues? |
| | Yes | No (please exp | lain) | | | |
| 4. | Will you conti | nue your membe | rship wit | h ACHE | after graduation? | |
| | Yes | No (please exp | lain) | | | |
| 5. | Will you becom | me involved with | the MHA | Alumn | i Association? | |
| | Yes | No (please exp | lain) | | | |
| 6. | Which MHA | Alumni Associatio | on activit | ies will l | be important to you? (P | lease List) |
| IV. CA | REER DATA | | | | | |
| 1. | | ur current job tit | tle/positio | n and ei | mployer? | |
| | B. What is your base salary per year? (Optional) \$ | | | | | |

| 2. | Type of organization where you work: (Please check only one.) | | | | | | | |
|-------|---|--|--|--|--|--|--|--|
| | HospitalMulti-System HospitalInsurance Carrier | | | | | | | |
| | Nursing HomeExtended Care FacilityHome Health | | | | | | | |
| | Group Practice Clinical Ambulatory Care | | | | | | | |
| | Accounting FirmConsulting FirmGovernment | | | | | | | |
| | AssociationPlanning AgencyOther (Specify) | | | | | | | |
| | College/UniversityHospice | | | | | | | |
| | HMO/PPORehabilitation | | | | | | | |
| 3. | Has the MHA Program helped you obtain a higher-level position or promotion? | | | | | | | |
| | YesNo | | | | | | | |
| | If yes, has this increased your income? Yes No If no, do you feel more proficient at your current job? Yes No | | | | | | | |
| 4. | Do you feel capable of holding a higher-level position than your current one?YesNo | | | | | | | |
| 5. | Do you feel prepared to pursue a health care administration career? YesNo (if not, please explain) | | | | | | | |
| 6. | Did you change employers after entering the MHA Program? | | | | | | | |
| | | | | | | | | |
| | YesNo | | | | | | | |
| | If yes, how many times and why? | | | | | | | |
| 7. | Did the MHA Program help you develop a strategic career plan and direction? | | | | | | | |
| . • | | | | | | | | |
| | YesNo | | | | | | | |
| | Comments: | | | | | | | |
| O | Do you feel better about yourself as a person as a result of completing the program? | | | | | | | |
| 8. | | | | | | | | |
| | YesNo | | | | | | | |
| | | | | | | | | |
| | Comments: | | | | | | | |
| | | | | | | | | |
| Pleas | e add any additional comments and feedback on the backside of this page. | | | | | | | |
| | | | | | | | | |
| Thanl | α you for your participation. Good luck in your career! | | | | | | | |

APPENDIX D

HAD 580 Grading Rubric

| Date: | | |
|--------|---------|----------|
| Rater: | Course: | Student: |

| Category | Description | Points Available | Goal | Score |
|---|---|---------------------|--|-------|
| Communication Skills, Organizational Skills and Time Management (This section also includes your success in identifying an Internship, assistance with Affiliation Agreement, development of Work Plan, course registration & initial paperwork graded here.) | As a professional, you must be proficient in finding an attaining pertinent information for decision making, competent in written and verbal communication including the marketing of oneself and ones interests and capabilities. Professionalism and time management are key. | 20 points | Effectively communicates both written and verbal. Always professional and timely. | |
| Weekly | HAD 580 requires weekly reports that track your time and discuss your activities. Details have been provided in Appendix A. The purpose of this tracking is also to expose potential issues within the organization or potential for projects by engaging in critical reflection and thinking. | 20 points | Submitted for each week by Tuesday of the following week. | |
| Projects: Internship 1-Major 2-Minor | All projects must include a project summary sheet. Students should maintain a working file of all project related work product such as emails, PowerPoints, brochures, electronic files, etc. to reflect the underlying substance of the project and final work product. | 20 points | Ability to assess data, research, discuss & present opportunities & strategies. | |
| Submission of Document Binder: Appendix A-1, Section III | Affiliation Agreement, Work Plan, Weekly time allocations and reflections, Reflection summary, Goal and Objective attainment summary, Project Work, MHA competency assessment, Preceptor Eval, and Course Eval are to be submitted professionally to the Department at the conclusion of HAD580 | 20 points | Clear and proactive understanding of the importance of documentation and documentation audit trails | |
| Preceptor and Fieldwork Coordinator Evaluation of 5 Main adopted MHA Competency Domains. | Preceptor will complete an evaluation form of the student based on the five ACHE Competencies of 1) Communication Skills, 2) Leadership, 3) Professionalism, 4) Knowledge of the Healthcare Environment and 5) Business Skills and Knowledge | 20 points | To specifically assess the 5 main domains of student competency from both the day to day perspective of the hands on Preceptor and the administrative oversight perspective of the Fieldwork Coordinator | |