CAHME / Baylor Scott & White Health Award for Excellence in Quality Improvement Education

Overview of Program

Since its founding in 1959, the Master of Health Administration Program at The George Washington University has offered education in health services administration to help meet the growing need for skilled executives to manage organizations throughout the healthcare delivery sector. Because it recognizes and responds to the fast-paced, dynamic changes occurring in the industry today, the Program is well-positioned to prepare not only health care managers, but the health care leaders of tomorrow. An MHA degree from the Department of Health Policy and Management incorporates business and medical informatics training, knowledge of health care systems, management theory, finance, ethics, law, and policy, critical values in decision making, and much more.

The mission of the MHA Program is that it will develop leaders who possess the values, knowledge, and skills to achieve optimal delivery of healthcare. This crucial outcome aligns strongly with the CAHME mission of serving the public interest in advancing the quality of healthcare management education. The Program has been continuously accredited by CAHME and its predecessor ACEHSA since 1969. It continues to evaluate and revise its curriculum to both meet the changing environment of health services delivery and the strengthened criteria developed by CAHME to assure quality health management and leadership training and development.

The Program’s special strengths include an emphasis on experiential learning and community service, distinguished faculty, research collaborations and relationships with policymaking and health care organizations in Washington, DC. Active alumni and student associations foster mentoring, networking and other professional development opportunities.

The curriculum focuses on leadership and strategic management trends, quality and performance improvement, leadership skills, community health planning and advocacy, organizational theory, finance and health law. The Program also offers residency and internship opportunities that allow students to apply their classroom knowledge in healthcare settings. Numerous seminar, conference, and networking opportunities are made possible through relationships with professional organizations and associations.

The declared goals of the Master of Health Administration Program are that its graduates will be able to:

- Effectively manage organizational change and promote organizational and clinical excellence
- Manage health services organizations under alternative financing mechanisms
- Lead and manage human resources in diverse organizational environments
- Manage information resources to assist in effective decision making and clinical management
- Use statistical, quantitative, and economic analyses in decision making
- Have the skills to improve both business and clinical outcomes of health services organizations
Innovative Techniques in Teaching and Program Delivery

The curriculum in the Master of Health Administration Program is constantly being evaluated for relevance, leadership development, and industry preparation. This is accomplished through multiple avenues of industry engagement, environmental scanning, and curriculum feedback. These elements include the creation of an external advisory committee of healthcare professionals, both alumni and other health sector leaders, who represent healthcare finance, health systems operations and management, health informatics services, pharmaceuticals, workforce development professionals, and leaders from academic medical centers, acute care hospitals, rural health care, and post-acute care/long term care organizations. This group meets semi-annually to broadly review the current curriculum of the Program in the context of the changing health services delivery and health policy environment.

Information obtained from these meetings of the faculty with the external advisory committee is incorporated into curriculum review and revision. This process also considers feedback from alumni discussions and student evaluations in a cycle of continuous improvement of graduate healthcare education, and new teaching techniques and program delivery.

In healthcare quality improvement education we use several educational approaches. We use a flipped classroom approach whereby students lead the class discussions based on readings and research they have prepared on a quality topic. We support this design with focused lectures, which are targeted towards specific issues or tools and techniques used in practice. Cased-based instruction is also used in class to develop critical thinking, apply quality improvement techniques and develop team work skills. We use multi-media teaching resources, including Textbook, articles, videos, web-based resources and excel data base development and visual data presentation. Students gain real-world exposure to quality improvement practitioners by interviewing practitioners on the field for an assignment and interacting with guest speakers throughout the course.

We adopt a multi-stakeholder, systems-based approach to advance student’s knowledge and skills regarding the analysis, development, implementation and evaluation of quality issues and improvement activities. The systems-based approach includes exploring the relationship of quality and process improvement with finance, operations, information technology, accreditation and the regulatory environment. Students are challenged to develop their management thinking and skills which support contextual and situational analysis and actions related to quality and process improvement.

Students are exposed to a number of Q/PI concepts, approaches and tools. These will include Continuous Quality Improvement, Robust Process Improvement, Six Sigma and lean management approaches, as well as practical skills such as statistical process control and root cause analysis among others. We also focus on analyzing the measurement and improvement of patient satisfaction (especially the HCAHPS survey) and developing project management and data dashboards skills to support operational decision-making.
Integration of quality improvement education throughout the curriculum

Quality Improvement education is integrated throughout the curriculum through fundamental management courses and Quality improvement courses in the first year and then through application in other courses (core/elective) and practical experiences (internship or residency) in the second year (Figure 1.).

Basic quality and Quality Improvement related concepts are included in all introductory courses (Finance, Introduction to Management, Introduction to healthcare delivery; and Information Technology; Quantitative Methods&Epid/HealthServices ). This foundational quality knowledge is then expanded upon with dedicated courses in Quality improvement. These courses include a full Quality and Process improvement course (HSML 6204) as well as an optional introduction to Lean Six Sigma Course (HSML 6299). Finally, students apply their quality improvement knowledge throughout their core and elective courses, including courses in strategic management, practice management and acute care delivery courses.

Figure 1. Integration of Quality Improvement education into MHA curriculum.

Alumni involvement in quality improvement education with current students.

All students in our program are assigned an alumni mentor who is able to discuss key learnings, including quality improvement knowledge and experience with students. In the Quality and Process Improvement course (HSML 6204), students are given an assignment in which they must interview a quality improvement practitioner. Alumni who are involved in quality improvement work are asked to
participate in these interviews. Alumni share their knowledge and practical experience as guest speakers in class. From next year, Current students who participated in a quality improvement internship will also give a presentation to first year students.

Each fall semester the Program hosts the Gibbs Oration, named in honor of founding Program Chair Professor Frederick Gibbs. This two-day event brings alumni, industry leaders, and current students both in their curriculum phase as well as student in Administrative Fellowships onto campus for an opportunity of networking and learning from industry leaders. This program is the initial formal face-to-face engagement each year of alumni and students, and both initiates leadership development and reinforces the mentoring process noted above.

Alumni serve as Executives in Residence as a component of the Professional Development program conducted by the Department. On routine schedule, multiple alumni currently working in the industry come onto campus to discuss their career path, development as practitioners, and share insights into the future of healthcare quality improvement and value-based care. In addition, they conduct mock interviews with student to build on this crucial skill set.

**Professional development opportunities.**

We have an active NACHE active chapter with students as members and volunteers at NACHE events. The program is committed to supporting students develop their professional network and gain exposure to current healthcare activities by encouraging students to attend the ACHE congress each year. We are committed to this development and do not hold class over the time of the congress so that students can attend without having to miss class. In addition, each year, we hold a lecture series (Gibbs Oration) where we invite alumni from the program back to campus to network with our current students.

Students in the MHA program have also formed the GWU chapter of the Institute for Healthcare Improvement Open School and have held their first event in which they invited a senior vice president of quality and safety to speak on quality Improvement issues, including career opportunities in QI.

**Experiential opportunities in quality improvement related areas.**

The program supports several experiential opportunities for learning. In the Quality and and Process Improvement course (HSML 6204), students work on a data set and create a quality dashboard as a final assignment. This was instituted based on feedback from students who were tasked with this activity in their internships. Our program has also developed a quality-focused internship with the Geisinger Health System. The selected student spends the summer internship under the mentorship of the Vice-President for Quality at the health system. The student is exposed to a broad spectrum of activities in the Quality department, with work on a specific project so that the student has a defined deliverable at the end of the summer. We are also in discussion with the George Washington University Hospital to allow students to attend management rounds as part of their quality training. The GWUH also hires interns from our program to during the semester on Patient Experience projects.
The GWU Institute for Healthcare Improvement Open school chapter has just been formed, and the student run organization is actively developing public health and Quality Improvement activities for the new year.

A core component of the MHA Program at GW is the requirement of a year-long administrative residency as the final nine credit hours of the curriculum. Students competitively apply for, and obtain, administrative residencies in health care organizations which vary by size (integrated health systems vs. critical access hospitals), location (Connecticut to California and international), delivery model (acute care vs. ambulatory care vs. long-term care), and development focus (operational management vs. financial management vs. strategic planning). During the one-year residency period each student creates a residency plan which outlines his or her goals of progressive development of the competencies introduced in the curriculum, and undertakes a series of projects under the guidance of a preceptor in their institution. This component of the degree program is overseen by a faculty advisor working in conjunction with the preceptor and reviewing the student’s leadership progress. One of the most important goals involves the student’s creation of actions to provide a foundation for professional development and advancement, with action steps to be accomplished during the residency year. The student reports monthly to the preceptor and the faculty advisor on their progress of the approved action plan. Student with significant healthcare industry experience who would be prepared to move forward on completion of didactic learning generally place into shorter three-month final internship with additional directed coursework focused on specific interest areas such as project management.

To prepare students for the residency experience, the GW MHA Program encourages all first year students to engage in shadowing internships during the break between fall and spring semesters, and to pursue an a three month internship in the summer subsequent to the first year of classes. To facilitate both this process and in the subsequent residency component, the program has a fulltime residency coordinator on staff who works both collectively and individually with students to guide them through these early careerist foundational activities.