Army-Baylor Residency Manual & Deliverables

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Army-Baylor Residency

• The application phase of the Army-Baylor MHA or MHA/MBA competency-based curriculum
• Builds on competencies learned during the didactic year
• Each resident is evaluated using:
  – Experiences
  – Residency projects
  – Written communications
• 9 Semester Hours / 405 Contact Hours
Army-Baylor Residency

• Two tracks – Traditional and ECL
• Traditional – full year post didactic education
• ECL – condensed, one-year program running didactic & residency concurrently
• Traditional – early to mid-career
• ECL – Healthcare providers with 12+ years of healthcare experience
Army-Baylor Residency Objectives

• Further develop Army-Baylor competencies appropriate to management, administrative, and leadership positions within the federal healthcare sector.

• Develop a practical knowledge of the clinical and administrative elements of healthcare institutions across the Army-Baylor competencies.

• Identify and target the resident’s skills and competencies identified by the resident, preceptor, and/or faculty advisor which require enhancement.
Army-Baylor Residency Objectives

• Strengthen a code of personal ethics, a philosophy of management, and a dedication to the high ideals and standards of excellence in federal healthcare administration.

• Develop Army-Baylor competencies by completing preceptor-sponsored residency projects and submitting written summaries of these projects for evaluation.
Army-Baylor Residency Core Rotations

• Executive or Command Suite
  – CEO, CFO, COO, CIO, CNO, CMO, Accreditation, HRO

• Resource management
  – Financial, Intellectual, Billing Office, other

• Logistics/Facilities
  – Warehouse operations, acquisitions

• IT/IM
  – Helpdesk, Cybersecurity, Privacy Office, Informatics

• Patient Administration/Managed Care
  – Safety, quality, patient experience, ombudsman, coding,

• Inpatient settings
  – Physician, nursing, scheduling
Army-Baylor Residency Core Rotations

- **Outpatient settings**
  - Physician, nursing, scheduling (Primary care, specialty care clinics, pharmacy, lab, etc.)

- **Surgical settings**
  - Same day, in-patient, emergent, scheduling, templating

- **Behavioral Health**
  - Behavioral health, social work, inpatient, other

- **Education & training**

- **Emergency Management**
  - Readiness, crisis action team, response team, other

- **Human resources**
  - Legal, labor, volunteer, union representative
Preceptor Responsibilities

• Page 9-10 in the manual
• Evaluate all deliverables submitted by resident
• Orient the resident to your organization
• Guide the resident to find, plan, and execute projects and best practices
• Provide the resident with office space and computer
• Meet with the faculty advisor and resident quarterly
Preceptor Responsibilities

• Guide the development of the residency plan
• Take an active role in developing projects
• Use eBEAR to identify competency development opportunities
• Provide recommendations of curtailments
• Forward any concerns to the Program Director
• Complete the preceptor survey and statement of residency completion
• Complete mid-year and end of residency competency assessments
Resident Responsibilities

• Complete all residency requirement
• Execute the residency plan while including any developing opportunities
• Submit a report every other week to preceptor & faculty
• Work with the preceptor to find and complete projects
• Attend meetings, symposiums, training, etc. directed by preceptor
Residency Key Dates

• Residency begins 18 July 2022
• Residency ends 14 July 2023
Key Deliverables – What to Know

• First key deliverable – Meeting among Faculty, Resident, and Preceptor NLT 26 August
• Residency Plans
• Discussion Boards
• Pre-project Write-ups
• Post-project Write-ups
• Reflection Paper
• Best Practice Presentation
• Project Presentation
Key Deliverables – The Evolution

• 3 projects and 1 best practice papers (Portfolio)
• 2 projects and 1 best (New Portfolio)
  – Included Pre/Post write-up requirements
• 2022-2023 requirements
  – 3 pre/post write-ups
  – 1 best practice presentation
  – 1 project presentation
  – 1 residency competency-based reflection
• Better aligns with CAHME requirements and higher-level learning expected of graduate students
Best Practices & Presentations

• What is this assignment?
  – Is the student performing a best practice?
  – Is the student observing and reporting a best practice?

• What is the program looking for with the best practice?

• Why are we using presentations?

• Presentations will occur in January and you will receive an invite (page 23)
Projects & Presentations

• Concentrate of decision-making and problem solving
• Integrate competencies, applications, and methodologies
• Topics: strategic management, project management, financial management, economic analysis, productivity, quality improvement, change management, leadership, case competitions
• Creativity, independence, methodical, professional
• Presentations in May (page 22)
Pre/Post Project Worksheets

• Let’s review the pre/post project blank worksheets

• Now let’s break into small groups and go over an actual pre-project worksheet
  – How would you advise the student
Final Thoughts

• There are numerous templates for the residents and preceptors in the manual, please use these
• Residency should benefit the student, organization, and the preceptor
• This is an unbelievable opportunity for you to mentor the future of the Federal Health System and promote your organization and yourselves
• Residencies could not happen without you, so thank you from the Army-Baylor Program!
Questions

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