RESIDENCY FORMS

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Note: Forms can be downloaded in Word format at dal.ca/sha

STUDENT EVALUATION FORM

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Sterling Edmonds</th>
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<tbody>
<tr>
<td>Agency/Organization</td>
<td>Children's Hospital of Eastern Ontario</td>
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<tr>
<td>Preceptor Name/Title</td>
<td>Susan Richardson, VP Child Development &amp; Community Services</td>
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Purpose: The intent of this evaluation form is to provide the School of Health Administration Director and future MHA students, with information on past Residency experiences.

Instructions: The student is expected to complete and sign the evaluation form, indicating whether the information can be shared with future students.

1. Overall, was your Residency placement a positive experience? What were some of the main contributors to your overall experience?

My residency was a very enriching and positive experience that gave me opportunity to grow as a young professional. My preceptor gave me the independence I needed to explore projects on my own, attend meetings and strategy sessions across a variety of professional portfolios, and meet all kinds of people in and out of the institution. Susan expected me to work on my assigned projects/tasks, but supported my learning in any way that she could.

The unique and specialized nature of pediatric health centres in Ontario provided me with an in-depth understanding of healthcare funding systems in the province. I now have a more concrete understanding of how hospitals like CHEO interact with and all levels of government and their agencies.
The hospital was undergoing two significant changes during the months of my residency. It was undergoing an organizational amalgamation with the Ottawa Children’s Treatment Centre. The whole process will take approximately 18 months and many things for the executive team to consider when implementing and managing such a complex change. It was an amazing learning experience for me because I got to see real change management techniques learned in class employed in an actual work environment by professionals. I feel very fortunate that this opportunity arose for me. The second organizational change was the implementation of an electronic health record across the entire organization. There was a large focus on change management for front-line employees, as the primary users of this technology, and the financial implications of the entire process. Again, this was a very insightful experience because I saw first-hand how some very important decisions were made that affected many employees’ daily work.

II. List the title of your position and the main functions and projects which you performed/completed during your Residency placement.

My title was “MHA Resident” in the Administration department. As mentioned, my preceptor assigned me to several projects for me to work on throughout my residency. I was assisted Susan with small tasks that arose with some of her work throughout my time at CHEO.

Two of my main projects involved the preparation of business cases to advocate to government ministries for program changes and additional funding. These business cases were prepared with policy-makers/government officials as the intended audience and contained a great deal of economic analysis to appropriately demonstrate value for money. One project was reviewed by our CEO and he taught me about perspective and writing tone in these sorts of projects. His extensive political background was very enlightening in this case.

Another project that I worked on with Susan more directly was a department-wide organizational chart restructure that was occurring as part of the amalgamation. I worked closely with Susan and two directors to organize the leadership and distribution of human resources in a responsible and effective way for the staff members involved. This was a thorough process and involved many different stakeholders. The financial implications of establishing different numbers of managers and coordinators needed to be balance with appropriate workload distribution and consideration for program management. This was another insightful project because I got to see the executive-level decision-making process for human resources and the sorts of things that need to be considered.

Lastly, I worked on a current state evaluation of the hospital’s partnership with one of the local universities. I conducted interviews with staff to truly understand where this partnership was and where it needed to go to be improved for all stakeholders in the future. CHEO is a recognized teaching hospital; educating future professionals is tremendously important to the organization and all staff involved. Having contributed to a project so valuable to the organization was very fulfilling and something I thoroughly enjoyed.
III. What competencies were necessary for you to attain *prior to* your Residency, for you to perform well in your Residency?

There are a few competencies I can think of that really translated to a successful residency experience in my eyes. First, Interprofessional communication was very important. Often I was in different meetings or sessions that involved people from many different backgrounds or professions. It was important to understand and communicate effectively with the members of these interprofessional teams to achieve our common goals. Second, role clarification. Even though it may seem obvious, understanding where you fit in an organization is very important. As mentioned, I was a member of many different interprofessional committees with different people that I reported to directly. Often these committees contain some of the same people but with different roles in different committees. Role clarity is important to understand where you fit in various committees, and what is an appropriate contribution for you in your role. As a student resident, it was important not to overstep my boundaries but to contribute meaningfully and professionally at the appropriate times. Lastly, problem-solving. The ability to solve problems independently, timely and sometimes creatively is essential. Susan operates very efficiently and with tight timelines, so being able to solve problems for her quickly and without direct supervision made me a valuable part of the team that assists her. People appreciate when you can solve problems on your own and do so effectively; it makes their jobs much easier.

IV. What NCHL competencies did you gain *during* your Residency?

I gained the following competencies during my residency:

- Change Leadership
- Initiative
- Organizational Awareness
- Human Resources Management
- Strategic Orientation

Most of these competencies were gained throughout either my work on my individual projects highlighted above or my attendance at the executive-level meetings. Organizational awareness, change leadership and strategic orientation were all derived from shadowing Susan at high-level meetings. The executives needed to employ these competencies for themselves to successfully navigate the intense changes occurring at all corners of the organization. Gaining these competencies through direct experience was very fulfilling as a young professional and a student.
V. Describe your IPHE 5900 collaborative learning during your Residency?

CHEO truly values collaborative leadership driving their organization and is a great strength of the organization, specifically in the context of interprofessional collaboration. This strength and value is demonstrated through the leadership channels developed by the executive team to drive patient and family involvement in high-level decisions. For instance, CHEO instituted both a family forum and a children's forum: each is a committee comprised of local community members that often have experience at CHEO as a patient or family member. Their input from quarterly meetings is presented directly to the board for their consideration into policy and strategic direction decisions.

Interprofessional collaboration was undertaken during my Residency Placement at CHEO. As mentioned, I had the opportunity to collaborate on a project which involved the preparation of a comprehensive business case to advocate for additional funding to program that is very important to the community. There are many different professionals, both clinical and administrative, that have a stake in this program. Their collaboration was necessary to determine the best course of action and accurately reflect the true value of this program to the community. Each clinician and administrative professional brought a different view on the program and its contribution to the health and wellness of children in the community. This project couldn’t have been completed thoroughly without the collaborative efforts of every professional stream in the program.

VI. Why would/wouldn’t you recommend this preceptor to another student completing a Residency with this organization?

I would recommend Susan as a preceptor to other students in this program who want to understand the high-level operations and administration of a well-run, well-respected tertiary/quaternary healthcare facility specializing in pediatrics. Susan has a very wide portfolio that she manages and you truly can make this residency your own. She assigned me several tasks/projects I was expected to work on, however she also supports you to explore your interests and see areas of the hospital that you would find interesting.

I would NOT recommend Susan as a preceptor to any students who do not like to work independently and/or with little direct supervision or guidance. Although she does her best to make time for you, she is very busy and cannot meet with you on short notice or with great regularity. She is a great mentor; however, she expects you to learn on your own and complete your assigned work on top of any other residency activities. Susan and her directors told me they appreciated my ability to learn fast, solve problems creatively on my own, and always be prepared for meetings and assignments, even if it meant doing it on my own time.

Susan and CHEO both provided a wonderful experience for me. This residency can be great for you too, but you must facilitate your own learning, book your own appointments and see what you want to see. If there is something you want to do, go and do it! Susan will support whatever your educational interests are.
VII. Why would/wouldn't you recommend this organization to another student seeking a Residency placement in the future?

CHEO is a fantastic place to have your residency. I would recommend the organization to other students; CHEO is a recognized teaching hospital and the staff are used to having students around, so they are very welcoming. Everyone from frontline nurses to the CEO appreciates having students around and invites you to participate in whatever will help facilitate your learning.

However, CHEO has a written agreement with the University of Ottawa that they are required to give preference to students from the OttawaU MHA program. That means that if another student from the University of Ottawa wants to go to CHEO for their residency, they may be obligated to go with that student. This is just an unfortunate set of circumstances and if you can get connected with the right person, Susan or otherwise, I’m sure they will do their best to take you on.

VIII. Additional comments:

None.