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Patient Safety Internship

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Patient Safety Internship
Deaconess Hospital

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Project submitted in partial fulfillment of the requirements for the Bachelor of Integrated Studies Degree

Continuing Education and Academic Outreach
Murray State University
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Abstract:

As a Murray State University student seeking my Bachelor’s in Integrated Studies (Healthcare Administration), I completed a fifteen-week internship at Deaconess Hospital in Evansville, Indiana. This internship is in partial fulfillment of the requirements for the BIS 437 project. As part of the internship requirements, I was required to intern two eight-hour days every week for fifteen weeks in the Patient Safety/Infection Control Department. Throughout this internship, I would gain the skills and knowledge of what a Patient Safety Coordinator is responsible for in the daily routine. Although, the skills and knowledge were important, the experience that I received during this time was very beneficial.

I was assigned to work under the Patient Safety Coordinator at Deaconess Hospital, Katie Gretler. During the first month of my internship, I received tours of both Midtown and Gateway Campuses, met some of the excellent staff and leaders in employee onboarding, gathered project ideas for me to complete, and attended multiple rounding sessions with various safety ambassadors. The second month focused on discussing patient safety fair tasks, attending meetings for my project, and beginning the Lean Six Sigma – Yellow Belt Classes. The last two months were filled with the patient safety fair activities, completing my Lean Six Sigma – Yellow Belt Classes, and rounding on various units to receive voice of the customer.

With the practical approach and professional skills that I have gained during this internship, I know that I will be able to be an advocate for any medical organization in the future. This has been a fantastic opportunity for me to receive first-hand experience in my career field and is something that was easily achievable. I can’t thank Murray State University and Deaconess Hospital enough.
Background of Facility:

As stated from, “125 years of Deaconess Health Care System, 2017,” One hundred twenty-five years of new lives, delivering preventive care, end of life care, healing care, lifesaving care, and answering the call when patients need them. This is the story of people, amazing people, the heart of Deaconess. In the early year of 1892, the city of Evansville, Indiana, was continuing to grow and decided they needed a new hospital. Just one year later, in 1893, Deaconess purchased a framed house which they used as a hospital to treat patients. The hospital was not the only place where care could be given. Care could also be provided at home. In 1897, Deaconess moved out of the framed house into yet another new hospital. This is also where The Deaconess School of Nursing was established. Along with many other important staff that Deaconess honored, there was one person that stood out in this period, Sister Sophie. Sister Sophie served seventy-two years at Deaconess Hospital. She not only encouraged and helped students who were in the school of nursing, but was devoted to all Deaconess staff. Sophie helped lay the honor for Deaconess hospital to have magnet status. She was truly a Deaconess legend.

In 1901, six years after x-rays were established, the hospital was able to purchase the first x-ray machine. Now one hundred years later, they are the owners of a forty-foot mobile breast center, allowing women to receive their 3D mammography where they live and work. In 1922, a $100,000 fundraiser allowed Deaconess to double the hospital capacity from fifty to one hundred beds. This new addition also accompanied a new obstetrics department and a children’s ward. The international foot printing system was adopted at Deaconess in 1932, with them being one of the first hospitals to implement this system. Along with all the new developments, the hospital was wired for electricity in 1960. Just one year later, mental health services were established at
Deaconess and if that’s not enough, in 1966, they were the first hospital to have a computer to process patient accounts. The first open heart surgery took place in 1974 making history.

In the early 2000’s, capacity was continuing to grow and a second hospital was needed. On January 16, 2016, the one hundred sixteen bed facility known as Deaconess Gateway Hospital opened in Warrick County. Deaconess’s motto for building the new facility was, “If we build it, they will come.” Several new additions were added within a short amount of time such as the new tower in 2010, along with the Deaconess Orthopedic and Neuroscience Hospital to open in 2018. In 2008, Deaconess Hospital and Welborn Clinic merged together to form Deaconess Clinic. This allowed patients in other smaller areas to have access to services without traveling a far distance. Riley Hospital for Children and Deaconess Hospital also came together to provide pediatric services with some of the top pediatric specialists providing care. Deaconess is not only trying to serve people here in the tri-state, but they also partnered with a hospital in Jamaica. The hospital was then rated the number one hospital in Jamaica with outstanding achievements. Today, Deaconess Trauma Center is recognized as the highest qualified level two trauma center in the area.

The Linda E. White Hospice House opened in 2017, with construction beginning in 2016. Linda E. White is a former CEO of Deaconess Hospital. She is loved by so many and she truly cares about everyone. Her true love for Deaconess allowed her to create the culture there. The hospice house provides inpatient medical services for terminally ill patients, while also providing families a place to stay. There are seven patient beds that accompany seven suites for families to stay with their loved ones. “Linda has been an advocate for enhanced end-of-life services for many years,” said Deaconess Foundation Board of Directors Chairman, Mike Sutton. They consider this to be an honor and couldn’t think of anyone else to give it to, other than Linda.
Adopted from “Deaconess Health Care System Employee Handbook, 2016,” Deaconess Hospital stands behind their mission, vision, values, and goals. Listed below is what Deaconess believes in when providing care to their patients:

- **Mission:** “To advance the health and well-being of our community, with a compassionate and caring spirit.”

- **Vision:** “To be the preferred regional health care partner for patients, providers, employees and payers, with access to innovative, efficient, top quality health care.”

- **Values:** “At Deaconess Hospital, our values are based on our commitment to Quality. We define Quality as the continuous improvement of services to meet the needs and exceed the expectations of the customers we serve.

  Our Values are:

  - Quality in everything we do
  - Respect for all people
  - Efficiency and effectiveness in the use of resources
  - Innovation toward continuous systems improvement
  - Partnership with those we serve and with the suppliers
  - Education for continuous growth and knowledge
  - Pride in workmanship

- **The Deaconess Credo:** “We are ambassadors of Deaconess, cultivating a nurturing atmosphere of Courtesy, Respect, Empathy, Dignity, Optimism”

- **Goals:** “To accomplish its mission, Deaconess Hospital is committed to improving the quality of life for the people of the Tri-state by:
• Demonstrating excellence in health care services
• Providing access to health care
• Providing charity to those in need
• Promoting healthy lifestyles
• Offering spiritual and psychological support
• Supporting health related education
• Advancing health knowledge through research

The mission, values, and goals at Deaconess Hospital are recognized through the leadership and commitment of the board of directors, clergy, employees, medical staff, students, suppliers, and volunteers.

**Guidelines for internship:**

To participate within an internship for BIS 437, there were some guidelines that had to be followed. Murray State University was required to have an Affiliation Agreement with Deaconess Hospital. With one not being on file, Deaconess Hospital had to have Murray State University sign and agree upon the terms and conditions. After this was completed, just like any other internship, clinical rotation, or observation, Deaconess Hospital required me to have a flu shot, TB skin test within the last twelve months, and immunization records present. For Human Resources purposes a Student Application had to be completed, along with the Student Handbook Acknowledgement Page signed and returned. This meant for an entire fifteen-week period, I would intern two eight hour shifts each week in the Patient Safety Department. Throughout the internship, I was also required to give updates via email every four weeks to my faculty adviser, Mike Barton. Toward the end of the internship, a twenty-page paper would be assigned for me to write. The paper would have to include my experience throughout the
internship in the Patient Safety Department there at Deaconess. Being a student intern at Deaconess Hospital also meant that I had to participate in onboarding for new employees, although technically I was not a new employee. During onboarding I received a student intern badge, reviewed many policies and procedures, met many great leaders and managers at Deaconess, and participated in onboarding simulations.

**Assigned Tasks and Roles:**

During the internship, I worked closely with the Patient Safety Coordinator at Deaconess, Katie Gretler. With Katie, having her Master’s in Healthcare Administration, they felt that it was in my best interest to partner with her. Katie held many roles and duties there at Deaconess and with her being the only Patient Safety Coordinator, she was constantly busy completing tasks. With that being said, some of Katie’s duties were assigned to me throughout the fifteen-week period. The first assigned task was helping with safety ambassador rounding. Safety ambassador rounding is a technique used to see if the employees at Deaconess can identify safety tips within the organization. This required visiting units at Midtown and Gateway locations asking any employee such as a registered nurse (RN), patient care technician (PCT), dietary workers, student nurses, environmental service workers (EVS), physical therapists and assistants, respiratory therapists (RT), and medical doctors (MDs). The questions began with asking the worker if they felt comfortable speaking up to their manager or supervisor, a manager or supervisor of a different department, or even a physician. Employees are encouraged to speak up to encourage communication, improve teamwork outside the department, empower staff to have a questioning attitude, and promote respect among all staff. Deaconess believes it is best to speak up for their patients. The second set of questions asked employees if they felt comfortable taking concerns pertaining to the patient’s safety or employee’s safety to their supervisor. Human error
is inevitable; therefore, learning from errors leads to improvements in the process. Employees are encouraged to share information about errors with others to develop a learning environment across the organization. Keeping the staff safe helps to keep the patients safe.

The third set of questions asked employees if they knew what just culture was. Most of the employees interviewed responded with the answer no, due to just culture being somewhat new at Deaconess Hospital. This seemed to be a learning experience for me as well. A just culture focuses on detecting and learning from errors, rather than focusing on blame. It also balances the system and process design with personal accountability. The goal of just culture is to make people feel more comfortable in reporting errors, so they are not hidden. Although, many hospitals have diverse ways of reporting errors, Deaconess uses Midas. Midas reporting is necessary to identify errors that drive process improvements. Without reporting errors, it allows the same error to pop-up again without being solved. The fourth set of questions in safety ambassador rounding asked employees if they knew what to do if they had an injury at work. While most people knew the proper steps in reporting an injury at work, some of them didn’t know exactly what to do afterward. The tips given to the employees if they were unsure of the correct actions to take if an injury occurred were perform first aid (clean the area if applicable), notify supervisor, seek medical treatment if applicable, notify the COMP center or if COMP center is closed notify the emergency department, and lastly complete a Midas Report. At Deaconess, everyone tries to promote and maintain a safe and healthful work environment. Finally, the last set of questions asked employees and staff if they knew what the acronyms RACE and PASS stood for. While it may seem simple, these can be easily forgotten when completing day to day activities. Both acronyms are designed to help them remember what to do in case of a fire. RACE stands for Rescue, Alarm, Contain, and Extinguish. PASS stands for
Pull, Aim, Squeeze, and Sweep. After discussing these rounding tool tips with staff and employees, most of them felt comfortable and provided great feedback. The last step for me when completing safety ambassador rounding was to combine all data and put it into an Excel spreadsheet. This way data could be later accessed easily for Katie to view and report on.

The second assigned task that was given to me during my internship was attending the daily check-in for patient safety. The daily check-in was held every morning at 11:30 a.m., at every Deaconess location. Managers and leaders from every department such as Security, Dietary, Lab, Pharmacy, Nursing Units, Administrator on Call, Patient Safety/Infection Control, Patient Placement, Human Resources, Quality, Engineering and Maintenance, Environmental Services, along with many others met to discuss any event(s) that occurred that day. There was a roll call that the Chief Medical Officer (CMO) called each day. If a department had no event for that day, then the manager or leader from that department would simply say “no event.” Daily check-in happened every day, Monday-Friday. Katie would record every event from each department during the check-in. After an entire month of daily-check ins, she would give me the papers to put into an Excel spreadsheet. Within the Excel spreadsheet, I would record on each day whether the department was present or absent. This was easy and efficient to see who attended on what days. After the attendance of each day was recorded, the total amount of minutes per daily check-in was calculated. This allowed an average to be formed to see the amount of time Deaconess was taking on their daily check-in for patient safety.

As the Patient Safety Coordinator, Katie, was also assigned to read good catches. Good catches were collected from Midas where an employee would report an error. Deaconess Hospital is a large organization; therefore, the number of good catches continues to grow. Katie would have to go through and read every good catch and eliminate it down to the three she
thought were the best. This required my help as well. Each month, I would go through the good catches, along with Katie’s assistance, to see which ones we thought were the best. These good catches ranged from a patient receiving the incorrect dosage of medication to even discharge instructions being incorrect. After Katie and I eliminated it down to at least three good catches, we would present them at the Safety Ambassador meeting to let them vote on their favorite. After the votes are counted, the employee who had the good catch and got the most votes received a certificate along with a treat bag. The Safety Ambassador meetings are held monthly.

A Safety Ambassador is someone within a department who encourages and promotes safety within their department. There are several Safety Ambassadors with the list continuing to grow. The Safety Ambassadors also helped with the safety ambassador rounding along with many other activities at Deaconess Hospital.

**Special Projects/Assignments:**

With my internship being in the Patient Safety Department, January through May, this allowed me to help assist with the Patient Safety Fair at Deaconess Hospital. The National Patient Safety Week was March 12th – March 16th. The theme of the safety fair this year was “Let’s Go to The Movies.” Some of the special projects, I was able to help with was creating signs to use at the safety fair. Signage was used to develop flyers, to put on poster boards, and labels for other objects used during the fair. The second project, I was able to assist with was video taping employees and staff for the actual movie. The video consisted of a broad range of staff from different departments stating that they would speak up. The goal of the video was to let patients and other staff members know that they were not afraid to speak up for patient safety. The Patient Safety Department thought that having leaders to participate in the video was a wonderful way to show patients and staff that they had their support in speaking up. I also
worked the patient safety fair the two days that I interned that week. There was a great turnout during those two days and staff seemed to enjoy it. Between helping decorate, popping popcorn, and managing surveys, the safety fair was a success.

My biggest project within my internship was the patient engagement project. In the very beginning of my internship, the staff at Deaconess was unsure of what project they wanted me to complete. They decided that they wanted to see more patient engagement happening within the organization. After a few discussions with Katie and Dawn Rogers (Patient Safety and Infection Prevention Officer), it was decided that I help with this project. The first task was to develop a proposal to propose to the Gateway Nursing Director and Midtown Nursing Director. If they were onboard with the project, then we knew we could proceed. After many questions were asked and their input was given, the project had their approval. The second step was to brainstorm questions that many patients ask the clinical staff while in the hospital regarding medication safety, infection prevention, patient identification, falls, and speaking up. The questions would be simple enough where the patient could respond with a yes or no answer, along with some comments. I would then round on six units between both campuses with a nurse clinician. Rounding with a nurse clinician was the easiest way to get questions answered without having to search down a manager, leaving the patient waiting. After voice of the customer was gathered, the data would be entered in an Excel spreadsheet. The voice of the customer data would later be used for some opportunities or tools to engage patients and their families such as a safety tool via iPad, TV, or on their bedside table. On week thirteen of my internship, I began to obtain voice of the customer. This took a total of four weeks, being on each unit with the clinician for at least 30 – 60 minutes. Below is the proposal used and the different sets of questions we used to receive voice of the customer.
Patient Safety/Patient Engagement Proposal and Questions

Overview:

To engage patients to be advocates for their own safety, we would like to obtain voice of the customer on at least six units between Midtown and Gateway. To address any needs in the moment while obtaining voice of the customer, we would like to round with nurse clinicians. This will be a minimal amount of time each week. The goal is 30 minutes weekly with each unit. We will be asking questions related to patient safety issues such as: fall prevention, medication safety, patient identification, and speaking up. Being aware that we want to maintain great patient satisfaction; we will limit four to five questions per patient as we obtain voice of the customer. In the future, patient safety can use this voice of the customer data to identify some opportunities or tools to engage patients to be an advocate for their care.

Goal:

Our goal is to obtain information by receiving voice of the customer. Along with the healthcare team, we want our patients to be an advocate for themselves. We would ask questions regarding some of the following: medication safety, infection prevention, patient identification, falls, and speaking up. Particularly, how patients can advocate for themselves. We would like to collect data on at least 150 patients.

Timeline:

The tentative timeline is as follows:

April 2nd - April 23rd - Obtain voice of the customer/begin rounding on units with nurse clinicians for 30-60 minutes per unit.
April 30th - Review data and findings.

Units:

We have selected three units from Gateway and four units from Midtown to trial this project. We would like to do at least five of the six units. These units were chosen, so that we could receive a variety of patient and family input. Units were selected with Jill Buttry’s input, so that experienced nurse clinicians can also attend rounding. To obtain a good sampling, we would like to round on 30 patients per unit; totaling about 150 patients.

Gateway: B400 ICU, A400 ICU, A400 PEDS

Midtown: 2900, 5500, 2500/2600

Possible Questions for Patients to Obtain Voice of the Customer:

- Do you know how to ask for assistance if needed?
- Has anyone explained to you why you are wearing the hospital stockings?
- Has everyone been confirming your identification?
- Do you feel comfortable asking staff if they performed hand hygiene?
- Do you know who to call if your condition gets worse?

Stakeholders:

- Johnna Noel – 2900 clinician
- Shelly Duggins – B400 ICU clinician
- Jamie Tretler – 4800 clinician
- Jason May – A400 ICU clinician
- Mary Wildeman – 2500/2600 clinician
- Stephanie Herron – Team Leader PEDS
- Jill Septer – 5500 clinician
• Brian Spencer - Medication Safety & Blood Clots
• Amanda Elikofer - Blood Clots, Falls, Discharge
• Candace Foster - Patient Identification
• Amanda Blanton - Pressure Ulcers
• Patty Laird - Discharge
• Cathy Murphy - Nursing Director Gateway
• Jill Buttry - Nursing Director Midtown

• Dawn Rogers - Patient Safety and Infection Prevention Officer
• Katie Gretler - Patient Safety Coordinator
• Holly Wells - Patient Safety Intern
• Lindsey Robbins - Patient Experience and Value Based Programs Manager
• Jennifer Cooney - Administrative Analyst

**Question Set #1**

Preventing falls:

• Do you know why you are wearing yellow socks?

Pressure ulcer prevention:

• Do you feel that you have changed positions frequently? Perhaps, when did you last change positions?

Preventing blood clots:

• Do you know why you are encouraged to do simple leg and ankle exercises?
Preventing infection:

- Do you feel comfortable asking staff if they performed hand hygiene? (Ex. Wash Hands/Hand Sanitizer)

**Question Set #2**

Preventing falls:

- Do you feel comfortable using your walking aids? (Ex. Cane, Walker)

Pressure ulcer prevention:

- Do you feel comfortable telling someone if you are uncomfortable?

Preventing blood clots:

- Has anyone explained to you why you are wearing the hospital stockings?

Preventing infection:

- Have you observed staff doing hand hygiene? (Ex. Wash Hands/Hand Sanitizer)

**Question Set #3**

Preventing falls:

- Do you know how to ask for assistance if needed?

Pressure ulcer prevention:

- Do you know why they turn you every two hours?
• Do you know why you are encouraged to do simple leg and ankle exercises?

Preventing infection:

• Do you know to use hand hygiene before all meals, and before and after visiting the toilet?

Question Set #4

Identification:

• Is your medical information on your arm band correct?

Medications:

• Do you know why you are taking your medications?

Any concerns:

• Do you feel comfortable speaking up if you have any questions?

Leaving Hospital:

• Do you have prescriptions for all your medications?

Question Set #5

Identification:

• Are you able to tell us if your personal information on the white board is incorrect?

Medications:

• Do you feel comfortable talking to your doctor, nurse, or pharmacist about any concerns you may have?
Any concerns:

- Have you had a concern where you didn’t feel comfortable speaking up?

Leaving Hospital:

- Have all follow up appointments been made?

**Question Set #6**

Identification:

- Did you tell us your allergies?

Medications:

- Do you know why you are taking your medications?

Any concerns:

- Do you feel comfortable speaking up if you have any questions?

Leaving Hospital:

- Do you feel you are prepared and have enough resources to leave the hospital?

**Question Set #7**

Identification:

- Has everyone been confirming your identification?

Medications:

- Do you feel comfortable talking to your doctor, nurse, or pharmacist about any concerns you may have?
Any concerns:

- Have you had a concern where you didn’t feel comfortable speaking up?

Leaving Hospital:

- Will anyone be helping with your care when you leave the hospital?

**Question Set #8**

Preventing falls:

- Was equipment out of your way to help prevent falls?

Leaving Hospital:

- Do you feel comfortable speaking up to your Patient Care Physician?

Identification:

- Are you able to tell us if your personal information on the white board is incorrect?

Any concerns:

- Do you feel comfortable speaking up if you have any questions?

**Yellow Belt Certification:**

Along with all the other opportunities I was given at Deaconess, I received the opportunity to participate in the Lean Six Sigma – Yellow Belt Classes. After completion of the class, I received my Yellow Belt Certification. The Yellow Belt serves for someone who is knowledgeable of the foundational elements of the Lean Six Sigma Methodology. It is also someone who can lead limited improvement projects and/or serves as a team member in a part-time role. The class was every Thursday afternoon for six weeks. Not only was I able to
participate in a great internship, but I also received a certification that will help me be a better leader throughout the next few years of my life, and for that I am grateful.

**Tie-ins with completed course work:**

Just like starting a new job, it is also nice to have a little knowledge on what you are going to learn in an internship. Thankfully, I was given the opportunity to receive a few healthcare administration courses beforehand. Going all the way back to my first semester, whether it was health care planning, overview of the health care delivery system, hospital and health services administration, or even financial aspects of health service organizations, they all tie into something that I learned during the internship. Learning about customer value chains, action plans, and the financial aspects for a healthcare organization were a few topics that I felt like tied in with my completed course work. Most of everything in the healthcare field relates back to the patient/customer. Seeing what the patient will benefit from the most, the time frame that it can be completed in, and the attitude that is given with the care are just a few parts of the customer value chain. This even ties into the project that I completed at Deaconess regarding patient engagement. Making sure each patient in the hospital has an excellent stay is what brings back the business. If a person has an excellent stay at Deaconess Hospital, they will go tell others about their experience resulting in a domino effect. Completing a customer value chain for the patient engagement project gave me the benefit of knowing what needed to be completed and when it needed to be completed. Action plans were also something else that I felt like I used within my internship. Developing an action plan helped guide me throughout the process of the patient engagement project. It made things go a lot smoother by knowing who my resources were for each action, the amount of time I had to complete the action, and some of the expected outcomes. Lastly, everything ties into a budget or the financial aspects of a department within the
organization. While planning the safety fair in March, a budget was created to help make sure we stayed on or below that value. Organizations like Deaconess Hospital are continuing to grow; therefore, it is important that a strict budget is followed. I can relate to many of the terms and processes that I learned in my financial classes. I am glad that I was somewhat familiar with how the financial side of things work, because if not I would have been completely lost.

**Lessons Learned:**

I feel grateful, given this opportunity through Murray State University along with Deaconess Hospital. I not only was given the chance to expand my knowledge through the healthcare administration courses, but also through this internship. Learning in a classroom with other students and a professor is nice; however, it has been extremely nice to go out into the actual field and get experience. Several lessons were learned throughout this process. The first one being having excellent leadership is the foundation for an organization. Leadership is so much more than having people lead the organization. It’s the people who lay the structure, lead the people, and provide motivation and inspiration within the organization. I was able to meet some outstanding leaders at Deaconess Hospital. These people truly care about that organization and everyone who is employed there. The second lesson I learned while completing this internship was punctuality. While being a manager or coordinator, there are constantly meetings, conference calls, or trainings that you must attend; therefore, it is extremely important that you are not late. Time management is crucial when you work in an environment such as Deaconess Hospital. Some meetings might be scheduled back to back or overlap one another, but that’s when you must maintain a set schedule. I am thankful that I do not struggle with time management and organization, because I feel that these two skills are needed to be in such a role that I have witnessed during my entire internship.
The last lesson that I feel like I learned during this process was network, network, network! Being introduced to so many employees at Deaconess Hospital helped build my professional network. Since I do not have a full-time job set up for after graduation, this was just another benefit for me. I feel as if it is never to early to establish connections with some of the leaders here, so that maybe one day in the future it can be used to help me obtain a position. Keeping in touch with the staff is also something that I plan on doing, since I completed the internship.

**Conclusion:**

The Patient Safety Internship has been an excellent experience for me. This internship has provided me with so many opportunities that I would not have been able to receive in the classroom. It has impacted my career in a positive way. Being partnered with the Patient Safety Coordinator at Deaconess Hospital has better prepared me for a job one day in the healthcare administration field. It has given me insight on what it takes to be a manager or coordinator. I was not having to look from the outside in anymore. I was there participating. Although I have worked many part-time jobs throughout my college years, they were not like this one. I was able to see what the actual working world was like on a much higher scale. The college life is much more different than the professional world; however, I have already got to experience both before graduation, which is one thing not all students can say. It has also provided me the opportunity to learn from failure. Being an intern allowed me to be taught and trained by professionals. They allowed me to complete my own work and if it was not correct or fully what they wanted, I was able to learn from my mistakes and correct them. Lastly, it has given me the opportunity to receive a vision of my career. I can now say that I can’t wait to be a healthcare
administrator in a facility like Deaconess one day. This experience has made me nothing more, but excited to start my career in the healthcare field.

My evaluation of this internship is excellent. The amount of information that I learned within this fifteen-week period is amazing. Not only was I able to learn the skills and tasks on a day to day basis, I got to experience it first-hand. Since I am a person who learns better hands-on and visually, this was the perfect opportunity for me. I can honestly say that I do not regret making this choice. It was probably the best decision I’ve yet to make in my college years. Every one of the employees at Deaconess Hospital welcomed me with open arms and accepted me as if I was one of their own. I did not once feel as if I couldn’t ask a question to an employee there. Each of them was so friendly and caring.

Lastly, I learned a lot about myself throughout this process. Taking on a fifteen-week internship, eighteen credit hours of classes, and working PRN at a local hospital has not been easy. I learned what time management, challenging work, and dedication were this last semester. It not only helped me learned what my career was all about, but it also helped me be a better college student. After completing my Associates in Science and now my Bachelors in Integrated Studies with my field of study being Healthcare Administration, I thought that I would want to be done with school for forever. Once this internship was completed, those plans changed, and now I want to pursue my Master’s in Healthcare Administration. Being able to see all the great leaders at Deaconess Hospital gave me the motivation to further my education. I highly recommend any college student receiving their bachelors in this field to partake in an internship. The experience and knowledge I gained throughout this opportunity is something that changed my life forever. I can’t thank everyone enough, including the entire staff at Deaconess Hospital and Murray State University for allowing me to participate in such a wonderful experience. It is
something that I will reflect on through my entire career and know that it was part of my foundation.
Resources:
