

RESIDENCY HANDBOOK

Master of Science in Health Service Administration

Department of Health Science and Human Ecology

College of Natural Sciences

California State University, San Bernardino

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THE RESIDENCY EXPERIENCE

This handbook defines the Residency requirements for the Master of Science in Health Services Administration (MSHSA) at California State University, San Bernardino. The handbook serves as a guide for students, preceptors, and faculty to encourage and support the highest educational value of the Residency experience.

Health services administration is a rapidly changing field. The speed and direction of major alterations in utilization, reimbursement, operations, competition, regulation, and technology make it difficult for an administrator to be adequately prepared for success in today's environment from a series of academic courses alone. Graduates of health services administration programs must possess the knowledge and theory necessary to understand and adapt in these rapidly changing times. At minimum, students should be prepared to deal effectively with:

- Economic Change
- Information Processing
- Capital Scarcity
- Competitive Market/Managed Care
- Demographic Trends
- Governmental Agencies
- Productivity

The role of the academic institution is to provide the fundamental knowledge, theory, and competencies needed for successful administrative behavior. California State University, San Bernardino recognizes that merely possessing knowledge and theory, however, does not ensure that students can successfully apply what they have learned into practice. Providing experience in the process of application is a major function of the Residency assignment. The experience facilitates the synthesis of classroom theory into practical, day-to-day experience, and better prepares graduates to enter the workforce.

The Residency is an integral part of the MSHSA program. It is designed to supplement coursework and give each student the opportunity to receive guidance from a well-qualified, practicing health services administrator; to apply and test administrative theory in practical work situations; and to develop the ability to assume major responsibility in a healthcare organization. The Residency demands that students demonstrate competencies that contribute to the profession of health services administration.

The preceptor, of course, becomes the key player in this transition from student to professional. The preceptor is an advisor, teacher, role model, tutor, mentor, and guide.

The preceptor augments faculty efforts to assist interns in developing a philosophy of administration, a code of values and ethics, and life-long professionalism. In this role, the preceptor will guide the intern toward:

- Improved skills and capabilities
- Strengthening interpersonal attributes
- Becoming a manager and leader

INTRODUCTION

ORGANIZATIONAL STRUCTURE

The Master of Science in Health Services Administration (MSHSA) program is offered through the Department of Health Science and Human Ecology (HSCI) in the College of Natural Sciences (CNS) at California State University, San Bernardino (CSUSB).

OVERVIEW

The goal of the MSHSA program is to provide graduate students an integrated, contemporary, and multidisciplinary education with diverse topics integrated into curriculum, research, and practical experience. In terms of general objectives, at the conclusion of the Residency program, students will be able to:

1. Describe the organization and framework of the modern healthcare industry.
2. Demonstrate knowledge, skills, and abilities associated with administrative roles in various organizations in the healthcare industry.
3. Apply leadership skills in a transitional (school-to-career) setting.
4. Interact constructively with diverse specialists in the healthcare industry to evaluate and resolve administrative problems.

The completion of a Residency is a primary component of the program for students who do not have prior appropriate professional work experience in a health-related organization. The Residency provides students the opportunity to acquire firsthand professional knowledge of and experience with the functioning of a health-related entity. The working Residency requires the completion of 720 hours of approved work experience in a professional capacity, an oral presentation, and a Formal Report of the Residency documenting the student's experience. The Residency is supervised by department Graduate Coordinator.

STUDENT ORGANIZATIONS

The MSHSA Program is affiliated with the American College of Healthcare Executives (ACHE).

HSCI 697 COURSE DESCRIPTION – Administrative Residency

- I. 697A: Residency. First half of a 720-hour supervised Residency in sites such as hospitals, health plans, HMOs, medical groups, managed care organizations, private or public health services or agencies. Requires a rotation in administrative organization and function. Prerequisites: HSCI 601, 602, 603, 605, and 690, and completion of at least 36 units of approved course work toward graduation, advancement to candidacy, and consent of department. (4 units)
- II. 697 B: Residency and Final Project. Second half of a 720-hour supervised Residency in sites such as hospitals, health plans, HMOs, medical groups,

managed care organizations, private or public health services or agencies.
Requires completion of the rotation of administrative organization and function.
Completion of Formal Written Report of Residency. Prerequisites: HSCI 697A
and consent of department. (4 units)

RESIDENCY GOALS

Each student, in consultation with the faculty advisor, will develop specific goals and objectives to round out the educational experience. Goals and objectives may be modified based on the reality of the field experience; clear communication with the preceptor and the faculty advisor is essential.

ARRANGEMENTS

The Residency assignments are varied in keeping with the individual needs of the student. The Graduate Coordinator tries to identify strengths and opportunities for improvement in each student's level of preparedness. Resources and strengths of affiliation sites and preceptors are also identified. With this information, students are encouraged to pursue recommended sites that can also best meet their needs.

WORKSITE RESIDENCIES

Worksite Assignments: In some instances, students may prefer assignments in organizations where they are already employed. If approval for such a placement is granted, residency activities must be outside of students' usual scope of work. Additionally, students must arrange for preceptor supervision outside of the normal "chain of command" or line of accountability. This arrangement offers both advantages and disadvantages, and should be discussed at length with the MSHSA Graduate Coordinator. Approval of the Graduate Coordinator is required.

ADVANTAGES

Convenience of location
Familiar relationships
Building on existing skills
Already on location

DISADVANTAGES

Missed opportunity to learn a new organization
Missed opportunity for new experiences
Limited to work-related assignments
Difficult to distinguish work time from Residency time

PAID ASSIGNMENTS

Participation in a residency is not predicated on a stipend; students should plan for an unpaid experience. While payment might be preferred, it carries inherent disadvantages. In a paid setting, the student becomes an employee of the facility and could have assigned duties unrelated to residency objectives. As a paid employee, the student would be obligated to fulfill job assignments that could jeopardize the attainment of residency competencies. The disadvantages of a worksite assignment would apply here as well.

However, the residency period can be viewed as probationary since, during this time, the organization has the opportunity to evaluate the student in anticipation of possible future employment. It is also a time when the student can consider the facility as a place for future opportunities.

HEALTH SERVICES ADMINISTRATION COMPETENCIES

Residency assignments, projects, and experiences are designed to provide additional development of these competencies recognized by the American College of Healthcare Executives (ACHE), the American College of Medical Practice Executives (ACMPE), and the Medical Group Managers Association (MGMA):

- Structuring/marketing/positioning healthcare organizations
- Financial management
- Leadership, interpersonal & communication skills (professionalism)
- Managing information resources
- Collecting/analyzing, and using information in decision making (including epidemiological applications)
- Statistical/quantitative/economic analysis applied to business and clinical decisions
- Health policy formulation/implementation
- Assessment of health status in populations
- Management of health risks
- Development of health systems in diverse communities (business and clinical operations)
- Business and health outcomes measurement
- Governance (organizational, technical/professional knowledge)

Competencies have been categorized as technical, administrative, and institutional (see appendix). Students are required to address each category during the residency assignment with a minimum of three competencies in each category. In some cases, a specific project may not be assigned for a competency. However, students can develop competencies through observations and interactions at the site. These experiences should be documented and related to the appropriate competency.

HEALTH SERVICES ADMINISTRATION CODE OF ETHICS

Students are expected to adhere to a professional code of ethics during the residency assignment and in their professional careers. Codes of ethics are available for ACHE, MGMA, and ACMPE. Students should refer to the ACHE website and others for the complete codes and guidelines. The ACHE preamble reads as follows:

The purpose of the *Code of Ethics* of the American College of Healthcare Executives is to serve as a guide to conduct for members. It contains standards of ethical behavior for healthcare executives in their professional relationships. These relationships include members of the healthcare executive's organization and other organizations. Also included are patients or others served, colleagues, the community and society as a whole. The *Code of Ethics* also incorporates

standards of ethical behavior governing personal behavior, particularly when that conduct directly relates to the role and identity of the healthcare executive.

The fundamental objectives of the healthcare management profession are to enhance overall quality of life, dignity, and well-being of every individual needing healthcare services and to create a more equitable, accessible, effective and efficient healthcare system. Healthcare executives have an obligation to act in ways that will merit the trust, confidence, and respect of healthcare professionals and the general public. Therefore, healthcare executives should lead lives that embody an exemplary system of values and ethics.

In fulfilling their commitments and obligations to patients or others served, healthcare executives function as moral advocates. Since every management decision affects the health and well-being of both individuals and communities, healthcare executives must carefully evaluate the possible outcomes of their decisions. In organizations that deliver healthcare services, they must work to safeguard and foster the rights, interests, and prerogatives of patients or others served. The role of moral advocate requires that healthcare executives speak out and take actions necessary to promote such rights, interests, and prerogatives if they are threatened.

PROGRAM POLICIES

ELIGIBILITY

The residency experience is designed to be completed at the end of the MSHSA curriculum as the culminating experience. The student must be in good academic standing, having met the GPA requirement of 3.0.

PROCESSES AND PROCEDURES

- Meet eligibility requirements
- Apply for residency placement
- Sign confidentiality agreement
- Engage in projects based on ACHE competencies
- Compile artifacts demonstrating competencies
- Document 720 hours in time log
- Formal Written Report of Residency
- Participate in formal presentation
- Evaluate site, preceptor, course, and self.
- Participate in Residency Showcase
- Receive grade

SCHEDULING

The minimum number of contact hours for the residency assignment is 720. These hours must be documented on the MSHSA Time Log (see appendix).

Since the MSHSA strives to meet the needs of working professionals, flexibility exists in scheduling residency hours. After approval, students may begin the assignment as soon as eligibility criteria are met. Hours can be worked according to a variety of schedules. The student can work full time to accumulate the 720 hours or intermittently with as many hours per week as possible. This will result in a longer time required to complete the 720 hours. All time must be documented in the Time Log.

AFFILIATION SITE SELECTION

Site and preceptor selection are vital to a successful residency. The student is responsible for identifying personal strengths and areas in need of additional skill development. These are communicated to the Graduate Coordinator and the site preceptor in the form of objectives. The Graduate Coordinator and student will work together to identify a site that best provides the opportunity to meet the student's objectives.

The first step of student assessment of strengths and weaknesses is crucial in identifying the best match of a student's experience. The student is expected to complete this first step prior to contacting faculty or sites for placement. The assessment should be based on performance in the classroom and previous experience as well as future goals.

Initial contact with a potential site can be made by the student or the Graduate Coordinator. The student cannot make any commitments without approval of the Coordinator. When approaching a preceptor and/or site the student should follow these procedures:

- Ascertain strengths and improvements needed.
- Write specific objectives for the residency experience.
- Identify a site that has the best potential to meet the objectives.
- Update résumé.
- Contact the site. Speak with the health care administrator, not Human Resources.
- Make an appointment to interview for the position.
- Decide if the site is appropriate to meet your objectives.
- Send a thank-you note to the site indicating whether you will be submitting information for approval to the Graduate Coordinator.
- Inform site of approval.
- Complete all required documents.
- Schedule work time.
- Complete residency with excellent work.
- Evaluate experience.
- Present site with appreciation certificate at Showcase.

To ensure that every student is placed in a suitable learning environment, the Master of Science in Health Services Administration program has established the following guidelines for site assignments. The site must have:

- Capacity to provide experiences in the defined competency areas;
- A preceptor who is interested in providing time for teaching the student and is accessible, committed, knowledgeable, skillful, and professionally mature;
- A management staff willing to contribute to the administrative residency experience by mentoring, providing opportunities for observation and application of administrative competencies;
- Opportunities that provide productive and varied experiences for the resident and assist the resident in developing marketable skills;
- Preceptor and other key officials willing to support the educational policies, requirements, and standards of the MSHSA program;
- Signed affiliation agreement; and
- Approval of the MSHSA Graduate Coordinator.

AFFILIATION SITE AGREEMENTS

To document the site's willingness to accept a student and provide a meaningful learning experience, each site will be required to sign an Affiliation Agreement. A sample is in the appendix of this Handbook.

The Graduate Coordinator will maintain a directory of affiliation sites that have signed agreements. These will comprise the Site Directory from which future students can make selections for the residency experience. However, students will not be limited to this list. They may locate and investigate new sites for approval and addition to the directory after processing of the Affiliation Agreement.

ROLES AND RESPONSIBILITIES FOR STUDENT, SITE, AND FACULTY

STUDENT RESPONSIBILITIES

- Study all documents in preparation for Residency experience;
- Meet all course requirements;
- Serve as an ambassador representing CSUSB to the affiliation site;
- Write residency objectives in accordance with educational competencies;
- Meet expectations of CSUSB and affiliation site;
- Prepare all projects, reports, and evaluations, as required for course completion; and
- Submit required documents on time as assigned.

SITE RESPONSIBILITIES

1) *Mentoring Relationship* - Through a mentoring relationship between the preceptor and the student, the student acquires an in-depth understanding of the preceptor's

attitudes and beliefs concerning quality of patient care, strategic thinking, operations management, interpersonal skills, professional socialization, analysis of political processes, community relationships, and medical ethics. Examples of mentoring activities:

- Participation in debriefing sessions, which follow regular formal/informal meetings
- Engaging in discussions that allow the preceptor to evaluate the intern and provide feedback
- Working on preceptor-assigned projects that the preceptor evaluates and provides feedback
- Participation in discussions with the preceptor regarding his/her views on leadership philosophy and techniques
- Developing a personal philosophy, value system, code of ethics, and dedication to high professional standards and ideals desired of a health care administrator through discussions with preceptors and other health care administrators

2) *Observation/Familiarization* - The student develops an understanding of the organization's mission, administrative structure, operation, and inter-relationship of major units within the organization, and the means by which the organization carries out its major functions. The student develops an understanding of the operations and processes of the decision-making bodies at various levels, including policy making, medical and professional staff, administrative staff, and important external organizations, such as regulatory, financing, and professional associations. Objectives include:

- Gain a full understanding of the organization including its mission, goals, and objectives
- Observe, participate, and critically evaluate administrative and policy activities of the institution
- Observe the complex interrelationships within the institution. Develop a knowledge and understanding of the structural and interpersonal relationships between health professionals and health care administrators
- Develop an understanding of the institution's influence on its environment and the environment's influence on the organization
- Gain exposure to medical staff issues and concerns
- Examine the roles and responsibilities of external healthcare organizations through attendance at external meetings as well as site visits to other hospitals, public health agencies, extended care facilities, reimbursement agencies, and professional associations
- Develop an understanding of the institution's competitive strategies
- Attend internal meetings at all levels of the organization and participate in some or all of the following ways: observation, preparation of minutes for the meeting, active participation in discussion, or presentation of reports.
- Types of meetings include: department head briefing, coordinating council, quality assurance, community advisory council, board of trustees, executive committee, finance committee, medical staff, tissue committee, medical records, infection control, information management, utilization review, administrative staff,

union-management negotiation, risk management, legal interaction, meetings with consultants, and long range planning committees.

- Understand the internal operation and policies through reading internal documents. Examples of documents include: strategic planning documents, administrative policy manuals, personnel manuals, disaster manuals, medical staff bylaws, rules and regulations, coordination council bylaws, corporate board bylaws, business plans of parents and subsidiaries, and budgets of parents and subsidiaries.

3) *Application* - The student applies and tests administrative theory and tools in a “real world” setting. Through this application process, the student will build upon knowledge acquired in the didactic curriculum. Activities include:

- Perform projects as assigned. Projects should pertain to at least one of the identified competencies. This can include formal presentations (written and oral).
- Perform studies for the organization, e.g., marketing/planning, joint venture projects, evaluation of an operation, evaluation of a proposition and making a recommendation, specific strategic planning activities, and gathering internal financial and statistical data.
- Assume responsibilities within the organization. Utilize opportunities to strengthen leadership, judgment, problem solving, decision making, administrative, and communication skills, e.g., on-call duty, coordination/participation in a regulatory inspection, experiencing leadership in both large and small groups, department accountability, and line responsibility.

PRECEPTOR RESPONSIBILITIES:

- Provide supervision, guidance, and counseling
- Be an accessible teacher and mentor
- Provide access to vital internal and external resources.
- Notify the CSUSB MSHSA Graduate Coordinator if the student is not meeting expectations
- Offer continuous feedback to the student, including formal evaluation at the completion of the assignment.

FACULTY RESPONSIBILITIES:

The Graduate Coordinator is the assigned CSUSB faculty responsible for the MSHSA residency and is responsible for the educational quality of Residency experiences.

- Develop course information for dissemination to students and affiliation sites
- Assist students with selection of affiliation sites
- Provide orientation to students and sites in preparation for the residency assignment
- Maintain contact with preceptors during student assignments
- Conduct correspondence, visits, and conferences as needed with students and/or preceptors

- Plan events to facilitate positive relationships between CSUSB and the healthcare community.
- Develop guidelines for assignments to document the residency experience
- Grade each student's performance at the conclusion of residency assignment
- Maintain confidentiality of all reports and information from the student concerning the affiliation sites

PRE-RESIDENCY PREPARATION

ELIGIBILITY AND OBJECTIVES

No later than one full quarter prior to beginning the residency, the student should ensure that eligibility requirements have been met. Application procedures then can begin. The student should first define personal objectives for the residency experience. These objectives should be based on the student's previous experience, background, strengths, and weaknesses. Objectives should address each competency area defining what the student would like to accomplish in each category.

STUDENT ORIENTATION

Students should review the residency guidelines. It will also be helpful to attend the Residency Showcase to view graduating students' residency Formal Written Report of Residency and poster presentations. The Showcase is an opportunity to hear firsthand experiences from students completing residencies.

INVESTIGATE AFFILIATION SITES AND APPLICATION PROCEDURES

The student needs an updated résumé in preparation for site interviews. The process of investigating and choosing a site then begins. The Affiliation Site Directory can be a starting point. The Directory is on the department website and lists all sites that have signed an affiliation agreement. There is a link to the site's home page. Students can begin to match site resources with personal needs and objectives. However, the student can contact a site that is not in the Directory. After approval, the site representative will be asked to sign an affiliation agreement that would result in its inclusion in the Directory. The student should make an appointment to interview with the potential site preceptor so that both parties can make a decision about the residency. The MSHSA Graduate Coordinator is available for assistance throughout this process. After approval, the hours may be scheduled.

CHECKLIST

A checklist has been provided to guide the student through the process prior to assignment, during the assignment, and following completion of the assignment. The checklist in the Appendix of this handbook is a valuable tool.

ACTIVITIES DURING THE RESIDENCY

TIME DOCUMENTATION

Each student is required to complete a log documenting time spent on various activities at the affiliate site. The minimum time requirement for the residency is 720 hours. The log also serves as a chronological journal of the residency experience and competencies gained.

CONFIDENTIALITY

Health care facilities are required by federal law to protect patient right to privacy regarding healthcare information. As an intern in an affiliation site, students might have access to confidential information. CSUSB assures affiliation sites that students are knowledgeable about patients' right to privacy and agree to abide by the federal guidelines outlined in HIPAA legislation.

PROFESSIONALISM

Professionalism encompasses appearance, language, and competence, among other aspects of business-related practice. Students are expected to adhere to the professional code of ethics. Professionalism includes but is not limited to:

- Respecting the rights and dignity of all individuals.
- Compliance with all laws, regulations, and standards governing the practice of Health Services Administration.
- Ensuring professional excellence through self-assessment and continuing education.
- Accurate representation of professional credentials, education, and experience.
- Adherence to the mission and values of the profession.
- Protecting the confidentiality of healthcare information.
- Advocating change to improve the quality of healthcare.

SAMPLE RESIDENCY ACTIVITIES

- Rotate among all major services/activities of the affiliation site.
- Attend regularly scheduled administrative meetings.
- Request attendance at any events that will support competency development.
- Complete major management/problem-solving project, monthly reports, or evaluations.
- Visit external healthcare facilities.
- Attend local, regional, and other professional organization meetings.
- Observe the preceptor in daily operations.
- Participate in organizational decision-making as assigned.
- Engage in professional reading on healthcare topics.

A sample list of competency activities is located in the appendix.

Formal Written Report of Residency

- The Formal Written Report of Residency for the residency experience is compiled into a portfolio. This will provide evidence of the student's experience and activities during the residency assignment. It will also provide a valuable resource for the student to document skills that will be useful in the job search after graduation. The Formal Written Report of Residency should include the minimum requirements as outlined in the table of contents and should reflect the depth and breadth of the experience. It may also demonstrate a student's ability to communicate in writing and incorporate creativity.

The Formal Written Report of Residency is divided into the following sections:

I. The Site – describes the site, including types services offered and organizational structure.

II. The Student – includes the personal career goals and student's philosophy.

III. The Residency – recounts the projects, activities, and learning experiences organized by competency areas.

IV. Formal Written Report- demonstrates how the student has integrated scholarship with practice during the residency experience. The formal written report is based on culmination of experiences encountered by the by the student during the residency. Preparation of the formal written report will engage the student in critical analysis of issues, problems, and situations experienced during the residency, using relevant public health, health administration, and management theory. The report should include:

- APA Style
- Type using 12-point standard font, such as Arial, Geneva, Bookman, Helvetica, etc.
- Text should be double spaced on 8 ½" x 11" paper with 1 inch margins, single sided
- 15 page minimum
- Number pages consecutively

1. Title Page

2. Introduction

The purpose of an introduction is to orient the reader with the rationale behind the work. It places your work in a theoretical context, and enables the reader to understand and appreciate your objectives.

- Describe the importance (significance) of the work done - why was this worth doing in the first place? Provide a broad context.
- Defend/contextualize salient theoretical business and management models- why did you (the organization) use this particular tack or system? What are its advantages? You might comment on its

suitability from a theoretical point of view as well as indicate practical reasons for using it.

3. Project Identification/Overview

There is no specific page limit, but a key concept is to keep this section concise yet wholly inclusive. Materials, tools and methods may be reported under separate subheadings within this section or can be incorporated together.

4. Methods:

- Report the methodology (not details of each procedure that employed the same methodology)
- Describe the methodology completely, including specifics from business, management, and public health theory.

Generalize - report how procedures were done

5. Results:

The page length of this section is set by the amount and types of data to be reported. Continue to be concise yet inclusive, using figures and tables, if appropriate, to present results most effectively. The purpose of a results section is to present and illustrate your findings and or the outcomes of your various work projects. Make this section a completely objective report of the results/outcomes, and save all interpretation for the discussion.

6. Discussion

The objective here is to provide an interpretation of your results and support for all of your conclusions, using evidence from your experiences within the residency and generally accepted knowledge, if appropriate. The significance of the projects and applied theoretical findings should be clearly described.

V. Evaluations – provide feedback from the site preceptor and the student.

A table of contents for the Formal Written Report of Residency is included in the appendix of this Handbook.

POST-RESIDENCY ACTIVITIES

SUBMIT FORMAL WRITTEN REPORT OF RESIDENCY

The Graduate Coordinator will announce the deadline date for the Formal Written Report of Residency. The Formal Written Report of Residency can be mailed or personally delivered to the Graduate Coordinator's office. All components must be present for grading. The Graduate Coordinator will complete an evaluation form and return the feedback at the Showcase.

EVALUATION

Evaluations by the preceptor need to be based on personal observation, not solely based on written reports or second-hand information. They should be seen as a useful learning tool and should be discussed with the student prior to submission to the Graduate Coordinator. Both preceptor and student should sign evaluations.

Preceptor Evaluation of the Student: The evaluation form will be given to the preceptor by the student to be completed and submitted to the Graduate Coordinator. The preceptor and student will sign each report. The preceptor should make special reports or calls to the Graduate Coordinator whenever the progress or performance of the student is considered to be deficient.

Student Evaluation of the Preceptor/Site: At the end of the residency, each student will complete and return one copy of the evaluation form to the Graduate Coordinator. This evaluation will be kept in the strictest confidence. The comment section should be used for any pertinent information, including an explanation of ratings. This feedback will be used to evaluate the suitability of a site for future placements.

Student Self-Evaluation: Each student will compare the actual residency experience with objectives and evaluate the assignment. The student should also perform a self-evaluation of projects, activities, professionalism, and demonstrated abilities during the assignment.

ORAL DEFENSE

The purpose of the final oral defense is to allow students to reflect on the residency experience. This is an opportunity to describe what was done and what was learned, and to place the experiences within the context of the organization, the community and the MSHSA program. Students should think creatively about their contributions to the profession and the professional value of the placement. The following outline is a guide. The oral defense should be scheduled approximately **one week before the end of the residency** with the Graduate Coordinator.

The oral defense contains four (4) facets.

1. Organization Profile

The Organization Profile is intended to reflect the student's understanding of the site based on personal experience. Information to be included:

- a. Name and location of the organization, including the specific division or department in which the student worked
- b. Preceptor's name and title
- c. Project supervisor's name and title, if applicable
- d. Student's position in the organization with a brief explanation of why the student chose the residency site and project
- e. Mission/purpose and goals of the Residency site
- f. Organizational structure, e.g. organizational chart, departments, qualifications or background of key professionals
- g. Programs and services offered
- h. Population(s) served including pertinent demographic/census information.
- i. Relationship of this organization to other regional, state, or national organization

2. Organization Analysis

This analysis is a recapitulation of identified organizational factors that affected policy, procedure, and programs throughout the student's residency experience. The student is asked to identify trends as well as any internal and external changes that enhanced or hindered the success of the healthcare organization.

3. Self-evaluation of the Student's Performance

The self-evaluation is a personal reflection on the residency experience itself. Reviewing the *Residency Agreement* will be helpful in preparing this part of the assignment. Areas to be addressed include:

- a. How successful the student was in achieving the learning objectives and delineating the scope of work
- b. Key competencies and skills the student developed
- c. Any unanticipated accomplishments
- d. Impact of the experience on the student's personal and professional development
- e. Resources and contacts the student developed for future use
- f. What would the student do differently? What would remain the same?

4. Integration of Scholarship and Practice

The last section of the oral defense is designed for the student to demonstrate the integration of scholarship with practice during the residency experience. This could be accomplished, for example, through application of academic knowledge to the practice setting or by showing how new knowledge emerged from practice.

SHOWCASE

At the conclusion of the residency, each intern will participate in a showcase. The purpose is to share the experiences with future interns, CSUSB faculty, site preceptors, other interns, and guests. It is also an opportunity to thank preceptors and affiliation sites for welcoming students into their facilities and donating their time and expertise to help educate students.

Each intern will prepare a poster presentation depicting the residency experience. Posters are expected to be professional, attractive, and informative. Poster guidelines are available in the appendix.

Interns will form a panel to share experiences and give tips to future interns. At the conclusion of the showcase, interns will present certificates of appreciation (prepared by the Graduate Coordinator) to the site preceptors. The showcase is both an educational and a social event.

GRADING

Grading of the residency is based on the evaluations, Formal Written Report of Residency, oral defense, and showcase. All requirements must be met to receive a passing grade.

Appendix A

Affiliation Site Agreement

AFFILIATION AGREEMENT
For
California State University, San Bernardino (CSUSB)
College of Natural Sciences
Department of Health Science and Human Ecology
Master of Science in Health Services Administration (MSHSA)
And
ORGANIZATION NAME

CSUSB and the organization named above, hereinafter referred to as affiliation site, agree to establish an affiliation for the purpose of providing a Residency in health services administration for identified student(s) seeking a Master of Science Degree in Health Services Administration.

The University and Affiliation Site jointly agree that:

1. The purpose of the Residency is to provide opportunities for teaching and learning activities that will enable students to meet stated objectives.
2. There shall be open channels of communication between CSUSB and the Affiliation site relative to the Residency through the graduate coordinator.
3. The student will adhere to working hours and procedures of the affiliation site.
4. CSUSB is responsible for selecting and assigning students to the Residency. However, the affiliation site can interview and choose to accept or decline any student seeking a Residency assignment.
5. This agreement shall remain in effect until either CSUSB or the affiliation site initiates termination.
6. Any of the parties may withdraw from this affiliation by giving thirty days' notice in writing to the other parties.
7. This agreement does not require a monetary reimbursement to any party. However, it does not rule out such payment if both parties and the student agree on the terms and conditions.
8. No CSUSB faculty member shall be considered employees or agents of the affiliation site, unless specified in an additional agreement.
9. Students will adhere to a professional code of ethics while working at the affiliation site.

The University agrees to:

1. Assign a faculty member to serve as graduate coordinator. The graduate coordinator serves as the liaison for CSUSB and the affiliation site.
2. Select students who shall be placed at the affiliation site, subject to the approval of the site.
3. Provide information, upon request, regarding the background, experience, and educational needs of each student to the site prior to the students' placement. These will be in the form of a student resume and objectives.
4. Restrict the activities of its graduate coordinator from performing any service of the site except in the course of performance of instruction, unless otherwise contracted.
5. Carry final responsibility for the administration of the Residency.
6. Respect the mission of the site and both parties expect and require students to accept site clientele, staff, and administrators, regardless of race, ethnic origin, sex, age, religion or political belief.

7. Withdraw, upon written request, any student whose performance is unsatisfactory or whose conduct is unacceptable to the affiliation site.
8. To the extent that CSUSB personnel have access to the Residency site's Protected Health Information as that term is defined in the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and as they are amended from time to time, CSUSB and the Residency site agree that such personnel will be considered part of the Residency site "workforce" for HIPAA compliance purposes only. As such, personnel are subject to compliance with all of the Residency site's privacy policies adopted pursuant to the Regulations. Both parties agree that neither CSUSB nor its personnel are Business Associates of the Residency site as that term is defined under HIPAA and the related HIPAA Regulations. CSUSB personnel shall not disclose any of the Residency site's Protected Health Information to School or its faculty employees, agents, or representatives. CSUSB will never access or request to access any of the Residency site's Protected Health Information under this Agreement.

The Affiliation Site agrees to:

1. Accept students for the Residency in the site with the provision that the students may participate in overall site programs and activities as appropriate.
2. Accept students without regard to race, ethnic, origin, sex, age, or religious or political belief.
3. Provide appropriate instruction by a qualified site representative, known as the "preceptor".
4. Allow the preceptor time to prepare for conferences with students; to maintain conferences with students and the consult with the graduate coordinator.
5. Provide suitable space, equipment and materials for the intern.
6. Inform the University of changes in site policy, procedures and staffing that affect Residency courses.
7. Withdrawal of the student by the University when the placement fails to be in the best interest of the student, site or University.
8. Provide reimbursement, where possible, for student travel, equipment and supplies expended on behalf of the affiliation site.

In order to clarify the joint and separate responsibilities for the faithful performance of the terms of this Agreement, the parties hereto, in their capacity as stated, affix their signatures and declare their intentions effective the date signed.

AFFILIATION SITE _____ and
CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO

Residency Preceptor

Date

Graduate Coordinator

Date

Appendix B

Checklist

MSHSA RESIDENCY CHECKLIST

- Meet eligibility Requirements
- Attend Showcase (prior to Residency)
- Write personal objectives for Residency experience
- Develop list of potential sites (website, personal contacts, consult coordinator)
- Interview with potential sites (take objectives and resume, develop plan and projects)
- Select site (classify objectives activities by competency areas)
- Present resume and objectives.
- Receive approval from Graduate Coordinator
- Schedule 720 contact hours
- Sign confidentiality statement
- Record 720 hours on time log and document experience
- Compile Formal Written Report of Residency demonstrating competencies (Follow table of contents provided)
- Engage in projects/activities based on competencies
- Complete Residency objectives
- Evaluate site, preceptor, course and self
- Submit Formal Written Report of Residency to coordinator
- Oral Defense
- Participate in Residency showcase
- Receive grade

Appendix C

Confidentiality Statement

California State University, San Bernardino
Master of Science in Health Services Administration Residency
STUDENT CONFIDENTIALITY STATEMENT

Confidential information is defined as any information found in a patient's medical record. All information relating to a patient's care, treatment or condition constitutes confidential information. Interns shall never discuss a patient's medical condition with other personnel, friends or families. Confidential matters should not be topics for conversation at coffee breaks or in areas where they might be overheard. A patient's presence in the facility could also indicate the nature of the patient's illness and therefore should not be disclosed without proper authorization.

Any unauthorized disclosure by interns could render the facility and the university liable for damages on grounds of defamation or invasion of the right to privacy.

Any intern who violates the confidentiality of medical information is subject to serious disciplinary action, up to and including dismissal from an affiliation site and/or failure of the Residency experience.

I have received a copy of, read, understand and agree to uphold the written policy on matters of confidential information as described above. I also understand that in my daily job duties I will have access to confidential information. Any violation of confidentiality, in whole or in part, could result in disciplinary action, up to and including failure of the Residency experience and/or dismissal from the affiliation site. My signature acknowledges familiarity with HIPAA and agreement to comply with its requirements.

CSUSB further expects students to adhere to a professional code of ethics. The student's signature below acknowledges review of the code of ethics and agreement to abide by the guidelines.

Intern Signature

Date

Appendix D

**Formal Written Report of Residency
Evaluation**

**Self-Evaluation by Residency Student
Preceptor Evaluation of Residency Student
Evaluation of Residency Experience
Residency Time Log**

California State University, San Bernardino
Master of Science in Health Services Administration
FORMAL WRITTEN REPORT OF RESIDENCY EVALUATION

Student _____ Quarter/Year _____

Site _____

TOPIC	PASS	FAIL	COMMENTS
Appearance			
Creativity			
Professionalism			
Description			
Statistical Information			
Services provided			
Organizational Structure			
Resume			
Philosophy			
Role of Administrator			
Career Goals			
Community Diversity			
Decision Making			
Financial Management			
Health Policy			
Health Populations Assessment			
Health Risks Management			
Health System Development			
Information Management			
Leadership			
Marketing			
Outcomes Measurements			
Statistical Analysis			
Time Log			
By Preceptor			
Site Evaluation			
Self Evaluation			

 INTERNSHIP COORDINATOR

 DATE

California State University, San Bernardino
Master of Science in Health Services Administration
SELF EVALUATION BY INTERNSHIP STUDENT

Student: _____

_____ Site: _____

_____ Preceptor: _____

_____ Dates of Assignment _____

Indicate your judgment on a scale of 1 (disagree) to 4 (agree) by checking the appropriate number in the box provided. DISAGREE _ _ _

_ _ AGREE

TOPIC	1	2	3	4
Coursework adequately prepared me for this assignment				
CSUSB provided adequate information for internship				
My Objective provided for syntheses of didactic training				
Was able to plan a project effectively				
Was able to follow through with assignments				
Assignments were of managerial quality				
Was able to conceptualize solutions to problems				
Was thorough in completing projects				
Demonstrated appropriate knowledge				
I met my objectives				
Was cooperative with personnel				
Was participative with management team				
Interacted appropriately with multiple levels of personnel				
Was able to express myself effectively verbally				
Was able to express myself in writing				
Offered contributions when appropriate				
Able to accept criticism				
Demonstrated self-confidence				
Was resourceful				
Was flexible				
Physical appearance was appropriate				
Was dependable and punctual				
Demonstrated maturity and professionalism				

**Use the back or additional sheets for narrative evaluating yourself in the internship.*

COMMENTS: _____

STUDENT'S SIGNATURE _____

DATE _____

California State University, San Bernardino
Master of Science in Health Services Administration
EVALUATION OF INTERNSHIP STUDENT

STUDENT _____

SITE _____

PRECEPTOR _____ DATES OF
ASSIGNMENT _____

Indicate your judgment of the site on a scale of 1(disagree) to 4(agree) by checking the appropriate number in the box provided.

DISAGREE- - - - - AGREE

TOPIC	1	2	3	4
Was able to plan a project effectively				
Demonstrated ability to follow through				
Assignments were of managerial quality				
Was able to conceptualize solutions to problems				
Was thorough in completing projects				
Demonstrated appropriate knowledge				
Was cooperative with personnel				
Was participative with management team				
Interacted appropriately with multiple levels of personnel				
Was able to express him/her self effectively verbally				
Was able to express him/her self effectively in writing				
Offered contributions when appropriate				
Able to accept criticism				
Demonstrated self-confidence				
Was resourceful				
Was flexible				
Physical appearance was appropriate				
Was dependable and punctual				
Demonstrated maturity and professionalism				
Modeled ethical behavior				
I would recommend this intern for a position				

Comments _____

Student's signature _____ Date _____

Preceptor's signature _____ Date _____

California State University, San Bernardino
Master of Science in Health Services Administration
EVALUATION OF INTERNSHIP EXPERIENCE

STUDENT _____

SITE _____

PRECEPTOR _____ DATES OF
ASSIGNMENT _____

Indicate your judgment of the site on a scale of 1(disagree) to 4(agree) by checking the appropriate number in the box provided.

DISAGREE - - - - - AGREE

TOPIC	1	2	3	4
Related to Health Care Administration Competencies				
Provided broad overview of HCA responsibilities				
Followed the proposed objectives				
Reinforced coursework				
I was included I administrative level work				
Assignments were appropriately challenging				
Assignments were beneficial for the site				
Helpful in my professional development				
Adequate physical facilities				
Organizational structure was easy to understand				
Personnel easy to work with				
Role models were visible				
Provided effective supervision				
Was accessible and available				
Was knowledge of HCA role s and responsibilities				
Coursework provided adequate preparation for this experience				
Orientation for Internship was adequate				
Requirements were clearly defined				
Pre-assignment procedures were adequate				
Instructor site visit was helpful				
I would recommend this site to future interns				

Comments _____

Student's signature _____
Date _____

**California State University, San Bernardino
Master of Science in Health Services Administration**

Each student is required to document a minimum of 720 hours of practical experience at the assigned site. The completed log will be submitted with the Formal Written Report of Residency at the end of the quarter. It also should be available for review during the visits by the instructor.

DATE	TIME IN	TIME OUT	ACTIVITIES	TOTAL TIME	COMMENTS

I hereby certify that all information reported on this time log is accurate.

Signature of Student _____ Date _____

Signature of Site Preceptor _____ Date _____

Appendix E

Residency/Residency MSHSA Authorization Form

California State University, San Bernardino
College of Natural Sciences
Master of Science in Health Services Administration
Residency Authorization

Organization _____

Supervisor/Preceptor _____

Address _____ City _____ State ____ ZIP _____

Phone Number _____ FAX Number _____ email _____

Resident _____

Address _____ City _____ State ____ ZIP _____

Home Phone _____ Work Phone _____ email _____

Residency Dates: Start _____ End _____ (720 Contact Hours)

Remuneration: _____

Scheduled Duties and/or responsibilities:

Training Opportunities:

Tentative Work Schedule:

Residency Site Supervisor/Preceptor Date

Student/Resident Date

Graduate Coordinator Date

Appendix F

FORMAL WRITTEN REPORT OF RESIDENCY

MSHSA RESIDENCY FORMAL WRITTEN REPORT OF RESIDENCY

Format – The Formal Written Report of Residency should be bound and presented in a professional manner (e.g. three-ring binder) with dividers and a table of contents. There should be a section for each topic area with a separate section for each competency. For each competency, documentation should be provided indicating how the student developed that skill. A **summary should be included with each section** describing the activities. Students are expected to be professional and creative in presentation of the Residency experience in this written format.

Section I – About the Site

- Description
- Statistical information
- Services provided
- Organizational Structure
- Time Log

Section II – About the Student

- Curriculum vita
- Health Care Philosophy and role of the Health Care Administrator
- Personal Career Goals

Section III – Formal Written Report

- Title Page
- Introduction
- Project Identification/Overview
- Methods:
- Results:
- Discussion

Section IV – Evaluation

- Student by Preceptor
- Site by Student
- Self-evaluation by student

Appendix G

Poster Presentation Guidelines

MSHSA POSTER PRESENTATION GUIDELINES

Purpose: Each intern will design a poster describing his or her Residency experience. The poster will be displayed at the Residency Showcase.

Requirements:

- Posters should be set up by the designated time in the assigned location on the date of the Residency Showcase.
- Provide explanation to visitors attending the Showcase
- Display Portfolio

Format:

- Three-panel, tri-fold poster board
- Neat
- Attractive, creative, uncluttered
- Professional in appearance

Poster Content: (minimal)

- Name of affiliation site
- General description of the organization
- Include photos, flyers, logo, brochures, pamphlets, etc.
- Residency Objectives
- Residency Accomplishments
- Samples/examples of projects and Residency activities

Appendix H

Sample Competency Activities

SAMPLE COMPETENCY ACTIVITIES

1. Structuring/marketing/positioning healthcare organizations
 - Strategic planning
 - Business Plan
 - Marketing Plan
 - Monitor & Evaluate plan effectiveness
 - Partnerships & alliances
 - Visioning
 - Management flexibility
 - Critical Thinking
 - Goal setting
2. Financial Management
 - Capitation & Reimbursement Cost Accounting
 - Physician compensation strategies
 - Cost containment
 - Budgeting
 - Managed Care Relationships
 - Contracting
 - Financial statements
 - Investment planning
 - Fee schedules
 - Tax laws
3. Leadership, interpersonal & communication skills (professionalism, human resource management)
 - Interpersonal relationships
 - Ability to motivate personnel
 - Written and Verbal communication skills
 - Leadership ability
 - Decision Making
 - Physician Relations
 - Human Resource Management/Networking
 - Team Building skills
 - Negotiation Skills
 - Compensation & Benefits Programs
 - Workforce Development
 - Performance Evaluation
 - Conflict Resolution
 - Employment Laws
4. Managing information resources
 - Statistical reporting
 - Report development
 - Target monitors
 - Information system needs analysis
 - Procurement & installation
 - Training & support
 - Database management & maintenance
 - Information security

5. Collecting/analyzing & using information in decision making (including epidemiological)
 - Analyzing and synthesizing data
 - Objectivity
 - Pattern identification
 - Outcomes analysis
 - Electronic education
6. Statistical/quantitative/economic analysis applied to business & clinical decisions
 - Computer skills
 - Marketing
 - Analyze at-risk activities
 - Auditing
 - Clinical support services development
7. Health policy formulation/implementation
 - Risk Management
 - Legal competency
 - Staff Training
 - Legal compliance
8. Assessment of health status in populations
 - Implementation of survey methodologies
 - Community Needs assessment
 - Responsive plan development
 - Community Outreach
 - Patient satisfaction
9. Management of health risks (risk management)
 - Awareness of the environment
 - Special services administration
 - Prevention Activities
 - Liability insurance
 - Communication systems
 - Credentialing for staff
10. Development of health systems in diverse communities (business & clinical operations)
 - Organizational knowledge
 - Operations Management
 - Acquisitions & Mergers
 - Diversity Training
 - Resource networks
 - Patient Flow processes
11. Business & health outcomes measurement
 - Effectiveness evaluations
 - Patient satisfaction
 - Performance evaluation
 - Business operations planning
 - Inventory control
12. Governance (organizational, technical/professional knowledge)
 - Practice improvement
 - Change management
 - Bylaws, policies, procedures

Stakeholder relationships
Quality assurance programs