

Health Administration Intern Weekly Report

Date:

Name:

Location / Nursing Unit / Charge Nurse

Please share your thoughts related to your observations of your patient (do not use actual names) and the care that was provided during your observation shift. Be sure to include at least one positive example and one example where improvement was indicated. If you need additional space, please feel free to attach additional pages. As a future health administration leader, think carefully about the way you observe care being delivered and the steps you would initiate to change processes and improve your future organization's performance.

Patient Satisfaction

Employee Satisfaction

Patient Safety and Quality

Care Management

Length of Stay

Patient / Employee census

Other Comments / Suggestions