Rush University Application Packet

For

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

Cover Letter .................................................................................................................................

Application .................................................................................................................................

Appendix A: Recommendation Letters
   Alumni Recommendation Letters ..............................................................................................
   Student Recommendation Letters ..........................................................................................

Appendix B: Experiential Projects List ......................................................................................

Appendix C: Syllabi ......................................................................................................................
   Required Quality Improvement Courses .................................................................................
   First Year Foundational Courses ..........................................................................................
   Second Year Courses .............................................................................................................
   Elective Courses ...................................................................................................................

CAHME / Baylor Scott & White Health Award for Excellence in Quality Improvement Education
Rush University Application
Cover Letter
November 16, 2017

Joe Morris
Program Specialist, CAHME
6110 Executive Boulevard, Suite 614
Rockville, MD 20852

Dear Mr. Morris and CAHME Awards Committee

Thank you for providing opportunity to submit application for the CAHME / Baylor Scott & White Health Award for Excellence in Quality Improvement Education.

The Health Systems Management (HSM) Master of Science (MS-HSM) Program at Rush University, Chicago was re-accredited by CAHME for seven years in 2013. HSM program has not won the CAHME / Baylor Scott & White Health Award for Excellence in Quality Improvement Education within the last 3 years. The quality improvement courses (HSM 572 Health Care Operations Management and HSM 557 Quality in Health Care) were required quarter curriculum courses for all graduate students in MS-HSM program. The MS-HSM program has transition to the semester curriculum starting Fall 2017 and the above two courses were combined to form HSM 636 Quality, Safety & Operational Improvement in Healthcare. This semester course is also required course for all graduate students in MS-HSM program. If we receive the award, HSM representatives will attend the CAHME Awards Ceremony on Sunday, March 25, 2018 in Chicago. In addition, the MS-HSM program will make and present a short video about the program and integration of quality improvement education within our curriculum and beyond.

Thus, we request the CAHME Awards Committee to consider our application for the CAHME / Baylor Scott & White Health Award for Excellence in Quality Improvement Education. If you need additional information, please communicate with us.

Sincerely,

Shital Shah, PhD
Application
Overview of the Program

The Rush Master’s Program in Health Systems Management (MS-HSM) is a CAHME-accredited, two-year program integrating quality and operations improvement learning throughout its curriculum. The program operates under a unique practitioner-teacher model within Rush University Medical Center. The program’s vision, to be “recognized as the premier graduate health care management program for developing leaders to transform health care,” reflects our desire to not only see the practitioner-teacher model become much more widely adopted but also to transform health care through safe, timely, effective, efficient, and coordinated operations within as well as outside the health care organizations our graduates serve. Collectively, our program’s mission and primary goals align very well with CAHME’s mission of advancing the quality of healthcare management education.

Integration of quality improvement education throughout the curriculum

As would be expected in a highly practice-focused program, quality is embedded throughout our curriculum, as illustrated in Figure 1.

Figure 1: Courses and applied work on quality in the Rush curriculum

Quality receives its most intensive didactic focus during the first year, in two courses: Quality in Health Care and Health Care Operations Management. Competencies covered by these courses include...
project management (e.g., team formation, voice of the customer, stakeholder analysis, SMART goals, and defining project scope); process improvement analytics (including identifying waste, process mapping, value stream mapping, root cause analysis, forecasting, what-if analysis using queuing and simulation modeling, managing inventory and supply chain, statistical process control, variation identification tools, hoshin planning, and dashboarding); change management; and financial return on investment for quality improvement projects. Working closely with the Performance Improvement (PI) Department at Rush University Medical Center, we also systematically introduce students to Rush’s internal process improvement model, known as “the RUSH way” (Ready, Understand, Solve, and Hold). An additional benefit of having the PI Department involved as instructors is that as the medical center’s approach to performance improvement evolves, we are able to immediately bring these new approaches directly into the classroom. For example, Rush is in the process of adopting the daily management system approach, involving identifying daily goals and potential barriers that need escalation, encouraging frontline staff to provide solutions, and the importance of listening. This approach will also be incorporated into the Quality, Safety & Operational Improvement in Healthcare and Lean Six Sigma in Health Care courses being offered next spring semester.

The Quality and Operations Management courses are supported by multiple foundational courses earlier in the curriculum. The Health Care Organizations and Patient Experience courses provide students with a fundamental understanding of the US health care as well as patient experiences with their health and health care providers. The Data Management Workshops and Informatics courses provide expertise in handling vast amounts of data to extract meaningful knowledge to support decision-making. The Human Resource Management course provides a basic understanding of managing people, and lays groundwork for change management. The Accounting and Corporate Finance courses provides the foundational skills necessary for evaluating the potential impact of the quality improvement initiatives. Students also utilize the quality improvement tools and concepts in internships completed during their first year (half-time), summer (full-time), and second year (half-time). Some students also choose master’s projects on quality improvement topics (see Appendix B). The change management concepts introduced in the first year Quality Improvement
curriculum are further re-enforced in the Organizational Analysis & Change and Capstone courses. In addition, the HSM department routinely offers project-based elective courses in topics such as Lean Six-Sigma in Health Care, Practice Management, Consulting, and Data Analytics that utilize the quality improvement framework. The MS-HSM program also prepares interested students to take the Bronze Lean-Six Sigma Certification from ASQ/ SME as part of the Lean Six-Sigma elective course.

Innovative Techniques used in Teaching Quality Improvement Education

The single most important innovation of our program is its implementation in close partnership with the field of practice, in which work-based and experiential learning is foundational rather than adjunct to our students’ education. The curriculum is designed around a rigorously developed and field-validated leadership competency model, and our approaches are continuously updated to incorporate advances in the health care field, including evidence-based quality improvement practices. As part of our department’s own lean continuous improvement philosophy, we regularly solicit and incorporate feedback from leaders in the field, practitioner and academic faculty, alumni, and students, resulting in an agile, just-in-time, and dynamic health systems management curriculum. The quality improvement courses are co-taught by academic and practitioner faculty from the Performance Improvement (PI) Department at Rush University Medical Center as well as Vizient, Inc. The involvement of practitioners in the direct delivery of our classroom education helps us ensure that students are learning about the most current developments and challenges facing health care organizations. Our extensive use of practitioner faculty allows us to expose students to applied practice on real-world problems throughout the curriculum. Additional experiential learning activities include site visits across a breadth of settings (e.g. inpatient, outpatient, ancillary services, and non-health care manufacturing companies), as well as the use of simulations and case studies.

To ensure we are leading by example in quality improvement education, our faculty engage in extensive ongoing data collection on curricular outcomes, and also regularly run and evaluate experiments to improve our approaches. For example, in an effort to ensure mastery of core principles by all students, we
piloted a triple-reinforcement approach, involving explaining concepts with examples, followed by in-class hand-on examples, followed by assignment and projects. Through our tracking we were able to determine that the approach was associated with improved content retention rates, as well as higher course evaluations and higher self-reported confidence in tackling future operational challenges. The approach is now being systematically implemented across all of the quality improvement courses.

**Alumni involvement in quality improvement education with current students**

Throughout its history, the Rush MS-HSM program has placed special emphasis on maintaining active involvement from our alumni, up to and including their participation as practitioner-faculty. The alumni who serve as practitioner faculty and internship preceptors have not only mentored the students but also have been role models for promoting and implementing quality improvement concepts within their domains. In addition, many alumni offer site visits to their organizations, so that the students get exposure to other health care domains and their operations. The alumni are also routinely invited to present at “lunch & learn” events, where they can discuss their work in a setting conducive to open and candid dialog. These opportunities also allow alumni to reinforce the importance of quality improvement principles in their own workplaces.

**Experiential opportunities (like internships, fellowships or residencies)**

In addition to the classroom exercises, real life projects, and internships described previously, many students gain additional experience with quality improvement principles through their Masters’ Projects, case competitions, and/or field project courses. The Health Care Operations Management and Lean Six-Sigma in Health Care courses provide particularly robust opportunities to practice quality improvement skills. For these classes, project topics are solicited from medical center leadership that will not only meet the course objectives of applying quality and efficiency improvement concepts, but also will address real operational needs. The structured project framework ensures 1) project completion within 7 weeks, 2) active involvement of key project sponsors, 3) experiential learning, and 4) building analytical and
interpersonal skills for the students. Project sponsors and course faculty provide ongoing feedback and coaching on teamwork, time management skills, and project communications. The students present their analysis and recommendations to project sponsors and stakeholders during the last week of classes (a list of recent projects is included in Appendix B). In addition, multiple teams have been invited to present their recommendations at departmental meetings to administrators and clinicians. Competencies developed by these projects include analytical thinking, process management and organizational design, information seeking, project management, impact and influence, communication skills, self-confidence, teamwork, and innovation.

**Professional development opportunities**

All HSM students are strongly encouraged to volunteer for leadership and professional development roles throughout the course of the curriculum, through a variety of mechanisms. First, all students are required to complete a minimum of 16 hours of **community service**, and are offered opportunities to do so through numerous ongoing university, college, and departmental activities. All students also have the chance to participate in the shared governance of the HSM department, through participation in the department’s operating committees and/or service on the **Student Governing and Professional board (SG&P)**. Every year, HSM students also lead an interdisciplinary student team in hosting the university-wide TEDx conference. Each year, several students also participate in **interdisciplinary field projects**, with stipends provided through philanthropic support. This widespread involvement also provides important opportunities for faculty and alumni to role-model professional development approaches as well as re-enforce the quality improvement education in applied contexts. HSM students also actively collaborate with the Chicago chapter of the **American College of Healthcare Executives**, including hosting several annual events, such as an annual national administrative fellowship recruiting and consulting sessions that are open to sites and graduate students from across the country.
Appendix A: Recommendation Letters
November 8, 2017

Joe Morris
Program Specialist, CAHME
6110 Executive Boulevard, Suite 614
Rockville, MD 20852

Dear Mr. Morris and CAHME Awards Committee,

I am writing in support of Rush University’s M.S. Health Systems Management program for the Baylor Scott & White Health Award for Excellence in Quality Improvement Education.

Prior to attending graduate school, I was working as a Health Systems Quality Specialist for the New York City Department of Health and Mental Hygiene. In this role, I had the opportunity to work directly with physicians as they implemented electronic health records and pursued clinical quality improvement programs. When considering various graduate programs for healthcare administration, I was eager to pick a program that would challenge me academically as well as give me the tools to advance my professional skills. Through the application and interview process, it became clear to me that Rush University was unique in its ability to offer this type of comprehensive educational experience.

Upon enrolling at Rush University, I was impressed with the many opportunities to grow my knowledge of health systems operations and quality improvement principals. In courses such as Quality, Operations Management and Practice Management we were exposed to the full spectrum of quality improvement. We learned about key theories in quality improvement, such as Lean, Six Sigma and total quality management. We also learned about tools to implement these theories, such as the PDSA cycle, value stream mapping and developing a fishbone diagram. Furthermore, we learned some of the leadership skills that are necessary to manage a quality improvement project, such as building dashboards to share real-time data and using change management models to gain census and build momentum.

In parallel with my classroom learning, I was also able to apply principles of quality improvement during my internship experiences. During both academic years, I worked closely with the Administrator and the Medical Directors in the Department of Emergency Medicine at Rush University Medical Center. This group of physicians was highly engaged quality improvement, as they were always striving to improve their ability to manage high volumes of patients without compromising on quality. A key component of my role in this
department was to facilitate data sharing. In addition to maintaining dashboards with individual physician metrics, I also maintained bulletin boards to share the department’s achievements in quality metrics such as wait times and patient satisfaction scores. One of my culminating experiences was helping with the design of an incentive plan for the physicians which included some of these key performance indicators, challenging all physicians to be engaged in the department’s quality improvement initiatives.

Upon graduation, I accepted a role as a Division Administrator at Rush University Medical Center. In this role, I provide leadership and support to the Division of Hematology, Oncology & Cell Therapy as well as to the Division of Allergy & Immunology. My academic and hands-on learning experiences while I was a student prepared me to handle various quality improvement efforts in my role. This has ranged from providing support and education as the Cancer Center began a piloting Lean principles, to working with individual employees to use PDSA techniques as we rolled out a new process for scheduling on-call providers to cover infusion services. As the Division Administrator, I may be implementing quality improvement initiatives directly or empowering direct reports to implement with their teams.

As an alumnus of the M.S. Health Systems Management program at Rush University, I feel confident in my abilities to identify, implement and manage a quality improvement program. The academic and hands-on learning from the program gave me the tools to evaluate and implement a quality improvement initiative, as well as the confidence to guide a team through a small- or large-scale change. I believe that Rush University’s M.S. Health Systems Management program is an extremely strong candidate for the Baylor Scott & White Health Award for Excellence in Quality Improvement Education.

If you need any additional information to supplement my letter of support, please do not hesitate to contact me.

Sincerely,

Danielle M. Goetter, M.S.

Division Administrator
November 13, 2017

Joe Morris
Program Specialist, CAHME
6110 Executive Boulevard, Suite 614
Rockville, MD 20852

Mr. Morris:

I am pleased to give my endorsement for Rush University’s Health Systems Management program for the CAHME/Baylor Scott & White Health Award for Excellence in Quality Improvement Education.

I graduated from the Rush University Health Systems Management (HSM) program in 2013. During this time, and still today, the direction of healthcare has focused on moving the system from volume to value. While, ultimately this movement relies on payment structure and revenue cycle changes, for this to be achieved, systems need to be challenged from an operational and quality improvement perspective. The HSM program incorporated these concepts exceptionally well.

Upon graduation, I accepted an Administrative Fellowship at Midwest Orthopaedics at Rush with the objective to guide the organization through this era of value-based programs, specifically bundled payments. In order to be successful in this space, I needed to dig into current workflow and data management. Obtaining success under a bundled payment model is dependent on how an organization can analyze past behavior and identify root-causes contributing to poor clinical outcomes and/or high cost of care. The payment mechanism of bundled payments provides the incentive to make changes to reduce waste, however the method of achieving this relies on the provider to recognize where and how these changes can be made. Midwest Orthopaedics at Rush has been successful in navigating new payment models and I, four years later, am glad to have been a contributor to this success, now as Director of Patient Access.

When tackling these types of initiatives, I relied heavily on the skill set taught to me through the HSM curriculum. One course, Healthcare Operations Management, specifically covered the key concepts to navigating process improvement and workflow design. In this course, we completed a project involving a team of students collaborating with a department in the Medical Center. My project related to optimizing the Emergency Department’s patient flow in an effort to improve the patient experience and reduce waste. To accomplish this, we analyzed past data and performed various simulations, based on the input of key stakeholders, to explore alternative use of the space. The key with this project was that it was not theoretical. The solutions we advised on to the Emergency Department staff and leadership were going to be leveraged and considered for the future implementation. Through this project, we not only learned the key foundations of quality improvement, LEAN concepts, and efficiency, we had to simultaneously apply the learning in a real-life scenario.
Projects such as this gave me tangible experience to take on similar projects, such as bundled payment implementation, in my career post-graduation. The balance between classroom learning and hands-on application is the key to success within the HSM program and is what I attribute my current success to. I am honored to have the opportunity to share my experience with you, and I strongly endorse the Rush University Health Systems Management program to be honored with this award.

Sincerely,

Renée Glanzman

Renée Glanzman, MS, FACMPE

Director of Patient Access and Chief Compliance Officer
Midwest Orthopaedics at Rush
P: 312-432-2877
renee.glanzman@rushortho.com
November 8, 2017

Joe Morris  
Program Specialist, CAHME  
6110 Executive Boulevard, Suite 614  
Rockville, MD 20852

Dear Mr. Morris and CAHME Awards Committee,

It is my honor to write in support of Rush University's Health Systems Management (HSM) Program for the CAHME/ Baylor Scott & White Health Award for Excellence in Quality Improvement Education.

I am a full-time second year student in the HSM program. One of the most valuable areas the Rush HSM program focuses on is quality improvement. Rush's dedication to quality improvement has been a unifying thread throughout our curriculum. Our courses build on the fundamental concepts established early in the program to continuously develop our skills, and to provide us with the essential tools for successful leadership roles. I have been fortunate to have received a multitude of opportunities throughout my time in the program for hands-on experiences in the area of quality improvement. Ultimately, these opportunities have allowed me to develop as a professional and prepare for the next steps in my long-term career.

Our experiences with quality improvement began in the fall quarter during our first year of the program in our patient experience course. We were tasked to evaluate the patient experience within one of Rush's clinics to produce recommendations that highlight the best evidence-based methodologies to improving patient satisfaction scores. This involved analyzing current patient satisfaction scores, conducting informational interviews with clinic leadership and staff, and observing the current patient flow within the clinic. My team was assigned to Rush’s newest ambulatory clinic that had recently opened in downtown Chicago. The clinic was designed with patient features including self-check-in kiosks, a real-time location services system, and an on-stage/off-stage floor plan. Our recommendations included optimizing utilization of the features and accommodations within the clinic to take the patient experience to the next level. This first project not only enabled us to develop our analytical and problem-solving skills, but taught us to step back to see a problem through the perspectives of the major stakeholders involved. When embarking on a quality improvement initiative, one of the critical first steps is to assess the current state in order to better understand the overall process to identify opportunities to make improvements.

Later in our first year, our health care operations management course had a team project to design recommendations and initiatives to improve quality in one area at Rush University Medical Center. The course is centered around teaching us about the various methodologies to achieve quality improvement, providing us with the tools to practice with hypothetical case examples, and most importantly, applying
these concepts to our project. This project was a large step up from our first experience, my team worked with the Orthopedic Service Line Administrator to address the length of stay of joint replacement surgery patients who were being discharged to skilled nursing facilities and inpatient rehabilitation facilities. Our data analysis found that this subpopulation of patients had an average length of stay that is nearly double that of patients being discharged to their homes with self-care, or with home health care services. Our project took us through stakeholder interviews, Strength-Weaknesses- Opportunities- Threats (SWOT) analysis, process flow mapping, root cause analysis, creating a control/impact assessment, designing recommendation, an implementation plan with timeline, and assessing sustainability tactics. The final deliverable involved presenting our findings and final recommendations to our stakeholders which include updating and customizing education materials for patients for improved discharge planning, and creating a risk predictive model to engage case managers sooner in the episode of care.

It is immensely valuable to not only understand the process and theories of quality improvement, but to also gain the experience of working on a problem throughout the set of processes which includes meeting with stakeholders, addressing barriers, and creating a final implementation plan. This project reflects the type of work that healthcare professionals complete throughout their career, and has been instrumental to helping me prepare myself for my future career endeavors. As I enter my final semester within HSM, I am eager to complete our lean six sigma elective course for the chance to dive into another real-world experience and apply my skills developed throughout the entirety of the program. Through the Rush program, it has become a personal goal of mine to become Six Sigma certified after graduation. I believe having the fundamentals of change methodology will allow me to be a successful change agent in any healthcare organization.

The Rush's Health System Management program's commitment to providing its students with unique real-world opportunities to apply their knowledge about quality improvement is truly a differentiating factor that makes Rush standout as an exceptional program. I am confident that through my education and experiences here that I am prepared to be a successful future leader in healthcare, and will be equipped with the necessary tools to address problems and create measureable results.

I strongly support the Rush Health Systems Management program for the CAHME/ Baylor Scott & White Health Award for Excellence in Quality Improvement Education.

Sincerely,

Jillian De Mik
Jillian De Mik
M.S. Candidate- Health Systems Management
October 25, 2017

Joe Morris
Program Specialist, CAHME
6110 Executive Boulevard, Suite 614
Rockville, MD 20852

Dear Mr. Morris and CAHME Awards Committee,

It is with great pleasure that I recommend Rush University’s Department of Health System Management for the CAHME Baylor Scott & White Health Award for Excellence in Quality Improvement Education. During my time at Rush University, I can say with utmost confidence that I have grown tremendously as a leader and future healthcare administrator. The Department of Health Systems Management has instilled in me values that I will carry throughout the remainder of my career; most of all the value of providing patient centered high quality health care. Throughout the program we are taught as future administrators the importance of placing the patient at the center of care, however I believe the HSM program at Rush is unique in the types of hands on experience that we as students are able to gain to assist in providing this type of quality care and learning the nuances that accompany the art of quality improvement within health systems. This goes beyond just one course that touches on quality but is a theme throughout the curriculum and behaviors of the faculty, staff, and the University.

We specifically have two courses dedicated to quality that I found extremely beneficial in my work in healthcare leadership so far, Healthcare Operations Management and Healthcare Quality. Healthcare Quality allowed us to understand in depth how to utilize data to understand the root cause of the problem and justify our cases to allow for effective quality improvement in our organizations. This course allowed us to have hands on experience with data analysis through the Clinical Data Base at Vizient. We were able to drill down into the data to better understand the areas of improvement in an organization and suggest recommendations in ways to utilize the data set for process improvements. In addition to this class, we also take Healthcare Operations Management which focuses on providing a hands on experience at Rush University Medical Center in a department focusing on the ownership of a process improvement initiative. This allows us as students to work with a team and experience all the phases of a process improvement project and provide recommendations through utilizing the techniques that we learn throughout the course including lean six sigma.
One example of this quality behavior that sticks out to me was a project that was tasked to our cohort as first year students to interview patients in the Johnston R. Bowman Center at Rush University Medical Center as a part of our Healthcare Organization’s course. From this assignment we were able to provide insight to the patient experience and offer solutions to areas of opportunities in quality improvement initiatives form the patient perspective. Through this course and the understanding of the hands on data analytics course focused on quality metrics both in our curriculum as well as our internship experiences, we were allowed to own a process improvement project within Rush University Medical Center. I believe that I am well prepared to tackle challenges in my fellowship that I will start in May thanks to the dedication and commitment to the faculty in the Department of Health Systems Management because of the focus and dedication to these themes throughout my education.

Beyond these departmental efforts, I had the privilege of completing a first year internship through the program in the Population Health department at RUMC where I was presented by an alumnus of the Department of Health Systems Management. Through this experience I was able to be mentored by an individual that took these same values and displayed them in her leadership decision. From this, I was able to see how the values of quality and patient improvement were demonstrated by those that came before me in the program and gave back to the healthcare field. This experience allowed me to have the mindset of continuous improvement and that mindset that was put in motion by the department has opened doors that have allowed me to achieve success early on in my career. The healthcare field is challenging however, because of my time at Rush University has made me into the leader that I am today and has taught me to push the limits of the quality and allow my consciousness of patient experience to guide my administrative direction in the choices that lie ahead.

Sincerely,

Shelby R. Wallace

Shelby Wallace
M.S., Health Systems Management
November 17, 2017

Joe Morris  
Program Specialist, CAHME  
6110 Executive Boulevard, Suite 614  
Rockville, MD 20852

Dear Mr. Morris,

As a second year Health Systems Management (HSM) student at Rush University Medical Center, I unequivocally recommend it for the CAHME/Baylor Scott & White Health Award for Excellence in Quality Improvement Education. The most valuable lesson that HSM has taught me is that change is difficult, and when pursuing quality improvement projects data, consideration of various perspectives, and patience are key. The HSM program stresses the importance of quality improvement in this new era of value based purchasing and enforces methodology for pursuing change in order to develop strong quality improvement initiatives. My cohort has been provided with resources, theories, and experiences throughout our courses and internship to confidently embark in quality improvement as we begin our careers as healthcare professionals.

Over the past 18 months, my peers and I have gained skills in using data and benchmarks to evaluate a current state, and develop a science for creating, recommending, and executing improvement initiatives. My first course of the program, Patient Experience, had us fully evaluate and recommend solutions to improve a clinic’s patient satisfaction scores. We used the Press Ganey database, observations, staff interviews, and best-practice research to present a solution on our findings. In addition, our Quality in Healthcare course was taught directly by one of the lead consultants of Vizient, who taught us how to utilize their national database of clinical quality data used for information and benchmarking. By the end of my first year of HSM, we had used the tools we learned throughout the program and added LEAN, KAIZEN, and process improvement methodology and tools taught by experts in the field in our Health Operations course. My peers and I were able to condense a “real-life” process improvement project in a 10-week analysis to reduce discharge time in the Rush Emergency Department. The highlight of HSM is that we not only learn great content, but also get to apply them to improve actual departments at Rush.

In addition, the HSM program requires us to complete an internship in a department at Rush, where we are able to see how the concepts we learn in class are utilized by those who are already healthcare professionals. I interned in the Rush Emergency Department (ED), where I used my excel skills to assist in numerous process improvement and patient satisfaction projects. The EDs Medical Directors were heavily involved in improving the throughput to reduce our left without being seen percentage. I quickly
grasped that having constant patient flow ensures that those who need urgent care will have a bed available in a reasonable amount of time—otherwise, they risk their condition escalating. There were discussions about adding a physician in triage and stroke nurse in the waiting room, to catch high acuity cases early, and about the method for evaluating the success of these initiatives. Being at the forefront of projects has made me more aware that they take time and effort for the other ED physicians to buy-in to and how the partnership between an administrator and a champion physician—along with patience—helps change move forward. Each of my peers worked in a different department around Rush in their first-year HSM. So, not only do we apply our knowledge in quality improvement at our own jobs, but also learn from each other’s experiences. No other health management program offers this dual track, which has allowed us to apply and observe quality improvement efforts in healthcare every single day.

In all, the Rush University Medical Center’s Health System’s Management program prepares its students to improve quality of care and experience from day one. The lectures by experts in the field, guided practice in quality improvement projects, and immersion in real-life initiatives through our internships, have supported us to become confident in our abilities to pursue this work as healthcare professionals. In fact, as a second-year trying to find her first job post-graduation, my interests are in quality/process improvement, and I would not be as excited to seek this path if it was not for what I learned in HSM. If you have any questions about my education at Rush, please do not hesitate to reach out.

Sincerely,

Sruthi Doniparthi
Appendix B: Experiential Projects List
Sample List of Experiential Learning Projects Related to Quality Improvement Education

Health Care Operations Management, Spring 2017

1. Redesign Emergency Department (ED) Processes to Improve ED Throughput
   a. Students: Jad Bahhur, Govinder Gill, Sruthi Doniparthi, Priyanka Puttamreddy, & Annie Huang
   b. Preceptors: Paul Casey, MD, Associate Chief Medical Informatics Officer, Medical Director, Process Improvement & Patient Experience, Department of Emergency Medicine
   c. Course Faculty: Shital Shah & Cheston Brauer

2. EVS Medical Equipment Cleaning, A Process Improvement Project to Reduce C. Diff
   a. Students: Zack Altizer, Mirella Camastra, Dallas Dedman, Samantha Kane, Shanna Koickal, & Carli Schlaker
   b. Preceptors: Mike Mulroe, Vice President, Hospital Operations
   c. Course Faculty: Shital Shah & Cheston Brauer

3. THA/TKA Procedures, Elevated LOS for SNF and Inpatient Rehab Patients
   a. Students: Justin Humber, Heather Watson, Hena Yaqub, Jillian De Mik, Dior Chasanov, & Linnea Karlson
   b. Preceptors: Wendy Stark-Riemer, MHA, Director, Rush SurgiCenter & Service Line Administrator, Orthopedics & Mary Carol Racelis, APN, ACNS-BC, Clinical Nurse Specialist, 13 East Tower – Orthopedics
   c. Course Faculty: Shital Shah & Cheston Brauer

4. Reducing Length of Stay, of Pediatric Epilepsy Patients with Scheduled Electroencephalograms (EEGs)
   a. Students: Blake Dobrich, Alicia Foren, Lindsey Kovac, Kaila Mitchell, Maddie Thompson, & Shelby Wallace
   b. Preceptors: Tom Webb, MBA, Manager, Clinical Resource Management
   c. Course Faculty: Shital Shah & Cheston Brauer

5. Redesign of Front-end Core Lab Processes to Reduce Delays
   a. Students: Benjamin Wetzker, Tyler Feuz, Nathan Fullmer, Aayush Mittal, & Sid D’Mello
   b. Preceptors: Yolanda Garcia, MS, MLS(ASCP)CMSBB, Lab Manager, RML Core Laboratory, Erin Wilgus, Medical Technologist, RML Core Laboratory
   c. Course Faculty: Shital Shah & Cheston Brauer
Sample List of Experiential Learning Projects Related to Quality Improvement Education

Health Care Operations Management, Spring 2016

1. ED Consultation Optimization
   b. Preceptors: Paul Casey, MD, Associate Chief Medical Informatics Officer, Medical Director, Process Improvement & Patient Experience, Department of Emergency Medicine, & Dino Rumoro, DO, MPH, FACEP, Chairman, Department of Emergency Medicine
   c. Course Faculty: Shital Shah & Cheston Brauer

2. Rush University Cardiologists
   a. Students: Mario Cuartas, Sammy Mahmood, Mallory Nolen, McLane Rywant, Zaid Saqri, & Dave Smart
   b. Preceptors: Sara Turley, MBA, Division Administrator, Division of Cardiology, & Erica Kent, RUMG RN Manager, University Cardiologists
   c. Course Faculty: Shital Shah & Cheston Brauer

3. Improving Utilization of Clinical Pathways by the Hospitalists
   a. Students: Anjali Asthana, Erika Torres, Mary Kate Wainwright, Brianna Solola, & John O’Toole
   b. Preceptors: Tom Webb, MBA, Manager, Clinical Resource Management, & Amir Jaffer, MD, MBA, Associate Chief Medical Officer, Vice Chair, Quality and Patient Safety, Division Chief, Hospital Medicine
   c. Course Faculty: Shital Shah & Cheston Brauer

4. Optimizing RUMC Blood Center Expeditor Station
   a. Students: Michael Drunasky, Benjamin Gonzalez, Sarah Jouras, Allison Parker, Shelly Shelton, & Jack VanOverloop
   b. Preceptors: Yolanda Sanchez Garcia, Blood Center Lab Manager, Scott Schoppe, Transfusion Supervisor, Wendell Dequilla, Lab Technician/ Shift Expeditor
   c. Course Faculty: Shital Shah & Cheston Brauer

5. Radiology Utilization
   b. Preceptors: Paul Casey, MD, Associate Chief Medical Informatics Officer, Medical Director, Process Improvement & Patient Experience, Department of Emergency Medicine, Carolyn Clayton, MD, Physician Emergency Medicine, Justin Mehring, RT, Rahul Patwari, MD, Physician Emergency Medicine, & Dino Rumoro, DO, MPH, FACEP, Chairman, Department of Emergency Medicine
   c. Course Faculty: Shital Shah & Cheston Brauer
Sample List of Experiential Learning Projects Related to Quality Improvement Education

Lean-Six Sigma in Health Care, Winter 2017

1. RUMG Operational Improvement Project-Emergency Department
   a. Students: Benjamin Gonzalez San Martin, Jackson Russell, Ishani Patel, McLane Rywant, Lisa Spagnoli
   b. Preceptors: Paul Casey, Medical Director, Process Improvement & Patient Experience, Department of Emergency Medicine
   c. Course Faculty: Phil Shaw, Katherine Bogey

2. RUMG Operational Improvement Project-Dermatology
   a. Students: David Smart, Liz Koszarik, Hailey Mulliner, Chris Villa
   b. Preceptors: Patricia Cole-Acosta, Practice Administrator, Department of Dermatology, Rush University Medical Center
   c. Course Faculty: Phil Shaw, Katherine Bogey

3. RUMG Operational Improvement Project-Cancer Center
   a. Students: Mario Cuartas, Michael Drunasky, Jordan Rothfeld, Taylor Winn
   b. Preceptors: Marie Duval-Macke, Practice Administrator, Rush University Cancer Center
   c. Course Faculty: Phil Shaw, Katherine Bogey
Sample List of Master’s Project Related to Quality Improvement Education

7. **Keerthi Subbarao**, Investigating the feasibility of a dedicated patient observation unit at an academic medical center, 2009-2010
8. **Rabhea Chaudry**, Nurse staffing levels and patient outcomes, 2010-2011
10. **Adam Gray**, Quick Order Sets for Orthopedic Injuries to Improve Emergency Department Throughput, 2012-2013
11. **Renee Durack**, Forecasting Demand for X-Ray Services in the Orthopaedic Ambulatory Care Setting, 2012-2013
16. **Jasmine Jacobs**, Quality and Cost of Care Differentiation between Level III and level IV Neonatal Intensive Care Units, 2015-2016
Appendix C: Syllabi
College of Health Sciences  
Department of Health Systems Management

HSM 572 - 
Health Care Operations Management  
Course Syllabus – Spring 2017  
Credit Hours: 4

Course Days: Tuesday and Thursday  
Times: 1:00 PM to 2:50 PM  
Location: AAC 952 except METC 903 on 5/2, 5/4, 5/9, 5/16, and 5/18  
ACC 976 on 3/30, 5/23, 5/30, and 6/1

Course Director:  
Shital Shah, PhD  
Associate Professor, Department of Health Systems Management  
Office Phone: 312-942-7926  
E-mail: Shital_C_Shah@rush.edu  
Office hours: By appointment.

Course Assistant:  
Cheston Brauer, MBA  
Strategic Planning Consultant  
Adjunct Faculty, Department of Health Systems Management  
Office Phone: 312-942-3250  
E-mail: Cheston_Brauer@rush.edu  
Office hours: By appointment.

Required Course Textbook(s):  

Optional Course Textbook(s):  

Additional Readings: Summary Class Schedule

Course Description and Primary Aims:  
This course provides students with the knowledge, skills and abilities needed to apply systems thinking, quantitative methods and other tools to better inform decisions and improve problem-solving in health care organizations. Students will appreciate the utility of these approaches for analyzing systems and improving processes. Emphasis is placed on students’ abilities to work with managers and clinicians to analyze problems, identify possible solutions, implement process improvements, and communicate with stakeholders.
in non-technical terms. The course uses a combination of learning methods, including group discussion, multi-media, site visits and operational projects. Site visits and challenging assignments in real health care settings—such as emergency department throughput, operating room logistics, and support services roles—give students the opportunity to apply what they are learning.

**Course Pre-requisites:** HSM 551 (Health Informatics) or concurrent and HSM 514 (Statistics for Health Care Management) unless waived by the course faculty

**Teaching and Learning Methods Used in this Course:**
The course uses a combination of learning methods, including group discussion, multi-media, site visits operational projects, case studies, guest speakers and lectures. Site visits and challenging assignments in real health care settings—such as emergency department throughput, operating room logistics, and support services roles—give students the opportunity to apply what they are learning.

**Learning Outcomes:**

At the conclusion of this class, students will:
- Identify waste and inefficiencies in the health care domain and apply approaches to improve efficiency.
- Critically evaluate the operational processes, identify bottlenecks, and propose solutions.
- Effectively communicate results to stakeholders in non-technical terms.
- Successfully apply operations management concepts and tools to a real world project.
- Apply systems thinking to problems in the health care environment.
- Effectively manage projects using detail project plans, milestones, and performance requirements
**Curriculum Goals/Competencies:** HSM 572 is designed to build students’ knowledge, skills, abilities and values in the following competency areas associated with the NCHL model:

<table>
<thead>
<tr>
<th>Learning Objectives</th>
<th>NCHL Competencies</th>
<th>Related Assignments</th>
<th>Bloom's Taxonomy</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Explain healthcare operations and identify potential operational challenges</td>
<td>L18.1 Conducts Process Flow Analyses</td>
<td>HW</td>
<td>Cognitive</td>
</tr>
<tr>
<td></td>
<td>L3.2 Identifies Basic Relationships</td>
<td>Group Discussions</td>
<td>Analysis/Syntheses</td>
</tr>
<tr>
<td></td>
<td>L10.1 Expresses Logical Intention but Takes No Action</td>
<td>HW</td>
<td></td>
</tr>
<tr>
<td></td>
<td>L6.2 Prepares Effective Written Business Cases or Presentations</td>
<td>Project Charter Case Studies</td>
<td></td>
</tr>
<tr>
<td>2. Identify cause-and-effect relationships for operational issues and prepare and communicate clear and concise problem statement(s)</td>
<td>L18.1 Conducts Process Flow Analyses</td>
<td>HW</td>
<td>Cognitive</td>
</tr>
<tr>
<td></td>
<td>L3.2 Identifies Basic Relationships</td>
<td>Group Discussions</td>
<td>Analysis/Syntheses</td>
</tr>
<tr>
<td></td>
<td>L10.1 Expresses Logical Intention but Takes No Action</td>
<td>HW</td>
<td></td>
</tr>
<tr>
<td></td>
<td>L6.2 Prepares Effective Written Business Cases or Presentations</td>
<td>Project Charter Case Studies</td>
<td></td>
</tr>
<tr>
<td>3. Develop problem solving strategies using quantitative techniques for improving healthcare operations</td>
<td>L18.1 Conducts Process Flow Analyses</td>
<td>HW</td>
<td>Cognitive</td>
</tr>
<tr>
<td></td>
<td>L3.3 Recognizes Multiple Relationships</td>
<td>Group Discussions</td>
<td>Analysis/Syntheses</td>
</tr>
<tr>
<td></td>
<td>L3.4 Develops Complex Plans or Analyses</td>
<td>HW</td>
<td></td>
</tr>
<tr>
<td>4. Weigh relative value of potential solutions for each stakeholder to develop best/practical strategy for streamlining operations</td>
<td>L3.3 Recognizes Multiple Relationships</td>
<td>HW</td>
<td>Cognitive</td>
</tr>
<tr>
<td></td>
<td>L3.4 Develops Complex Plans or Analyses</td>
<td>Project Report and Presentation</td>
<td></td>
</tr>
<tr>
<td>5. Formulate effective communication - in non-technical terms - of alternative solution approaches with pro and cons to support managerial decision-making</td>
<td>L14.4 Clarifies Complex Ideas or Situations</td>
<td>HW</td>
<td>Cognitive</td>
</tr>
<tr>
<td></td>
<td>L10.1 Expresses Logical Intention but Takes No Action</td>
<td>Project Report and Presentation</td>
<td>Syntheses</td>
</tr>
<tr>
<td></td>
<td>L4.1 Identify Areas for Change</td>
<td>Group Discussion and Project</td>
<td></td>
</tr>
<tr>
<td></td>
<td>L6.2 Prepares Effective Written Business Cases or Presentations</td>
<td>Affective</td>
<td>Receiving/Attending</td>
</tr>
<tr>
<td></td>
<td>L6.3 Makes Persuasive Oral Presentation</td>
<td>Group Discussion and Project</td>
<td></td>
</tr>
<tr>
<td>6. Demonstrate systems thinking to improve health care organizations</td>
<td>L18.2 Benchmarks Good Processes and Practices</td>
<td>Group Discussion and Case Studies</td>
<td>Cognitive</td>
</tr>
<tr>
<td>7. Demonstrate project management using project plan, milestones, and performance requirements</td>
<td>L20.1 Prepares a Detailed Project Plan:</td>
<td>Project Charter</td>
<td>Application</td>
</tr>
<tr>
<td>8. Creating an appreciation for applicability of systems thinking and quantitative modeling to effect change management</td>
<td>L4.1 Identify Areas for Change</td>
<td>Group Discussion and Project</td>
<td>Affective</td>
</tr>
<tr>
<td></td>
<td>L10.1 Expresses Logical Intention but Takes No Action</td>
<td>Group Discussion and Project</td>
<td></td>
</tr>
</tbody>
</table>
Curriculum Goals/Competencies:

**Analytical Thinking:** The ability to understand a situation, issue, or problem by breaking it into smaller pieces or tracing its implications in a step-by-step way. It includes organizing the parts of a situation, issue, or problem systematically; making systematic comparisons of different features or aspects; setting priorities on a rational basis; and identifying time sequences, causal relationships, or if-then relationships.

- **L3.2 Identifies Basic Relationships:** Identifies the cause-and-effect relationship between two aspects of a situation; Separates situations into two parts: pro and con; Sorts out a list of tasks in order of importance

- **L3.3 Recognizes Multiple Relationships:** Makes multiple causal links: several potential causes of events, several consequences of actions, or multiple-part chain of events (A leads to B leads to C leads to D); Analyzes relationships among several parts of a problem or situation (e.g., anticipates obstacles and thinks ahead about next steps, in detail, with multiple steps)

- **L3.4 Develops Complex Plans or Analyses:** Identifies multiple elements of a problem and breaks down each of those elements in detail, showing causal relationships between them; Peels back multiple layers of a problem; Uses several analytical techniques to identify potential solutions and weigh the value of each

**Change Leadership:** The ability to energize stakeholders and sustain their commitment to changes in approaches, processes, and strategies.

- **L4.1 Identify Areas for Change:** Publicly define one or more specific areas where change is needed; Identify what needs to change, but may not completely describe the path to change

**Communication Skills:** The ability to speak and write in a clear, logical, and grammatical manner in formal and informal situations to prepare cogent business presentations, and to facilitate a group.

- **L6.2 Prepares Effective Written Business Cases or Presentations:** Uses accurate and complete presentation of facts; Uses logical presentation of arguments pro and con; Develops well-reasoned recommendations; Prepares concise executive summary

- **L6.3 Makes Persuasive Oral Presentations:** Uses clear and understandable voice that is free of extraneous phrases (i.e., “uhm” and “you know”); Uses effective audiovisual media (presentation software, exhibits, etc.); Stays on the topic; Engages in non-defensive Q&A; Stays within time allotment

**Impact and Influence:** The ability to persuade, convince, influence, or impress others (individuals or groups) in order to get them to go along with or to support one’s opinion or position. The “key” is understanding others, since Impact and Influence is based on the desire to have a specific impact or effect on others where the person has a specific type of impression to make, or a course of action that he or she wants the others to adopt.

- **L10.1 Expresses Logical Intention but Takes No Action:** Intends to have a specific effect or impact; Communicates intentions; Expresses concern with reputation, status, appearance, etc., but does not take any specific actions

**Innovative Thinking:** The ability to apply complex concepts, develop creative solutions, or adapt previous solutions in new ways for breakthrough thinking in the field.

- **L14.4 Clarifies Complex Ideas or Situations:** Makes complex ideas or situations clear, simple, and/or understandable (e.g., re-framing the problem, use of analogy); Assembles ideas, issues, and observations into a clear and useful explanation; Restates existing observations or knowledge in a simpler fashion; Takes intricate data and puts it into lay terms; “boils down” information

**Process Management and Organizational Design:** The ability to analyze and design or improve an organizational process, including incorporating the principles of quality management as well as customer
L18.1 Conducts Process Flow Analyses: Uses process mapping and analysis software; Maps process steps; Identifies key decision points; Determines staffing requirements (numbers, costs and essential knowledge, skills and other attributes), cost implications, and service implications

L18.2 Benchmarks Good Processes and Practices: Conducts benchmarking and best practices research and interpretation to improve both clinical and non-clinical organizational practices; Understands customer service and satisfaction drivers; Understands continuum of care across different delivery sites (e.g., outpatient, acute care, specialty clinic); Defines roles and responsibilities of different caregivers and other providers; Defines roles and responsibilities of administrators and departments; Understands legal, accrediting, and regulatory requirements; Understands clinical research requirements and practices; Knows patient and information confidentiality requirements; Determines costs and revenue implications

Project Management: The ability to plan, execute, and oversee a multi-year, large-scale project involving significant resources, scope, and impact. Examples include the construction of a major building, implementation of an enterprise-wide system (patient tracking, SAP), or development of a new service line

L20.1 Prepares a Detailed Project Plan: Uses project management software; Establishes phases and steps with realistic timelines; Identifies required knowledge, skills, and abilities of team and vendors; Selects team; Identifies selection and contracting processes and criteria and selects vendor; Identifies performance requirements, measurement systems, and tracking and reporting processes; Establishes budget

General Expectations

- Students are expected to maintain a professional demeanor at all times. This includes:
  - Arriving for classes on time, and remaining attentive throughout.
  - If you need to arrive late to a specific class, communicating this well in advance so that the course director, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
  - If you will need to leave prior to the end of the class session, you should communicate this prior to the beginning of the class, in all cases generally and especially if there is a guest lecturer present. Leaving in the middle of a guest’s lecture without explanation, for any reason (even to go to the bathroom) can be highly disruptive.
  - Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in session. Your full attention during class sessions is a basic expectation of the MS-HSM graduate program. It is also a common courtesy in many formal meetings and an important professional habit to develop.
  - Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate. Dressing professionally sends the message that you are a professional and should be taken seriously. Failing to dress professionally sends the message that you are “just a student.” It reflects poorly not only on yourself but also on your peers.
  - Expressing disagreements respectfully.
  - Active participation is critical and expected.
  - Listed readings are to be completed prior to the first class for that week as listed in the syllabus.
  - Assignments are due at the assigned date and time as stated on Blackboard; lateness, regardless of cause, will result in loss of credit. Late assignments will not be accepted.
  - Each student is expected to submit the homework and any other individual assignments
independently (refer academic integrity section).

- Students are expected to attend the scheduled lecture, prepare for the lectures, and complete the suggested reading.
- **All submitted course material is expected to be of professional quality in terms of content, format, and presentation.**
- The course director will provide feedback on the submitted assignment within seven days or the time allocated for the student to submit the assignment, whichever is later.

Policy on Missed Classes:
- Students are expected to be present for all lectures and attendance sheets would be used to track attendance.

Assignments:
Details are provided later in the syllabus.

Grading Scale (Percentage):

- ≥ 90-100 = A
- ≥ 80 and < 90 = B
- ≥ 70 and < 80 = C
- < 70 = Not passing

Elements of Final Course Grade:

<table>
<thead>
<tr>
<th>Component</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Homework Questions (7-8)</td>
<td>40</td>
</tr>
<tr>
<td>Case Study Preparation</td>
<td>05</td>
</tr>
<tr>
<td>One Page Case Summaries (1)</td>
<td>2</td>
</tr>
<tr>
<td>In Class Discussion (1)</td>
<td>3</td>
</tr>
<tr>
<td>Project</td>
<td>40</td>
</tr>
<tr>
<td>Project Charter (≤2 pages)</td>
<td>05</td>
</tr>
<tr>
<td>Mid-Term Report (≤2 pages)</td>
<td>10</td>
</tr>
<tr>
<td>Final Report (≤10 pages)</td>
<td>13</td>
</tr>
<tr>
<td>Presentations</td>
<td>12</td>
</tr>
<tr>
<td>Participations</td>
<td>15</td>
</tr>
<tr>
<td>Class Participations</td>
<td>10</td>
</tr>
<tr>
<td>Site Visits</td>
<td>05</td>
</tr>
</tbody>
</table>

Total 100 points

Rush University is committed to attracting and educating students who will help to make the health care profession representative of the national population, including individuals with disabilities. In keeping with Rush University’s mission to promote diversity among its student population and providing equal access to its facilities, programs, services and learning opportunities, the University encourages students with disabilities to engage the Office of Student Disability Services as soon as they begin their program. Students should feel free to contact Marie Ferro-Lusk, Manager of Student Disability Services for Rush University to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings.

Accommodations are not provided retroactively and students are encouraged to register with the Office of Student Disability Services as soon as they begin their program. Additional information can be found online at the Office of Student Disability website or by contacting the Office of Student Disability Services. In order to respect student’s privacy and ensure a thoughtful interactive...
discussion, students should not make accommodation requests to individual faculty members, lecturers, or course directors, instead please contact:

Marie Ferro-Lusk, MBA, MSW, LSW  
Manager, Student Disability Services  
Rush University  
600 S. Paulina St. Suite 440  
Chicago, IL. 60612  
Phone: (312) 942-5237  
Fax: (312) 942-2778  
Email: marie_s_ferro-lusk@rush.edu  
Website: https://www.rushu.rush.edu/students-disabilities

**Academic Integrity**  
Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin. Further information can be found at: http://www.rushu.rush.edu/catalog/acadresources/academicichonesty.html
<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Reading</th>
<th>Topic</th>
<th>In Class</th>
<th>Assignments</th>
<th>Lead</th>
</tr>
</thead>
</table>
| W1   | 28-March   | Reading McLaughlin & Olson, Chapters 1, 2, 9 | - Introductions  
- Syllabus Review  
- Article Debrief  
- Systems Overview/ Introduction to Lean Systems  
- Identifying Waste  
- Introduction to Project Management & Project Charter | Content  
Student Experiences  
Systems Thinking video  
In class Examples  
Start Project Charter |  | S. Shah/ C. Brauer |
|      | 30-March   | McLaughlin & Olson, Chapter 5                | Introduction to Project Management & Project Charter  
- Class Project Introduction | Content  
Project Introduction  
Stakeholder Project Presentations |  | C. Brauer |
| W2   | 4-Apr      | McLaughlin & Olson, Chapter 6                | - Theory of Constraints  
- Mapping Techniques | Content  
In-class discussions  
Flow Mapping Exercise |  | C. Brauer |
|      | 6-Apr      | McLaughlin & Olson, Chapter 6                | - Mapping Techniques | Content  
In-class discussions |  | C. Brauer |
| W3   | 11-Apr     | McLaughlin & Olson, Chapter 9                | - Lean Systems - 5 Whys & Cause Effect Diagram  
- Control/Impact Chart  
- A3 Approach  
- Site Visit Preparation | Content  
In-class discussions  
Cause Analysis Exercise | HW1 Assigned  
Project Charter Due | S. Shah |
|      | 13-Apr     | McLaughlin & Olson, Chapter 9                | - Value Stream Mapping  
- Additional Concepts Lean Systems | Structured Debrief  
Content  
In-class discussions  
VSM Exercise |  | S. Shah |
| W4   | 18-Apr     |                                              | Project Check-in/Time | Project Check-in  
HW 1 Due 11:55 PM |  | C. Brauer/ S. Shah |
|      | 20-Apr     | MGH PATA Clinic case Study                  | - Additional Concepts Lean Systems  
- Lean Systems – In class Case Study  
- MGH PATA Clinic | Student Lead  
Discussion  
Main Point Clarifications  
Hand-on Activities | Pre-Submission of  
Case Study questions  
April 19, 2017 11:55 PM | S. Shah |
| W5   | 25-Apr     |                                              | - Site Team A: OR + SPD  
- Site Team B: Cancer Center + Pharmacy | Site Visit  
HW2 Assigned |  | C. Brauer |
<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Reading</th>
<th>Topic</th>
<th>In Class</th>
<th>Assignments</th>
<th>Lead</th>
</tr>
</thead>
<tbody>
<tr>
<td>27-Apr</td>
<td></td>
<td>McLaughlin &amp; Olson, Chapter 13</td>
<td>- Site visit Debrief</td>
<td></td>
<td></td>
<td>C. Brauer/ S. Shah</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Forecasting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>W6</td>
<td>2-May</td>
<td>McLaughlin &amp; Olson, Chapter 10</td>
<td>- Queuing &amp; Probability Distributions</td>
<td>Content</td>
<td>HW 2 Due 11:55 PM</td>
<td>S. Shah</td>
</tr>
<tr>
<td>METC 903</td>
<td></td>
<td></td>
<td>- Simulation Methods</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Simulation Modeling basics</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>4-May</td>
<td>McLaughlin &amp; Olson, Chapter 10</td>
<td>- Simulation Modeling basics</td>
<td>Content</td>
<td>Mid-term Project Report Due</td>
<td>S. Shah</td>
</tr>
<tr>
<td>METC 903</td>
<td></td>
<td></td>
<td>- Simulation Modeling</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Simulation Results and Interpretations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>W7</td>
<td>9-May</td>
<td>McLaughlin &amp; Olson, Chapter 13</td>
<td>- Simulation case study</td>
<td>Simulation Case Studies Applications</td>
<td>HW3 Assigned</td>
<td>S. Shah/ C. Brauer</td>
</tr>
<tr>
<td>METC 903</td>
<td></td>
<td></td>
<td>- Supply Chain Management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>11-May</td>
<td>McLaughlin &amp; Olson, Chapter 13</td>
<td>- Supply Chain Management</td>
<td>Case Study Based Learning Student lead discussions</td>
<td></td>
<td>C. Brauer</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>W8</td>
<td>16-May</td>
<td>McLaughlin &amp; Olson, Chapter 13, 6(pp.151-156), 12 Additional Notes</td>
<td>Analytical Tools:</td>
<td>Concepts</td>
<td>HW 3 Due 11:55 PM</td>
<td>S. Shah</td>
</tr>
<tr>
<td>METC 903</td>
<td></td>
<td></td>
<td>- Linear Programming/Optimization</td>
<td>Optimization Exercise</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>18-May</td>
<td>Additional Notes</td>
<td>Analytical Tools:</td>
<td>Optimization Exercise</td>
<td></td>
<td>S. Shah</td>
</tr>
<tr>
<td>METC 903</td>
<td></td>
<td></td>
<td>- Linear Programming/Optimization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>25-May</td>
<td></td>
<td>Project Meeting</td>
<td></td>
<td></td>
<td>Students</td>
</tr>
<tr>
<td>W10</td>
<td>30-May</td>
<td>Systems View McLaughlin &amp; Olson,</td>
<td>- Financial analysis/Change Management/</td>
<td></td>
<td>HW 4 Due 11:55 PM</td>
<td>C. Brauer/ Students</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Holding the Gains</td>
<td>Presentation Due May 29, 2017, 11:55 PM</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Systems Impact</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Week</td>
<td>Date</td>
<td>Reading</td>
<td>Topic</td>
<td>In Class</td>
<td>Assignments</td>
<td>Lead</td>
</tr>
<tr>
<td>------</td>
<td>------</td>
<td>------------------</td>
<td>--------------------------------------------</td>
<td>----------</td>
<td>------------------------------</td>
<td>---------------</td>
</tr>
<tr>
<td>1</td>
<td>Jun</td>
<td>Presentations</td>
<td>- Presentations (3 Groups)</td>
<td></td>
<td>6/4/2017 11:55 PM Final Paper Due</td>
<td>Students</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Chapter 14 and 15</td>
<td>- Future Trends</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Article Debrief</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Presentations (2 Groups)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Additional Readings:**

- Forecasting Notes and reading material (Posted on Blackboard)
- Additional readings as assigned on Blackboard
Detailed Descriptions of Assignments for the Quarter and Grading Rubric for Each

Homework Questions (7-8) Points: 40
- There will be 7 homework questions with sub-questions (if applicable).
- The homework questions will be based on the topics covered, for example if we cover A3 approach in lean systems, one of the assignment questions could be to apply A3 approach to a particular health care challenge. The sub-question(s) will describe the steps to operationalize the proposed solution.
- The homework questions may require problem solving using quantitative tools (e.g., forecasting, linear programming, simulation modeling, queuing, and inventory management among others) as well as demonstration of systems, analytical, and operational thinking.
- Most the homework questions will address one or more of the following: identification of challenges, applying analytical approaches, interpretation of results, communication of the results to a non-technical audience, and operationalization of the findings.
- Evaluation of the assignments will be based on evidence of understanding the concepts as well as accuracy and practicability of the proposed solutions.
- Students should consult with course directors and course assistant to clarify understanding of the topics and homework assignments.
- Homework questions will be assigned immediately after the content is covered in the class room and will have a due date.

Case Study Assignment (1) Points (05)
- **Before class (2 Points)**
  - Thoroughly read the assigned case study
  - Submit one page explaining the case and answering case study related questions
    - Try to link case aspects to the content taught in the class
- **During class (3 Points)**
  - Discuss the case and present your views
  - As a group solve the case and provide recommendations using the content taught in the class
  - Present your recommendations/Debrief to the class

Project Information Points: 40
1. **Pre Project Assignment Phase**
   a. Student can select their own team members. The projects will be assigned using the lucky draw mechanism
   b. **Project List:**
      i. Group 1: Redesign ED Processes to Improve Emergency Department Throughput
      ii. Group 2: Improve Medical Equipment Cleaning Process to Reduce C. Diff
      iii. Group 3: Redesign the Frontend Core Lab Process to Reduce Delays
      iv. Group 4: Redesign Ortho Discharged Process for Rehab and SNF patients to reduce Adjusted Length of Stay
      v. Group 5: Reducing LOS for Epilepsy Patients in General Pediatrics Units.
2. **Project Understanding Phase**
   a. Brief introduction of projects by course instructors (*March 30, 2017*)
   b. Understand and develop problem solving strategies for improving operational processes (Meet with domain experts *March 30, 2017* 2:20 PM to 2:50 PM)
      i. Aim of the project
      ii. Problem statement
      iii. Proposed quantitative approaches and observational analysis
   c. **Submit Project Charter Due date: April 11, 2017.**
      i. **Required Items**
         a. Team members
         b. Title
         c. Abstract
         d. Project plan and timeline
         e. Key preceptor and staff
f. Data sources
   ii. A sample charter is posted on Blackboard.

3. Analysis Phase
   a. Observational analysis (Completion prior to May 04, 2017)
      i. Arrange meeting with the preceptor to visit the project location and observe the processes
      ii. This should lead to creation of process flow mapping
      iii. Use this opportunity to identify challenges as well as best practices
   b. Analysis Phase
      i. Apply the techniques/quantitative approaches covered in the lectures/book among others.
         a. Optimize operational processes through the application of linear programming (operations research techniques), simulation, forecasting, supply and demand patterns, inventory management, and other quantitative approaches.

   a. Updated Project Charter/Problem statement
   b. Initial Analysis
      i. Observational Analysis
         a. Voice of Customer
         b. Stakeholder Analysis
      ii. Analytical approaches/methods applied
         a. Process Flow Mapping
         b. Cause Analysis
         c. Effort/Impact Analysis
         d. Other applicable tools
   c. Project Timeline
   d. List of Issues/Barriers
   e. Each Team Members’ Individual Contributions with documentation

5. Interpretation Phase
   a. Interpret and translate the solutions to non-technical audiences.
   b. Determine a plan to implement (operationalize) the findings
      i. Technical aspects
      ii. Inter-personal/professional aspects
   c. Effectively communicate alternative solution approaches to support managerial decision-making

6. Communication Phase
   a. Presentation: Approximately 20 to 25 minutes each + 5 minutes for discussion and questions March 30, 2017 and June 1, 2017.
      i. Submit presentation slides. Due date: May 29, 2017 before 11:55 PM.
   b. Prepare a comprehensive and professional report.
      i. Submit final report. Due date: June 04, 2017 before 11:55 PM.
         a. One page Executive summary
            i. Problem statement
            ii. Recommended solutions
            iii. Implications
            iv. Analytical approaches/methods
         b. Problem statement
         c. Final Analysis
            i. Observational Analysis
               a. Voice of Customer
               b. Stakeholder Analysis
            ii. Analytical approaches/methods applied
               a. Process Flow Mapping
               b. Cause Analysis
               c. Effort/Impact Analysis
               d. Other applicable tools
         d. Analytical approaches/methods applied
            i. Multiple alternatives tested and compared against each other
         e. Results and Recommendations
f. Implications/operationalization including Systems thinking: System-wide impact/considerations
g. Plan for Sustaining the change/holding the gains
h. Each Team Members’ Individual Contributions with documentation

7. Other Project Aspects
   a. Project Meetings (April 18, 2017 1:00 PM to 2:50 PM and May 25, 2017 1:00 PM to 2:50 PM)
      i. The project meeting time are allocated for the students to work on the project, meet with preceptors, and observe processes among other things.
      ii. The students should coordinate the schedule for the project meetings with their preceptors and they do not have to meet in the classroom.
      iii. Though the students don’t have to meet in the classroom, to receive attendance credit, the students need to update the course director on their project meeting via a short email to the course director. The update should include the team members present and the activities performed during the meeting.
      iv. Project teams should communicate with the preceptor on regularly bases and should let the preceptor know the plan for the project meetings during class time.
      v. All email communication with the preceptors need to be cc to the course director
   b. Demonstrate other competencies
      i. Demonstrate project management, accountability, and teamwork while working on an operational project.
   c. Preceptors
      i. Shital Shah, PhD
      ii. Cheston Brauer, MBA

Class participation Points: 15
   Regular class participation (10 points)
   o Students are encouraged to actively participate in class discussions during regular classes as well as online on blackboard.
   o Each student is expected to participate and will be required to ask at least three questions (in-class as well as on discussion board) during the course duration. Part of the participation grade is based on the active participation and quality of the questions asked.
      • Each student is encouraged to submit the questions asked during the class on the blackboard discussion board.
   o Course directors will base the class participation grade on active participation of the student, the quality of added value to the discussion, and relevance to the topics discussed.

Site Visit Points: (5 points)
   • There will be a total of two site visit locations per group. These site visits increase student understanding of the processes in context of systems thinking; relating the topics covered in the class to these processes; identifying barriers/bottlenecks; and identifying potential solutions.
   • Grading
      o Present for the sites visits. If a student is NOT present for the site visit, then no credit associated with the site visit may be awarded.
      o Course directors assess both group and individual contributions based on in-class discussion post site visit

Site Visit: (April 25, 2017, 12:50 PM to 2:50 PM)
   • Site Team A: OR + SPD
   • Site Team B: Cancer Center + Pharmacy
Detailed Class Descriptions and Class Objectives

Please refer the blackboard
# March 2017/April 2017

<table>
<thead>
<tr>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
<tbody>
<tr>
<td>26</td>
<td>27</td>
<td>28</td>
<td>29</td>
<td>30</td>
<td>31</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ACC 952</td>
<td></td>
<td>ACC 976</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ACC 952</td>
<td></td>
<td>ACC 952</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>10</td>
<td>11</td>
<td>12</td>
<td>13</td>
<td>14</td>
<td>15</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ACC 952</td>
<td></td>
<td>ACC 952</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>17</td>
<td>18</td>
<td>19</td>
<td>20</td>
<td>21</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ACC 952</td>
<td></td>
<td>ACC 952</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>24</td>
<td>25</td>
<td>26</td>
<td>27</td>
<td>28</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ACC952</td>
<td></td>
<td>ACC 952</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- ACC 952
- Project Charter Due
- HW 1 Assigned
- Pre-Submission of Case Study questions 11:59 PM
- HW 2 Assigned
# April 2017/May 2017/June 2017

<table>
<thead>
<tr>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td></td>
<td>METC 903 HW2 Due</td>
<td></td>
<td>METC 903 Mid-term Project Report Due</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
<th>13</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>METC 903 HW 3 Assigned</td>
<td></td>
<td>ACC 952</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>14</th>
<th>15</th>
<th>16</th>
<th>17</th>
<th>18</th>
<th>19</th>
<th>20</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>METC 903 HW 3 Due</td>
<td></td>
<td>METC 903</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>21</th>
<th>22</th>
<th>23</th>
<th>24</th>
<th>25</th>
<th>26</th>
<th>27</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>ACC 976 HW 4 Assigned</td>
<td></td>
<td>ACC 952 Project Meeting</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>28</th>
<th>29</th>
<th>30</th>
<th>31</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Project Presentation - May 29, 2017 before 11:55 PM</td>
<td>ACC 976 HW 4 Due</td>
<td></td>
<td>ACC 976</td>
<td></td>
<td>Final Paper - June 4, 2017 before 11:55 PM</td>
</tr>
</tbody>
</table>
HSM 557 - Quality in Healthcare
Course Syllabus – Winter 2017

Credit Hours: 3
Day of Week: Monday
Times: 3:00-5:40pm
Location: AAC 971

Course Readings

Required:

Recommended (not Required):

Course Director
Steve Meurer, PhD, MBA, MHS
Professor, Rush HSM
Senior Principal, Data Science & Member Insights
Office: (312) 775-4270
E-mail: meurer@uhc.edu
Office Hours: by appointment

Course Assistants
Julie Cerese, RN, PhD(c)
Adjunct Faculty, Rush HSM
Senior Vice President, Performance Improvement
Vizient
Phone: (312) 775-4146
E-mail: cerese@uhc.edu
Office Hours: by appointment

Joe Ornelas, PhD, FACHE
Adjunct Faculty, Rush HSM
Phone: (815) 307-4153
E-mail: Joe_Ornelas@rush.edu
Office Hours: by appointment
Course Description and Primary Aims
This course provides students with fundamentals of quality improvement in health care. Specifically, students will examine the history of quality improvement in hospitals and how that has translated into the current structures, processes and outcomes of the hospital improvement efforts of today. Emphasis is placed on philosophy, framework, and methodology of quality improvement, with a specific focus on the measurement and analysis of data. Students will learn to use frameworks and tools to apply quality improvement strategies and sharpen their skills in turning data into information and in change management. Quality as it appears in current health policy will also be discussed. Prerequisite: HSM-502.

Teaching and Learning Methods Used in this Course
- Lectures and in-class discussions

Learning Outcomes
At the conclusion of this class, students will be able to:
- Define and describe quality in healthcare along with the quality improvement processes
- Define structure, process, and outcome in the context of health care quality
- Measure and report quality in various healthcare settings
- Utilize quality improvement methodology and tools to critically analyze systems and processes
- Explain the impetus for patient safety and the importance of customer service and satisfaction
- Define benchmarking and its importance in health care quality

HSM 557 is designed to build students’ competencies in the following competency area associated with the National Center for Healthcare Leadership (NCHL) model:
- Performance measurement – monitoring a “scorecard” of quantitative and qualitative measures: Using patient and constituent satisfaction scores; gathering quantitative and qualitative information on customer perceptions, market position, and financial viability; tracking high-incidence procedures and conditions; establishing procedures based on evidence (L 17.2)

Additionally, HSM 557 is designed to build students’ competencies in the following competency areas associated with the National Center for Healthcare Leadership (NCHL) model:
- Achievement orientation – Improving Performance: Making specific changes in the system or in one’s own work methods to improve performance; doing something better, faster, at lower cost, more efficiently (L 2.3)
- Information seeking – Delving deeper: Asking probing questions to get at the root of a situation, problem, or potential opportunity below the surface issues presented; calling on others who are not personally involved, to get their perspective; not stopping with the first answer; finding out why something happened; seeking comprehensive information, including expecting complexity (L 11.3)
- Analytical Thinking: Recognizes Multiple Relationships– Makes multiple causal links:
several potential causes of events, several consequences of actions, or multiple-part chain of events (A leads to B leads to C leads to D); Analyzes relationships among several parts of a problem or situation (e.g., anticipates obstacles and thinks ahead about next steps, in detail, with multiple steps) (L 3.3)

**General Expectations**

The following items are general expectations for the course. Additional information is provided in the ‘Participation/Professionalism’ rubric below, as a portion of the course grade is based on those behaviors.

- Students are expected to maintain a professional demeanor at all times. This includes:
  - Arriving for classes on time, and remaining attentive throughout.
  - If you need to arrive late to a specific class, communicating this well in advance so that the course director and/or class guests are not wondering where you are or are interrupted by your late arrival.
  - If you will need to leave prior to the end of the class session, you should communicate this prior to the beginning of the class, in all cases generally and especially if there is a guest lecturer present. Leaving in the middle of a guest’s lecture without explanation, for any reason (even to go to the bathroom) can be highly disruptive.
  - Turning laptops, cell phones, mobile e-mail devices, etc. off while class is in session. Your full attention during class sessions is a basic expectation of the MS-HSM graduate program.
  - Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate. Dressing professionally sends the message that you are a professional and should be taken seriously. Failing to dress professionally sends the message that you are “just a student.” It reflects poorly not only on yourself but also on your peers.
  - Expressing disagreements respectfully.
  - Active participation is critical and expected.
  - Listed readings are to be completed prior to the class period listed in the syllabus.

**Attendance Policy**

Students are expected to attend all class sessions, and should email Steve Meurer (meurer@uhc.edu), Julie Cerese (cerese@uhc.edu) and Joe Ornelas (Joe_Ornelas@rush.edu) of any known conflicts and/or absences as soon as a conflict is known. Students must provide a valid reason for their absence. Each non-notified or unexcused absence will automatically reduce your overall course grade by 2%.

**Accommodations**

Rush University is committed to attracting and educating students who will help to make the health care profession representative of the national population, including individuals with disabilities. In keeping with Rush University’s mission to promote diversity among its student population and providing equal access to its facilities, programs, services and learning opportunities, the University encourages students with disabilities to engage the Office of Student Disability Services as soon as they begin their program. Students should
feel free to contact Marie Ferro-Lusk, Manager of Student Disability Services for Rush University to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings.

Accommodations are not provided retroactively and students are encouraged to register with the Office of Student Disability Services as soon as they begin their program. Additional information can be found online at the Office of Student Disability website or by contacting the Office of Student Disability Services. In order to respect student’s privacy and ensure a thoughtful interactive discussion, students should not make accommodation requests to individual faculty members, lecturers, or course directors, instead please contact:

Marie Ferro-Lusk, MBA, MSW, LSW  
Manager, Student Disability Services  
Rush University  
600 S. Paulina St. Suite 440  
Chicago, IL. 60612  
Phone: (312) 942-5237  
Fax: (312) 942-2778  
Email: marie_s_ferro-lusk@rush.edu  
Website: https://www.rushu.rush.edu/students-disabilities

**Academic Integrity**

Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty, which is stated in the Rush University Bulletin. Further information can be found at: [http://www.rushu.rush.edu/catalog/acadresources/academichonesty.html](http://www.rushu.rush.edu/catalog/acadresources/academichonesty.html)

**Elements of Overall Grading**

<table>
<thead>
<tr>
<th>Element</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>One page App Paper</td>
<td>15%</td>
</tr>
<tr>
<td>Class Participation &amp; Team Exercises</td>
<td>10%</td>
</tr>
<tr>
<td>Case Study</td>
<td>25%</td>
</tr>
<tr>
<td>Quizzes (2 at 10% each)</td>
<td>20%</td>
</tr>
<tr>
<td>Insights Presentation</td>
<td>30%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100 %</strong></td>
</tr>
</tbody>
</table>

**Overall Grading Scale (Percentage):**

<table>
<thead>
<tr>
<th>Percentage Range</th>
<th>Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100</td>
<td>A</td>
<td>reflects EXCELLENT work &amp; superior understanding of material</td>
</tr>
<tr>
<td>80-89</td>
<td>B</td>
<td>reflects GOOD work</td>
</tr>
<tr>
<td>70-79</td>
<td>C</td>
<td>reflects ACCEPTABLE work, meeting the course objectives</td>
</tr>
<tr>
<td>Below 70</td>
<td></td>
<td>Not passing</td>
</tr>
</tbody>
</table>
Description of Deliverables

In Class Team Exercises
There will be a number of in class exercises to provide students with the opportunity to show their mastery of the material covered. The most notable of these is Jeopardy. Students will be placed in teams the first class and will continue to work with their team throughout the class.

Case Study
Written Paper: Each individual student will be required to submit a written response to one of the Study Questions listed at the end of each chapter. Students will choose one chapter’s Study Questions to complete. Each individual student must answer the case questions in no more than 2 pages double-spaced. Study Questions are due by the start of class on the date indicated in the syllabus to Joe Ornelas (Joe_Ornelas@rush.edu) or handed in at the beginning of class. Late assignments will not be accepted unless prior arrangements are made with Steve Meurer (meurer@uhc.edu), Julie Cerese (cerese@uhc.edu) and Joe Ornelas (Joe_Ornelas@rush.edu). This paper will be graded according to the associated rubric at the bottom of this syllabus.

Quizzes
There will be two quizzes throughout the course. Questions will be based on the readings from the prior weeks. Please make sure you do your reading before class and prepare accordingly.

Insights Presentation
Oral Presentation: Individual students will be assigned to present 4 to 5 recommendations on improving value of a clinical condition. Students will develop a PowerPoint presentation to present to the class. The presentation will be no more than 7 minutes. Time limits will be strictly enforced and any group that goes overtime on the initial 7-minute presentation will be deducted 5% from their total grade for this assignment. This presentation will be graded according to the associated rubric at the bottom of this syllabus. All students in a group will receive the same grade.
<table>
<thead>
<tr>
<th>Date</th>
<th>Class Lead</th>
<th>Activity</th>
<th>Time Slot</th>
<th>Assignment Due</th>
<th>Readings Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/9</td>
<td>Meurer</td>
<td>Introduction to course, review of syllabus: grading,</td>
<td>3:00pm - 4:20pm</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td></td>
<td></td>
<td>schedule and deliverables</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Assignment of Class Teams</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Discussion: Why do we need quality? History and</td>
<td>4:30pm - 5:40pm</td>
<td></td>
<td>None</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Components of Quality</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Introduction to QI App &amp; QIKAT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1/16</td>
<td></td>
<td><strong>No Class – Make Up Class TBD to discuss Best Practices</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>(Ornelas) – Best Practices / Care Maps</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1/23</td>
<td>Meurer</td>
<td>Continued Discussion: History and Components of Quality</td>
<td>3:00pm - 4:20pm</td>
<td>One Page QI App Paper Due (15%)</td>
<td>None</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Discussion: Understanding Data, Variation &amp; SPC - CDB</td>
<td>4:30pm - 5:40pm</td>
<td></td>
<td>None</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Demo: CDB</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1/30</td>
<td>Cerese</td>
<td>Discussion - Change Methodologies: Lean, Six Sigma, PTSA,</td>
<td>3:00pm - 4:20pm</td>
<td>Prepare with Team for Jeopardy</td>
<td>Chapters 1, 2, 3, 4, 10, 14</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Collaboratives</td>
<td>4:30pm - 5:40pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Team Exercises: Deserted Island</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2/6</td>
<td>Silver /</td>
<td><strong>Quiz (10%)</strong></td>
<td>3:00pm – 3:15pm</td>
<td>Prepare for Quiz - will include Chapters 5, 6, 7</td>
<td>Chapters 5, 6, 7</td>
</tr>
<tr>
<td></td>
<td>Cerese</td>
<td>Team Exercise: Jeopardy</td>
<td>3:15pm - 4:45pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Lecture: The Challenges of Implementing Quality</td>
<td>4:45pm – 5:40pm</td>
<td>Prepare for Jeopardy</td>
<td>Chapters 5, 6, 7</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Improvement Projects.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Discussion: The role of leadership in improvement</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2/13</td>
<td>Meurer</td>
<td>Team Exercise: Apples to Apples</td>
<td>3:00pm - 4:20pm</td>
<td>Case Study Due (25%)</td>
<td>Chapters 9, 11, 12</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Discussion: Data Analysis for Performance Measurement &amp;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>SPC Tools</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Team Exercise: A leader’s most important attributes Team</td>
<td>4:30pm - 5:40pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2/20</td>
<td>Meurer</td>
<td><strong>Quiz (10%)</strong></td>
<td>3:00pm – 3:15pm</td>
<td>Prepare for Quiz - will include Chapters 9, 11, 12, 8, 15, 16</td>
<td>Chapters 8, 15, 16</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Post QIKAT</td>
<td>3:15pm - 4:20pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Lecture: Patient Safety, Satisfaction, Accreditation</td>
<td>4:30pm – 4:45pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2/27 &amp;</td>
<td>Meurer /</td>
<td>Discussion: Patient Satisfaction / Experience</td>
<td>4:45pm – 5:40pm</td>
<td>Prepare Presentation</td>
<td></td>
</tr>
<tr>
<td>3/6</td>
<td>Ornelas</td>
<td><strong>Presentation of Insights: Identification of organizational improvements from clinical database (30%)</strong></td>
<td>3:00pm - 5:00pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Case Study Paper (60 points possible)</td>
<td>Level 1 (1 Point)</td>
<td>Level 2 (3/5 points)</td>
<td>Level 3 (4/8 Points)</td>
<td>Level 4 (5/10 Points)</td>
<td></td>
</tr>
<tr>
<td>---------------------------------------</td>
<td>-------------------</td>
<td>----------------------</td>
<td>----------------------</td>
<td>----------------------</td>
<td></td>
</tr>
<tr>
<td><strong>Problem Definition (5 points)</strong></td>
<td>Does not identify and summarize the problem or identifies a different or inappropriate problem</td>
<td>Identifies only the main problem and does not recognize or state any subsidiary, imbedded or implicit aspects of the issue. General problem statement with wide applicability.</td>
<td>Clearly identifies the main problem with some subsidiary or implicit aspect of the issue. Specific issues are defined in relationship to the case facts.</td>
<td>Identifies and clearly states not only the basics of the problem but recognizes all of the nuances of the issue. Sufficiently focused and supported by case facts to allow for executive actions.</td>
<td></td>
</tr>
<tr>
<td><strong>Critical Issues (5 points)</strong></td>
<td>Does not surface the critical challenges and issues that underlie the problem.</td>
<td>Identifies at least 1 of the critical challenges and/or issues that underlie the problem and presents a general argument as to why it is important.</td>
<td>Identifies most of the critical challenges and/or issues that underlie the problem and presents case facts to support why they are important.</td>
<td>Identifies all of the critical challenges and/or issues that underlie the problem and presents case facts to support why they are important.</td>
<td></td>
</tr>
<tr>
<td>Provides Quality Evidence (incorporate as least 1 or 2 external sources) (5 points)</td>
<td>Provides insufficient evidence of the problem and/or other statements in the report. Repeats information provided taking it as truth or denies evidence without adequate justification.</td>
<td>Evidence is used but not carefully examined. Sources are not questions for accuracy, precision, relevance, and completeness. Inferences of cause and effect are made but not complete or accurate. Facts and opinions are not stated as such and not distinguished from value judgments.</td>
<td>Examines the evidence and it’s sources, questions its accuracy, precision, relevance, and completeness. Cause and effect are stated but not complete or accurate. Facts and opinions are stated as such although not clearly distinguished from value judgments.</td>
<td>Evidence is identified and carefully examined. Sources are questioned for accuracy, precision, relevance and completeness. Accurately observes cause and effect. Facts and opinion are stated and clearly distinguished and value judgments acknowledged.</td>
<td></td>
</tr>
<tr>
<td><strong>Analysis (10 points)</strong></td>
<td>The analysis is superficial and/or inaccurate. Analysis is based on the thinking and assumptions of the writer and may not support the goals and recommendations.</td>
<td>The analysis is based on various facts from the case but not presented in a clear comprehensive manner. Logical inferences are not drawn to make a compelling argument. Analysis of the environment, the industry, the company’s resources, and competitors may be presented but are not clearly connected to the recommendations.</td>
<td>The analysis is consistent with the material in the case and provides sufficient evidence to make a compelling argument for the chosen recommendation. Analyses of the environment, the industry, company resources, and competitors are appropriately drawn to support the chosen recommendations.</td>
<td>The analysis is consistent with the materials in the case and provides sufficient evidence to make a compelling argument for the chosen recommendation. Analysis of the environment, the industry, company resources, and competitors are appropriately drawn from the case and correct inferences are drawn to support the chosen recommendations.</td>
<td></td>
</tr>
<tr>
<td><strong>Statement of Alternatives (5 points)</strong></td>
<td>Does not state any reasonable alternatives or lists many alternatives that are not mutually exclusive or may not be feasible.</td>
<td>Identifies alternatives that resolve the problem but may not be mutually exclusive or feasible given the case facts. Provides a rationale for the alternatives, but does not fully present the pros and cons of each alternative.</td>
<td>Clearly defines at least 2 mutually exclusive alternatives but does not provide an entire solutions. Presents pros and cons of each but may not justify their feasibility.</td>
<td>Clearly defines 2 or more mutually exclusive alternatives that are comprehensively exhaustive. Present pros and cons of each and provides data from the case to justify their feasibility. Recommends ways to address the cons.</td>
<td></td>
</tr>
<tr>
<td>Goals and Recommendations (at least 2) (10 points)</td>
<td>No goals and recommendations are made or are so general as to be of no value.</td>
<td>Goals and recommendation are stated but not explained and are too general to support specific strategic action items. Recommendations are one of the alternatives listed.</td>
<td>Goals and recommendations are clearly stated and explained but may not be specific enough to serve as the basis for strategic actions. Recommendations are one of the alternatives listed that support the goal in general.</td>
<td>Goals and recommendations are clearly stated and explained and are specific enough to serve as the basis for strategic actions. Recommendations are one or a combination of the alternatives listed that best support the stated goals.</td>
<td></td>
</tr>
<tr>
<td><strong>Strategic Actions (10 points)</strong></td>
<td>Actions items are limited or missing or do not support the recommendations in whole or part.</td>
<td>Actions are general in nature and support the recommendations. They may not be completely feasible and may not fit well or provide a distinct approach.</td>
<td>Clear, specific and feasible action items are listed that include who, what, and when. They directly support the recommendations but may not fit with each other or may not be unique to the industry with the appropriate tradeoffs discussed.</td>
<td>Clear, specific and feasible action items are listed that include who, what, and when. They fit with each other and directly support the recommendations. They are unique to the industry with appropriate tradeoffs discussed.</td>
<td></td>
</tr>
<tr>
<td><strong>Writing (10 points)</strong></td>
<td>Organization is not logical and word choice is haphazard. Significant spelling or grammar errors exist. Exhibits are non-existent or repeats from the case or do not support the statements made.</td>
<td>The paper is logically organized but word choice may not be precise, or may be redundant and verbose. Some spelling and grammar errors exist. Connections among ideas may not be clear. Exhibits may not support the statements in the report or may be merely copies or restatements of those in the case.</td>
<td>The paper is logically organized word choice is precise and economical. Relationships among ideas are evident but may not be clearly expressed. A few spelling and grammar errors may exist. Exhibits support the statement in the main body. They have been developed by the writer but may not be clear and effective.</td>
<td>The paper is logically organized and word choice is precise and economical. Ideas in the report and the relationship among them are clearly expressed. Spelling and grammar are accurate. Exhibits are developed by the author and are clear and effective in supporting the statements in the report.</td>
<td></td>
</tr>
<tr>
<td>Presentation Grading (80 points possible)</td>
<td>Level 1 (10 Points)</td>
<td>Level 2 (5 Points)</td>
<td>Level 3 (8 Points)</td>
<td>Level 4 (10 Points)</td>
<td></td>
</tr>
<tr>
<td>------------------------------------------</td>
<td>---------------------</td>
<td>-------------------</td>
<td>--------------------</td>
<td>---------------------</td>
<td></td>
</tr>
<tr>
<td><strong>Slide Design</strong></td>
<td>Slides are poorly designed and show many flaws in content and structure. Little or no graphic &amp; color use that adds little to the presentation.</td>
<td>Slides have minimal design and may show few flaws such as no consistency among points on a slide. Graphic &amp; color use may need improvement.</td>
<td>Slides have good design &amp; execution. Slide information may be too wordy or there may be too much information on some slides. Graphic &amp; color use may be good but could be more appropriate for the presentation.</td>
<td>Slides are designed &amp; executed well. Slide information is clear, understandable &amp; supports what is being said. Graphic &amp; color use is good and appropriate for the presentation.</td>
<td></td>
</tr>
<tr>
<td><strong>Content and format</strong></td>
<td>The presentation generally rambles one with little or no construction. The main points are not stated upfront and body section begins quickly. Discussion of the main points meanders with little or no logical support. The closing is weak and comes to an end with little or no recommendations or conclusions.</td>
<td>The presentation has a faulty design with opening, body and closing not easily being delineated. The main points in the opening may contain too information that would typically be put into the body. The body contains relevant information but does not flow well. The closing may not restate the main points or moves to quick close.</td>
<td>The presentation has an acceptable design with a good opening, body and closing. The opening introduces the subjects and the main points are stated but may not be clear. The body covers the main points broadly with little or no supporting information and could use more depth. The closing may restate the main points covered but moves to a close with little no conviction.</td>
<td>The presentation is well designed with an excellent opening, body, closing. The opening introduces the subject using a creative attention-getter, and the main points are stated clearly. The body discusses the main points in depth with appropriate supporting information. The closing summarizes the main points previously stated and the conclusions/recommendations are logical bringing the presentation to a strong close.</td>
<td></td>
</tr>
<tr>
<td><strong>Problem Definition</strong></td>
<td>Does not identify and summarize the problem is confused or identifies a different or inappropriate problem</td>
<td>Identifies only the main problem and does not recognize or state any subsidiary, imbedded or implicit aspects of the issue. General problem statement with wide applicability.</td>
<td>Clearly identifies the main problem with some subsidiary or explicit aspect of the issue. Specific issues are defined in relationship to the case facts.</td>
<td>Identifies and clearly states not only the basics of the problem but recognizes all of the nuances of the issue. Sufficiently focused and supported by case facts to allow for executive actions.</td>
<td></td>
</tr>
<tr>
<td><strong>Critical Issues</strong></td>
<td>Does not surface the critical challenges and issues that underlie the problem.</td>
<td>Identifies at least 1 of the critical challenges and/or issues that underlie the problem and presents a general argument as to why it is important.</td>
<td>Identifies most of the critical challenges and/or issues that underlie the problem and presents case facts to support why they are important.</td>
<td>Identifies all of the critical challenges and/or issues that underlie the problem and presents case facts to support why they are important.</td>
<td></td>
</tr>
<tr>
<td><strong>Provides Quality Evidence</strong> (incorporate as least one or two external sources) (10 points)</td>
<td>Provides insufficient evidence of the problem and/or other statements in the report. Repeats information provided taking it as truth or denies evidence without adequate justification.</td>
<td>Evidence is used but not carefully examined. Sources are not questions for accuracy, precision, relevance, and completeness. Inferences of cause and effect are made but not complete or accurate. Facts and opinions are not stated as such and not distinguished from value judgments.</td>
<td>Examines the evidence and it’s sources, questions its accuracy, precision, relevance, and completeness. Cause and effect are stated but not complete or accurate. Facts and opinions are stated as such although not clearly distinguished from value judgments.</td>
<td>Evidence is identified and carefully examined. Sources are questioned for accuracy, precision, relevance and completeness. Accurately observes cause and effect. Facts and opinion are stated and clearly distinguished and value judgments acknowledged.</td>
<td></td>
</tr>
<tr>
<td><strong>Analysis</strong></td>
<td>The analysis is superficial and/or inaccurate. Analysis is based on the thinking and assumptions of the writer and may not support the goals and recommendations.</td>
<td>The analysis is based on various facts from the case but not presented in a clearer comprehensive manner. Logical inferences are not drawn to make a compelling argument. Analysis of the environment, the industry, the company’s resources, and competitors may be presented but are not clearly connected to the recommendations.</td>
<td>The analysis is consistent with the material in the case and provides sufficient evidence to make a compelling argument for the chosen recommendation. Analyses of the environment, the industry, company resources, and competitors are appropriately drawn from the case and correct inferences are drawn to support the chosen recommendations.</td>
<td>The analysis is consistent with the materials in the case and provides sufficient evidence to make a compelling argument for the chosen recommendation. Analysis of the environment, the industry, company resources, and competitors are appropriately drawn from the case and correct inferences are drawn to support the chosen recommendations.</td>
<td></td>
</tr>
<tr>
<td><strong>Goals and Recommendations</strong> (at least 2) (10 points)</td>
<td>No goals and recommendations are made or are so general as to be of no value.</td>
<td>Goals and recommendation are stated but not explained and are too general to support specific strategic action items. Recommendations are one of the alternatives listed.</td>
<td>Goals and recommendations are clearly stated and explained but may not be specific enough to serve as the basis for strategic actions. Recommendations are one of the alternatives listed that support the goal in general.</td>
<td>Goals and recommendations are clearly stated and explained and are specific enough to serve as the basis for strategic actions. Recommendations are one or a combination of the alternatives listed that best support the stated goals.</td>
<td></td>
</tr>
<tr>
<td><strong>Strategic Actions</strong></td>
<td>Actions items are limited or missing or do not support the recommendations in whole or part.</td>
<td>Actions are general in nature and support the recommendations. They may not be completely feasible and may not fit well or provide a distinct approach.</td>
<td>Clear, specific and feasible action items are listed that include who, what, and when. They directly support the recommendations but may not fit with each other or may not be unique to the industry with the appropriate tradeoffs discussed.</td>
<td>Clear, specific and feasible action items are listed that include who, what, and when. They fit with each other and directly support the recommendations. They are unique to the industry with appropriate tradeoffs discussed.</td>
<td></td>
</tr>
</tbody>
</table>
College of Health Sciences
Department of Health Systems Management

HSM 502 –
Health Care Organization
Course Syllabus – Fall Quarter 2016
Credit Hours: 2

Course Days: Tuesday
Times: 3:00 – 4:50 PM
Location: AcFac 969

Course Director:
Brian T. Smith, MHA
Assistant Professor, HSM
VP Clinical Affairs, Rush University Hospitals
Executive Director, Rush University Medical Group
Phone: (312) 942-5568
Office: Professional Office Building Ste. 364
Email: Brian_T_Smith@rush.edu

Kara Stubbsins, MHA
Adjunct Faculty, HSM
Division Administrator
Internal Medicine
Phone: (312) 942-4166
Office: Kellogg Building, 1121
Email: Kara_SStubbins@rush.edu

Office Hours: By appointment-please let us know if you’d like to meet.

Required Course Textbook(s):
Sudbury, Massachusetts: Jones and Bartlett Publishers.

Additional Readings:
Additional required readings may be assigned to supplement the textbook reading and will be posted on Blackboard.

Course Description and Primary Aims:
This course provides an overview of the United States Health Care Delivery System. Students will understand and analyze the historical evolution, the structure, the financing mechanisms, the major provider components, the overall performance, and the future directions of the system. Students will have the opportunity to interview health care consumers to understand their interface with the system and related medical, social, and economical issues. Through class discussions and debates, students will gain an understanding of the major issues facing the system and consider alternative approaches to improve the system. The course will provide students with a framework to organize knowledge of the health care system to support further study in health services administration.

Course Pre-requisites:
Enrolled in Health Systems Management Program or by Instructor Permission
Teaching and Learning Methods Used in this Course:
Students are expected to attain the basic knowledge contained in the course through readings/assigned materials and through preparation prior to class. While short lectures and strategically-selected guest speakers may be used, the majority of class time will be geared more toward experiential teaching and learning methods (i.e. cases, role-playing, individual and group reflective learning, group and class discussion, and sharing of homework and other assignments), which require application of knowledge, skills, and abilities contained in the course. The course relies on a combination of individual and small team assignments for practice of skills and abilities and for assessment of student attainment of competencies contained in the course.

Learning Outcomes:
At the conclusion of this class, students will be able to:
- Understand the United States health care system, including its historical evolution, structure, financing, major provider components, future directions, and overall performance (Cognitive, Level 1)
- Develop a framework to organize knowledge of the health care system to support further study in health services administration (Cognitive, Level 3)
- Analyze major issues facing the system and the public/private/individual roles in addressing these issues (Cognitive, Level 1)
- Consider how consumers interface with the healthcare system and the related medical-social issues (Affective, Level 2)
- Consider alternative approaches to improve the health care system and understand the implications of reform (Affective, Level 2)

Curriculum Goals/Competencies:
HSM 502 is designed to build students’ knowledge, skills, abilities and values in the following competency areas associated with the NCHL model:

- L3.3 Analytical Thinking: Recognizes Multiple Relationships
- L11.1 Information Seeking: Consults Available Resources
- L11.2 Information Seeking: Investigates Beyond Routine Questions
- L14.2 Innovative Thinking: Recognizes Patterns Based on Life Experiences

General Expectations
- Students are expected to maintain a professional demeanor at all times. This includes:
  - Arriving for classes on time, and remaining attentive throughout.
  - If you need to arrive late to a specific class, communicating this well in advance so that the course director, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
  - If you will need to leave prior to the end of the class session, you should communicate this prior to the beginning of the class, in all cases generally and especially if there is a guest lecturer present. Leaving in the middle of a guest’s lecture without explanation, for any reason (even to go to the bathroom) can be highly disruptive.
- Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in session. Your full attention during class sessions is a basic expectation of the MS-HSM graduate program. It is also a common courtesy in many formal meetings and an important professional habit to develop.
• Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate. Dressing professionally sends the message that you are a professional and should be taken seriously. Failing to dress professionally sends the message that you are “just a student.” It reflects poorly not only on yourself but also on your peers.
• Expressing disagreements respectfully.
• Active participation is critical and expected.
• Listed readings are to be completed prior to the class period listed in the syllabus.
• Assignments are due at the start of the class period listed; lateness, regardless of cause, will result in loss of some credit. Some assignments (e.g. the discussion questions and most pre-work assignments) will not be accepted late.

Policy on Missed Classes:
Attendance at all classes is mandatory. Please notify the instructor of any expected absences. Making up missed material is the students’ responsibility.

Accommodations
In keeping with its goal to promote diversity among its student population, Rush University is committed to attracting and educating students who will help to make the population of health care professionals representative of the national population, including students with disabilities. In addition, Rush University wishes to insure that access to its facilities, programs and services are available to students with disabilities. The University provides reasonable accommodations to all students on a nondiscriminatory basis consistent with legal requirements as outlined in the Americans with Disabilities Act (ADA) of 1990 and the Rehabilitation Act of 1973. A reasonable accommodation is a modification or adjustment to an instructional activity, facility, program or service that enables a qualified student with a disability to have an equal opportunity to participate in all Rush University student activities. To be eligible for accommodations, a student must have a documented disability as defined by the ADA and Section 504 of the Rehabilitation Act of 1973. Both the ADA and Section 504 define disability as (a) a physical or mental impairment that substantially limits one or more major life activities of such individual; (b) a record of such impairment; or (c) being regarded as having such a condition. Further information or questions can be directed to the College of Health Sciences faculty member, Joanne Schupbach. She can be reached at (312) 942-3293 or Joanne_E_Schupbach@rush.edu.

Additional information can be found at:
http://www.rushu.rush.edu/catalog/aboutrush/disabilityrights.html

Further information can be found at:
http://www.rushu.rush.edu/catalog/aboutrush/disabilityrights.html

Academic Integrity
Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.

Further information can be found at:
http://www.rushu.rush.edu/catalog/acadresources/academichonesty.html
Course Requirements, Assignments, and Grading - Assignments are due on the date indicated below.

<table>
<thead>
<tr>
<th>DUE DATE</th>
<th>ITEM</th>
<th>% OF GRADE</th>
<th>FOR DETAIL SEE</th>
</tr>
</thead>
<tbody>
<tr>
<td>October 4</td>
<td>Assignment 1: Health Consumer Interview</td>
<td>20%</td>
<td>Attachment A</td>
</tr>
<tr>
<td>October 4</td>
<td>Individual Paper</td>
<td></td>
<td></td>
</tr>
<tr>
<td>October 4</td>
<td>Class presentation / Discussion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>November 1</td>
<td>Assignment 2: Team Debate</td>
<td>30%</td>
<td>Attachment B</td>
</tr>
<tr>
<td>November 8</td>
<td>Submit article via email</td>
<td></td>
<td></td>
</tr>
<tr>
<td>November 11</td>
<td>In Class Debate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>November 11</td>
<td>Team Evaluation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ongoing</td>
<td>Class Participation</td>
<td>10%</td>
<td>Attachment C</td>
</tr>
<tr>
<td>Varies</td>
<td>Assignment 3: Final Questions</td>
<td>10%</td>
<td>Attachment D</td>
</tr>
<tr>
<td>November 22</td>
<td>Final Exam (in Class)</td>
<td>30%</td>
<td>-</td>
</tr>
</tbody>
</table>

Attachment E (Health Care Organization Assignments: Source Materials) provides useful information regarding sources of current events, peer-reviewed articles and journals, and citations. Please review this prior to submitting an assignment.

Assignments will be graded on 100 points:
- A 90-100 points, reflects EXCELLENT work and superior understanding of course material
- B 80-89 points, reflects GOOD work
- C 70-79 points, reflects ACCEPTABLE work and meeting the course objectives
- F below 70, reflects UNACCEPTABLE work

Blackboard:
- Course materials are available through Blackboard
- All assignments and guest lecture evaluations should be submitted through Blackboard

Guest Faculty:
- We sometimes have guest faculty from the health care industry. These may be incorporated into the course to provide students with a broad exposure to the health care system.
- Students must come to class prepared – read the assignments and have questions in mind. Use these sessions to probe the topic and benefit from the expertise of the guest lecturers. Ask questions and actively engage in class discussions. You will find that the guest faculty can help some of the course topics come to life. Don’t be intimidated.
- Please complete the online evaluation for each guest faculty. This helps us determine whether the guest speaker is helping us meet the course objectives. You can also raise any follow-up questions you may have. Evaluations are available for you to complete via Blackboard and are required.
## HSM 502: WEEKLY COURSE OUTLINE

### WEEK 1: SEPTEMBER 13, 2016 – HEALTHCARE SYSTEM: HISTORICAL EVOLUTION AND COMPONENTS

**Objectives**
- Course Introduction – Syllabus Overview
- Gain an overview of the healthcare system components and structure

**Readings and Assignments**
- Chapter 1: Major Characteristics of U.S. Health Care Delivery
- Chapter 2: Foundation of U.S. Health Care Delivery
- Chapter 3: Historical Overview of U.S. Health Care Delivery

**Instructor:** Brian T. Smith

**Instructor:** Kara Stubbins

### WEEK 2: SEPTEMBER 20, 2016 – FINANCING HEALTHCARE: MEDICARE, MEDICAID, AND COMMERCIAL PAYERS

**Objectives**
- Understand basics of reimbursement models used by Medicare, Medicaid, and Commercial Payers
- Review current issues and evolutions of each payer category
- Review major healthcare payment terms and concepts: PPS, DRG, RBRVS, BBA, APC, CMS
- Review bundled payments, capitation and other models of reimbursement

**Readings and Assignments**
- Chapter 6: Financing and Reimbursement Methods
- Chapter 9: Managed Care and Integrated Systems

**Instructor:** Brian T. Smith

**Instructor:** Kara Stubbins

### Week 3: September 27, 2016 – Healthcare Providers: The Continuum of Care; The Elderly and Disabled

**Objectives**
- Discussion of Health Care Consumer Interviews
- Gain an understanding of the continuum of care and how services are organized and coordinated for patients across the continuum
- Understand issues relative to aging and care for the elderly or disabled

**Readings and Assignments**
- Chapter 10: Long-Term Care Services

**Instructor:** Kara Stubbins

**Guest Lecturer:** TBD

**Instructor:** Brian out of state
### WEEK 4: OCTOBER 4, 2016 – HEALTHCARE PROVIDERS: AMBULATORY CARE AND PHYSICIAN PRACTICES

**Kara Stubbins**  
**Brian Smith**

**Objectives**  
- Understand organization and models of physician practices  
- Recognize influence of health care financing on physician practices  
- Identify basic issues important to setting up and managing physician practices

**Readings and Assignments**  
- Chapter 4: Health Care Providers and Professionals  
- Chapter 7: Outpatient Services and Primary Care  

*Assignment 1 due: Health Consumer Interview Paper*

### WEEK 5: OCTOBER 11, 2016 – HEALTHCARE PROVIDERS: HOSPITALS AND HEALTH SYSTEMS

**Kara Stubbins**  
**Brian T. Smith**

**Objectives**  
- Understand role of hospitals in the health care system and historical trends that shaped the industry  
- Be able to identify types of hospitals and health systems, including governance and management structures

**Readings and Assignments**  
- Chapter 5: Technology and Its Effects  
- Chapter 8: Hospitals

### WEEK 6: OCTOBER 18, 2016 – FINANCING HEALTHCARE: UNDERSERVED POPULATIONS

**Kara Stubbins**  
**Brian T. Smith**

**Objectives**  
- Review organization of healthcare services for the poor  
- Understand the uninsured and the Affordable Care Act of 2010

**Readings and Assignments**  
- Chapter 11: Populations with Special Health Needs

### WEEK 7: OCTOBER 25, 2016 – HEALTHCARE SYSTEM: HEALTH CARE SYSTEMS GOALS AND PERFORMANCE

**Kara Stubbins**  
**Brian T. Smith**

**Objectives**  
- Identify the goals of the US HealthCare System  
- Understand how system performance is measured  
- Review the challenges of managing access, cost and quality

**Readings and Assignments**  
- Chapter 12: Cost, Access, and Quality  

*Assignment Due: Submit Debate Topics*
**WEEK 8: NOVEMBER 1, 2016 – ROLE OF GOVERNMENT AND POLITICS IN HEALTHCARE**

<table>
<thead>
<tr>
<th>Kara Stubbins</th>
<th>Objectives</th>
<th>Readings and Assignments</th>
</tr>
</thead>
</table>
| **Guest Speaker:** Braden Mantei | - Identify the role the political system plays in health care policy  
- Understand how government develops and implements health care policies  
- Understand the role of health care providers in health care policy development | - Chapter 13: Health Policy |

**WEEK 9: NOVEMBER 8, 2016 – STUDENT HEALTHCARE TEAM DEBATES**

| Brian T. Smith  
Kara Stubbins | Objectives |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Topics TBD</td>
</tr>
</tbody>
</table>

**WEEK 10: NOVEMBER 15, 2016 – UNIVERSAL HEALTH CARE: CAN WE GET THERE?**

| Brian T. Smith  
Kara Stubbins | Objectives | Readings and Assignments |
|--------------|------------|--------------------------|
| | - Discuss healthcare as a right v. a privilege  
- Discuss where we are with current healthcare reform platforms  
- Understand the impact of reform on the organization, financing, and delivery of health care services in the US | - Chapter 14: The Future of Health Services Delivery |

**NOVEMBER 22, 2016 – FINAL EXAM**

| Final Exam Details TBD |
ASSIGNMENT 1: HEALTH CARE CONSUMER INTERVIEW

OVERVIEW

PART ONE

In teams of two, students will interview a resident of an assisted-living facility about their experiences with the health care system.

- Interviews will be done OUTSIDE OF CLASS, and students will sign up in advance for their interview time.
  - Chapter 2: Basic Interviewing
  - Chapter 4: Interviewing Patients Under Special Circumstances.
- A list of potential interview questions is included below. Please review this list PRIOR to the interview.
- Students should arrive for the interview on time and treat the interviewee with the utmost courtesy and respect

PART TWO

Each student will prepare a typed, double-spaced, 12pt, Times New Roman font, 3-5 page summary paper that describes the healthcare experiences of the person interviewed and connects that person’s experience to the concepts covered in class. Analyze that person’s experience against the triple aim of healthcare: access, cost and quality. Based on the experience of the person interviewed and the concepts covered in class and in the readings, how would you improve the US healthcare system?

Some points to consider (additional points on the following page):

- Background – how did this person come to the point at which they currently are?
- The person’s experience and the most significant medical, social and/or economic issues in their lives.
- How does the person interface with the healthcare system now as compared to before joining the assisted living facility? Which is better and why?
- What have you learned about the healthcare system based on this person’s experience?

Please note that we value quality of writing over quantity of writing.

Two copies of the paper should be submitted in class on Tuesday, October 4.

Please be prepared to discuss your papers and what you learned through this exercise in class.

Please review grading rubric on page 10.
ASSIGNMENT 1: HEALTH CARE CONSUMER INTERVIEW

POTENTIAL INTERVIEW OUTLINE/QUESTIONS

*PLEASE NOTE YOU DO NOT NEED TO ANSWER EACH QUESTION; RATHER, THESE BULLETS ARE MEANT TO PROVIDE IDEAS FOR YOUR INTERVIEW.

General
- Students introduce yourself
- Ask the interviewee for their background and how he/she came to be living here.
- How long has the person lived here and where did he/she live before?

Interface with the health care system
- Do you feel that you have any health problems? If so what are they?
- How do you choose your doctor or health care provider?
- How has aging affected your doctor’s relationship with you?
- How do you take care of your health care needs? Do you use any home remedies? Do you check with your doctor or a nurse before trying these remedies?
- Before coming here, did you feel that health care services were easy for you to access?
- Did you have any problems getting to your doctor visits or getting the tests you needed? How could this have been made better?
- Has that gotten better since coming to this facility?

On insurance and financing of healthcare
- Have your health care choices been affected by the type of insurance that you have?
- Do you feel that your income level has affected the health care you’ve received? If so, how?
- Has it been hard for you to afford the medicines that your health care provider prescribes? Have you ever skipped doses or decrease strength to reduce your health care costs?

On being an older adult
- Do you think of yourself as a typical older adult (yes or no)? Please explain.
- Do you feel that being an older adult affects the health care that you receive?
- Do you use health care services (doctors, hospitals, emergency room) the same, less often or more often than when you were younger?
- Have health care providers always met your needs as an older adult? If not, how could this be improved?

On the health care system
- If you could give a doctor or nurse some advice on caring for an older adult, what would you tell them?
- How do you rate the quality of the health care you have received over the years?
- Have you ever gotten poor quality health care? If so, explain.
- How do you feel about the quality of health care services in your community (Chicago)?
- What do you think about health care in the United States?
 ASSIGNMENT 1: HEALTH CARE CONSUMER INTERVIEW
GRADING RUBRIC

STUDENT NAME_______________________

The paper should be no more than 5 pages in length, typed and double-spaced with 12pt Times New Roman font with 1inch margins.

Background, Life Experiences and Health Care Interface /20

• Did the author provide a background story of how the person came to the point at which they currently are?
• What have been the most significant medical, social and economic issues in this person’s life?
• How does the patient interface with the healthcare system now, including physicians, pharmaceutical, hospitals, home care, etc.?
• Has their interface improved or gotten worse since joining JRB?

Application of Findings /70

• Is this person’s experience what you would expect from your reading and studying of the healthcare system so far? Please explain and site evidence.
• What have you learned about the health care system based on this person’s experience?
• Based on this person’s experiences, how well does the health care system provide for access, low cost and high quality health care?
• Based on these observations, how would you improve the healthcare system?

General quality of writing /10

• Did the author develop a logical outline for the paper?
• Is the paper well-written, grammatically correct and spell-checked?

Please note that 70% of your final paper should be devoted to “Application of Findings.” That means that over 3 pages out of 5 should be application of findings- which does not imply a mere recollection of what your resident shared with you. In this section, we want you to take what you learned from the resident and reflect on how it compares and applies to what you’ve learned in class- concepts, theories, news articles, text book readings.

For this assignment, it is expected that 2-3 external resources will be cited. Please include a “works cited” reference page at the end of your assignment (this is not included in the 5 page limit).

COMMENTS:
ASSIGNMENT 2: TEAM DEBATES

OVERVIEW

Students will be randomly assigned to teams and the topic for each team will also be randomly assigned. The teams will prepare to defend both sides of the issue. In class, the opposing teams must present their sides of the argument and lead the class in developing an understanding of this opinion. The presentation must be supported by at least 2 articles from the literature.

- The team must provide one article for the class to read on the topic—these will be distributed before the debates and will be incorporated into the reading assignment for the class. One reference article per team must be submitted by class on November 1.

- Debates will be held in class on November 8 using the format described below:

<table>
<thead>
<tr>
<th>PRO</th>
<th>CON</th>
</tr>
</thead>
<tbody>
<tr>
<td>Presentation of Argument (8 minutes)</td>
<td>Presentation of Argument (8 minutes)</td>
</tr>
<tr>
<td>Team Conference (2 minutes)</td>
<td></td>
</tr>
<tr>
<td>Open Rebuttal 1 (4 minutes)</td>
<td></td>
</tr>
<tr>
<td>Team Conference (1 minute)</td>
<td></td>
</tr>
<tr>
<td>Open Rebuttal 2 (4 minutes)</td>
<td></td>
</tr>
<tr>
<td>Q&amp;A with Class (5 minutes)</td>
<td></td>
</tr>
</tbody>
</table>

- You may use notes, but no slides allowed
- You may bring reference material to use during the debate
- When using statistics or other data, you must cite your source (briefly)

- Students must complete a “team / self-evaluation” and this input will be used in assigning the overall grade for the Debates. Evaluation form questions are to be completed and submitted via email to Kara Stubbins by 9:00 AM Friday, November 11. Please review page 12 for more details.

- 80% of the grade is determined by the team performance and 20% by the individual’s performance. Please review the rubric on page 13.
ASSIGNMENT 2: TEAM DEBATES

GROUP EVALUATION

Coming together is a beginning, staying together is progress, and working together is success.
- Henry Ford

This project will be assigned a grade balancing assessment of the work of the whole against individual’s contributions to the whole work. As a part of the evaluation process, your analysis about the positive and negative aspects of the group, your own contributions and the effectiveness of team interactions is required. The goal of this exercise is to draw meaningful conclusions to help you learn from your successes and failures. Your analysis should include an honest, thoughtful evaluation of the progress of your team. It should not attempt to place blame for failure but should identify specific actions that either hindered or benefited the project. In most cases, the team as a whole should accept responsibility. With consideration of these issues, please document your response to the following questions and submit via email to Kara Stubbins by 9:00 AM Friday, November 11.

<table>
<thead>
<tr>
<th>Team Member</th>
<th>Participation</th>
<th>Teamwork</th>
<th>Timely completion of tasks</th>
<th>Meeting attendance / promptness</th>
<th>Additional comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Example</td>
<td>4</td>
<td>4</td>
<td>5</td>
<td>3</td>
<td>Usually late to meetings and could have been more collaborative.</td>
</tr>
</tbody>
</table>
ASSIGNMENT 2: TEAM DEBATES

GRADING RUBRIC

STUDENT NAME_______________________________________________

TEAM___________________________________________________ PRO / CON

**INSTRUCTOR EVALUATION OF THE GROUP**

<table>
<thead>
<tr>
<th>Reference article</th>
<th>/5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did the group provide an article that supports the argument it will be making?</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Presentation of the case</th>
<th>/30</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did the group introduce the topic in an interesting and clear manner, from the stakeholder’s perspective?</td>
<td></td>
</tr>
<tr>
<td>Did the group provide enough background to understand the topic?</td>
<td></td>
</tr>
<tr>
<td>Did the group build a strong case for the opinion and site supporting evidence?</td>
<td></td>
</tr>
<tr>
<td>Did the group provide strong evidence to support its position?</td>
<td></td>
</tr>
<tr>
<td>Is the analysis logical and supported by the literature?</td>
<td></td>
</tr>
<tr>
<td>Is the analysis focused?</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Rebuttal</th>
<th>/25</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did the group defend the opinion during the debate?</td>
<td></td>
</tr>
<tr>
<td>Did the group successfully demonstrate evidence in support of its position and counter any evidence provided by the competitor?</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>General quality of the presentation</th>
<th>/20</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did the team work together productively on the debate?</td>
<td></td>
</tr>
<tr>
<td>Was the presentation clear, organized and well-communicated?</td>
<td></td>
</tr>
<tr>
<td>Did the group provide at least 2 articles from peer reviewed journals in an annotated bibliography (APA style)? Did the group appropriately site other references and include them in the bibliography?</td>
<td></td>
</tr>
</tbody>
</table>

**TEAMMATE EVALUATION OF THE INDIVIDUAL**

<table>
<thead>
<tr>
<th>Total Points</th>
<th>/20</th>
</tr>
</thead>
</table>

**COMMENTS:**
**OVERALL CLASS PARTICIPATION SCORE**

Students can receive up to 30 points for participation, as specified in the table below. Participation will count for 10% of the final grade.

**STUDENT NAME:**

<table>
<thead>
<tr>
<th>COMPONENT</th>
<th>POINTS RECEIVED</th>
<th>POINTS POSSIBLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendance: 1 point for each class attended. 0.5 points for each class attended late.</td>
<td></td>
<td>10</td>
</tr>
<tr>
<td>Completed Team Debate Evaluation</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>Participation in Class &amp; Group Discussion (see Rubric below)</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>Pre-Class Preparation and Materials Reference (see Rubric below)</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>Listening Skills (see Rubric below)</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td><strong>TOTAL PARTICIPATION SCORE</strong></td>
<td></td>
<td>30</td>
</tr>
</tbody>
</table>
**CLASS DISCUSSION PARTICIPATION RUBRIC**
Level corresponds to number of points received at that level.

**Student Name:**

<table>
<thead>
<tr>
<th>Participation Component</th>
<th>Level 1: Unacceptable</th>
<th>Level 2: Minimal</th>
<th>Level 3: Emerging</th>
<th>Level 4: Competent</th>
<th>Level 5: Exemplary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participation in Class and Group Discussions</td>
<td>No participation – does not offer a comment when questioned.</td>
<td>Minimal participation – occasionally offers a comment when directly questioned. Does not add anything new to conversation.</td>
<td>Volunteers comments, but comments may lack depth or connection to discussion.</td>
<td>Volunteers comments and most are appropriate, reflecting some thoughtfulness. May lead to further questions from other students.</td>
<td>Appropriate, timely, and thoughtful comments that provokes further discussion within the group. Responds respectfully to other student’s remarks.</td>
</tr>
<tr>
<td>Pre-Class Preparation and Materials Reference</td>
<td>Demonstrates no exposure to the assigned material.</td>
<td>Demonstrates minimal exposure to the assigned material and cannot sustain references to it in the course of discussion.</td>
<td>Demonstrates evidence of having read the material but lacks thoroughness of understanding or insight.</td>
<td>Demonstrates evidence of having read the material with some thoroughness, but may lack some detail or critical insight.</td>
<td>Clear reference to material being discussed and makes connections from previous readings and discussions.</td>
</tr>
<tr>
<td>Listening Skills</td>
<td>Does not pay attention to discussion; may be occupied by some other task. Posture and demeanor shows lack of respect and attentiveness.</td>
<td>Drifts in and out of discussion. Listens to some remarks but clearly misses or ignores other relevant comments. Posture and demeanor sometimes shows respect and attentiveness.</td>
<td>Listens to other some of the time, does not stay focused on other’s comments or loses continuity of discussion. May show inconsistency in responding to other’s comments.</td>
<td>Listens to others most of the time but may not stay focused on other’s comments or loses continuity of discussion. Shows consistency in responding to other’s comments. Posture and demeanor indicates respect and attentiveness.</td>
<td>Posture, demeanor and behavior clearly demonstrate respect and attentiveness to others. Consistently responds to other’s comments in a thoughtful and constructive manner.</td>
</tr>
</tbody>
</table>
ASSIGNMENT 3: FINAL QUESTIONS

OVERVIEW

Each student is to submit ten relevant questions and the answer via Blackboard, based on assigned category. The questions can be submitted as either multiple choice or short answer. Below are examples of each type of question. This assignment is worth 10% of the overall grade for the course and will be scored out of 10 points. Please see the grading rubric below for more detail.

*A template will be dispersed that must be used for the questions.

The questions submitted will be compiled and distributed as a study guide for the final. The final will consist of questions submitted by the students and additional questions at the discretion of the course instructors.

MULTIPLE CHOICE FORMAT

1. Quality of care can be assessed by:
   a. Mortality
   b. Morbidity
   c. Life Expectancy
   d. All of the above
   e. None of the above

   Answer: D

SHORT ANSWER FORMAT

2. What is/are the federal source(s) for Medicare?

   Answer: Federal Government

ASSIGNMENTS

Below are the lecture assignments. Questions should be submitted via email to Kara Stubbins by 5 PM on the due date.

<table>
<thead>
<tr>
<th>Name</th>
<th>Lecture Date</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>TBD</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
ASSIGNMENT 3: FINAL QUESTIONS

GRADING RUBRIC

STUDENT NAME ___________________________________________ LECTURE ______________________

<table>
<thead>
<tr>
<th>Relevance and Accuracy</th>
<th>/5</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Did the student provide 10 questions relevant to the lecture assigned?</td>
<td></td>
</tr>
<tr>
<td>• Did the student provide accurate answers to each of the 10 questions?</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Quality</th>
<th>/7.5</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Course Instructors will choose questions with good quality to use on the final exam. This will be assessed by determining whether the questions are clear and test the understanding of key aspects of each lecture.</td>
<td></td>
</tr>
<tr>
<td>• 1 point will be assigned for each question used on the final up to five questions. ½ point will be given to each question used thereafter.</td>
<td></td>
</tr>
</tbody>
</table>

| Total Points¹ | /10 |

¹Students have the ability to earn an additional point for each question used on the final after the first five questions selected. The total score will be taken out of a base of 10, instead of 12.5.

COMMENTS:
SOURCE MATERIALS GUIDE

CURRENT EVENTS
Many sources are available to provide timely information on events in the healthcare industry and other related industries. Students are encouraged to develop a routine of perusing several sources to keep up on international, national, state and local events and actively considering how current events will impact healthcare administration. The following are recommended:

- Modern Healthcare (also has web-page www.modernhealthcare.com and daily e-mail for subscribers)
- Hospitals and Health Networks (www.hhnmag.com)
- Crain’s Chicago Business (also has web-page www.crainschicago.com and daily e-mail for subscribers)
- www.HospitalConnect.com (links to many of the other sites listed here)
- www.healthleaders.com
- Centers for Medicare and Medicaid web page (www.cms.gov)
- Healthcare Financial Management Association (www.hfma.org)
- American Hospital Association web page (www.aha.org, news available at www.ahanews.com and free daily e-mail is available)
- Illinois Hospital Association web page (www.ihatoday.org)
- Commonwealth Fund (www.cmwf.org)
- Kaiser Family Foundation (www.kff.org)
- Center for Studying Health System Change (www.hschange.org)

Note: In the above professional publications, articles are written and/or edited by an editorial staff, and are not subject to the peer-review process, which is described below.

RESEARCH/PEER-REVIEWED ARTICLES
In policy papers and debates, students are expected to use and appropriately cite relevant references from health care peer-reviewed journals, and may also supplement with references from the professional publications noted above.

What’s the difference? In a peer-reviewed journal, nearly all articles are submitted by researchers and practitioners in the field. Submitted articles are reviewed by a panel of peers/colleagues in the field to assure the validity of the article and that the article is free of bias. Reviewers are usually kept anonymous, so they are free to critique the article with full vigor. See summary below of peer reviewed journal articles in health care management and policy and their availability.

CITATIONS
Whenever you use a quote, fact or idea from a source—whether or not it is a peer-reviewed source—you must provide a citation. Here are some general guidelines:

- Cite all exact quotations with quotation marks.
- Cite paraphrases (when you change the wording but use the same basic sentence structure).
- When you use your own words you don’t need to cite the source, unless it’s a specific fact.
- When you use your own words and it’s a general idea, you don’t need to cite the source.

Written citations should conform to the APA Style - highlights are available at the following web-sites:
http://www.apastyle.org/faqs.html#8 (general citation information)
http://www.apastyle.org/elecsource.html (citation of electronic sources)
## Peer Reviewed Journals in Health Care Management and Policy
(Provided by the Research Committee of Health Systems Management Program)

<table>
<thead>
<tr>
<th>Journal</th>
<th>On-Line Accessibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration and Policy in Mental Health</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>American Journal of Community Psychology</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>American Journal of Epidemiology</td>
<td>Through library, 2000 to current</td>
</tr>
<tr>
<td>American Journal of Industrial Medicine</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>American Journal of Managed Care</td>
<td>Through library, 1995 to current</td>
</tr>
<tr>
<td>American Journal of Public Health</td>
<td>Through library, 1998 to current</td>
</tr>
<tr>
<td>American Journal of Tropical Medicine and Hygiene</td>
<td>Through library, 1995 to current</td>
</tr>
<tr>
<td>Annals of Epidemiology</td>
<td>Through library, 1995 to current</td>
</tr>
<tr>
<td>Annual Review of Public Health</td>
<td>Through library, 1985 to 2001</td>
</tr>
<tr>
<td>Archives of Environmental Health</td>
<td>Through library, 1981 to 2000</td>
</tr>
<tr>
<td>Care Management: Official Journal of the Academy of Certified Case Managers</td>
<td>Through library, 2004 to current</td>
</tr>
<tr>
<td>Evidence Based Health Policy and Management</td>
<td>Through library, 1999 to current</td>
</tr>
<tr>
<td>Family Practice Management</td>
<td>Through library, 1985 to current</td>
</tr>
<tr>
<td>Harvard Business Review</td>
<td>Through library, 1981 to current</td>
</tr>
<tr>
<td>Health Affairs</td>
<td>Through library, 1995 to current</td>
</tr>
<tr>
<td>Health Care Analysis</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>Health Care Financing Review</td>
<td><a href="http://www.cms.hhs.gov/review/">http://www.cms.hhs.gov/review/</a></td>
</tr>
<tr>
<td>Health Care Management Review</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>Health Care Management Science</td>
<td>Through library, 1998 to current</td>
</tr>
<tr>
<td>Health Economics</td>
<td>Through library, 1995 to current (ScienceDirect)</td>
</tr>
<tr>
<td>Health Education Research</td>
<td>Through library, 2002 to current</td>
</tr>
<tr>
<td>Health Policy</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>Health Policy and Planning</td>
<td>Through library, 1997 to current (Highwire)</td>
</tr>
<tr>
<td>Health Services Research</td>
<td>Through library, 1995 to current</td>
</tr>
<tr>
<td>Healthcare Informatics</td>
<td>Through library, 1995 to current</td>
</tr>
<tr>
<td>Hospitals and Health Networks</td>
<td>Through library, 2001 to current</td>
</tr>
<tr>
<td>Inquiry</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>International Journal of Epidemiology</td>
<td>Through library, 1999 to current</td>
</tr>
<tr>
<td>International Journal of Health Services</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>Journal of AHIMA (American Health Information Management Association)</td>
<td>Through library, 1999 to current</td>
</tr>
<tr>
<td>Journal of American Medical Association (JAMA)</td>
<td>Through library, 1991 to current</td>
</tr>
<tr>
<td>Journal of Clinical Epidemiology</td>
<td>Through library, 1995 to current (ScienceDirect)</td>
</tr>
<tr>
<td>Journal of Community Health</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>Journal of Epidemiology and Community Health</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>Journal of Health and Social Behavior</td>
<td>Through library, 2004 to current</td>
</tr>
<tr>
<td>Journal of Health Care for the Poor and Underserved</td>
<td>Through library, 1995 to current</td>
</tr>
<tr>
<td>Journal of Health Economics</td>
<td>Through library, 2000 to current</td>
</tr>
<tr>
<td>Journal of Health Politics, Policy and Law</td>
<td>Through library, 2000 to current</td>
</tr>
<tr>
<td>Journal of Medical Systems</td>
<td>Through library (Ovid)</td>
</tr>
<tr>
<td>Journal of Occupational and Environmental Medicine</td>
<td>Through library (Ovid)</td>
</tr>
<tr>
<td>Journal of Public Health Management and Practice</td>
<td>Through library, 1999 to current</td>
</tr>
<tr>
<td>Journal of Religion and Health</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>Managed Care Interface</td>
<td>Through library, 1996 to current</td>
</tr>
<tr>
<td>Medical Care</td>
<td>Through library, 1995 to 1999</td>
</tr>
<tr>
<td>Medical Care Research and Review</td>
<td>Through library, 1999 to current</td>
</tr>
<tr>
<td>Milbank Quarterly</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>New England Journal of Medicine</td>
<td>Through library, 1993 to current</td>
</tr>
<tr>
<td>Occupational &amp; Environmental Medicine</td>
<td>Through library, 1995 to current</td>
</tr>
<tr>
<td>Preventive Medicine</td>
<td>Through library, 1993 to current (ScienceDirect)</td>
</tr>
<tr>
<td>Psychology and Health</td>
<td>Through library, 1993 to current (ScienceDirect)</td>
</tr>
<tr>
<td>Psychology, Public Policy, and Law</td>
<td>Through library, 1999 to current</td>
</tr>
<tr>
<td>Public Health</td>
<td>Through library, 2001 to current</td>
</tr>
<tr>
<td>Public Health Reports</td>
<td>Through library (Ovid)</td>
</tr>
<tr>
<td>Quality Management in Health Care</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>Quality of Life Research</td>
<td>Through library, 1995 to current</td>
</tr>
<tr>
<td>Social Science and Medicine</td>
<td>Through library, 1997 to current</td>
</tr>
<tr>
<td>Sociology in Health and Illness</td>
<td>Through library, 1981 to 2000</td>
</tr>
<tr>
<td>Statistics in Medicine</td>
<td>Through library, 1997 to current</td>
</tr>
</tbody>
</table>
HSM 506 -
Patient Experience

Course Syllabus – Fall 2016
Credit Hours: 2

Rev. 2016 – August – 16

Course Days: Wednesday
Times: 1:00 pm – 2:50 pm
Location: AAC 971

Course Director: Co-Director:
Francis A. Fullam, MA Natasa Djukic, MS-HSM
Assistant Professor, Rush HSM Adjunct Faculty, Rush HSM
Senior Director, Marketing Research Project Manager
Rush University Medical Center Rush University Children’s Hospital
Office: (312) 942-5583 Office Phone: (312) 563-7494
E-mail: francis_Fullam@rush.edu Office Location: 466 Pavilion
Office Hours: by appointment Email: Natasa_Djukic@rush.edu

Required Course Textbook(s):
1. There is no required textbook for this course. Readings will be assigned for each class and made available via Blackboard.
2. Several videos will be required viewing; links will be provided.

Course Description and Primary Aims:
The course provides students with an overview of the history and current context of the patient/family experience in the US healthcare system. The content is designed to lead students to develop an understanding of patients’ perceptions of their care and how this is increasingly used to improve outcomes such as quality, safety, efficiency, staff engagement, and financial performance, as well as minimize litigation risks. Regulatory aspects of the patient experience will be reviewed, including the relationship of the patient experience to Value-Based Purchasing through HCAHPS/CAHPS.

The course will introduce patient experience measurement and monitoring tools, techniques for listening to the “voice of the patient”. Students will examine evidence based strategies to improve overall patient/family experiences at both the organizational and departmental level. The course will be taught using relevant case studies, guest speakers, patient interviews/videos, and a real-world project to understand and improve patient experiences in several outpatient clinics and the Emergency Department.
Prerequisite

None

Teaching and Learning Methods Used in this Course:

- Lectures and in-class discussions
- Directed written reflections
- Observation of patient experiences in outpatient clinics and ED
- Group project

Learning Outcomes:

At the conclusion of this class, students will be able to:

1. Understand patients’ perception of their care including main dis-satisfiers and areas for improvements
2. Understand the relation between patient experience and quality, outcomes, safety, efficiency, staff engagement, financial performance, and litigation risk.
3. Understand measuring and monitoring tools for the patient experience (e.g., Press Ganey, HCAHPS, informal surveys, dashboards, and peer communications).
4. Develop evidence based strategies to improve overall patient experience.
5. Apply the patient experience concept to a real-world project.
6. Have an appreciation for patient/person centered healthcare.

Curriculum Goals/Competencies:

HSM 506 is designed to build students’ knowledge, skills, abilities and values in the following competency areas associated with the NCHL model:

- Performance measurement – monitoring a “scorecard” of quantitative and qualitative measures: Using patient and constituent satisfaction scores; gathering quantitative and qualitative information on customer perceptions, market position, and financial viability; tracking high-incidence procedures and conditions; establishing procedures based on evidence (L 17.2)

Additionally, HSM 506 is designed to build students’ competencies in the following competency areas associated with the National Center for Healthcare Leadership (NCHL) model:

- Achievement orientation – Improving Performance: Making specific changes in the system or in one’s own work methods to improve performance; doing something better, faster, at lower cost, more efficiently (L 2.3)
- Information seeking – Delving deeper: Asking probing questions to get at the root of a situation, problem, or potential opportunity below the surface issues presented; calling on others who are not personally involved, to get their perspective; not stopping with the first answer; finding out why something happened; seeking comprehensive information, including expecting complexity (L 11.3)
- Analytical Thinking: Recognizes Multiple Relationships– Makes multiple causal links: several potential causes of events, several consequences of actions, or multiple-part chain of events (A leads to B leads to C leads to D); Analyzes relationships among several parts of a problem or situation (e.g., anticipates obstacles and thinks ahead about next steps, in detail, with multiple steps) (L 3.3)

General Expectations

- Students are expected to maintain a professional demeanor at all times. This includes:
o Arriving for classes on time, and remaining attentive throughout.
  o If you need to arrive late to a specific class, communicating this well in advance so that
    the course director, your fellow students, and/or class guests are not wondering where
    you are or are interrupted by your late arrival.
  o If you will need to leave prior to the end of the class session, you should communicate
    this prior to the beginning of the class, in all cases generally and especially if there is a
guest lecturer present. Leaving in the middle of a guest’s lecture without explanation,
for any reason (even to go to the bathroom) can be highly disruptive.
  o Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in
  session. Your full attention during class sessions is a basic expectation of the MS-HSM
  graduate program. It is also a common courtesy in many formal meetings and an
  important professional habit to develop.
  o Business casual dress attire, at a minimum, is required. Dressing professionally sends the
  message that you are a professional and should be taken seriously. Failing to dress
  professionally sends the message that you are “just a student.” It reflects poorly not only
  on yourself but also on your peers.
  o Expressing disagreements respectfully.

- Active participation is critical and expected.
- Listed readings are to be completed prior to the class period listed in the syllabus.
- Assignments are due at the start of the class period listed; lateness, regardless of cause, will
  result in loss of some credit. Some assignments (e.g. the discussion questions and most pre-
  work assignments) will not be accepted late.
  o Assignments are due at the assigned date and time as stated on Blackboard; lateness,
    regardless of cause, will result in loss of credit.
  o Assignments turned in late, but within 48 hours of the due time lose half (50%) of their
    value.
  o Assignments turned in 48 -72 hours more after their due time lose 75% of their value.
  o After 72 hours, assignments lose 100% of their value.
  o Timeliness will be judged by the "time stamp" created by Blackboard; note that it can
    take Blackboard several minutes to upload your work and "time stamp" it.
- Students are expected to attend the scheduled lecture, prepare for the lectures, and complete the
  suggested readings.
- All submitted course material is expected to be of professional quality in terms of content,
  format, and presentation.

Policy on Missed Classes:

Students are expected to attend all class sessions, and should email Natasa Djukic natasa_djukic@rush.edu of
any known conflicts and/or absences as soon as a conflict is known. Students must provide a valid reason for
their absence. Each non-notified or unexcused absence will automatically reduce your overall course grade
by 2 points.

Elements of Overall Grading:

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Using the Pt. Satisfaction Data Assignment</td>
<td>10</td>
</tr>
<tr>
<td>Mid Term Exam</td>
<td>15</td>
</tr>
<tr>
<td>Group Project Presentation</td>
<td>15</td>
</tr>
<tr>
<td>Group Project Paper</td>
<td>15</td>
</tr>
<tr>
<td>4 Reflections on Readings/Directed Questions (5 pts each)</td>
<td>15 points (4* 3.75 points)</td>
</tr>
<tr>
<td>Final Exam</td>
<td>30</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
</tr>
</tbody>
</table>
Grading Scale (Percentage):

- ≥90 to 100 = A
- ≥80 to < 90 = B
- ≥70 to <80 = C
- < 70 = Not passing

Academic Integrity

Rush University students and faculty belong to an academic community with high scholarly standards. As essential as academic honesty is to the relationship of trust fundamental to the educational process, academic dishonesty violates one of the most basic ethical principles of an academic community, and will result in sanctions imposed under the University's disciplinary system. A partial list of academically dishonest behaviors that would subject a student to disciplinary action includes cheating, fabrication, facilitating academic dishonesty, plagiarism, and unauthorized examination behavior.

Further information can be found at:
http://www.rushu.rush.edu/catalog/acadresources/academichonesty.html

The College of Health Sciences will not condone cheating in any form. Allegations of cheating will be reviewed by the departmental Committee on Progress and Promotions. Any student found to be cheating on an examination may receive a “0” for the examination and will be subject to formal disciplinary action, which may include suspension or dismissal from the program. Failure to report incidents involving scholastic dishonesty on the part of another student will be considered unprofessional conduct and may also result in disciplinary action. Students should refer to the Rush University Policy on Academic Honesty for further information.

Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.

Rush University Policies And Procedures For Students With Disabilities

Rush University provides reasonable accommodations to all students on a nondiscriminatory basis consistent with legal requirements as outlined in the Americans with Disabilities Act (ADA) of 1990 and the Rehabilitation Act of 1973 and applicable implementing regulations of these statutes. A reasonable accommodation is a modification or adjustment to an instructional activity, facility, program or service that enables a qualified student with a disability to have an equal opportunity to participate in all Rush University student activities. To be eligible for accommodations, a student must have a documented disability as defined by the ADA and Section 504 of the Rehabilitation Act of 1973. Both the ADA and Section 504 define disability as (a) a physical or mental impairment that substantially limits one or more major life activities of such individual; (b) a record of such impairment; or (c) being regarded as having such a condition. For information to request accommodation(s), please contact your college representative listed below. Please do not make requests for accommodation(s) to individual faculty members, lectures or course directors.

College of Health Sciences – Joanne Schupbach, M.S., M.A.
(312) 942-3676
Joanne_E_Schupbach@rush.edu

Additional information can be found at:
http://www.rushu.rush.edu/catalog/aboutrush/disabilityrights.html
Assignments for the Quarter

**Reflections (Points: 4 reflections at 3.75 points each)**
- Reflections will be due on the day of class by 8 a.m.
- Each reflection response must be between 300 and 500 words
- Submit all reflections via Blackboard
- All responses must include at least one source

<table>
<thead>
<tr>
<th>Due Date</th>
<th>Reflection Questions (300-500 words)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reflection #1</td>
<td>Reflect on your personal experiences as a consumer of health care or as a family member of someone navigating the health care continuum. What does health care system do well in terms of patient experience? Who or what stands out in your mind? What did they do or not do? Provide two examples of areas for improvement and how you might innovatively solve the issues at hand. (No source required for Reflection #1)</td>
</tr>
<tr>
<td>Due Sept. 14th</td>
<td></td>
</tr>
<tr>
<td>Reflection #2</td>
<td>Having learned about patient satisfaction surveys, studied survey results, and observed in a Rush clinic, how do you think the surveys relate to what is actually going on in a patient's life? What are criticisms of measuring the patient experience on behalf of the patient, clinic management, and providers? How might you overcome them?</td>
</tr>
<tr>
<td>Due Oct. 5th</td>
<td></td>
</tr>
<tr>
<td>Reflection #3</td>
<td>You’ve learned about methods, other than surveys, that hospitals and providers can use to collect patient and family input. Come up with two other innovative methods hospitals and providers can use to get patient and family feedback. Think about websites, apps, and other outlets that you use in your everyday life and how they might be used in healthcare.</td>
</tr>
<tr>
<td>Due Oct. 26th</td>
<td></td>
</tr>
<tr>
<td>Reflection #4</td>
<td>As a health care administrator, you may have very little direct patient interaction. Despite this, how do you see the role of a health care leader in improving the patient experience? How does the staff (i.e. physicians, nurses, medical assistants, front desk staff) and built environment play a role in the patient experience?</td>
</tr>
<tr>
<td>Due Nov. 9th</td>
<td></td>
</tr>
</tbody>
</table>

**Group Project (Paper: 15 points; Presentation: 15 points)**

**Team Interviews**
Each team will conduct at least two (2) interviews related to the assigned clinical area. There must be at least two members of your team at each interview. You may conduct more than two interviews, but you must include at least one from each of the following categories:

1. a person in a leadership role (i.e. Practice Manager, Unit Director, Medical Director)
2. a person in a staff role (i.e. Nurse, Medical Assistant, Front Desk staff, etc.)

Be sure to include the topics/questions listed in this document at a minimum; feel free to probe more deeply with your interview subject when you think you need more or detailed information.

In addition to interviews, each team should observe the patient experience in their assigned clinical area. Options could include shadowing staff or observing in the waiting area/nurses’ station.

**Team Paper**
As a group, review your feedback and develop a brief written report (3-5 pages, single-spaced) synthesizing what you have discovered. Be sure to cover the following:

- A description of the clinical area. This section should describe the clinic or unit’s specialty, size, relationship to other departments, organizational structure, and physical environment, layout, etc.
• A description of the people you interviewed – who they are by title or function, what they do, how long they have been in their positions, and any relevant observations regarding their clinical area.

• An analysis of the clinical area’s patient satisfaction scores for (define period of time), including their strengths and weaknesses.
  o Students will be given access to their clinical area’s scores on Press Ganey

• Discuss these scores with the clinic leadership and staff to understand their perspectives on what they believe to be the strengths and weaknesses of their clinical area as it relates to the patient experience

• A description of what the team believes to be the strengths and weaknesses of the patient experience, based on observations/shadowing experience.

• Describe any initiatives related to the patient experience that the clinical area has worked on or is currently working on

• Based on your observations of the clinical area, your interviews with the staff, and your analysis of the scores, provide recommendations to the clinical leadership as to how they might improve the patient experience

Team Presentation
The team should also synthesize their findings into a presentation, following the structure of the paper.

• Each group will be expected to give a 10 minute presentation that will be shared with the entire class. Encourage the clinic leadership and staff who you interviewed to come as well.

• Your 10 minute report will be followed by another 5 minute period of questions and answers.
<table>
<thead>
<tr>
<th>Wk</th>
<th>Date</th>
<th>Pre-class readings (on Blackboard)</th>
<th>Assignment(s) Due</th>
<th>Topics / Themes</th>
<th>In Class Activities</th>
<th>Class Lead</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Wed. 9/14</td>
<td>- Cleveland Clinic videos (x2)</td>
<td>Reflection #1 due</td>
<td>- Welcome and introductions</td>
<td>- Icebreaker</td>
<td>F. Fullam N. Djukic</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- “Defining the Patient Experience”</td>
<td></td>
<td>- Class overview including:</td>
<td>- Group assignments</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- “Concern for the Patient Experience Comes of Age”</td>
<td></td>
<td>o final paper due at end of qtr.</td>
<td>- Press Ganey portal review</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>o how course builds toward this</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>- History of Patient Experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>- Preparation for clinic observations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Wed. 9/21</td>
<td>No class this week</td>
<td>Use this time for clinic</td>
<td>- Schedule clinic visits</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>observations</td>
<td>- Visit clinics and meet with staff</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Wed. 9/28</td>
<td>TBD</td>
<td>Press Ganey analysis assignment due</td>
<td>- Measurement and metrics</td>
<td>Class to let out at 2:40 for CHS Convocation</td>
<td>F. Fullam N. Djukic, Cathy Johnson (Manager, Rush Patient Relations)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>- Value Based Purchasing</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>- Patient Relations and Risk</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Wed. 10/5</td>
<td>TBD</td>
<td>Upload presentations to Blackboard by 11:59 pm on 10/4</td>
<td>In-class group presentations</td>
<td>Group presentations</td>
<td>F. Fullam N. Djukic</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Reflection #2 due</td>
<td>o 10 min presentation, 5 min Q&amp;A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Wed. 10/12</td>
<td>TBD</td>
<td>No assignment due Midterm (in class)</td>
<td>- Midterm (first half of class)</td>
<td>Midterm</td>
<td>F. Fullam N. Djukic, George Fitchett, DMin, PhD (Director of Research, Dept. of Religion Health and Human Values)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>- Spirituality and the patient experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Wed. 10/19</td>
<td>TBD</td>
<td>No assignment due</td>
<td>- Patient advisory councils and other patient input methods</td>
<td>Discussion</td>
<td>N. Djukic, Denise N. Szalko (VP, Revenue Cycle at Rush)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>- Patient experience and finance (insurance literacy, federal programs, navigating bills, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wk</td>
<td>Date</td>
<td>Pre-class readings (on Blackboard)</td>
<td>Assignment(s) Due</td>
<td>Topics / Themes</td>
<td>In Class Activities</td>
<td>Class Lead</td>
</tr>
<tr>
<td>----</td>
<td>-----------</td>
<td>-------------------------------------</td>
<td>------------------------------------</td>
<td>------------------------------------------------------</td>
<td>----------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>7</td>
<td>Wed. 10/26</td>
<td>TBD</td>
<td>Reflection #3 due</td>
<td>- Planning for the Rush Center for Advanced Healthcare</td>
<td>- Presentations by Leaders</td>
<td>Traci d’Auguste (AVP, RUMG Strategic Operations)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>- Q&amp;A</td>
<td>David Grandy (AVP, Managing Director of Strategic Innovation at HDR)</td>
</tr>
<tr>
<td>8</td>
<td>Wed. 11/2</td>
<td>TBD</td>
<td>No assignment due</td>
<td>Patient experience at Rush’s front line</td>
<td>- Presentations by Leaders</td>
<td>Phil Shaw (Director, Patient Relations)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>- Q&amp;A</td>
<td>Katie Bogey (Patient Experience Consultant)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TBD</td>
</tr>
<tr>
<td>9</td>
<td>Wed. 11/9</td>
<td>TBD</td>
<td>Reflection #4 due</td>
<td>Patient Experience Leaders at Rush</td>
<td>- Presentations by Leaders</td>
<td>Fadi Hachem</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>- Q&amp;A</td>
<td>Liz Wurth</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Dr. Tony Perry</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Dr. Surpana Dutta</td>
</tr>
<tr>
<td>10</td>
<td>Wed. 11/16</td>
<td>TBD</td>
<td>No assignment due</td>
<td>Patient Experience at other area Medical Centers</td>
<td>- Presentations by Leaders</td>
<td>Phil Shaw (Rush)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>- Q&amp;A</td>
<td>TBD</td>
</tr>
<tr>
<td>11</td>
<td>Wed. 11/23</td>
<td>TBD</td>
<td>Take home final paper Due at 11:59pm on 11/23</td>
<td>Take home, written final: More details to be provided. Final will focus on your decisions as a senior manager overseeing the development and design of a new ambulatory facility</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

*Copyright © 2015 the Department of Health Systems Management, Rush University. All rights reserved worldwide.*
College of Health Sciences
Department of Health Systems Management

HSM 515 -
Human Resources Management

Course Syllabus – Fall 2016
Credit Hours: 4

Rev. 2016-07-22

Course Days: Monday/Wednesday
Times: 3:00-4:50PM
Location: AAC 985

Course Director:
Richard B. ("Rick") Davis, JD
Vice President, HR Operations
Office Phone: 312-942-3631
E-mail: rick_davis@rush.edu

Office hours:
By Appointment via Outlook

Course Assistant:
Fadi Hachem, MS-HSM
Manager of Patient Experience
Midwest Orthopaedics at Rush
1611 W. Harrison St, Suite 212
Office Phone: 312-432-2869
Email: fadi.hachem@rushortho.com

Office Hours:
Appointments upon request

Required Course Textbook(s):

Optional Course Textbook(s): None

Additional Readings and Activities:
Supplementary case studies and other readings will be assigned in class and in the Blackboard shell. Students will be assigned a personality profile assessment prior to the beginning of the term and must complete the assessment work by the end of the first week of class.

Course Description and Primary Aims:
This course provides an understanding of the human resource management knowledge and skills required of the health systems manager in an environment that is constantly changing. Skills acquired include recruiting and managing talent, training and developing talent, engaging/motivating employees, and leadership capability.
Course Pre-requisites:
HSM program

Teaching and Learning Methods Used in this Course:
1. Individual and Small Group Presentations
2. Case Applications from Textbook
3. Class Participation
4. Mid-Term Exam
5. Final Exam

Learning Outcomes:
At the conclusion of this class, students will be able to:

- Have a fundamental understanding of the strategic role that Human Resources (HR) plays in business success. They will explore talent-related topics and how HR can support/influence their talent-related decisions.
- Develop a fundamental understanding of the operational role that Human Resources (HR) plays in business success. They will explore internal and external issues that influence an organization's decisions and policies affecting its human resources.
- Be introduced to a variety of Human Resource Management principles and strategies typically used in day-to-day operations in the health care environment. They will improve their skills, knowledge and behaviors as people managers and will become familiar with HR processes and concepts that will support their own management practices. They will be able to analyze and diagnose Human Resource Management problems and design appropriate solutions.
- Have an understanding of the effects of a rapidly changing business environment on Human Resource Management in the health care setting, e.g.: organizational change; employee turnover; employee retention; legal and regulatory considerations, quality and efficiency in health care delivery; diversity issues in the workforce; compensation and benefit structures; linking Human Resource objectives and strategies to the organization’s objectives.

Curriculum Goals/Learning Objectives:

- Understand the strategic and operational roles that Human Resources (HR) plays in business success
- Explore internal and external issues that influence an organization's decisions and policies affecting its human resources
- Understand the effects of a rapidly changing business environment on Human Resource Management in the health care setting (e.g.: organizational change; employee turnover; employee retention; legal and regulatory considerations, quality and efficiency in health care delivery; diversity issues in the workforce; compensation and benefit structures; linking Human Resource objectives and strategies to the organization’s objectives).
- Exposure to a variety of Human Resource Management principles and strategies typically used in day-to-day operations in the health care environment
- Analyze and diagnose Human Resource Management problems and design appropriate solutions.
- Develop talent management skills to support/influence departmental/organizational decision making.
- Develop skills, knowledge and behaviors as people managers to be successful in their careers.
Curriculum Goals/NCHL Competencies:

HSM 515 is designed to build students’ knowledge, skills, abilities and values in the following competency areas associated with the NCHL model:

**L6. Communication Skills:** The ability to speak and write in a clear, logical, and grammatical manner in formal and informal situations to prepare cogent business presentations, and to facilitate a group.

- **L6.2 Prepares Effective Written Business Cases or Presentations:** Uses accurate and complete presentation of facts; Uses logical presentation of arguments pro and con; Develops well-reasoned recommendations; Prepares concise executive summary

- **L6.3 Makes Persuasive Oral Presentations**
  Uses clear and understandable voice that is free of extraneous phrases (i.e., “uhm” and “you know”); Uses effective audiovisual media (presentation software, exhibits, etc.); Stays on the topic; Engages in non-defensive Q&A; Stays within time allotment

**L9. Human Resources Management:** The ability to implement staff development and other management practices that represent contemporary best practices, comply with legal and regulatory requirements, optimize the performance of the workforce, including performance assessments, alternative compensation and benefit methods, and the alignment of human resource practices and processes to meet the strategic goals of the organization.

- **L 9.1 Is Familiar with Basic Employment Processes and Law:** Demonstrates basic knowledge of employment management principles, policies, and law in relation to hiring, promotion, or dismissal; Applies human resources policies and procedures; Applies equal opportunity and federal contract compliance (EEOC/OFCCP), the disabilities act (ADA), fair labor standards (FLSA) and employee income, security, and refinement regulations (ERISA); Demonstrates an understanding of union/labor principles and practices (e.g., contracting, negotiations, grievance process, mediation)

- **L9.2 Uses Alternative Compensation and Benefit Programs:** Conducts job analysis, evaluation, and grading; Uses compensation surveys; Understands compensation structures, including: market pricing, pay delivery models and their implications, benefits and their role in total compensation, and union wage and hour contract provisions; Uses compensation, benefit, and incentive programs to optimize performance of diverse employee stakeholders; Conducts performance assessments

- **L9.3 Aligns Human Resource Functions with Strategy:** Aligns human resource functions to achieve organizational strategic outcomes; Understands the importance of aligning recruitment and selection, job design and work systems, learning and development, reward and recognition, and succession planning

**L19. Professionalism:** The demonstration of ethics, sound professional practices, social accountability, and community stewardship. The desire to act in a way that is consistent with one’s values and what one says is important.

- **L19.2 Promotes Organizational Integrity:** Ensures that organization adheres to honesty and fair dealing with all constituencies, including employees and community stakeholders; Promotes the development of professional roles/values that are compatible with the improvement of health and wellness; Serves all equally and upholds trustworthiness.

**Policy on Missed Classes:** Students are expected to be present for all lectures and attendance sheets will be used to track attendance. While unforeseen personal illness or emergencies may cause an absence, students are expected to contact the Course Director and/or Course Assistant via email or phone in advance of the missed class in order to obtain an excused absence. The Course Director and Course Assistant may allow any work product for the missed class to be completed at a later date at their sole discretion.
General Expectations

- Students are expected to maintain a professional demeanor at all times. This includes:
  - Arriving for classes on time, and remaining attentive throughout.
  - If you need to arrive late to a specific class, communicating this well in advance so that the course director, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
  - If you will need to leave prior to the end of the class session, you should communicate this prior to the beginning of the class, in all cases generally and especially if there is a guest lecturer present. Leaving in the middle of a guest’s lecture without explanation, for any reason (even to go to the bathroom) can be highly disruptive.
  - Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in session. Your full attention during class sessions is a basic expectation of the MS-HSM graduate program. It is also a common courtesy in many formal meetings and an important professional habit to develop.
  - Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate. Dressing professionally sends the message that you are a professional and should be taken seriously. Failing to dress professionally sends the message that you are “just a student.” It reflects poorly not only on yourself but also on your peers.
  - Expressing disagreements respectfully.

- Active participation is critical and expected.
- Listed readings are to be completed prior to the class period listed in the syllabus.
- Assignments are due at the start of the class period listed; lateness, regardless of cause, will result in loss of some credit. Some assignments (e.g. the discussion questions and most pre-work assignments) will not be accepted late.
- Students are expected to attend the scheduled lecture, prepare for the lectures, and complete the suggested readings.
- All submitted course material is expected to be of professional quality in terms of content, format, and presentation.

Assignments:
(Details are provided later in the syllabus)

Grading Scale (Percentage):

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>≥90 to 100</td>
<td>A</td>
</tr>
<tr>
<td>≥80 to &lt; 90</td>
<td>B</td>
</tr>
<tr>
<td>≥70 to &lt;80</td>
<td>C</td>
</tr>
<tr>
<td>&lt; 70</td>
<td>Not passing</td>
</tr>
</tbody>
</table>
Elements of Final Course Grade:

<table>
<thead>
<tr>
<th>Component</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendance and Class Participation</td>
<td>10%</td>
</tr>
<tr>
<td>Case Applications from Textbook</td>
<td>10%</td>
</tr>
<tr>
<td>Current Topic Paper &amp; Presentation</td>
<td>15%</td>
</tr>
<tr>
<td>Team Presentations</td>
<td>20%</td>
</tr>
<tr>
<td>Mid-Term Examination</td>
<td>20%</td>
</tr>
<tr>
<td>Final Examination</td>
<td>25%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
</tr>
</tbody>
</table>

Academic Integrity

Rush University students and faculty belong to an academic community with high scholarly standards. As essential as academic honesty is to the relationship of trust fundamental to the educational process, academic dishonesty violates one of the most basic ethical principles of an academic community, and will result in sanctions imposed under the University's disciplinary system. A partial list of academically dishonest behaviors that would subject a student to disciplinary action includes cheating, fabrication, facilitating academic dishonesty, plagiarism, and unauthorized examination behavior.

Further information can be found at:  
http://www.rushu.rush.edu/catalog/acadresources/academichonesty.html

The College of Health Sciences will not condone cheating in any form. Allegations of cheating will be reviewed by the departmental Committee on Progress and Promotions. Any student found to be cheating on an examination may receive a “0” for the examination and will be subject to formal disciplinary action, which may include suspension or dismissal from the program. Failure to report incidents involving scholastic dishonesty on the part of another student will be considered unprofessional conduct and may also result in disciplinary action. Students should refer to the Rush University Policy on Academic Honesty for further information.

Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.

Accommodations

In keeping with its goal to promote diversity among its student population, Rush University is committed to attracting and educating students who will help to make the population of health care professionals representative of the national population, including students with disabilities. In addition, Rush University wishes to insure that access to its facilities, programs and services are available to students with disabilities. The University provides reasonable accommodations to all students on a nondiscriminatory basis consistent with legal requirements as outlined in the Americans with Disabilities Act (ADA) of 1990 and the Rehabilitation Act of 1973. A reasonable accommodation is a modification or adjustment to an instructional activity, facility, program or service that enables a qualified student with a disability to have an equal opportunity to participate in all Rush University student activities. To be eligible for accommodations, a student must have a documented disability as defined by the ADA and Section 504 of the Rehabilitation Act of 1973. Both the ADA and Section 504 define disability as (a) a physical or mental impairment that substantially limits one or more major life activities of such individual; (b) a record of such impairment; or (c) being regarded as having such a condition. Further information or questions can be directed to the College of Health Sciences faculty member, Richard Peach, PhD. He can be reached at (312) 942-3293 or Richard_Peach@rush.edu. Please do not make requests for accommodation to individual faculty members, lecturers or course directors.

Further information can be found at: http://www.rushu.rush.edu/catalog/aboutrush/disabilityrights.html
<table>
<thead>
<tr>
<th>W</th>
<th>Date</th>
<th>Pre-class readings</th>
<th>Assignment(s) Due</th>
<th>Topics / Themes</th>
<th>In Class Activities</th>
<th>Class Lead</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>9/12/2016</td>
<td>Textbook Ch. 1</td>
<td>Myers-Briggs Type Indicator</td>
<td>Introduction to Human Resources Management (HRM) – People, Processes and Systems</td>
<td>Expectations for Coursework and Preparation</td>
<td>Core Faculty</td>
</tr>
<tr>
<td></td>
<td>9/14/2016</td>
<td>Textbook Ch. 3&amp;4</td>
<td>Case Applications from Ch. 1, 3 &amp; 4 Personal Learning Objectives posted to Blackboard</td>
<td>Introduction to HRM – Legal &amp; Regulatory Environment</td>
<td>Myers-Briggs Type Indicator facilitated discussion</td>
<td>Core Faculty + Guest Speaker Mary M. Nash, PhD AVP Talent Management &amp; Leadership Development</td>
</tr>
<tr>
<td>2</td>
<td>9/19/2016</td>
<td>Textbook Ch. 2</td>
<td>Case Applications from Ch. 2</td>
<td>Strategic HR -- Formulating Organizational Strategy and Alignment of HR and Organizational Strategy</td>
<td></td>
<td>Core Faculty</td>
</tr>
<tr>
<td>3</td>
<td>9/26/2016</td>
<td>Case Studies</td>
<td>Individual Current Events Topics approved</td>
<td>Strategic HR – Management of Corporate Culture</td>
<td>Individual Current Events Presentations (3-4)</td>
<td>Core Faculty</td>
</tr>
<tr>
<td>4</td>
<td>10/3/2016</td>
<td>Textbook Ch. 6&amp;7</td>
<td>Case Applications from Ch. 6 &amp; 7</td>
<td>HR Processes - Healthcare Recruitment and Selection Search Strategies &amp; Networking</td>
<td>Individual Current Events Presentation (3-4)</td>
<td>Guest Speaker(s) TBD</td>
</tr>
<tr>
<td>5</td>
<td>10/10/2016</td>
<td>Textbook Ch. 5&amp;8</td>
<td>Case Applications from Ch. 5 &amp; 8</td>
<td>Personnel Selection and Onboarding; Hidden Cost of Employee Turnover</td>
<td>Individual Current Events Presentations (3-4)</td>
<td>Guest Speaker Andy Garman, PsyD, MS CEO - NCHL</td>
</tr>
<tr>
<td>6</td>
<td>10/12/2016</td>
<td>Textbook Ch. 14</td>
<td>Case Applications from Ch. 14</td>
<td>HR Processes – A Practical Guide to Employee &amp; Labor Relations</td>
<td>Individual Current Events Presentations (3-4)</td>
<td>Guest Speaker Paula J. Brown, MBA Manager, Diversity &amp; Inclusion</td>
</tr>
</tbody>
</table>

Copyright © 2016 the Department of Health Systems Management, Rush University. All rights reserved worldwide.
<table>
<thead>
<tr>
<th>W</th>
<th>Date</th>
<th>Pre-class readings</th>
<th>Assignment(s) Due</th>
<th>Topics / Themes</th>
<th>In Class Activities</th>
<th>Class Lead</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>10/17/2016</td>
<td>Textbook Ch. 9; Case Study</td>
<td>MIDTERM</td>
<td>MIDTERM</td>
<td>Individual Current Events Presentations (3-4)</td>
<td>Guest Speakers</td>
</tr>
<tr>
<td></td>
<td>10/19/2016</td>
<td>Textbook Ch. 9; Case Study</td>
<td>Case Applications from Ch. 9</td>
<td>Strategic HR – Leadership Development</td>
<td></td>
<td>Sue Lawler, MBA, PhD</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Director, Rush Leadership Academy</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Ravi Hansra, Ed.D</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Leadership Development Consultant</td>
</tr>
<tr>
<td>7</td>
<td>10/24/2016</td>
<td>Textbook Ch. 10; Case Study</td>
<td>Case Applications from Ch. 10</td>
<td>HR Processes – Organizational Effectiveness, Performance Management and Succession Planning</td>
<td>Individual Current Events Presentations (3-4)</td>
<td>Guest Speakers</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Alita Tucker,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Director, Talent Management</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Stephanie Marberry, PhD</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Talent Management Consultant</td>
</tr>
<tr>
<td>8</td>
<td>10/26/2016</td>
<td>Textbook Ch. 11&amp;12</td>
<td>Case Applications from Ch. 11 &amp; 12</td>
<td>HR Processes – Aligning Compensation and Benefit Plans with Corporate Strategy</td>
<td>Individual Current Events Presentations (3-4)</td>
<td>Core Faculty +</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Guest Speaker</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TBD</td>
</tr>
<tr>
<td>9</td>
<td>10/31/2016</td>
<td>Case Study</td>
<td>HR Processes – Today’s HR Technology; Metrics and Measurement</td>
<td>HR Processes – Today’s HR Technology; Metrics and Measurement</td>
<td>Individual Current Events Presentations (3-4)</td>
<td>Guest Speaker</td>
</tr>
<tr>
<td></td>
<td>11/2/2016</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Joe Anderson, MBA PMP</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>AVP HR Operations</td>
</tr>
<tr>
<td></td>
<td>11/7/2016</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Students</td>
</tr>
<tr>
<td></td>
<td>11/9/2016</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Students</td>
</tr>
<tr>
<td>10</td>
<td>11/14/2016</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Students</td>
</tr>
<tr>
<td></td>
<td>11/16/2016</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>HSM Recap – Review of Learnings; Final Exam Prep</td>
</tr>
<tr>
<td></td>
<td>11/21</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Core Faculty</td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*W* = Week
## Detailed Descriptions of Assignments and Grading Rubric for Each

Credit for participation is earned through your contributions to the quality of the class learning environment. Participation is judged based on current performance in class – in other words, a grade assigned on a particular day only relates to that day.

<table>
<thead>
<tr>
<th>Criteria considered in grading:</th>
<th>Not Passing</th>
<th>“C” Level</th>
<th>“B” Level</th>
<th>“A” Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class attendance</td>
<td>Substantially late to or absent from class; no advance explanation provided.</td>
<td>Arrives to class later than the scheduled start time. (Note: absence from class means no participation credit is earned for that session.)</td>
<td>Arrives on time, is seated and ready to begin at class start time.</td>
<td>Arrives on time, is seated and ready to begin at class start time, and immediately ceases other activities at the time the class actually starts.</td>
</tr>
<tr>
<td>Participation</td>
<td>Does not ask / answer any questions; does not make comments (or relevant comments) during the session; or significantly derails the agenda of the class</td>
<td>Does not contribute to class discussion, or participates but comments are off-topic and/or reflective of a lack of preparation (e.g. asking questions that the readings already clearly addressed.)</td>
<td>Contributes at a good level (but without dominating); contributions add to (do not derail) the class discussion</td>
<td>Contributions augment / add to comments from peers; synthesizes / incorporates readings and assignments into the class discussion</td>
</tr>
<tr>
<td></td>
<td>Noticeably off-task during a portion of the class and/or distracting to others. Examples include, but are not limited to: attending to non-class matters (checking e-mails / PDAs and/or using a personal laptop for any task not directly relevant to what’s going on in the class at the moment), cellphone/pager noise, off-topic conversations / passing notes / texts</td>
<td>Generally attentive, but engages in one or more side conversations or other off-task activities. Cell phone / pager noise is heard once during class.</td>
<td>Conversations are focused on the in-class discussion. No peripheral noises or distractions (cell phones, pagers, and other devices).</td>
<td>Conversations are focused on the in-class discussion. No peripheral noises or distractions (cell phones, pagers, and other devices).</td>
</tr>
<tr>
<td>Professionalism is lacking in one or more major ways (e.g. unprofessional dress, uses derogatory and/or other highly unprofessional language)</td>
<td>Professionalism is lacking in one or more minor ways (e.g. overly casual dress, use of slang and/or somewhat disrespectful or arrogant language)</td>
<td>Class participation reflects a good level of professionalism</td>
<td>Class participation reflects a noticeably high level of professionalism</td>
<td></td>
</tr>
</tbody>
</table>
### Guidelines for Team Presentations

<table>
<thead>
<tr>
<th>Presentation Component</th>
<th>Level 1 Minimal</th>
<th>Level 2 Emerging</th>
<th>Level 3 Competent</th>
<th>Level 4 Exemplary</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Content &amp; Format</strong></td>
<td>The presentation generally rambles on with little or no construction. The main points are not stated upfront and the body section begins quickly. Discussion of the main points meanders with little or no logical support. The closing is weak and comes to an end with little or no recommendations or conclusions.</td>
<td>The presentation has a faulty design with opening, body and closing not easily being delineated. The main points in the opening may contain too much information that would typically be put into the body. The body contains relevant information but does not flow well. The closing may not restate the main points or moves to a quick close.</td>
<td>The presentation has an acceptable design with a good opening, body and closing. The opening introduces the subject and the main points are stated but may not be clear. The body covers the main points broadly with little or no supporting information and could use more depth. The closing may restate the main points covered but moves to a close with little or no conviction.</td>
<td>The presentation is well designed with an excellent opening, body and closing. The opening introduces the subject using a creative attention-getter, and the main points are stated clearly. The body discusses the main points in depth with appropriate supporting information. The closing summarizes the main points previously stated and the conclusions/recommendations are logical bringing the presentation to a strong close.</td>
</tr>
<tr>
<td><strong>Delivery skills</strong></td>
<td>Greater voice level &amp; modulation needed for the size of the room. Eye contact is non-existent or very superficial. Little or no appropriate gestures &amp; movement around the room. Does not address audience directly but reads slide information with back to audience. Shows little or no energy in the delivery.</td>
<td>Voice level &amp; modulation need improvement for size of the room. Eye contact is minimal and much scanning the audience exists. Gestures &amp; movements are labored and/or repetitive. Reads much slide information from screen, not addressing the audience. Little energy &amp; enthusiasm shown in the delivery.</td>
<td>Voice level &amp; modulation is acceptable for the size of the room. Good eye contact with individual audience members but some scanning exists. Gestures &amp; movements are reasonable but may seem unnatural. Mostly addresses audience directly but occasionally turns back to audience to read slide information. Some enthusiasm &amp; energy shown in the delivery.</td>
<td>Voice level &amp; modulation is appropriate for the room. Eye contact is deliberate and direct contact is made with audience members. Gestures &amp; movements are appropriate for the topic and natural. Addresses audience directly using computer screen as a prompter for slide information. Much enthusiasm and energy shown in the delivery.</td>
</tr>
<tr>
<td><strong>A/V Support</strong></td>
<td>Slides are poorly designed and show many flaws in content and structure. Little or no graphic &amp; color use that adds little to the presentation.</td>
<td>Slides have minimal design and may show flaws such as no consistency among points on a slide. Graphic &amp; color use may need improvement.</td>
<td>Slides have good design &amp; execution. Slide information may be too wordy or too much information on some slides. Graphic &amp; color use may be good but could be more appropriate for the presentation.</td>
<td>Slides are designed &amp; executed well. Slides follow 6 x 6 rule with appropriate information given. Slide information is clear, understandable &amp; supports what is being said. Graphic &amp; color use is good and appropriate for the presentation.</td>
</tr>
</tbody>
</table>
College of Health Sciences
Department of Health Systems Management

HSM 531
Health Care Financial Accounting
Course Syllabus – Fall 2016
Credit Hours: 4

Rev. August 2016

Course Days: Tuesdays & Thursdays
Times: 1:00 p.m. – 2:50 p.m.
Location: AAC 969

Course Director:
Thomas Cutting, MBA
Assistant Professor, Department of Health Systems Management
Associate Vice President – Internal Audit
Annex Building Suite 317
Office Phone: 312.942.3041
FAX: 312.942.6875
E-mail: tom_cutting@rush.edu

Office hours: By appointment.

Course Assistant:
Mariella Mercer, MS-Accounting
Cash Management Manager – Treasury
Triangle Office Building Suite 265
Office Phone: 312.942.7021
FAX: 312.942.6875
E-mail: mariella_mercer@rush.edu

Office hours: By appointment.

Required Course Textbook
Mason, Ohio: South-Western Cengage Learning
(Not available at Rush University Bookstore, suggest purchase of used copy)

Other Articles
Throughout the quarter, various articles augmenting class lecture topics will be distributed.
Course Description and Primary Aims
This course provides students with a solid understanding of financial accounting concepts/principles as they relate to the health care industry. The course is taken in the fall quarter of the first year and prepares students to analyze and utilize accounting information to make management decisions. Many of the concepts learned will be applied during other courses in the HSM curriculum.

Course Pre-requisites
Undergraduate accounting.

Teaching and Learning Methods Used in this Course
- Most class sessions will be conducted in lecture format with a focus on applying the concepts covered in the text book to the health care industry. Prior to each class, Powerpoint lecture slides will be posted to Blackboard. Students should bring a copy of the lecture slides to each class.
- It is the student’s responsibility to come to class prepared by reading the assigned materials in advance. Individual pre-class preparation is essential for a successful learning environment. If you do not prepare in advance of each class session, you cannot effectively contribute to class discussions.
- Homework and in-class problems will be assigned and discussed to assist in the learning of the topics covered. Text book problem solutions will be provided after topics are covered in class sessions.
- Each student will participate in a group presentation of a health care accounting topic assigned by the instructor.
- A mid-term and final examination will be the primary method of assessing learning outcomes. Examinations are primarily objective in format (e.g. multiple choice, true/false) to allow a broad coverage of accounting topics. Extra credit problems will be included on the examinations. This is the only extra credit opportunity that is available.

Learning Outcomes
At the conclusion of this class, students will be able to:
- List the four major financial statements and describe their purpose.
- Demonstrate a solid understanding of generally accepted accounting principles.
- Illustrate the effect of various accounting transactions on the financial statements.
- Summarize key financial reporting areas and risks for health care related entities.
- Perform financial statement analysis to evaluate financial performance.
- Apply accounting knowledge to make informed management decisions.
- Discuss the key components of corporate governance, risk management and ethical financial reporting.
- Show ability to identify and assess internal controls.
- Make oral presentations that clearly apply accounting concepts discussed in class to current health care financial reporting topics.

Curriculum Goals/Competencies
HSM 531 is designed to build students’ knowledge, skills, abilities and values in the following competency areas associated with the NCHL model:

Communication Skills: L6.2 Prepares Effective Written Business Cases or Presentations
Uses accurate and complete presentation of facts; uses logical presentation of arguments pro and con; develops well-reasoned recommendations; prepares concise executive summary.
Communication Skills: L6.3 Makes Persuasive Oral Presentations
Uses clear and understandable voice that is free of extraneous phrases (i.e., “uhm,” and “you know”); uses effective audiovisual media (presentation software, exhibits, etc.); stays on the topic; engages in non-defensive Q&A; stays within time allotment

Financial Skills: L8.1 Explains the Organization’s Financial Metrics and Reports
Uses financial metrics to drive and track the organization’s success; Explains income statement, balance sheet, cash flow; Explains indicators of financial health, especially profitability, and accounting entries through general ledger to revenue

Financial Skills: L8.3 Understands Impact of Reimbursement Models
Assesses reimbursement and payment system alternatives; explains connections between models and behavior of providers and payers; develops incentives; considers impact of reimbursement and payment systems when assessing management alternatives

Performance Measurement; L17.1 Monitors Indicators of Performance
Uses knowledge of customers, markets, and financial and management accounting to track organization performance and financial results

Process Management and Organizational Design: L18.4 Understands the Basics of Organization Governance
Understands governance practices, including board relations, committee structure, and fiduciary, ethics, and clinical review responsibilities

Professionalism: L19.1 Acts Openly and Honestly
Acts consistently and according to organization’s expressed core values; Expresses what he or she believes even when the message may not be welcome; Shares information, insights, or comments when it would be easier to refrain from doing so

General Expectations
- Students are expected to maintain a professional demeanor at all times. This includes:
  - Arriving for classes on time, and remaining attentive throughout.
    - If you need to arrive late to a specific class, communicating this well in advance so that the course director, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
    - If you will need to leave prior to the end of the class session, you should communicate this prior to the beginning of the class, in all cases generally and especially if there is a guest lecturer present. Leaving in the middle of a guest’s lecture without explanation, for any reason (even to go to the bathroom) can be highly disruptive.
  - Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in session. Your full attention during class sessions is a basic expectation of the MS-HSM graduate program. It is also a common courtesy in many formal meetings and an important professional habit to develop.
  - Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate. Dressing professionally sends the message that you are a professional and should be taken seriously. Failing to dress professionally sends the message that you are “just a student.” It reflects poorly not only on yourself but also on your peers.
  - Expressing disagreements respectfully.
- Active participation is critical and expected.
- Listed readings are to be completed prior to the class period listed in the syllabus.
• Assignments are due at the start of the class period listed; lateness, regardless of cause, will result in loss of some credit. Some assignments (e.g. the discussion questions and most pre-work assignments) will not be accepted late.

Policy on Missed Classes
If you are unable to attend a class session, you must inform the instructor and receive class notes from another student. Late assignments will receive NO credit – all assignments must be turned in by the specified date and time.

Assignments
Health Care Revenue Cycle Graded Assignment
The revenue cycle is a complex accounting topic that is a critical element of health care financial statements. Students will be required to complete a problem provided by the instructor.

Financial Statement Analysis Graded Assignment
The ability to utilize financial statement information to assess performance is an important skill. Students will be required to complete a problem provided by the instructor.

Health Care Accounting Group Presentation
A group presentation will be assigned to allow students to demonstrate their ability to research and present health care financial reporting topics.

Grading Scale (Percentage):

<table>
<thead>
<tr>
<th>Percentage Range</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100</td>
<td>A</td>
</tr>
<tr>
<td>80-89</td>
<td>B</td>
</tr>
<tr>
<td>70-79</td>
<td>C</td>
</tr>
<tr>
<td>Below 70</td>
<td>Not passing</td>
</tr>
</tbody>
</table>

Note: Grading scales for examinations may be adjusted based on actual results

Elements of Final Course Grade:

<table>
<thead>
<tr>
<th>Component</th>
<th>Percentage of Course Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graded Assignments (2)</td>
<td>5%</td>
</tr>
<tr>
<td>In-Class Quizzes (4)</td>
<td>10%</td>
</tr>
<tr>
<td>Group Presentation</td>
<td>10%</td>
</tr>
<tr>
<td>Class Participation</td>
<td>5%</td>
</tr>
<tr>
<td><strong>Examinations:</strong></td>
<td></td>
</tr>
<tr>
<td>Mid-Term</td>
<td>35%</td>
</tr>
<tr>
<td>Final (non-cumulative)</td>
<td>35%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

Accommodations
In keeping with its goal to promote diversity among its student population, Rush University is committed to attracting and educating students who will help to make the population of health care professionals representative of the national population, including students with disabilities. In addition, Rush University...
wishes to insure that access to its facilities, programs and services are available to students with disabilities. The University provides reasonable accommodations to all students on a nondiscriminatory basis consistent with legal requirements as outlined in the Americans with Disabilities Act (ADA) of 1990 and the Rehabilitation Act of 1973. A reasonable accommodation is a modification or adjustment to an instructional activity, facility, program or service that enables a qualified student with a disability to have an equal opportunity to participate in all Rush University student activities. To be eligible for accommodations, a student must have a documented disability as defined by the ADA and Section 504 of the Rehabilitation Act of 1973. Both the ADA and Section 504 define disability as (a) a physical or mental impairment that substantially limits one or more major life activities of such individual; (b) a record of such impairment; or (c) being regarded as having such a condition. Further information or questions can be directed to the College of Health Sciences faculty member, Joanne Schupbach. She can be reached at (312) 942-3293 or Joanne_E_Schupbach@rush.edu.

Further information can be found at:  
http://www.rushu.rush.edu/catalog/aboutrush/disabilityrights.html

**Academic Integrity**

Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.

Further information can be found at:  
http://www.rushu.rush.edu/catalog/acadresources/academichonesty.html
<table>
<thead>
<tr>
<th>#</th>
<th>Date</th>
<th>Topics</th>
<th>Pre-Class Readings</th>
<th>Assignments Due</th>
<th>Class Lead</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>9/13</td>
<td>Course Introduction/Health Care Financial Statements</td>
<td></td>
<td></td>
<td>Tom Cutting</td>
</tr>
<tr>
<td>2</td>
<td>9/15</td>
<td>Accounting and Financial Statements</td>
<td>Porter/Norton Chapters 1, 2</td>
<td></td>
<td>Tom Cutting</td>
</tr>
<tr>
<td>3</td>
<td>9/20</td>
<td>Accounting Transactions</td>
<td>Porter/Norton Chapter 3</td>
<td></td>
<td>Tom Cutting</td>
</tr>
<tr>
<td>4</td>
<td>9/22</td>
<td>Income Measurement and Accrual Accounting</td>
<td>Porter/Norton Chapter 4 (exclude Appendix)</td>
<td></td>
<td>Tom Cutting</td>
</tr>
<tr>
<td>5</td>
<td>9/27</td>
<td>Revenue Cycle</td>
<td>Porter/Norton Chapter 7 (pages 335-350)</td>
<td></td>
<td>Tom Cutting</td>
</tr>
<tr>
<td>6</td>
<td>9/29</td>
<td>Revenue Cycle/Graded Assignment</td>
<td></td>
<td></td>
<td>Tom Cutting</td>
</tr>
<tr>
<td>7</td>
<td>10/4</td>
<td>Cash, Investments and Inventories</td>
<td>Porter/Norton Chapter 5 (include Appendix)</td>
<td></td>
<td>Mariella Mercer</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Chapter 6 (pages 294-306)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Chapter 7 (pages 351-358)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>10/6</td>
<td>Fixed Assets and Construction</td>
<td>Porter/Norton Chapter 8</td>
<td>Revenue cycle graded assignment due</td>
<td>Tom Cutting</td>
</tr>
<tr>
<td>9</td>
<td>10/11</td>
<td>Governance, Risk &amp; Control</td>
<td>Porter/Norton Chapter 6 (pages 307-321)</td>
<td></td>
<td>Tom Cutting</td>
</tr>
<tr>
<td>10</td>
<td>10/13</td>
<td>Current and Contingent Liabilities/Mid-Term Exam Review</td>
<td>Porter/Norton Chapter 9 (pages 424-437)</td>
<td>Complete practice mid-term exam</td>
<td>Tom Cutting</td>
</tr>
<tr>
<td>11</td>
<td>10/18</td>
<td>MID-TERM EXAMINATION</td>
<td></td>
<td></td>
<td>Mariella Mercer</td>
</tr>
<tr>
<td>12</td>
<td>10/20</td>
<td>Long-Term Liabilities/Group Presentation Assignments</td>
<td>Porter/Norton Chapter 10 (include Appendix)</td>
<td></td>
<td>Tom Cutting</td>
</tr>
<tr>
<td>13</td>
<td>10/25</td>
<td>Stockholder’s Equity/Net Assets</td>
<td>Porter/Norton Chapter 11 (include Appendix)</td>
<td></td>
<td>Tom Cutting</td>
</tr>
<tr>
<td>14</td>
<td>10/27</td>
<td>Statement of Cash Flows</td>
<td>Porter/Norton Chapter 12 (include Appendix)</td>
<td></td>
<td>Mariella Mercer</td>
</tr>
<tr>
<td>15</td>
<td>11/1</td>
<td>Financial Statement Analysis/Graded Assignment</td>
<td>Porter/Norton Chapter 13 (include Appendix)</td>
<td></td>
<td>Tom Cutting</td>
</tr>
<tr>
<td>16</td>
<td>11/3</td>
<td>Restricted Funds, Endowments &amp; Contributions</td>
<td></td>
<td></td>
<td>Tom Cutting</td>
</tr>
<tr>
<td>#</td>
<td>Topics</td>
<td>Pre-Class Readings</td>
<td>Assignments Due</td>
<td>Class Lead</td>
<td></td>
</tr>
<tr>
<td>----</td>
<td>----------------------------------------------------------</td>
<td>--------------------</td>
<td>------------------------------------------------------</td>
<td>----------------</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Health Care Financial Reporting</td>
<td></td>
<td>Financial statement analysis graded assignment due</td>
<td>Tom Cutting</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Group Presentations</td>
<td></td>
<td>Group Presentations</td>
<td>Mariella Mercer</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Financial Statement Impacts of the Affordable Care Act and Strategic Alternatives – In-class case discussion</td>
<td></td>
<td></td>
<td>Tom Cutting</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>IRS Reporting/Final Exam Review</td>
<td></td>
<td>Complete practice final exam</td>
<td>Tom Cutting</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>FINAL EXAMINATION</td>
<td></td>
<td></td>
<td>Tom Cutting</td>
<td></td>
</tr>
</tbody>
</table>
Detailed Descriptions of Assignments for the Quarter and Grading Rubric for Each

Assignments 1 and 2: Graded Homework Problems
Weighting: 2.5% of final course grade per problem
Due dates: See summary class schedule.

Description: Students are required to complete two health care financial accounting problems provided by the instructor. Solutions to the problem should be submitted by the due date electronically using Blackboard.

Grading Rubric: Problems will be graded using the following grading scale:
- 90%-100% - A
- 80%-89% - B
- 70%-79% - C
- Below 70% - Not Passing

Group Presentation
Weighting: 10% of final course grade
Due date: Assigned by instructor.

Description: The class will be divided into four groups for presentations. Each group will be provided a health care accounting related topic to research and present to the class. The instructor will provide a topic to each group and a member of the Rush University Medical Center management team to interview for the research portion. Each group will make a class presentation covering their assigned topic.

Grading Rubric: The following grading scale will be used for the listed domains:
- 90%-100% - A
- 80%-89% - B
- 70%-79% - C
- Below 70% - Not Passing

1. Topics coverage (70%)
2. Presentation format and delivery (30%)
### Detailed Class Descriptions and Class Objectives

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Objectives</th>
</tr>
</thead>
</table>
| September 13, 2016 | Course Introduction/Health Care Financial Statements | A. Understand the objectives of the HSM 531 course.  
B. Review course syllabus.  
C. Introduce Health Care Financial Statements. |
| September 15, 2016 | Accounting and Financial Statements       | A. Define accounting  
C. Understand the accounting process and flows of accounting information.  
D. Define generally accepted accounting principles and the accounting equation.  
E. Understand the purpose of the four basic financial statements. |
| September 20, 2016 | Accounting Transactions                   | A. Identify the basis for accounting transactions and source documents.  
B. Understand the effects of transactions on the accounting equation.  
C. Define double-entry accounting, chart of accounts and general ledger.  
D. Describe trial balance and journalizing and posting transactions. |
| September 22, 2016 | Income Measurement and Accrual Accounting | A. Define the recognition and measurement of economic transactions.  
B. Define the accrual and cash basis of accounting.  
C. Define accrual accounting and identify types of adjustments.  
D. Understand the monthly and annual accounting closing cycle.  
E. Understand the elements of a typical health care revenue and expense cycle. |
| September 27, 2016 | Revenue Cycle                            | A. Understand the health care revenue cycle components.  
B. Understand the concepts of accounts receivable, uncollectible accounts, charity care and credit losses.  
C. Understand the accounting transactions used to record contractual allowance and bad debt reserves.  
D. Understand different methods of estimating credit losses and writing-off accounts receivable.  
E. Understand the financial reporting impact of revenue cycle transactions. |
| September 29, 2016 | Revenue Cycle (Continued)                |                                                                             |
| October 4, 2016   | Cash, Investments and Inventories        | A. Define cash and cash equivalents.  
B. Understand reporting cash and investments on the balance sheet and statement of cash flows.  
C. Understand methods used to control cash including bank reconciliations.  
D. Understand accounting for investments.  
E. Understand overall concepts related to inventories. |
F. Calculate inventory costing under a perpetual inventory system using the specific identification, weighted average, FIFO and LIFO methods.
G. Analyze the effects of the different inventory costing methods on gross profit and inventory valuation.

October 6, 2016  
**Fixed Assets and Construction**

**Objectives:**
A. Identify the guidelines relating to the initial measurement of property and equipment.
B. Calculate depreciation expense using the straight-line or accelerated depreciation methods.
C. Discuss the nature of and the accounting for intangible assets.
D. Illustrate the balance sheet presentation of fixed and intangible assets.
E. Understand the construction process and its impact on the financial statements.

October 11, 2016  
**Governance, Risk & Control & Mid-Term Exam Review**

**Objectives:**
A. Define internal control.
B. Identify critical control techniques and control limitations.
C. Understand the COSO framework for internal control assessment.
D. Describe Enterprise Risk Management.
E. Describe concepts of corporate governance and ethics.
F. Review Mid-Term Practice Examination and discuss key topics.

October 13, 2016  
**Current and Contingent Liabilities**

**Objectives:**
A. Define current, long-term and contingent liabilities.
B. Discuss and illustrate the difference between known and estimated obligations.
C. Discuss liabilities related to payroll.

October 18, 2016  
**MID-TERM EXAMINATION**

October 20, 2016  
**Long-Term Liabilities**

**Objectives:**
A. Describe types of bonds and the classification of the bonds on the balance sheet.
B. Discuss the relationship of bond prices to interest rates.
C. Illustrate accounting for bond issuance, interest and effective interest amortization.
D. Define and distinguish between capital and operating leases.
E. Introduce the basic accounting for pension and post-retirement benefits.
F. Introduce the basic accounting for professional liability self-insurance.

October 25, 2016  
**Stockholder’s Equity/Net Assets**

**Objectives:**
A. Understand the corporate form of organization.
B. Identity the different types of stock and their basic rights.
C. Describe the accounting for issuances of stock.
D. Define stock splits and treasury stock.
E. Define book value and market value per share of stock.
F. Differentiate cash and stock dividends.
G. Illustrate a retained earnings statement and a statement of stockholders equity.
H. Illustrate the computation and disclosure of earnings per share.
I. Discuss the accounting impact of prior period adjustments, changes in accounting estimates and discontinued operations.

J. Understand the net assets section of a health care entity balance sheet.

**October 27, 2016**

**Statement of Cash Flows**

**Objectives:**

A. Understand the function of the statement of cash flows.
B. Understand the three major classifications of cash flows.
C. Have the ability to prepare a basic statement of cash flows.

**November 1, 2016**

**Financial Statement Analysis**

**Objectives:**

A. Identify sources of financial information for analysts.
B. Define and discuss financial ratios for analyzing profitability, short-term liquidity, long-term solvency and other financial ratios.
C. Calculate ratios.
D. Identify ratios commonly used in the health care industry.

**November 3, 2016**

**Restricted Funds, Endowments & Contributions**

**Objectives:**

A. Understand the various types of restricted fund classifications.
B. Understand the various types of contributions and pledges.
C. Understand the financial statement presentation of restricted funds, endowments and contributions.

**November 8, 2016**

**Health Care Financial Reporting**

**Objectives:**

A. Identify the unique characteristics of health care financial reporting.
B. Identify the various types of footnote disclosures customarily included in health care audited financial statements.
C. Understand the accounting and financial statement impact of key managed care contracting terms.
D. Understand the financial, regulatory and operational issues facing employed physicians, private physicians and medical groups.
E. Understand the unique aspects of joint ventures.
F. Understand financial statement presentation of joint ventures using the equity method or consolidation.

**November 10, 2016**

**Group Presentations**

**Objectives:**

A. Demonstrate the ability to research health care financial reporting topics.
B. Demonstrate the ability to utilize concepts covered in the course to explain assigned topics.
C. Demonstrate the ability to make an effective class presentation.
November 15, 2016  Financial Impacts of the Affordable Care Act and Strategic Alternatives – In-class Case Discussion

Objectives:

A. Understand the accounting and financial statement impact created by the Affordable Care Act (ACA) and strategic decisions.
B. Demonstrate the ability to utilize concepts covered in the course to analyze a real world health care case.
C. Participate in discussion of the in-class case.

November 17, 2016  Income Taxes/Final Exam Review

Objectives:

A. Understand the unique aspects of accounting for income taxes.
B. Understand the forms used and income flow for sole proprietorships, partnerships, corporations and LLCs.
C. Understand the principal federal tax and compliance requirements for not-for-profit status.
D. Review Final Practice Examination and discuss key topics.

November 22, 2016  FINAL EXAMINATION
HSM 536
Corporate Finance

Course Syllabus - Winter 2017
Credit Hours: 4.0

Course Days: Tuesdays and Thursdays
Times: 1:00-2:50 pm
Location: AAC 969

Required Course Textbook(s):

Additional Readings:
Additional readings will be available through Blackboard with advance notice or distributed in class.

Required Financial Calculator:
A financial calculator is required. Models, such as Texas Instruments BAII Plus (recommended), can be purchased for under $30.

Course Description and Primary Aims:
Enables students to understand the concepts and apply the tools of corporate finance and financial management. The overall objectives of the course are to understand the roles, functions and responsibilities of financial officers in managing a health care institution, be able to identify and analyze corporate finance problems and issues in the management of health care institutions, and be able to evaluate the financial performance of institutions in asset and debt management. Cash flow, financial management of assets, timing and uncertainty and access to the capital markets are covered in order to understand the importance of finance to health care operations and strategic planning.
Course Pre-requisites:
Completion of HSM 531, 533 or concurrent

Teaching and Learning Methods Used in this Course:
Lectures, classroom group projects, and presentations and open dialogue.

Learning Outcomes:
At the conclusion of this class, students will be able to:
1. Understand the roles, functions and responsibilities of financial officers in managing a health care institution.
2. Be able to identify and analyze corporate finance problems and issues in the management of health care institutions, including budgeting, long-term planning, and cash management.
3. Be able to evaluate the financial performance of institutions in asset and debt management, working capital management and external financing.
4. Be able to complete corporate finance problems, including time value calculations, capital budgeting, financial ratios, cost of capital, and net present value/IRR problems.
5. Understand the importance of finance and financial decisions in strategic decision making for all healthcare institutions;
6. Articulate through oral and written means corporate finance concepts, and current and relevant issues facing corporations; and
7. Prepare students for additional HSM courses.

Curriculum Goals/Competencies:
HSM 536 is designed to build students’ knowledge, skills, abilities and values in the following competency areas associated with the NCHL model:

1. L.8.1: Explains the Organizations Financial Metrics and Reports. Use financial metrics to drive and track the organization’s success; Explain income statement, balance sheet, cash flow; Explains indicators of financial health, especially profitability, and accounting entries through general ledger to revenue.
2. L.8.4: Evaluates Financial Analyses and Investments. Analyzes rates or return, net present value, cash flow analyses, and risk-return tradeoffs and cost-benefit analyses; Understands basics of insurance rating and actuarial risk.
3. L.17.1: Monitors Indicators of Performance. Uses knowledge of customers, markets, and financial and management accounting to track organization performance and financial results; Implements basic patient tracking and operational measurement systems; Reports results in an accurate timely manner that clearly shows organization of performance.
4. L.18.4: Understand the Basics of Organization Governance. Understands governance practices, including board relations, committee structure, and fiduciary, ethics, and clinical review responsibilities; defines roles and responsibilities of foundations and other auxiliary organizations; uses key governing and regulatory organizations such as state, county, and city governments; uses organization governance to enhance quality, customer satisfaction and performance.
General Expectations

Students are expected to maintain a professional demeanor at all times. This includes:

- Arriving for class on time and remaining attentive throughout.
  - If you need to arrive late to a class or leave prior to the end of a class, communicate this in advance to either the course director or course assistant.
- Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in session. Your full attention during class sessions is a basic expectation of the MS-HSM graduate program. It is also a common courtesy in many formal meetings and an important professional habit to develop.
- Expressing disagreements respectfully.
- Active participation is critical and expected.
- Listed readings are to be completed prior to the class period listed in the syllabus.
- Assignments are due at the start of the class period listed; lateness, regardless of cause, will result in loss of some credit. Some assignments (e.g. the discussion questions and most pre-work assignments) will not be accepted late.

Policy on Missed Classes:

Attendance is mandatory, unless the absence is excused in advance with the instructor.

Grading Scale (Percentage):

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100</td>
<td>A</td>
</tr>
<tr>
<td>80-89</td>
<td>B</td>
</tr>
<tr>
<td>70-79</td>
<td>C</td>
</tr>
<tr>
<td>Below 70</td>
<td>Not passing</td>
</tr>
</tbody>
</table>

Elements of Final Course Grade:

- Class Attendance & Participation: 10%
- Homework: 10%
- Group Project: 20%
- Quizzes: 30%
- Midterm Exam: 15%
- Final Exam: 15%

Class Attendance & Participation (10%)

Class participation and discussion are critical parts of the learning process. Proper preparation for class is essential for valuable contribution. Attendance is mandatory, unless the absence is excused in advance with the instructor. The next page outlines how class attendance, attention, participation and professional demeanor will be evaluated.

Homework (10%)

There will be a total of two graded homework assignments. Each assignment is due at the beginning of class and is to be completed individually. Homework will include problem sets to be described when handed out or posted. Homework will be checked for completion and class time may be used to work through the exercises. Late assignments will not be accepted unless prior arrangements are made with the instructor. Details on assignment dates are provided later in this syllabus.

Group Project (20%)
Two group projects will be assigned at the beginning of the class year. Group composition and sizes will be determined after the first class. Details on the group project, including how it will be evaluated for grading, will be provided when assigned.

**Quizzes (30%)**
A series of three quizzes is part of the student evaluation. Quizzes will be taken during the class period and will focus on specific aspects of the curriculum.

**Midterm Exam (15%)**
The midterm exam will cover chapters 1-8 (excluding chapter 4) and is currently scheduled for February 16th. A midterm review will be given as part of the February 11th class.

**Final Exam (15%)**
The final exam will cover all material up to the midterm plus chapters 9, 10, 12 and 13. The final is currently scheduled for March 16th. A final review will be given as part of the March 11th class.

**Accommodations**
Rush University is committed to attracting and educating students who will help to make the health care profession representative of the national population, including individuals with disabilities. In keeping with Rush University’s mission to promote diversity among its student population and providing equal access to its facilities, programs, services and learning opportunities, the University encourages students with disabilities to engage the Office of Student Disability Services as soon as they begin their program. Students should feel free to contact Marie Ferro-Lusk, Manager of Student Disability Services for Rush University to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings.

Accommodations are not provided retroactively and students are encouraged to register with the Office of Student Disability Services as soon as they begin their program. Additional information can be found online at the Office of Student Disability website or by contacting the Office of Student Disability Services. In order to respect student’s privacy and ensure a thoughtful interactive discussion, students should not make accommodation requests to individual faculty members, lecturers, or course directors, instead please contact:

Marie Ferro-Lusk, MBA, MSW, LSW  
Manager, Student Disability Services  
Rush University  
600 S. Paulina St. Suite 440  
Chicago, IL, 60612  
Phone: (312) 942-5237  
Fax: (312) 942-2778  
Email: marie_s_ferro-lusk@rush.edu  
Website: [https://www.rushu.rush.edu/students-disabilities](https://www.rushu.rush.edu/students-disabilities)

**Academic Integrity**
Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.
<table>
<thead>
<tr>
<th>Criteria Considered in Grading</th>
<th>No Pass</th>
<th>Low</th>
<th>Medium</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class Attendance</td>
<td>Substantially late to or absent from class; no advance explanation provided. More than 3 unexcused absences.</td>
<td>Arrives to class later than the scheduled start time. 3 unexcused absences.</td>
<td>Arrives on time, is seated and ready to begin at class start time. 1-2 unexcused absences.</td>
<td>Arrives on time, is seated and ready to begin at class start time, immediately ceases other activities at the time the class actually starts. All classes attended.</td>
</tr>
<tr>
<td>Participation</td>
<td>Does not ask/answer any questions; does not make comments (or relevant comments) during the session; or significantly derails the agenda of the class.</td>
<td>Does not contribute to class discussion, or participates but comments are off-topic and/or reflective of a lack of preparation (e.g. asking questions that the readings already clearly addressed).</td>
<td>Contributes at a good level (but without dominating); contributions add to (do not derail) the class discussion.</td>
<td>Contributions augment / add to comments from peers; synthesizes / incorporates readings and assignments into the class discussion.</td>
</tr>
<tr>
<td>Attention &amp; Professional Demeanor</td>
<td>Noticeably off-task during a portion of the class and/or distractive to others.</td>
<td>Generally attentive but engages in one or more side conversations or other off-task activities.</td>
<td>Conversations are focused on the in-class discussion.</td>
<td>Conversations are focused on the in-class discussion.</td>
</tr>
<tr>
<td>Professionalism is lacking in one or more major ways (e.g. unprofessional dress, uses derogatory and/or other highly unprofessional language).</td>
<td>Professionalism is lacking in one or more minor ways (e.g. overly casual dress, use of slang and/or disrespectful language).</td>
<td>Class participation reflects a good level of professionalism.</td>
<td>Class participation reflects a noticeably high level of professionalism.</td>
<td></td>
</tr>
<tr>
<td>Wk</td>
<td>Date</td>
<td>Pre-class readings</td>
<td>Assignment(s) / Quiz</td>
<td>Topics / Themes</td>
</tr>
<tr>
<td>----</td>
<td>-------</td>
<td>--------------------</td>
<td>----------------------</td>
<td>----------------</td>
</tr>
<tr>
<td>1</td>
<td>Jan 3</td>
<td>Chapters 1</td>
<td></td>
<td>Introductions / Review Syllabus/Project Assignments</td>
</tr>
<tr>
<td>2</td>
<td>Jan 10</td>
<td>Chapter 3</td>
<td>Governance Projects</td>
<td>Financial Performance</td>
</tr>
<tr>
<td></td>
<td>Jan 12</td>
<td>Chapter 4</td>
<td>Quiz #1 on Chapter 1,2,3,</td>
<td>Time Value of Money</td>
</tr>
<tr>
<td>3</td>
<td>Jan 17</td>
<td>Chapter 4</td>
<td>TMV Problems (Homework)</td>
<td>Time Value of Money</td>
</tr>
<tr>
<td></td>
<td>Jan 19</td>
<td>Chapter 5</td>
<td>Quiz #2 on Time Value of Money</td>
<td>Risk/Return</td>
</tr>
<tr>
<td>4</td>
<td>Jan 24</td>
<td>Chapter 6</td>
<td></td>
<td>Fixed Income Securities</td>
</tr>
<tr>
<td></td>
<td>Jan 26</td>
<td>Chapter 6</td>
<td>Debt Project</td>
<td>Fixed Income Securities</td>
</tr>
<tr>
<td>5</td>
<td>Jan 31</td>
<td>Chapter 7</td>
<td></td>
<td>Common Stock/Equity Securities</td>
</tr>
<tr>
<td></td>
<td>Feb 2</td>
<td>Chapter 7</td>
<td>Equity Project</td>
<td>Common Stock / Equity Securities</td>
</tr>
<tr>
<td>6</td>
<td>Feb 7</td>
<td>Midterm Review</td>
<td>Capstone on Group Project #1/Second Group Project Assignment</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Feb 9</td>
<td>Midterm Exam</td>
<td></td>
<td>Portfolio Construction</td>
</tr>
<tr>
<td>7</td>
<td>Feb 14</td>
<td>TBD</td>
<td>Project Work</td>
<td>Capital Construction</td>
</tr>
<tr>
<td></td>
<td>Feb 16</td>
<td>Chapter 8</td>
<td></td>
<td>Capital Budgeting</td>
</tr>
<tr>
<td>8</td>
<td>Feb 21</td>
<td>Chapters 8</td>
<td>Capital Budgeting Problem (Homework)</td>
<td>Capital Budgeting Problem</td>
</tr>
<tr>
<td></td>
<td>Feb 23</td>
<td>Chapters 11</td>
<td>Quiz #3 on Capital Budgeting</td>
<td>Cost of Capital</td>
</tr>
<tr>
<td>9</td>
<td>Feb 28</td>
<td>Chapter 12,13</td>
<td></td>
<td>Capital Structure</td>
</tr>
<tr>
<td></td>
<td>Mar 2</td>
<td></td>
<td></td>
<td>Current topics impacting healthcare finance</td>
</tr>
<tr>
<td>10</td>
<td>Mar 7</td>
<td></td>
<td>Group Project Presentations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mar 9</td>
<td>Final Review</td>
<td>Group Project Presentations</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Mar 14</td>
<td>Final Exam</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Schedule is subject to change.*
### Detailed Descriptions of Assignments

#### January 3, 2017

**Subject:** Course Introduction; Role & Objective of Financial Management; Financial Marketplace  

**Objectives:**  
A. Summarize course content, expectations, requirements to complete course, grading, etc.  
B. Identify primary goal of investor owned firms and compare that with the primary goal of a not-for-profit firm.  
C. Describe the role of finance in the corporate organization.  
D. Discussion of Group Project and Assignment of Company/Sector  

**Readings:** Chapter 1, “The Role and Objective of Financial Management”

#### January 5, 2017

**Subject:** Financial Marketplace  

**Objectives:**  
A. Group project assigned – details to be provided in class.  
B. Identify the components of the U.S. financial system, i.e., financial assets, markets, and intermediaries.  

**Readings:** Chapter 2, “The Domestic and International Financial Marketplace”  
‘How The Economic Machine Works’ [www.economicprinciples.org](http://www.economicprinciples.org)

#### January 10, 2017

**Subject:** Evaluation of Financial Performance  

**Objectives:**  
A. Review techniques that can be used to evaluate the strengths and weaknesses of a firm.  
B. Discuss credit rating agencies and their evaluation techniques of health care institutions.  
C. Calculate, review and discuss financial health care ratios for selected institutions.  
D. Present company assignment and governance model  

**Readings:** Chapter 3, “Evaluation of Financial Performance”

#### January 12, 2017

**Subject:** Quiz #1 on Chapters 1-3; Time Value of Money  

**Objectives:**  
A. Understand the concept of the time value of money.  
B. Apply principles of the time value of money to calculations in determining present and future value.  

**Reading:** Chapter 4, “The Time Value of Money”
January 17, 2017

Subject: Time Value of Money, continued

Objectives:
A. Calculate net present value, future value, annuities, lump sums.
B. Identify scenarios when healthcare institutions utilize these concepts.
C. Homework problems on TMV to be assigned (completed individually)

January 19, 2017

Subject: Quiz #2 on Chapter 5; Risk and Return

Objectives:
A. Describe fundamentals of risk including 1) risk probability distribution and 2) standard deviation as a measure of risk.
B. Introduce the concept of diversification and its effect on risk and return.
C. Introduce beta as a measure of security risk.
D. Explain the Security Market Line and how to use the capital asset pricing model.

Reading: Chapter 5, "Analysis of Risk and Return"

January 24, 2017

Subject: Securities Valuation - Fixed Income

Objectives:
A. Review the characteristics of fixed income securities.
B. Introduce how securities are valued; apply time value concepts to securities pricing.
D. Utilize basic valuation model to price securities.
D. Calculate yield to maturity.
E. Introduce relationship between risk and return; calculate holding period returns.

Reading: Chapter 6, "Fixed Income Securities: Characteristics and Valuation"

January 26, 2017

Subject: Fixed Income – Portfolio Management, Fixed Income Project
Guest Speaker, TBD

Objectives:
A. Application of fixed income valuation for the purposes of portfolio management
B. Group project assignment - Debt

Reading: TBD – will be available on Blackboard
January 31, 2017

Subject: Common Stock – Characteristics and Valuation

Objectives: A. Review the characteristics of equity securities.

B. Introduce how stocks are valued; apply time value concepts to securities pricing.

C. Utilize basic valuation model to price securities.

Reading: Chapter 7, "Common Stock: Characteristics, Valuation, and Issuance"

February 2, 2017

Subject: Common Stock – Portfolio Management, Equity Project

Guest Speaker: 

Objectives: A. Application of equity valuation for the purposes of portfolio management.

B. Group Project Assignment - Equity

Reading: TBD – will be available on Blackboard

February 7, 2017

Mid-term review/Group Project #1 Capstone Presentation/Group Project #2 Assignment

February 9, 2017

MIDTERM EXAM

February 14, 2017

Subject: Portfolio Construction, Class Project

Objectives: A. Why hospitals have investment portfolios?

B. Develop risk/return objectives for a portfolio.

C. Understand diversification and its impact on risk/return.

D. Project work on Group Project #2

Readings: TBD
February 16, 2017
Subject: Capital Budgeting and Cash Flow Analysis
Objective: 
A. Discuss capital allocation policies in healthcare.
B. Understand and estimate cash flows associated with investment projects, i.e., components of net investment (NINV) and future net operating cash flows (NCF).
Readings: Chapter 8, "Capital Budgeting and Cash Flow Analysis"

February 21, 2017
Subject: Capital Budgeting - Decision Criteria, In Class Problem
Objective: 
A. Develop Net Present Value (NPV) concept.
B. Explore alternative methods to NPV for evaluating projects, e.g., internal rate of return, payback period, capital rationing.
Readings: Chapter 9, "Capital Budgeting Decision Criteria"

February 23, 2017
Subject: Quiz #3 on Chapters 8-9; Cost of Capital
Objective: 
A. Identify the components of the cost of capital.
B. Develop ability to calculate the weighted average cost of capital.
Reading: Chapter 11, “The Cost of Capital”

February 28, 2017
Subject: Capital Structure
Objective: 
A. Understand how a company determines how to determine optimal capital structure
Reading: Chapter 12, 13, “Capital Structure Concepts”

March 2, 2017
Subject: Class participation and discussion of current macro trends, innovation, consumer behavior impacting healthcare finance
Objective: Understand how current trends, projections impact healthcare finance and strategies
Reading: TBD

March 7, 2017
Group Presentations

March 9, 2017
Final Exam Review, Group Presentations

March 14, 2017
FINAL EXAM
College of Health Sciences
Department of Health Systems Management

HSM 552
Health Care Information Systems

Course Syllabus – Winter 2017
Credit Hours: 2

Rev. 12/07/2016

Course Days: Wednesday
Times: 3:00 p.m. – 4:50 p.m.
Location: AAC 971

Course Director:
Jaime Parent, MA, MS, BS
VP, IT Operations, Assoc CIO
Information Technology
HSM: Assistant Professor
Office Phone: 312-942-0640
Office Location: TOB Suite 374
FAX: 312-942-4062
E-mail: Jaime_B_Parent@rush.edu
Office hours:
Friday: 12 – 4 pm
(please schedule by contacting Allie Perez, 312-563-3770)

Course Assistant
Laura Leahy, MHA
Senior Manager, International Patient Services
Northwestern Medicine
676 N St Clair Suite 1785
Cell Phone: 845-242-0604
Office Location: TBD
Email: laurafleahy@gmail.com
Office Hours:
By appointment only

Health Care Information Systems
ISBN: 978-1—118-17353-4

Health Care Information Systems – A Practical Approach for Health Care Management, Third editions
Authors: Karen A Wager, Frances Wickham Lee, John P. Glaser
Publisher: Jossey-Bass

Copyright © 2016 the Department of Health Systems Management, Rush University. All rights reserved worldwide.
Additional Readings:
Articles assigned during course

Course Description and Primary Aims:

The purpose of this course is to prepare future health care executives with the knowledge and skills they need to manage information and information systems. Students will learn the value of information systems from a business and clinical perspective. The course provides a good foundation for any career in health care given the pervasiveness of information systems as well as

Course Pre-requisites:
None

Teaching and Learning Methods Used in this Course:

- Student Teaching Model
- Case Studies
- Teaching Practitioner discussions
- Midterm
- Microsoft visit (non-testable)
- Term paper

Learning Outcomes:

At the conclusion of this class, students will be able to:

1. Identify the major advance in information technology and significant federal initiatives that influenced the adoption of health care information systems
2. Be able to describe the purpose, adoption, use, key attributes, and functions of some of the major types of clinical information systems used in health care
3. Learn current trends in healthcare IT
4. Define health information exchange and discuss efforts that are underway nationally and regionally to promote the exchange of health data across organizations as well as health care standards
5. Understand the basics of information systems related to administrator roles
6. Gain familiarity with infrastructure technology systems and security and their role in healthcare information
7. Add something related to ability to skills from teaching/presenting to class?

Curriculum Goals/Competencies:

Health Care Information Systems (552) is designed to build students' knowledge, skills, abilities and values in the following competency areas associated with the NCHL model:

- L2 Achievement Orientation – A concern for surpassing a standard of excellence. The standard may be one’s own past performance (striving for improvement); and objective measure results orientation); outperforming others (competitiveness); challenging goals, or something that has not been done previously (innovation).
- L2.5 Makes Cost Benefit Analysis – Makes decisions, sets priorities or chooses goals on the basis of calculated inputs and outputs (e.g., makes explicit considerations of potential profit and risks on return on investment); analyzes entrepreneurial opportunities in relation to risks, return on investment, and the scope and magnitude of the investments.

- L5 Collaboration – The ability to work cooperatively with others, to be part of a team, to work together, as opposed to working separately or competitively. Collaboration applies when a person is a member of a group of people functioning as a team, but not the leader.
  - L5.1 Conducts work in a cooperative manner – Supports team decisions; does his or her share of the work; keeps other team members informed and up-to-date about what is happening in the group; shares all relevant or useful information.

- L6 Communication Skills
  - L6.3 Clear and concise communication with references and critical thinking

- L12: Information Technology Management: The ability to see the potential in and understand the use of administrative and clinical technology and decision support tools in process and performance improvement. Actively sponsors their utilization and the continuous upgrading of information management capabilities
  - L12.2 Actively Promotes Information Systems Implementation: Understands PC and network technologies and uses this knowledge to advocate integrated systems that collect, track and share information across local- and wide-area networks; Understands how information technology tools simplify, streamline and improve care, including the ability to make a cogent case for using these tools to clinical and administrative audiences; Personally uses and supports investment in databases, Web-based tools, and information systems
  - L12.4 Seeks and Challenges the Organization to Use Leading-Edge and Developing Information Technology: Stays up to date on the latest developments in information technology; Identifies new opportunities to use latest information technology in the organization. These uses fundamentally alter the way the organization operates or promote wellness; Partners with the latest thinkers and developers to identify and implement breakthrough systems.

- L16 Organizational Awareness: The ability to understand and learn the formal and informal decision-making structures and power relationships in an organization or industry. This includes the ability to identify who the real decision makers are and the individuals who can influence them, and to predict how new events will affect individuals and groups within the organization.
  - L16.1 Uses Formal Structure: Uses the formal structure or hierarchy of an organization to get things done; Understands chain of command, positional power, rules and regulations, policies and procedures, etc.
  - L16.4 Considers Priorities and Values of Multiple Constituencies: Takes time to become familiar with the expectations, priorities, and values of health’s many stakeholders; Recognizes and/or uses ongoing power and political relationships within the constituencies (alliances, rivalries) with a clear sense of organizational impact.

- L20 Project Management: The ability to plan, execute and oversee a multi-year, large-scale project involving significant resources, scope and impact. Examples include the constructions of a major building, implementation of an enterprise-wide system (patient tracking, SAP), or development of a new service line.
  - L20.2 Manages Projects Effectively: Tracks performance against plan and budget; Holds vendors accountable; Holds team members accountable; Reports project outcomes;
Adjusts plan and re-projects; Ensures delivery within prescribed timeframes and budget.

- L20.3 Provides Project Oversight and Sponsorship: Identifies project performance requirements; Defines project requirements; Selects manager; Provides project plan and major decision review and oversight; Acquires resources; Manages major obstacles; Provides project performance reporting review and problem solving.

**General Expectations**

- Students are expected to maintain a professional demeanor at all times. This includes:
  - Arriving for classes on time and remaining attentive throughout.
    - If the student is aware in advance that they will arrive late to a specific class, it is expected that they will communicate this well in advance so that other students and the instructor expect the late arrival.
    - If a student must leave before the end of a class session, this also needs to be communicated prior to the beginning of class.
  - Laptops, cell phones, mobile e-mail devices, and pagers must be off while class is in session.
  - Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate.
  - Expressing disagreements respectfully.
  - Active participation is critical and expected.
  - Listed readings are to be completed prior to the class period listed in the syllabus.

**Policy on Missed Classes:**

Students are responsible to obtain the class content for missed classes from the instructor and fellow students.

**Assignments:**

- Weekly readings with pertinent application to current events
- Classroom teachings, discussion & case studies
- Term paper
- Mid-term exam
Grading Scale
90-100 points = A
80-90 points = B
70-80 points = C
Below 70 points = Not passing

Note: Extra 10 points applied to the overall above score for taking presidential position on term paper.

Elements of Final Course Grade:

- Lecture Presentation 30 points
- Midterm I 20 points
- 2 Case Study Write Ups 20 points
- Term paper (due 3/15) 30 points

Total 100 points

Accommodations
Rush University is committed to attracting and educating students who will help to make the health care profession representative of the national population, including individuals with disabilities. In keeping with Rush University’s mission to promote diversity among its student population and providing equal access to its facilities, programs, services and learning opportunities, the University encourages students with disabilities to engage the Office of Student Disability Services as soon as they begin their program. Students should feel free to contact Marie Ferro-Lusk, Manager of Student Disability Services for Rush University to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings.

Accommodations are not provided retroactively and students are encouraged to register with the Office of Student Disability Services as soon as they begin their program. Additional information can be found online at the Office of Student Disability website or by contacting the Office of Student Disability Services. In order to respect student’s privacy and ensure a thoughtful interactive discussion, students should not make accommodation requests to individual faculty members, lecturers, or course directors, instead please contact:

Marie Ferro-Lusk, MBA, MSW, LSW
Manager, Student Disability Services
Rush University
600 S. Paulina St. Suite 440
Chicago, IL. 60612
Phone: (312) 942-5237
Fax: (312) 942-2778
Email: marie_s_ferro-lusk@rush.edu
Website: https://www.rushu.rush.edu/students-disabilities
Academic Integrity

Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.
<table>
<thead>
<tr>
<th>W</th>
<th>Date</th>
<th>Pre-class readings</th>
<th>Class Summary</th>
<th>Topics / Objectives</th>
<th>Class Lead</th>
</tr>
</thead>
</table>
| 1 | 1/4  | Wager, Chapter 4, Appendix A | Introductions / Career Objective Lecture Discussion | CLASS TOPICS:  
- Instructor & Class Introductions  
- Course Summary & Syllabus Review  
- Introduction to Information Management  
LEARNING OBJECTIVES:  
- To be able to describe the history and evolution of health care information systems from the 1960’s to the present  
- To be able to identify the major advances in IT and significant federal initiative that influenced the adoption of healthcare IT  
- Learn a brief overview of healthcare IT | Jaime Parent |
| 2 | 1/11 | Wager, Chapter 13, 14 | Lecture Presentation Case Study #1 | CLASS TOPICS:  
- IT Alignment and Strategic Planning  
- Strategy Considerations  
LEARNING OBJECTIVES:  
- Understand the importance of an IT strategy  
- Review the components of an IT strategy  
- Be able to define and discuss IT governance  
- Understand IT governance and the importance of technology | Chapter 13: Blake Dobrich Madeline Thompson Shanna Koickal Sruthi Doniparthi  
Chapter 14: Zack Altizer Dallas Dedman Nathan Fullmer Aayush Mittal Benjamin Wetzker |
<table>
<thead>
<tr>
<th>Date</th>
<th>Assignment</th>
<th>Lecture/Case Study</th>
<th>Class Topics</th>
<th>Midterm Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 01/18</td>
<td>Wager, Chapter 15,16</td>
<td>Lecture Presentation</td>
<td><strong>CLASS TOPICS:</strong></td>
<td>Chapter 15:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Case Study #2</td>
<td>• IT Governance and Management and strategy</td>
<td>Girolama Camastra</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Midterm Review</td>
<td>• Management role in major IT initiatives</td>
<td>Tyler Fuez</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• To be able to define the types and importance of strategy</td>
<td>Govinder Gill</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>considerations</td>
<td>Linnea Karlson</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• To be able to define complementary strategies</td>
<td>Heather Watson</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• To be able to discuss strategy evolution</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• To be able to describe governing concepts</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• To be able to outline lessons learned from the use of IT to</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>improve an organizations competitive position</td>
<td></td>
</tr>
<tr>
<td>4 1/25</td>
<td>MIDTERM I (20 points)</td>
<td>Midterm Review</td>
<td><strong>LEARNING OBJECTIVES:</strong></td>
<td>Jaime Parent</td>
</tr>
<tr>
<td></td>
<td>10 multiple choice (1 point each)</td>
<td></td>
<td>• Discuss value in healthcare IT</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Case study question (10 points)</td>
<td></td>
<td>• Understand components of the iT</td>
<td></td>
</tr>
<tr>
<td>5 2/1</td>
<td>Wager, Chapter 17</td>
<td>Midterm answers and discussion</td>
<td><strong>CLASS TOPICS:</strong></td>
<td>Chapter 17:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Lecture</td>
<td>• Assessing and Achieving Value in Health Care Information Systems</td>
<td>Jad Bahhur</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Case Study #3</td>
<td><strong>LEARNING OBJECTIVES:</strong></td>
<td>Jilliam De Mik</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Discuss value in healthcare IT</td>
<td>Carli Schlaker</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Understand components of the iT</td>
<td>Henna Yaqub</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 6 | 2/8 | Wager, Chapter 11 | Lecture  
Case Study #4  
Term paper discussion |
|   |   |   | CLASS TOPICS:  
• History and Evolution of Health Care Information Systems  
• Clinical Information Systems  
LEARNING OBJECTIVES:  
• Understand security aspects of healthcare  
• Understand business continuity and disaster recovery  
• Understand the risks associated with a wide area networks |
|   |   |   | Chapter 11:  
SiddHarth D'Mello-Kamath  
Alicia Foren  
Kalia Mitchell  
Justine Humber |
| 7 | 2/15 | TEACHER PRACTITIONER MODEL #1: | Examples provided. Interactive discussion, real world examples  
Term paper discussion continued |
|   |   |   | CLASS TOPIC  
• Healthcare IT today in a large urban academic center and medical learning institution  
LEARNING OBJECTIVES:  
• Understand IT in the academic setting  
• Learn interactions with the IT department  
• Lessons learned for your career choices |
|   |   |   | Jaime Parent  
Larry Blackburn |
<table>
<thead>
<tr>
<th></th>
<th>Date</th>
<th>Item</th>
<th>Details</th>
<th>Leader</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>2/22</td>
<td>TEACHER PRACTITIONER MODEL #2</td>
<td>Examples provided. Interactive discussion, real world examples</td>
<td>Laura Leahy</td>
</tr>
<tr>
<td></td>
<td></td>
<td>CLASS TOPIC</td>
<td>Hospital administration today in a large urban academic center and medical learning institution, Role of IT</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>LEARNING OBJECTIVES:</td>
<td>Understand administrative services in the academic setting, Learn interactions and the role of IT department administration, Lessons learned applicable to your career choices</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>3/1</td>
<td>Case Study Review</td>
<td></td>
<td>Jaime Parent, Laura Leahy</td>
</tr>
<tr>
<td>10</td>
<td>3/8</td>
<td>Microsoft (NON TESTABLE, take a break and just fun -- you won’t want to miss it)</td>
<td>Site visit</td>
<td>Joey Avraham</td>
</tr>
<tr>
<td></td>
<td></td>
<td>CLASS TOPICS:</td>
<td>Data Center Tour</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>LEARNING OBJECTIVES:</td>
<td>Understand the activity of a large software and hardware organization (non testable)</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>3/15</td>
<td>Hand in term paper or complete in class</td>
<td>Final</td>
<td></td>
</tr>
</tbody>
</table>

**Term Paper Rubric**
Scope:
Information learned from text
Information learned from Case Studies
Information learned from Teacher-Practitioner class
Information you research on your own

Student: ________________________________

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Points earned</th>
<th>Points possible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clear and detailed background and current state of your selected topic</td>
<td></td>
<td>15</td>
</tr>
<tr>
<td>based upon lectures, case studies and/or teacher Practitioner lessons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Submission is 8 – 10 pages long double spaced</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Overall readability, grammar, and spelling</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Three arguments to support narrative</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>Five references (1 Wikipedia ok)</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Exam submitted on time</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>30</td>
</tr>
</tbody>
</table>

Your paper can cover one, some or all of the topics below:
1. The importance of security in healthcare today
2. The future of ACA
3. Predictions for healthcare IT in 2025?
4. How healthcare delivery will change over the next 10 years
5. The role of government going forward
6. The role of cloud computing
7. The role of mobile computing
8. The role of device development through start-up organizations
9. Your pre-approved idea here

Write your paper from the following perspective:

1. I am a clinic administrator
2. I am an IT Executive
3. I am a state regulatory agency
4. I am a board of trustee member who uses the hospital services
5. I am a Chicago Tribune columnist
6. I am a politician lobbying for improvement in the healthcare system
7. Your pre-approved idea here

Examples:

1. I am a clinic administrator sharing my view on security
2. I am a board member concerned about my role as leader and potential patient
3. I am an entrepreneur who wants to invest in healthcare IT
4. I am a government leader predicting the role of government in healthcare IT
5. Your pre-approved idea here

Team Presentation Summary:
Each week, a group of students will be assigned to “teach” the course content for that week to their cohort. Team sizes range, and multiple teams may present course content in one week. Students will be provided PowerPoint slides from the textbook, but are welcome to make adjustments to suite the style and format of their presentation. Examples and real-world stories are encouraged. Presentations will range in the amount of time they take, but each team member should speak for at least 3-4 minutes. Each member of the team will be graded based on the rubric provided below.

Grades will be assigned as follows:
Content and Format – 4 points
Delivery Skills – 8 points
Content Knowledge – 16 points
Speaking allotted time – 2 points

<table>
<thead>
<tr>
<th>Presentation Component</th>
<th>Level 1 Minimal</th>
<th>Level 2 Emerging</th>
<th>Level 3 Competent</th>
<th>Level 4 Exemplary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Content &amp; Format – 4 Total Possible Points</td>
<td>The presentation generally rambles on with little or no construction. The main points are not stated upfront and the body section begins quickly. Discussion of the main points meanders with little or no logical support. The closing is weak and comes to an end with little or no recommendations or conclusions.</td>
<td>The presentation has a faulty design with opening, body and closing not easily being delineated. The main points in the opening may contain too much information that would typically be put into the body. The body contains relevant information but does not flow well. The closing may not restate the main points or moves to a quick close.</td>
<td>The presentation has an acceptable design with a good opening, body and closing. The opening introduces the subject and the main points are stated but may not be clear. The body covers the main points broadly with little or no supporting information and could use more depth. The closing may restate the main points covered but moves to a close with little or no conviction.</td>
<td>The presentation is well designed with an excellent opening, body and closing. The opening introduces the subject using a creative attention-getter, and the main points are stated clearly. The body discusses the main points in depth with appropriate supporting information. The closing summarizes the main points and the conclusions/recommendations are logical bringing the presentation to a strong close.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Presentation Component</th>
<th>Level 1 Minimal</th>
<th>Level 2 Emerging</th>
<th>Level 3 Competent</th>
<th>Level 4 Exemplary</th>
</tr>
</thead>
</table>

Copyright © 2016 the Department of Health Systems Management, Rush University. All rights reserved worldwide.
<table>
<thead>
<tr>
<th>Delivery skills - 8 Total Possible Points</th>
<th>Greater voice level &amp; modulation needed for the size of the room. Eye contact is non-existent or very superficial. Little or no appropriate gestures &amp; movement around the room. Does not address audience directly but reads slide information with back to audience. Shows little or no energy in the delivery.</th>
<th>Voice level &amp; modulation need improvement for size of the room. Eye contact is minimal and much scanning the audience exists. Gestures &amp; movements are labored and/or repetitive. Reads much slide information from screen, not addressing the audience. Little energy &amp; enthusiasm shown in the delivery.</th>
<th>Voice level &amp; modulation is acceptable for the size of the room. Good eye contact with individual audience members but some scanning exists. Gestures &amp; movements are reasonable but may seem unnatural. Mostly addresses audience directly but occasionally turns back to audience to read slide information. Some enthusiasm &amp; energy shown in the delivery.</th>
<th>Voice level &amp; modulation is appropriate for the room. Eye contact is deliberate and direct contact is made with audience members. Gestures &amp; movements are appropriate for the topic and natural. Addresses audience directly using computer screen as a prompter for slide information. Much enthusiasm and energy shown in the delivery.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Content Knowledge - 16 Total Possible Points</td>
<td>Student does not have grasp of information, student cannot answer questions about the basic concepts.</td>
<td>Student demonstrates a slight grasp of basic business concepts, student can answer rudimentary questions about the basic concepts.</td>
<td>Student demonstrates considerable knowledge; is at ease in answering questions related to concepts, but does not apply to a scenario</td>
<td>Student demonstrates full knowledge (more than required) by answering all class questions with explanations and elaboration</td>
</tr>
</tbody>
</table>
Case Studies (15 points each, 30 points total)

During each class, students will work through a case study based on the content discussed in class. Students will work independently or with team mates to answer a series of questions around the case, drawing their answers from course content and supporting context from other classes or experiences. Multi-part questions will be asked to gauge the students understanding of the questions and concepts. The case studies will be reviewed in each class as a full group, during which students are encouraged to consider additional perspective from classmates.

By 3/1, students will formally write up responses to two case studies of their choosing. Case studies selected should reflect a particular interest for the student. Sourcing references is not required, nor is additional research beyond what is discussed in class. This is meant to be a thoughtful, analytic problem solving method, using the tools provided in the HSM program. Each case study has a possible 15 points for the students grade.
College of Health Sciences  
Department of Health Systems Management

HSM 551  
Health Informatics  
Course Syllabus – Spring 2017  
Credit Hours: 2

Course Days: Wednesday  
Times: 1:00 p.m. – 2:50 p.m.  
Location: AAC 952

Course Director:  
Steven Wightkin MA, MS  
AVP, Information Systems  
Office: 312-942-5947  
Steven_wightkin@rush.edu  
Office Hours: by appointment

Co –Director:  
Larry Blackburn, MSHI  
Director of Data Development  
Lurie Children’s Hospital  
Office: 630-338-9353  
lblackburn@luriechildrens.com  
Office Hours: by appointment

Course Pre-requisites:  
HSM-552.

Required Course Textbook(s):  
None

Additional Readings:  
Articles assigned during course (see syllabus)

Course Description and Principles:  
This class provides students with an introduction to Health Informatics, a field concerned with the use of information technology in healthcare. The course will provide students with an understanding of the application of health information technology.
Teaching and Learning Methods Used in this Course:
- Team Activities
- In Class Presentations and participation
- Lectures
- Case Study
- Investigation
- Discussion
- Reading

Learning Outcomes:
At the conclusion of this class, students will understand the following core health informatics principles:
- Health information technology (HIT) holds promise for improving healthcare delivery but there are many barriers to widespread adoption of HIT as well as unintended consequences.
- The transformation of healthcare data into information and knowledge is impacted by challenges with data workflows, standards, and privacy, and the resulting quality of the collected data.
- Health informatics demands are shaped by Regulatory, policy and business requirements.

Curriculum Goals/Competencies:
HSM 551 is designed to build students’ competencies in the following competency areas associated with the National Center for Healthcare Leadership model:
- Analytical thinking (level achieved: 3.3)
- Information seeking (level achieved: 11.3)
- Performance measurement (level achieved: 17.2)

General Expectations
- Students are expected to maintain a professional demeanor at all times. This includes:
  - Arriving for classes on time, and remaining attentive throughout.
  - If you need to arrive late to a specific class, communicating this well in advance so that the course director, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
  - If you will need to leave prior to the end of the class session, you should communicate this prior to the beginning of the class, in all cases generally and especially if there is a guest lecturer present. Leaving in the middle of a guest’s lecture without explanation, for any reason (even to go to the bathroom) can be highly disruptive.
  - Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in session. Your full attention during class sessions is a basic expectation of the MS-HSM graduate program. It is also a common courtesy in many formal meetings and an important professional habit to develop.
  - Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate. Dressing professionally sends the message that you are a professional and should be taken seriously. Failing to dress professionally sends the message that you are “just a student.” It reflects poorly not only on yourself but also on your peers.
  - Expressing disagreements respectfully.
• Active participation is critical and expected.
• Listed readings are to be completed prior to the class period listed in the syllabus.
• Assignments are due at the start of the class period listed; lateness, regardless of cause, will result in loss of some credit. Some assignments (e.g. the discussion questions and most pre-work assignments) will not be accepted late.
• Students are expected to attend the scheduled lecture, prepare for the lectures, and complete the suggested readings.
• All submitted course material is expected to be of professional quality in terms of content, format, and presentation.

Policy on Missed Classes:
Students are responsible to obtain the class content for missed classes from the instructor and fellow students.

Grading Scale (Points):

<table>
<thead>
<tr>
<th>Points Range</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100</td>
<td>A</td>
</tr>
<tr>
<td>80-89</td>
<td>B</td>
</tr>
<tr>
<td>70-79</td>
<td>C</td>
</tr>
<tr>
<td>Below 70</td>
<td>Not passing</td>
</tr>
</tbody>
</table>

Elements of Final Course Grade:

- Class Participation: 5 pts
- Group Participation: 5 pts
- HIPAA Breach case example: 10 pts
- Case Study 1: 20 pts
- Case Study 2: 20 pts
- Data Case Study:
  - Data analysis: 10 pts
  - Data visualization: 10 pts
- Policy Activity:
  - Infographic Poster: 5 pts
  - Case study: 5 pts
- Final Exam: 10 pts
- 100 pts

**Extra Credit – Research a real world HIT and apply the informatics Principles that are covered in class: 5 pts

Academic Integrity
Rush University students and faculty belong to an academic community with high scholarly standards. As essential as academic honesty is to the relationship of trust fundamental to the educational process, academic dishonesty violates one of the most basic ethical principles of an academic community, and will result in
sanctions imposed under the University's disciplinary system. A partial list of academically dishonest behaviors that would subject a student to disciplinary action includes cheating, fabrication, facilitating academic dishonesty, plagiarism, and unauthorized examination behavior.

Further information can be found at:
http://www.rushu.rush.edu/catalog/acadresources/academichonesty.html

The College of Health Sciences will not condone cheating in any form. Allegations of cheating will be reviewed by the departmental Committee on Progress and Promotions. Any student found to be cheating on an examination may receive a “0” for the examination and will be subject to formal disciplinary action, which may include suspension or dismissal from the program. Failure to report incidents involving scholastic dishonesty on the part of another student will be considered unprofessional conduct and may also result in disciplinary action. Students should refer to the Rush University Policy on Academic Honesty for further information.

Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.

Rush University Policies And Procedures For Students With Disabilities

Rush University is committed to attracting and educating students who will help to make the health care profession representative of the national population, including individuals with disabilities. In keeping with Rush University’s mission to promote diversity among its student population and providing equal access to its facilities, programs, services and learning opportunities, the University encourages students with disabilities to engage the Office of Student Disability Services as soon as they begin their program. Students should feel free to contact Marie Ferro-Lusk, Manager of Student Disability Services for Rush University to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings.

Accommodations are not provided retroactively and students are encouraged to register with the Office of Student Disability Services as soon as they begin their program. Additional information can be found online at the Office of Student Disability website or by contacting the Office of Student Disability Services. In order to respect student’s privacy and ensure a thoughtful interactive discussion, students should not make accommodation requests to individual faculty members, lecturers, or course directors, instead please contact:

Marie Ferro-Lusk, MBA, MSW, LSW
Manager, Student Disability Services
Rush University
600 S. Paulina St. Suite 440
Chicago, IL. 60612
Phone: (312) 942-5237
Fax: (312) 942-2778
Email: marie_s_ferro-lusk@rush.edu
Website: https://www.rushu.rush.edu/students-disabilities

Academic Integrity
Rush University students and faculty belong to an academic community with high scholarly standards. As
essential as academic honesty is to the relationship of trust fundamental to the educational process, academic dishonesty violates one of the most basic ethical principles of an academic community, and will result in sanctions imposed under the University's disciplinary system. A partial list of academically dishonest behaviors that would subject a student to disciplinary action includes cheating, fabrication, facilitating academic dishonesty, plagiarism, and unauthorized examination behavior.

Further information can be found at:
http://www.rushu.rush.edu/catalog/acadresources/academichonesty.html

The College of Health Sciences will not condone cheating in any form. Allegations of cheating will be reviewed by the departmental Committee on Progress and Promotions. Any student found to be cheating on an examination may receive a “0” for the examination and will be subject to formal disciplinary action, which may include suspension or dismissal from the program. Failure to report incidents involving scholastic dishonesty on the part of another student will be considered unprofessional conduct and may also result in disciplinary action. Students should refer to the Rush University Policy on Academic Honesty for further information.

Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.

Rush University Policies And Procedures For Students With Disabilities

Rush University is committed to attracting and educating students who will help to make the health care profession representative of the national population, including individuals with disabilities. In keeping with Rush University’s mission to promote diversity among its student population and providing equal access to its facilities, programs, services and learning opportunities, the University encourages students with disabilities to engage the Office of Student Disability Services as soon as they begin their program. Students should feel free to contact Marie Ferro-Lusk, Manager of Student Disability Services for Rush University to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings.

Accommodations are not provided retroactively and students are encouraged to register with the Office of Student Disability Services as soon as they begin their program. Additional information can be found online at the Office of Student Disability website or by contacting the Office of Student Disability Services. In order to respect student’s privacy and ensure a thoughtful interactive discussion, students should not make accommodation requests to individual faculty members, lecturers, or course directors, instead please contact:

Marie Ferro-Lusk, MBA, MSW, LSW
Manager, Student Disability Services
Rush University
600 S. Paulina St. Suite 440
Chicago, IL. 60612
Phone: (312) 942-5237
Fax: (312) 942-2778
Email: marie_s_ferro-lusk@rush.edu
Website: https://www.rushu.rush.edu/students-disabilities
<table>
<thead>
<tr>
<th>W</th>
<th>Date</th>
<th>Topics</th>
<th>Pre-class readings (all readings will be posted in Blackboard)</th>
<th>Assignment(s) Due (due start of class)</th>
<th>In-Class</th>
<th>Class Lead</th>
</tr>
</thead>
</table>
| 1 | 3/29 | • What is Health Informatics?  
• System Overview | N/A | N/A | • Introductions, Syllabus Review  
• Lecture & Discussion  
• Group assignments | Larry Blackburn  
Steve Wightkin |
| | | | | | | |
| 2 | 4/5  | • Informatics Principle 1  
   o Promise of HIT  
   o Barriers to HIT Adoption  
   o Unintended consequences of HIT | Readings posted in Blackboard | None | • Reading Summary & Discussion  
• Lecture – Principle 1  
• Policy topic chosen | Steve |
| | | | | | | |
| 3 | 4/12 | • Applied Informatics - EHR | Readings posted in Blackboard | None | • Reading Summary & Discussion  
• Guest lecture - EHR review & discussion  
• Small group activity  
• Review Breach assignment requirements | Jordan Dale |
| | | | | | | |
| 4 | 4/19 | • Informatics Principle 2  
   o Data Privacy  
   o Data Security | Readings posted in Blackboard | • Breach assignment | • Reading Summary & Discussion  
• Guest lecture – Privacy & Security  
• Small group activity  
• Review Data Case Study | Andy Reeder |
## Class Schedule

<table>
<thead>
<tr>
<th>W</th>
<th>Date</th>
<th>Topics</th>
<th>Pre-class readings (all readings will be posted in Blackboard)</th>
<th>Assignment(s) Due (due start of class)</th>
<th>In-Class</th>
<th>Class Lead</th>
</tr>
</thead>
</table>
| 5 | 4/26 | • Informatics Principle 2  
  o Data Workflow  
  o Data Standards  
  o Data Quality | • Readings posted in Blackboard | • Policy infographics poster  
  • Data analysis | • Reading Summary & Discussion  
  • Lecture – Principle 2  
  • Data Case Study – Part 1 | Larry |
| 6 | 5/3  | • Data Case Study | | • Data Case Study | • Data Case Study – Part 2  
  • Case study prep | Larry |
| 7 | 5/10 | • Applied Informatics – Infection Control | • Case Study 1 | • Case Study 1 group analysis | • Guest lecture  
  • Group review of case study | Michael Linn |
| 8 | 5/17 | • Applied Informatics – | • Case Study 2 | • Case Study 2 group analysis | • Guest lecture  
  • Group review of case study | Bala Hota |
| 9 | 5/24 | • Principle 3 | • Readings posted in Blackboard | • Group policy case studies | • Group activity | Steve & Larry |
| 10 | 6/1 | • Final Exam | | | • Final Exam |
## Written Summary Rubric

<table>
<thead>
<tr>
<th>Points per Component</th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Content</strong></td>
<td>Clearly understands the assignment. Document develops a central theme directed towards the appropriate audience. Data presented is appropriate to audience. Makes the point that writer wants to prove. Major points supported by details, examples or analysis. The conclusion calls the reader to action.</td>
<td>Consistently easy to follow, logical. Addresses specific needs of audience but lacking an action close. There is a logical flow to the paper. There are still elements of the assignment that are addressed in a way that does not show clear understanding.</td>
<td>Includes some contradictory statements between and among sections of paper. Misses target audience needs to some extent.</td>
<td>Difficult to follow; illogical. Does not understand the assignment in depth. Does not understand the audience and its needs. Total misunderstanding of relevant material. Contains only restated information but does not demonstrate ability to apply the information or concepts.</td>
</tr>
<tr>
<td><strong>Organization</strong></td>
<td>The title(s) lead(s) reader into the writer’s message. Makes connections between the materials in different sections of project. Major points organized logically.</td>
<td>Logical and generally well organized.</td>
<td>Some sense of organization comes out clearly.</td>
<td>Disorganized and difficult to understand. Little or no sense of planning prior to committing words to paper.</td>
</tr>
<tr>
<td><strong>Readability</strong></td>
<td>Sentences are complete, clear and concise. Includes reader aids such as subheaders, headlines, subject lines, appropriate bullet points, lists, etc. Appropriate use of white space. Took initiative to seek out additional or supplemental ways to present information (such as graphs, graphics, photos, etc.) that add value to the document.</td>
<td>Generally attractive document including reader aids, use of charts/graphs/tables. Some flaws in major points. Tone fits audience and subject matter. Reasonable attempt at using white space.</td>
<td>Some attempt at crafting the appearance and readability of the document. Wholly conventional reader aids and subheaders.</td>
<td>Long, difficult to read paragraphs. No reader aids. No subheadings and/or headline to interest the reader in reading. Physically unattractive document with poor use of white space and format.</td>
</tr>
<tr>
<td><strong>Style</strong></td>
<td>Well crafted and interesting style in keeping with the writer’s personality and the audience’s</td>
<td>Style is both personal and professional, generally matching the writer’s personality and</td>
<td>Inconsistent style – sometimes stream-of-consciousness, sometimes more professional.</td>
<td>Wholly lacking personal and professional style appropriate to the writer and the audience.</td>
</tr>
<tr>
<td></td>
<td>needs and desires. Uses effective language throughout. Concepts come clear on the first reading. Provides multiple examples of application of concepts and techniques to the assignment as well as in real-world application.</td>
<td>audience’s needs. Style helps make readers want to read through the document.</td>
<td>Might require multiple readings to get the point.</td>
<td>Difficult to read and often requires multiple reading to be understood.</td>
</tr>
<tr>
<td>---------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Mechanics</strong></td>
<td>Major points are stated clearly. The tone is appropriate to the content and assignment. Writes with clarity. Correct use of vocabulary. Sentences are well constructed and maintain the flow of thought. Citations of original works follow the accepted guidelines.</td>
<td>No significant issues of spelling, grammar, punctuation or sentence structure. No significant issues with citations (when required).</td>
<td>Minor spelling, grammar and punctuation errors or possibly exceeded page constraints. May include citations but not in an accepted format; not all appropriate materials correctly cited. It is questionable whether or not the references contributed to the assignment.</td>
<td>Major errors in format, spelling, punctuation and English grammar. Citations missing (if required) or incomplete. No reference to the course materials.</td>
</tr>
</tbody>
</table>
Assignments

Class Participation - 5 pts
Points will be earned for class participation by doing any of the following:
- Reading Summary
- Asking a question
- Responding to a question
- Group reporter
- Present breach case
Points are based on the frequency of participation:
2x – 2 points
3x – 3 points
>3x – 5 points

Group Participation – 5pts
Group work is an important element of this class. To ensure each student is properly participating and contributing to each group effort, group members will evaluate each other. These evaluations will be used to determine points received.
Total possible: 5 points

HIPAA Breach case example – 10 pts
Each student will research and prepare a 1 page summary of a reported PHI breach that occurred in a state beginning with the first initial of either their first or last name. Students will volunteer to discuss their example with class.

Summary to cover the following:
- Description of how breach occurred
- Impact to institution, both financial and reputational
- Remediation steps to prevent future occurrences, both actually taken and those recommended by student

Data Case Study

Data Analysis -10 pts
Each student will submit an analysis of the data set.

Data visualization – 10 pts
Each student will submit a dashboard using a data visualization tool.

Case Study Analysis – 20 pts each
Small groups will be assigned for each Case Study. Groups will complete a Case Study Analysis Template document and present their analysis in class.

Policy Activity

Infographic Poster - 5 pts

Working in your groups, learners will be assigned policy topic affecting informatics. The learners will develop a one sided poster detailing the policy and its informatics requirements. Include selected sources/references to refer your reader. Posters should be designed in PowerPoint using dimensions 30”x 20” (vertical orientation). The poster design does not need to follow the format of professional poster display. Learners are encouraged to be creative with the use of text, graphics, and visual images to present the information. Have fun with this assignment! All posters will be posted to share with the class. Feel free to google “infographic examples” for inspiration.

Case Study - 5 pts
Groups will develop their own case study based on your policy. Groups can decide whether to use a retrospective (outcome of data is suspect, why?) or prospective (how to implement some new regulation?) approach.
These case studies will be discussed in class.

**Final Exam – 10 pts**
The final exam will be a mixture of essay questions, multiple choice and True/False questions.
College of Health Sciences  
Department of Health Systems Management  

HSM 550 (1) – A, B, C  
HSM Internship  
Course Syllabus – Fall, Winter and Spring Quarters, Academic Year 2016-2017  
Credit Hours: Total of 3 credit hours for the full Internship  

Rev. 2015-8-25  

Course Dates: 9/14, 9/15, 9/21, 9/22, 9/28, and 10/5  
Room: METC 903  
Times: 10:00 AM to 12:00 Noon  

Course Director:  
Internship Section  
Jeff Canar, PhD  
Assistant Professor, Department of Health Systems Management  
Office Phone: 312-942-7455  
Jeff_Canar@rush.edu  
Office hours: Available upon request  

Course Co-Director:  
Data Management Section  
Amanda P. Tosto, R.N., M.S.  
Director, System Integration and Population Health  
Practitioner Faculty, Department of Health Systems Management  
Office Phone: 312-942-4116  
amanda_tosto@rush.edu  
Office hours: Available upon request  

Course Co-Director:  
Data Management Section  
Thomas A. Webb  
Manager, Clinical Program Redesign  
Adjunct Faculty, Department of Health Systems Management  
Office Phone: 312-942-7443  
thomas_a_webb@rush.edu  
Office hours: Available upon request  

Optional Course Textbook (s):  
Diane Koers, Excel 2007 Just the Steps For Dummies (ISBN: 978-0470501641), June 2010  

Additional Readings: Summary Class Schedule and Selected Readings book (Distributed during the 1st class)
Course Description and Primary Aims:
The HSM internship requires a minimum of 440 hours of real world work experience in a health care organization. HSM fulltime students will almost always fulfill this requirement through part-time jobs within Rush University Medical Center or its affiliates during their first year in the program; however, fulltime students do have the option of fulfilling the requirement through a more traditional summer internship that they identify and secure. The internship emphasizes the 10 distinguishing competencies contained within the full set of 26 competencies for the National Center for Healthcare Leadership; these include: accountability, achievement orientation, leadership, collaboration, communication skills, professionalism, project management, and self-confidence. Demonstration of behavior consistent with the Rush ICARE values is also expected. During the first quarter, data management sessions will build upon basic and intermediate Excel knowledge. Data management skills are further strengthened to handle real world data challenges (i.e., domain and data understanding, data cleaning, data transformation, output generation, and creating reports and dashboards) to facilitate decision making.

This syllabus also contains:
- **Addendum A**: A description of what an “ideal” internship might entail, with the elements and characteristics currently required to meet the minimum expectations bolded. While it is unlikely that all internship experiences will encompass every one of the characteristics or meet all of the expectations of the ideal, the description should be seen as an model toward which the HSM program, preceptors and students strive. Also contained in this description is a set of required minimum expectations for all Rush HSM-1 Internships.
- **Addendum B**: Expectations about the qualifications and positioning of Rush HSM internship preceptors.
- **Addendum C**: A list of practice experiences all HSM students should have by graduation. These experiences may be obtained within the scope of the student’s formal HSM Internship placement, in a course, full or part-time job, through other organized efforts of the HSM Program, or through volunteer or community service efforts.

Course Pre-requisites: A basic knowledge of computer workstation manipulation, particularly file management and basic Excel skills.

Teaching and Learning Methods Used in this Course:

**Internship Section:**
This course provides an opportunity for every MS-HSM student to obtain applied, experiential learning in a practice setting within RUMC or another approved (by the Director of Operations and Faculty Development) health care organization. This course requires a minimum of 440 hours of applied work experience in a health care organization under the direction and guidance of a health care manager who serves as the student’s internship preceptor. Students are matched to part-time jobs, within Rush, with preceptors who also have an appointment as an HSM faculty member. In addition to the minimum number of hours students must work during each of the three quarters within the first academic year in the program, students are required to participate in additional activities such as resume and interviewing clinic; job interviews and matching process; periodic meetings of the cohort to discuss job issues and challenges; internship site-visit between academic adviser, student and preceptor; lunch-and-learn sharing sessions with the entire cohort; and assurance of completion of both Student and Preceptor Internship evaluation surveys.

**Data Management Section:**
The teaching and learning methods used this course will include the following:
- Short Lectures
- Hands-on experience
• Scenario based introduction of tools and skills
• Projects based on actual problems and data

Learning Outcomes:

Data Management Section:
At the conclusion of this class, students will be able to:
1. Demonstrate intermediate level of data management skills (mainly using Microsoft Excel).
2. Analyze data as well as generate and present solutions for stakeholder request.

Curriculum Goals/Competencies:
HSM 550-A, B, C is designed to build students’ knowledge, skills, abilities and values in the following competency areas associated for the 10 “distinguishing competencies”, plus Professionalism and Analytical Thinking (from the full list of 26 NCHL competencies); in addition to the NCHL competencies, demonstration of the Rush ICARE values are also included as a behavioral expectation.

Upon successful completion of the Data Management and Internship sections, the student will be able to perform the skills necessary to develop and sustain their careers. They will also be able to demonstrate progress toward competencies that are most relevant to an entry level position in health care management.

L1. Accountability - The ability to hold people accountable to standards of performance or ensure compliance using the power of one’s position or force of personality appropriately and effectively, with the long-term good of the organization in mind.

L.1. 2 Sets Limits – Establishes high but achievable performance, quality and resource utilization standards; Firmly says no to unreasonable requests; Sets limits for others’ behavior and actions; Limits others’ options to force them to make desired resources available.

L2. Achievement Orientation – A concern for surpassing a standard of excellence (e.g. one’s own past performance; an objective measure (results orientation); outperforming others (competitiveness); challenging goals, or something that has not yet been done (innovation).

L.2.1 Wants to Do Job Well – Tries to do the job well or right; Expresses a desire to do better; Expresses frustration at waste or inefficiency; Delivers expected results in line with job requirements.

L6. Communication Skills - The ability to speak and write in a clear, logical, and grammatical manner in formal and informal situations to prepare cogent business presentations, and to facilitate a group.

L6.2 Prepares Effective Written Business Cases or Presentations – Uses accurate and complete presentation facts; Uses logical presentation of arguments pro and con; Develops well-reasoned recommendations; Prepares concise executive summary

L8. Financial Skills - The ability to understand and explain financial and accounting information, prepare and manage budgets, and make sound long-term investment decisions.

L10. Impact and Influence – The ability to persuade, convince, influence, or impress others (individuals or groups) in order to get them to go along with or to support one’s opinion or position.

L.10.2 Takes A Single Action To Persuade – Uses direct persuasion in a discussion or presentation; Appeals to reason, data, others’ self-interest; Uses concrete examples, visual aids, demonstrations, etc. Makes no apparent attempt to adapt presentation to the interest and level of the audience.
L12. **Information Technology Management** - The ability to see the potential in and understand the use of administrative and clinical technology and decision-support tools in process and performance improvement.

   L12.1 Recognizes the Potential of Information Systems in Process and Patient Service Improvement Is familiar with current technology for patient tracking (especially registration, billing and records management), financial automation and reporting, and reimbursement management; Is open to automation of paper-based processes.

L17. **Performance Measurement** - The ability to understand and use statistical and financial methods and metrics to set goals and measure clinical as well as organizational performance; commitment to and employment of evidence-based techniques.

L18. **Process Management & Organizational Design** - The ability to analyze and design or improve an organizational process, including incorporating the principles of quality management as well as customer satisfaction.

L20. **Project Management** - The ability to plan, execute, and oversee a multi-year, large-scale project involving significant resources, scope, and impact. *(Note for the internship, specifically: Project Management can be considered in the context of time management as well)*

L22. **Self-Confidence** – A belief in one’s own capability to accomplish a task and select an effective approach to a task or problem. Includes confidence in one’s ability as expressed in increasingly challenging circumstances and confidence in one’s decisions or opinions.

   L22.1 Seeks Feedback – Routinely seeks feedback from others, including those who are likely to be critical; Appreciates the need to learn and grow.

L19. **Professionalism** – The demonstration of ethics, sound professional practices, social accountability, and community stewardship. The desire to act in a way that is consistent with one’s values and what one says is important.

   L19.1 Acts Openly and Honestly – Acts consistently and according to organization’s expressed core values; Deals with staff, public and government in an open and truthful manner; Expresses what he or she believes even when the message may not be welcome; Shares information, insights, or comments when it would be easier to refrain from doing so.

L3. **Analytical Thinking:** The ability to understand a situation, issue, or problem by breaking it into smaller pieces or tracing its implications in a step-by-step way. It includes organizing the parts of a situation, issue, or problem systematically; making systematic comparisons of different features or aspects; setting priorities on a rational basis; and identifying time sequences, causal relationships, or if-then relationships.

   L3.2 Identifies Basic Relationships: Identifies the cause-and-effect relationship between two aspects of a situation; Separates situations into two parts: pro and con; Sorts out a list of tasks in order of importance.

**Rush I-CARE** – Behavior consistent with the Rush I-CARE values of Innovation, Collaboration, Accountability, Respect and Excellence.
General Expectations

- Students are expected to maintain a professional demeanor at all times. This includes:
  1. Arriving for classes on time and remaining attentive throughout.
  2. If you need to arrive late to a specific class, communicating this well in advance so that the course director, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
  3. If you will need to leave prior to the end of the class session, you should communicate this to the course director prior to the beginning of the class.
  4. Your full attention during class sessions is a basic expectation of the MS-HSM graduate program. It is also a common courtesy in many formal meetings and an important professional habit to develop.
  5. Having Respect for classmates, realizing that each person brings different skills and abilities to the classroom. (Rush I-CARE)
  6. Active participation is critical and expected.

- Listed readings are to be completed prior to the class period listed in the syllabus.
- Assignments are due on the assigned date and time as stated on Blackboard; lateness, regardless of cause, will result in loss of credit. Excessively late assignments will not be accepted.
- All submitted course material (e.g., assignments, cover letter, reflective paper, presentation, and reports) is expected to be of professional quality in terms of content, format, and presentation.

Policy on Missed Classes/Sessions:

Students are expected to attend the scheduled required lectures. Attendance will be factored into the participation grade. Students are also expected to attend—and be on time for—all required cohort sessions related to HSM 550-A, B, C, the HSM Internship, as scheduled at the beginning of each of the three quarters during the first academic year (or for part-time students, during the academic year in which they are completing the internship requirement).

Assignments:
(Details are provided later in the syllabus)

Grading Scale (Percentage):
Pass/Not Pass

Requirements for Grade of “Pass” for each quarter:

Fall Quarter
  1. Resume and interviewing clinic participation during Orientation Week
  2. Timely submission of final resume prior to job interviews
  3. Participation in part-time job (internship) interviews and matching process
  4. Rush HR orientation and hiring process
  5. Demonstration of good accountability for time-keeping (swiping and hours)
  6. Participation in “check in” session for entire cohort, with Director of Operations and Faculty Development, toward end of first quarter
  7. Minimum 80 hours worked
  8. Demonstrate satisfactory progress on data management section as listed below:

  ≥70 to ≤100 = Pass
  < 70 = Fail
Elements of Final Course Grade:

<table>
<thead>
<tr>
<th>Element</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Management Pre Assignment</td>
<td>10</td>
</tr>
<tr>
<td>Intermediate Data Management</td>
<td>30</td>
</tr>
<tr>
<td>Final Data Management Project</td>
<td>50</td>
</tr>
<tr>
<td>Participation</td>
<td>10</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Winter Quarter
1. 90-day Intern Self-Assessment and Preceptor Assessment (similar to a “probationary review” after 60 to 90 days of fulltime employment in most jobs), in January
2. Internship site-visit by HSM core faculty, in February
3. Minimum 180 hours worked during the quarter

Spring Quarter
1. 10-minute informal “presentation” on general internship experience and shared knowledge with student colleagues (includes delivery of one-page written summary to Director of Operations and Faculty Development) during an internship experience sharing session for the cohort
2. Attend at least 2 internship sharing sessions, one as a “presenter” and one as a participant learner
3. Intern Survey completed following 440 hours of total work hours in the internship
4. Preceptor Survey completed following 440 hours of total work hours in the internship
5. Minimum 180 hours worked during the quarter

Accommodations
In keeping with its goal to promote diversity among its student population, Rush University is committed to attracting and educating students who will help to make the population of health care professionals representative of the national population, including students with disabilities. In addition, Rush University wishes to insure that access to its facilities, programs and services are available to students with disabilities. The University provides reasonable accommodations to all students on a nondiscriminatory basis consistent with legal requirements as outlined in the Americans with Disabilities Act (ADA) of 1990 and the Rehabilitation Act of 1973. A reasonable accommodation is a modification or adjustment to an instructional activity, facility, program or service that enables a qualified student with a disability to have an equal opportunity to participate in all Rush University student activities. To be eligible for accommodations, a student must have a documented disability as defined by the ADA and Section 504 of the Rehabilitation Act of 1973. Both the ADA and Section 504 define disability as (a) a physical or mental impairment that substantially limits one or more major life activities of such individual; (b) a record of such impairment; or (c) being regarded as having such a condition. Further information or questions can be directed to the College of Health Sciences faculty member, Joanne Schupbach. She can be reached at (312) 942-3293 or Joanne_E_Schupbach@rush.edu.

Further information can be found at: [http://www.rush.rush.edu/catalog/aboutrush/disabilityrights.html](http://www.rush.rush.edu/catalog/aboutrush/disabilityrights.html)

Academic Integrity
Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.

Further information can be found at: [http://www.rush.rush.edu/catalog/acadresources/academichonesty.html](http://www.rush.rush.edu/catalog/acadresources/academichonesty.html)
Addendum A: Characteristics of an “Ideal” Rush HSM Internship (bold is required)

- The opportunity to work closely with, and under the direction of, a trained and experienced health care manager who serves as his/her preceptor.
- An orientation to the mission/vision/values of the sponsoring organization
- Required work experience tied to an identified subset of competencies from the NCHL model used by Rush HSM.
- Familiarity with the organizational structure and chart.
- Expectation to set specific goals for the internship, for student performance and for that performance to be evaluated.
- Responsibility for at least one major project (to be defined) that the student initiates and completes, in addition to other projects and tasks assigned by the preceptor or his/her designate.
- Inclusion on at least one project that involves collaboration outside of the primary division, department or service line.
- Experiences that ensure knowledge and understanding of budgets and the process of budgeting.
- Responsibility for planning and leading at least one meeting.
- Making at least one oral presentation for the management team.
- Attending meeting(s) with managers in positions more senior that the student’s Internship Preceptor, either within or outside of the department/service line.

Addendum B: Qualifications and Positioning of Preceptors

- Cost center manager or above with budgetary, personnel management, and project management responsibilities.
- Minimum of a Master’s degree and at least two years of fulltime work following their graduate degree (one of these can be in a post-graduate fellowship (or equivalent work experience and expertise, totaling 5 years or more).
- Out of school a minimum of 2 years so that enough experience has been gained to be a successful preceptor (again, one of these years can be in a post-graduate fellowship).
- Involvement in some aspect of senior management (through “boss,” committee work, task forces, and collaborative projects) so that the student gains wide enough exposure and does not work in a silo.

Addendum C: List of Practice Environment Experiences HSM Students Should Have Prior to Graduation (whether completed within or outside of the HSM Internship requirement)

- Attend a senior management, leadership, or board meeting (committee, subcommittee, etc.)
- Attend a strategic planning meeting (could be at any level of the organization)
- Exposure to clinical operations; could be accomplished in a number of different ways:
  - Course related
  - Project related in internship or job
  - Patient safety or quality rounds
  - Observation in Perioperative Services/OR
  - Work on interdisciplinary team with clinicians in course projects or in internships
- Understand the organizational structure and governance and management structure (and charts) of RUMC (this is accomplished during HSM Orientation for new students)
- Opportunity to plan and run meetings, including setting agendas and identifying action items
- Exposure to accreditation, certification, Magnet designation visits, Baldrige Award visits, etc., procedures and preparation
<table>
<thead>
<tr>
<th>W</th>
<th>Date</th>
<th>Pre-class readings</th>
<th>Assignment(s) Due</th>
<th>Topics / Themes</th>
<th>Objectives</th>
<th>Class Lead</th>
</tr>
</thead>
</table>
| 1 | 9/14   | METC 903                                                                           | Basic Excel Pre-Assessment Test Submitted by 9/2 by 5:00 pm                      | Introduction to Data Management (Basics)                                        | - Demonstrate navigation of Excel’s user interface  
- Find the menus and tools to professional format tables and charts  
- List several basic Excel formulas and charts and where to find them in the program | Tom Webb   |
- Translate desired outputs to necessary processing steps and Excel tools  
- Choose appropriate basic functions to start the initial analysis of a data set | Tom Webb   |
| 2 | 9/21   | METC 903                                                                           |                                                                                   | Introduction to Data Management (Intermediate)                                    | - Describe Excel’s handling of dates and times  
- Modify dates and times using Excel functions  
- Use Excel tools to link worksheets to external data sources | Tom Webb   |
<table>
<thead>
<tr>
<th>W</th>
<th>Date</th>
<th>Pre-class readings</th>
<th>Assignment(s) Due</th>
<th>Topics / Themes</th>
<th>Objectives</th>
<th>Class Lead</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>9/22</td>
<td>METC 903</td>
<td></td>
<td>• Functions and Formulas (Logic)</td>
<td>- Understand the components of an if/then statement and review scenarios of nested/multiple condition if/then statements.</td>
<td>Amanda Tosto</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• V-Lookup</td>
<td>- Learn how to use important functions e.g., F4 key to limit duplicative formula entry.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• Context and Data Analysis</td>
<td>- Master the v-lookup formula and identify conditions when v-lookup should be applied.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td><em>Scenario based problem solving (Focus on development of analysis plan and implementing it using In class exercise)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>9/28</td>
<td>METC 903</td>
<td></td>
<td>• Pivot Tables</td>
<td>- Learn how to slice and dice data sets by developing pivot tables.</td>
<td>Amanda Tosto</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• Charts</td>
<td>- Build charts with multiple series, dual axes and modify formatting and titles.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• Outputs</td>
<td>- Articulate steps required to protect datasets containing protected health information (PHI).</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• Data Protection</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• Other topics</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td><em>Scenario based problem solving (Focus on development of analysis plan and implementing it using In class exercise)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>10/5</td>
<td>METC 903</td>
<td>Intermediate Project Assignment</td>
<td>• Case Study -Data Analysis Practice</td>
<td>- Practice data management skills by working through a: 30 minute in-class case study.</td>
<td>Amanda Tosto</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Due Date: 10/7 by 11:59 pm</td>
<td>• Project Discussion</td>
<td>- Answer questions related to the final assignment.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Final Project Assignment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Due Date: 11/4 by 11:59 pm</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


Copyright © 2016 the Department of Health Systems Management, Rush University. All rights reserved worldwide.
Detailed Descriptions of Assignments for the Quarter and Grading Rubric for Each Data Management Section

Data Management Assignment 1: Pre Course (Points: 10)
1. Pre-Course Assignment for Basic Excel Skills
   a. Four Main Test Questions
   b. Test on basic Excel skills such as basic formatting including print ready status, basic charts, and basic Functions/data manipulation
   c. Submitting the assignment prior to Friday 9/02/2015 11:59 pm even though incomplete qualifies for 10 points.

Class Assignment 1 & 2

Much like situations encountered during internships, the intermediate and final assignments involve analyzing a single healthcare scenario accompanied by data. There are six scenarios, with one assigned to a group of 4-5 students. The purpose of the assignments is to understand the presented scenario, analyze the data toward the identified stakeholder need, draw conclusions based on the analysis, and communicate the results in a written, professional report. There are two assignments for the scenario.

Assignment 1: Intermediate Data Management Skills Assignment (Points: 30)

Assignment 1 should be completed and submitted as one from each team. Each team should review the supplied scenario and data set. The purpose of Assignment 1 is to develop a data management plan which defines the methods for analyzing the data to address the stakeholder’s need.

The data management plan should show a linkage between the desired output (ie metric, chart, or table), the process steps required to generate the output, and the Excel tools required to execute the processing steps. Please be as descriptive as possible; do not assume the graders know how to conduct the Excel analysis.

The grading rubric is as follows:

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Low Scale</th>
<th>High Scale</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Detail the data management plan for the scenario</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Describe outputs, processing steps, and Excel tools</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Complete the plan for four (4) to six (6) outputs</td>
<td>0</td>
<td>25</td>
</tr>
<tr>
<td>2. Demonstrate an understanding of the scenario and stakeholder needs. The outputs should help address the stakeholder’s request/questions in the scenario</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>/30</td>
</tr>
</tbody>
</table>

The team should upload the data management plan (Assignment 1) as a Word document plus all applicable working files on blackboard by 10/07/2015 11:59 pm.
Assignment 2: Final Data Management Project (Points: 50)

Assignment 2 should be completed and submitted individually, by each student. This assignment’s focus is to create a brief report on the scenario and analysis for the stakeholder. This includes a number of deliverables, including: executing the data management plan to analyze the data set (plus any additional analyses), formulating recommendations, and creating a brief, professional report to communicate findings. The output and results should be presented in professional manner for use by the stakeholders.

The grading rubric is as follows:

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Low Scale</th>
<th>High Scale</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Demonstrate an understanding of the scenario and stakeholder needs.</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>2. Perform data management operations to answer stakeholder requests/question, including the creation and accuracy of the required tables and graphs. The Excel workbooks with applicable formulas will be required to receive full credit.</td>
<td>0</td>
<td>20</td>
</tr>
<tr>
<td>3. Develop logical conclusions and/or recommendations from the data to the stakeholder’s needs presented in the scenario</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>4. Present the output/results in a manner that could be used by the stakeholder in professional meetings/venues.</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>/50</strong></td>
<td></td>
</tr>
</tbody>
</table>

Each individual should upload the final report as a Word document plus all applicable working Excel files on blackboard by 11/04/2015 11:59 pm.

Class Participation: (Points: 10)

Class participation, questions for lecturers, completing course evaluations, attendance, and professional behavior in the classroom and email communications
College of Health Sciences
Department of Health Systems Management

HSM 597A -
Master’s Project
Course Syllabus – Fall 2016
Credit Hours: 4

Rev. 2016-09-02

Course Director
Tricia J. Johnson, Ph.D.
Phone: 312.942.7107
Tricia_J_Johnson@rush.edu
Office hours: By appointment

Co-Instructor
Jeff Canar, Ph.D.
Phone: 312-942-5402
Jeff_Canar@rush.edu
Office hours: By appointment

Co-Instructor
Chien-Ching Li, Ph.D.
Phone: 312-942-5402
chien-ching_li@rush.edu
Office hours: By appointment

Co-Instructor
Shital Shah, Ph.D.
Phone: 312.942.7926
Shital_C_Shah@rush.edu
Office hours: By appointment

Course Days: Mondays and Wednesdays
Times: 3:00 p.m. – 4:50 p.m.
Location: Armour Academic Center Room 971 (Mondays); METC903 (Wednesdays), unless otherwise specified

Required Course Textbook(s)
None

Other Assigned Readings


Statistical methods:

- **Sample size:** [http://link.springer.com/content/pdf/10.3758/BF03193146.pdf](http://link.springer.com/content/pdf/10.3758/BF03193146.pdf)
  [www.statpower.net/Content/312/Handout/gpower-tutorial.pdf](http://www.statpower.net/Content/312/Handout/gpower-tutorial.pdf)

**Other Recommended Readings**


**Course Description and Primary Aims**

The overall goal of this course is to integrate quantitative methods and health care management knowledge to address a problem that is important to health care delivery, management or policy. In this course, students will design and conduct an applied quantitative research project that results in a high quality, compelling management report and two professional oral presentations to key stakeholders. The key components of this course include integrating and synthesizing information from multiple sources; developing an appropriate research question; developing an appropriate research design and analysis plan; integrating rigorous analytic methods with data management skills to analyze data; and interpreting quantitative or qualitative results in light of the existing literature and best practices to provide new insight for health care management or policy.

Quarter I: During Quarter I, students formulate the Master’s Project proposal. This phase includes defining the problem statement and hypotheses, conducting a thorough synthesis of what has and has not been done in prior work, defining the analytic plan and potential policy and/or management implications, and submitting a request for Institutional Review Board (IRB) and HIPAA approval. The project proposal must be approved by the Rush University Medical Center IRB before data collection begins, regardless of the nature of the
study and data source(s). Either the student or a committee member/stakeholder can submit the IRB proposal for the project. *No project can proceed with data collection until notice of IRB approval is submitted to the course instructors.*

A thorough proposal substantially increases the probability of a high quality final report. Before final preparation of the written proposal and after the student has submitted a complete draft, the student will prepare and deliver an oral presentation of the proposal to the project committee and other members of the faculty, student body and other interested persons. The oral presentations are scheduled during a special session during the Fall Quarter. The completed proposal paper is then submitted to the project committee and course instructors for grading.

**Quarter II:** During Quarter II, students execute the proposed study by collecting the necessary data, analyzing the data, interpreting the results and writing the final Master’s Project report. Student will make a formal oral presentation of the findings to the health care community during a special session during the Winter Quarter and will submit a final written report to the course instructors and committee. Students are encouraged to submit an abstract to either the Rush University Forum on Clinical Research and Investigation for presentation or another professional conference (e.g., American College of Healthcare Executives, AcademyHealth, American Public Health Association) for presentation.

**Course Pre-requisites**
Successful completion of the first year of coursework for the Master of Science in Health Systems Management. Enrollment in HSM597B Master’s Project requires successful completion of HSM597A Master’s Project.

**Teaching and Learning Methods Used in this Course**
This course uses a combination of learning methods, but by design, the primary focus is on external field experience, where the student investigator conducts a real-world project. Other learning methods include lecture and class discussion; reflective learning through the committee and project self reflections; and formal presentations of the project proposal and final project.

**Learning Outcomes**
At the conclusion of this class, students will be able to:

- Develop the scope of a policy or management problem for analysis
- Define a specific applied research problem and hypothesis
- Conduct a comprehensive policy and/or management implications on the study and methods used in the project
- Analyze and synthesize the reviewed background information
- Identify sources of data for the project analysis
- Gather and analyze data
- Demonstrate effective project management skills by developing and following a project plan and successfully completing the project on time
- Manage a committee structure
- Identify, describe and apply appropriate quantitative and analytical methods for hypothesis testing
- Interpret the results in light of the existing literature to provide new insight for health care management or policy
- Demonstrate the ability to communicate effectively in oral and written forms
- Demonstrate proficiency in key NCHL competencies such as communication skills, self confidence, and, initiative, among others.
Scholarly Publications
The Master’s Project course instructors and project committees are dedicated to identifying projects that are important to Rush and/or the health care community more broadly, and therefore, have a vested interest in following these projects through to scholarly publication when project findings may benefit the broader health care management profession. The student investigator and committee will be encouraged by the Master’s Project course instructors to pursue publication. Students are not required to pursue a scholarly publication based on their Master’s Project, but students are required to discuss their intentions and their committee’s intentions for publication at the beginning of the Fall Quarter. This discussion must be documented in the committee meeting minutes.

To pursue a scholarly publication as the lead author, the student must enroll in HSM597C, Master’s Project III: Writing for Publication, during the Spring Quarter of the second year (more information about HSM597C is available from the MP course instructors). Early communication of these intentions helps to further focus the written proposal and report. Students are required to confirm their plans to pursue (or not pursue) publication with their committee at the last committee meeting in the Spring Quarter. Manuscripts that are accepted for scholarly publication must acknowledge the student investigator’s affiliation with Rush University Department of Health Systems Management.

If the student investigator does not elect to pursue publication, the “right of first refusal” falls to the committee chair, followed by other committee members. For manuscripts that are accepted for publication, the student will be listed as a co-author, and the acknowledgments will indicate that the work was based on the student’s Master’s Project.

The likelihood of a project being accepted for scholarly publication decreases significantly (very close to zero probability) if a student stops pursuing a writing project for a period of greater than several weeks. Students working on “Writing for Publication” projects are required to show evidence of continual pursuit for publication (e.g., submitting the manuscript for publication, responding to reviewer comments and revising the manuscript as required for publication; re-submitting the manuscript to another journal for review when not accepted by one journal). If the student does not show evidence of continual pursuit for publication, the student will be asked to turn over the reins of the project to other members of his or her committee.

Student investigators are also encouraged to submit an abstract for presentation at a professional conference in collaboration with their committee. Committee members must be listed as co-investigators in abstracts and presentations (oral and poster).

Curriculum Goals/Competencies
HSM 597 is designed to build students’ knowledge, skills, abilities and values in the following competency areas associated with the NCHL model (NCHL competency level in parentheses):

Accountability: The ability to hold people accountable to standards of performance or ensure compliance as demonstrated by setting limits. Evidence includes establishing high but achievable performance, firmly saying no to unreasonable requests and setting limits for others’ behavior and actions. (L2)

Achievement orientation: Concern for surpassing a standard of excellence as demonstrated by setting and working to meet challenging goals. (L4)

Analytical thinking: The ability to understand a situation, issue or problem by breaking it into smaller pieces or tracing its implications in a step-by-step way as demonstrated by developing complex plans or analyses. (L4)
Collaboration: The ability to work cooperatively with others, to be part of a team, to work together as opposed to working separately or competitively as demonstrated by soliciting input. Evidence includes genuinely valuing others’ input and expertise, actively seeking the input of others, displaying a willingness to learn from others, and working to create a common mindset. (L3)

Communication skills: The ability to speak and write in a clear, logical and grammatically correct manner in formal and informal situations as demonstrated by making persuasive oral arguments and facilitating group interactions. (L3, L4)

Information seeking: An underlying curiosity and desire to know more about things, people or issues, including the desire for knowledge and staying current with health, organizational, industry and professional trends and developments, as demonstrated by conducting research to maintain knowledge. Evidence includes making a systematic effort over a limited time to obtain needed data or feedback; conducting in-depth investigation from unusual sources; and seeking expert perspective and knowledge. (L4)

Initiative: Identifying a problem, obstacle, or opportunity and taking action in light of this identification to address current or future problems or opportunities as demonstrated by taking action on longer term opportunities. Evidence includes anticipating short-term and long-term opportunities, obstacles and problems and proactively taking action to create an opportunity or avoid future crisis. (L3, L4)

Professionalism: The demonstration of ethics, sound professional practices, social accountability, and community stewardship specifically related to acting openly and honestly. Evidence includes acting consistent with and according to the organization’s expressed core values, dealing with team in an open and truthful manner, and sharing information, insights and comments when it would be easier to refrain from doing so. (L1)

Project management: The ability to plan, execute and oversee a large-scale project involving significant resources, scope and impact as demonstrated by preparing a detailed project plan and managing the project effectively. Evidence includes establishing phases and steps with realistic time frames, identifying required knowledge and skills of team members, and tracking performance against plan. (L1)

Self-confidence: A belief in your own capability to accomplish a task and select an effective approach to a task or problem as demonstrated by acting confidently at the limits or slightly beyond the limits of a job or role. Evidence includes making decisions without asking others, making decisions even when others disagree, acting in uncertain circumstances, communicating self-assuredness, and seeking challenges and being excited by these challenges. (L2)

Self development: The ability to have an accurate view of your own strengths and development needs, including the impact that you have on others as demonstrated by improving your own performance. Evidence includes regularly reflecting on your performance, including events that were successful and those that were less so; learning from less successful events, missteps and challenges; being open to coaching; and modifying your behavior in response to informal cues and formal feedback. (L2)

Team leadership: Sees oneself as a leader of others, from forming a team that possesses balanced capabilities to setting its mission, values and norms, as well as holding the team members accountable individually as demonstrated by keeping people involved. Evidence includes conducting efficient and effective meetings; stating meeting agendas and objectives; providing essential information for decision making and fulfillment of responsibilities individually and collectively, letting people affects by the team.
know what is happening and the status of these decisions; building team spirit to promote effectiveness of the group; and establishing norms for team behavior. (L2)

**General Expectations**

- Students are expected to maintain a professional demeanor at all times. This includes:
  - Arriving for classes on time, and remaining attentive throughout.
    - If you need to arrive late to a specific class, communicating this well in advance so that the course director, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
    - If you will need to leave prior to the end of the class session, you should communicate this prior to the beginning of the class, in all cases generally and especially if there is a guest lecturer present. Leaving in the middle of a guest’s lecture without explanation, for any reason (even to go to the bathroom) can be highly disruptive.
  - Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in session. Your full attention during class sessions is a basic expectation of the MS-HSM graduate program. It is also a common courtesy in many formal meetings and an important professional habit to develop.
  - Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate. Dressing professionally sends the message that you are a professional and should be taken seriously. Failing to dress professionally sends the message that you are “just a student.” It reflects poorly not only on yourself but also on your peers.
  - Expressing disagreements respectfully.

- Active participation is critical and expected.
- Listed readings are to be completed prior to the class period listed in the syllabus.
- Assignments are due at the start of the class period listed; lateness, regardless of cause, will result in loss of some credit. Some assignments (e.g. the discussion questions and most pre-work assignments) will not be accepted late.

**Policy on Missed Classes**

Attendance at all classes is expected.

**Assignments**

Assignments throughout the quarter are designed to draft the components of the Master’s Project proposal and final project paper. Final assignments include a formal presentation of the proposal and final project to the health care community and written papers. Details are provided later in the syllabus.

**Grading Scale (Percentage)**

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100</td>
<td>A</td>
</tr>
<tr>
<td>80-89</td>
<td>B</td>
</tr>
<tr>
<td>70-79</td>
<td>C</td>
</tr>
<tr>
<td>Below 70</td>
<td>Not passing</td>
</tr>
</tbody>
</table>

**Elements of Final Course Grade**

Each student earns a total of eight quarter hours of credit for HSM597. Four credit hours are earned in HSM597A (Fall Quarter), and four credit hours are earned in HSM597B (Winter Quarter). Letter grades will be awarded each quarter according to the adequacy of the phases completed.

Timely completion of each phase is essential to successful achievement of the course objectives. The course director submits each quarter’s grades to the Registrar. Recommendations by the committee chair, after consultation with the committee members, will be used along with input from the course instructor to
determine grades. The committee will evaluate the students on the demonstration of various NCHL competencies twice per quarter. These evaluations will be used to calculate the committee grade. The course instructor grade will be based on the overall project quality including analytical rigor, timeliness, written reports, and oral presentations. Students must meet with their committee at least two times during the quarter and maintain written meeting minutes as a record of these meetings. In addition, progress should be routinely discussed with the committee chair. Unprofessional behavior in the classroom can result in a reduction in the final quarter grade of up to 10 percentage points.

A grade of “incomplete” may only be considered in extraordinary circumstances beyond the student’s control. In addition, an “incomplete” grade may only be considered if the completed coursework has been qualitatively satisfactory. Components of the grade for each quarter are as follows:

**Quarter I Master’s Project Grades**

Total points = 100 (45 from committee, 55 from course instructor)

<table>
<thead>
<tr>
<th>Component</th>
<th>Committee</th>
<th>Course Instructor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Committee process &amp; competencies evaluation</td>
<td>35</td>
<td>--</td>
</tr>
<tr>
<td>Presentation</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Deliverables (quality and timeliness)</td>
<td>--</td>
<td>10</td>
</tr>
<tr>
<td>Written project proposal</td>
<td>--</td>
<td>35</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>45</strong></td>
<td><strong>55</strong></td>
</tr>
</tbody>
</table>

**Quarter II Master’s Project Grades**

Total points = 100 (45 from committee, 55 from course directors)

<table>
<thead>
<tr>
<th>Component</th>
<th>Committee</th>
<th>Course Instructor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Committee process &amp; competencies evaluation</td>
<td>35</td>
<td>--</td>
</tr>
<tr>
<td>Presentation</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Deliverables (quality and timeliness)</td>
<td>--</td>
<td>10</td>
</tr>
<tr>
<td>Written final project report</td>
<td>--</td>
<td>35</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>45</strong></td>
<td><strong>55</strong></td>
</tr>
</tbody>
</table>

Late deliverables are not accepted. The final grade will be reduced one full letter grade for each calendar day that the final written proposal or final written report is late. All other deliverables will receive 0 credit if submitted later than the specified due date and time.

Students are required to attend at least **fifty percent** of the Master’s Project Proposal Presentations and at least **fifty percent** of the Master’s Project Final Presentations, as demonstrated by the completion and submission of student presentation evaluations. Attending and completing written evaluations for fewer than fifty percent of the presentations will result in a three point reduction in the presentation grade for the given quarter.

**Privacy and Information Security**

Rush University faculty and students must always ensure the proper handling of information related to patients, other students, and employees. Maintaining the privacy and security of this information is essential to the integrity and trust placed in us as individuals and in the institution as a whole. The following guidance is provided in your requesting, receiving, and handling of information. Questions or concerns about privacy...
and security should be directed to your faculty advisor or by calling the Rush Privacy Office at 312-942-4416.

- Ensure that all requests for data made to Information Services or other sources have been approved through the IRB as part of a Rush Research Study. The approval letter for the study should accompany your data request.
- Check that the data received contains only the data elements requested. Report any differences to your faculty advisor and to Information Services immediately.
- All data from Rush Information Services must be stored and processed only on the Rush network, unless otherwise approved by the Department Chair. If available, students should utilize the VDI (Virtual Desktop Infrastructure) whenever possible.
- Any use of USB drives for the storage of patient identifiable information (also known as “protected health information”, or, “PHI”) must be pre-approved by the Department Chair. USB/”Flash” drives used for this purpose must be encrypted.
- PHI may only be sent to individuals within Rush with an authorized need for the information. When sending information by electronic means, only Rush email may be used and the recipient must also have a “rush.edu” email address. NEVER use a personal email address to send or receive PHI.
- PHI may not be sent to ANY location external to Rush; any such requests must be reviewed by the Department Chair. Only de-identified data may be sent outside of Rush or stored on personal computers.
- Data analysis involving PHI must only be shared with committee members who are considered core faculty. Only de-identified data may be shared with other Committee members or those that are not directly part of the Study team.
- Upon course completion a determination must be made with your faculty advisor as to the disposition of data that you have used and stored during the course. If the Study is closed, all data must be deleted from personal devices/storage. Coordination must be made with the faculty advisor as to the storage location for data existing on the Rush network (such as personal “H: drives”). If the Study will be continued, IRB application and study data must be transferred to Committee Chair, and then deleted by the student.
- If there is ever a suspected loss or theft of items containing any information or if you ever suspect that information has been sent to a wrong location (such as emailed to a wrong email address) immediately notify the course faculty office. Reports of lost or stolen devices must also be reported to Rush Security Services at 312-942-5678.

**Accommodations**

In keeping with its goal to promote diversity among its student population, Rush University is committed to attracting and educating students who will help to make the population of health care professionals representative of the national population, including students with disabilities. In addition, Rush University wishes to insure that access to its facilities, programs and services are available to students with disabilities. The University provides reasonable accommodations to all students on a nondiscriminatory basis consistent with legal requirements as outlined in the Americans with Disabilities Act (ADA) of 1990 and the Rehabilitation Act of 1973. A reasonable accommodation is a modification or adjustment to an instructional activity, facility, program or service that enables a qualified student with a disability to have an equal opportunity to participate in all Rush University student activities. To be eligible for accommodations, a student must have a documented disability as defined by the ADA and Section 504 of the Rehabilitation Act of 1973. Both the ADA and Section 504 define disability as (a) a physical or mental impairment that substantially limits one or more major life activities of such individual; (b) a record of such impairment; or (c) being regarded as having such a condition. Further information or questions can be directed to the
College of Health Sciences faculty member, Joanne Schupbach. She can be reached at (312) 942-3293 or Joanne_E_Schupbach@rush.edu.

Further information can be found at: http://www.rushu.rush.edu/catalog/aboutrush/disabilityrights.html

**Academic Integrity**

Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.

Further information can be found at: http://www.rushu.rush.edu/catalog/acadresources/academicintegrity.html
<table>
<thead>
<tr>
<th>W</th>
<th>Date</th>
<th>Topics/Themes</th>
<th>Pre-class readings</th>
<th>Assignment(s) Due during Week</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>9/12</td>
<td>Course overview and expectations; developing the research question and hypotheses</td>
<td>Dowd &amp; Town (2002)</td>
<td>Project description memo Research ethics training (<a href="http://www.citiprogram.org">www.citiprogram.org</a>)</td>
<td>AR971 (M) METC903 (W)</td>
</tr>
<tr>
<td>3</td>
<td>9/26</td>
<td>Literature review and study design</td>
<td>Campbell &amp; Swinscow (2009)</td>
<td>Conceptual model Master project and coverage analysis</td>
<td>AR971 (M) METC903 (W)</td>
</tr>
<tr>
<td>4</td>
<td>10/3</td>
<td>Data collection planning; variable definitions; planning for the descriptive analysis</td>
<td>Outline of literature review</td>
<td></td>
<td>AR971 (M) METC903 (W)</td>
</tr>
<tr>
<td>5</td>
<td>10/10</td>
<td>Planning for the bivariate and multivariate analysis</td>
<td>Assigned statistics readings applicable to the project</td>
<td>Critique of committee process</td>
<td>AR971 (M) METC903 (W)</td>
</tr>
<tr>
<td>6</td>
<td>10/17</td>
<td>Discussion/implications</td>
<td></td>
<td>Draft introduction and literature review</td>
<td>AR971 (M) METC903 (W)</td>
</tr>
<tr>
<td>7</td>
<td>10/24</td>
<td>Effective presentation slides</td>
<td></td>
<td>Draft methods and implications sections</td>
<td>AR971 (M) METC903 (W)</td>
</tr>
<tr>
<td>8</td>
<td>10/31</td>
<td>Project check-in; hands-on project work; presentation slides</td>
<td>IRB/HIPAA paperwork Draft presentation slides</td>
<td></td>
<td>AR971 (M) METC903 (W)</td>
</tr>
<tr>
<td>9</td>
<td>11/7 – 11/9</td>
<td>Practice and actual presentations</td>
<td>Final presentation slides Master’s project proposal presentation</td>
<td></td>
<td>AR539 &amp; AR540 Reception in Room 500 (tentative)</td>
</tr>
<tr>
<td>10</td>
<td>11/14</td>
<td>No class</td>
<td></td>
<td>Final proposal due to course instructors and committee (11/17) Critique of committee process (11/23)</td>
<td></td>
</tr>
</tbody>
</table>
### Fall Quarter Detailed Descriptions of Assignments for the Quarter and Grading Rubric for Each

#### Deliverable 1: Project description memo
1 Adequately describes the problem, research question/topic, potential data sources and committee members

0.5 Does not describe 1 element or inadequately describes 1 or 2 elements

0 Does not describe 2 or more elements or inadequately describes 3 or more elements

#### Deliverable 2: On-line research ethics training
1 Completes entire on-line research ethics training

0 Fails complete entire on-line research ethics training

#### Deliverable 3: Conceptual model
1 Properly identifies the independent variable(s) and dependent variable(s), as well as potential control (or confounding) variables

0.5 Identifies variables, but there does not appear to be any way to tell which variables are independent variables, which is/are the dependent variables, and no confounding or control variables have been identified

0 No discernible way to tell from the conceptual model what is going on

#### Deliverable 4: Outline of introduction and literature review
1 Includes outline for introduction and literature review
   Includes in-text citations and list of references in APA style
   Outline of introduction includes points that refer to the problem to be studied and why it is important
   Outline of literature review includes bullet points that synthesize previous work, as demonstrated by key concepts/ideas/findings (supported by citations where applicable) rather than key articles as the focus of each bullet point
   Outline describes the importance of the main independent and dependent variables based on previous literature
   Outline includes a description of the gaps in the existing literature and where the proposed study fits

0.5 One or two of the criteria are missing

0 Three or more of the criteria are missing

#### Deliverable 5: Critique of committee process
1 Clearly describes at least one strength and one opportunity for improvement
   Is a reflection on the student’s progress in terms of committee management

0.5 Fails to clearly describe at least one strength or one opportunity for improvement
   Primarily describes how well everything is going rather than being a reflection

0 Fails to identify either strengths or opportunities for improvement
Deliverable 6: Introduction and literature review
1. Includes an introduction and literature review/review of related information
   Introduction describes the problem to be studied and why it is important (e.g., background, significance of problem). Literature review synthesize previous work, as demonstrated by key concepts/ideas/findings (supported by citations where applicable) rather than describing key articles
   Includes in-text citations and a list of references in APA style

0.5 One or two of the criteria are missing
0 Three or more of the criteria are missing

Deliverable 7: Methods, Implications, and Limitations
1. Includes at least 9 of the following elements: 1) a description of the study design, 2) sample and setting, including data sources, 3) definition of measures, 4) procedures, 5) power analysis, 6) descriptive analysis plan, 7) bivariate analysis plan and 8) multivariate analysis plan (where applicable) (Note, the description of each element does not need to be correct to receive credit); 9) draft result tables; 10) describes the key implications and limitations of the study, regardless of the findings

0.5 Includes 7 to 8 of the elements listed above
0 Includes fewer than 7 of the elements listed above

Deliverable 8: Master Project and Coverage Analysis
1. Completes and submits the Master Project and Coverage Analysis in the Rush Research Portal

0.5 Completes the Master Project only
0 Does not complete Master Project

Deliverable 9: IRB/HIPAA Paperwork
1. Submits IRB/HIPAA application

0 Does not submit the IRB/HIPAA application

Deliverable 10: Draft of presentation slides
1. Includes content related to the introduction, literature review, conceptual model, methods, limitations, and implications

0.5 Omits one important element
0 Omits more than one element

Deliverable 11: Final presentation slides
1. Slides are submitted in final format

0 Slides are not submitted or are incomplete

Deliverable 11a: Proposal presentation (no electronic submission for this deliverable)
The evaluation of the proposal presentation is based on the average of all written faculty evaluations from the oral presentation session. The evaluation is described in the Master’s Project Presentation Evaluation Form.
Deliverable 12: Proposal paper
Proposal papers must be submitted electronically.

The course director’s assessment of the written proposal is described in the Master’s Project Course Instructor Grading Rubric. The final grade will be reduced one full letter grade for each calendar day that the final written proposal or final written report is late.

The committee’s assessment of the written proposal is described in the Master’s Project Committee Grading Rubric.

Deliverable 13: Critique of committee process
1 Clearly describes at least one strength and one opportunity for improvement
   Is a reflection on the student’s progress in terms of committee management

a. Fails to clearly describe at least one strength or one opportunity for improvement
   Primarily describes how well everything is going rather than being a reflection

0 Fails to identify either strengths or opportunities for improvement
Week 1
Overview of the Master’s Project, process of applied research, how to design a problem statement and hypothesis testing, and project management

This session will provide an overview of the Master’s Project and the process of applied research and how to write a problem statement and hypothesis appropriate for your study. At the end of this session, you will be able to

- Identify components for applied research
- Define a problem suitable for research
- Define objectives to represent the scope of a project
- Explain when to use a hypothesis versus ask a research question
- Formulate a research hypothesis

The hands-on portion of class will be dedicated to writing the research problem and hypothesis.

Week 2
Protecting human subjects; conceptual model development; conducting a literature review – peer reviewed and gray literature scan, what to do with the existing literature

Guest speakers (tentative date):
John Cobb, Manager, Operations, Human Subjects’ Protection
Stephanie Guzik, Director and Research Integrity Officer, Research Compliance

This session will be a hands-on session dedicated to conducting a scan of the peer-reviewed and gray literature. We will also discuss conceptual models. At the end of this session, you will be able to

- Identify independent, dependent, moderating and mediating variables
- Identify the key sources of literature
- Navigate through information to narrow the search
- Apply information from different types of articles – reviews, primary data, research articles and theoretical papers
- Critique a research article
- Concisely synthesize information from the existing literature

The hands-on portion of class will be dedicated to searching for literature and developing a conceptual model.

Week 3 Literature review and study design

In this session, we will focus on the tools needed to design the study and conduct literature reviews. At the end of this session, you will be able to

- Differentiate among types of study designs and identify the appropriate study design for a particular Master’s Project
- Conduct a project-specific literature review

The hands-on portion of class will be dedicated to determining the study design, searching for and synthesizing the literature, starting the analysis plan and completing the Master Project and Coverage Analysis in the Rush Research Portal.
Week 4
Data collection planning, variable definitions, and planning for the descriptive analysis

In this session, we will focus on the tools needed to design the study and describe the variables. At the end of this session, you will be able to

- Identify methods of data collection
- Develop a data collection plan
- Define key study variables
- Describe the descriptive statistics needed for your analysis
- Understand how to perform a power analysis and estimate sample size

The hands-on portion of class will be dedicated to determining the defining the study variables, starting the analysis plan and conducting a power analysis.

Week 5
Planning for the bivariate and quantitative analyses

This session will be dedicated to the bivariate statistical tests and quantitative analyses needed to address your research question/hypothesis. At the end of this session, you will be able to

- Identify key statistical tests for inferential analysis and hypothesis testing
- Conduct a power analysis or estimate the needed sample size
- Describe the analysis plan appropriate for the data (regression analysis, simulation modeling, etc.)

The hands-on portion of class will be dedicated to searching for and synthesizing the literature and creating an analysis plan.

Week 6
Study implications

This session will focus on how to describe the implications of your study. At the end of this session, you will be able to

- Identify the key implications of the study

The hands-on portion will be dedicated to writing the methods and implications sections.

Week 7
Giving an effective presentation

This session will focus on how to craft effective presentation slides for the proposal presentation. At the end of this session, you will be able to

- Understand how to create effective presentation slides that communicate the key aspects of a study

The hands-on portion will be dedicated to writing the methods, implications sections, and presentation slides
Week 8
Finalizing the proposal; project check-in; hands-on session

This session will be dedicated to finalizing the written proposal and preparing the presentation slides. At the end of this session, you will be able to

- Describe your project in a way that raises enthusiasm and interest in the question that you plan to study
- Convince others that your study is novel and intriguing
- Demonstrate a rich understanding of the project in context of the health care delivery system
- Clearly communicate the study goals, methodology and potential implications to a lay audience
- Prepare effective presentation slides

This session will be dedicated to working on the final aspects of the presentation and written proposal.

Week 9
Hands-on session for practice presentations, and presenting the project

This week will include a special session to present your proposal to the Department of Health Systems Management students, faculty and alumni, key project stakeholders, and the broader health care community. At the end of this session, you will be able to

- Prepare and deliver a professional quality presentation
- Concisely communicate relevant issues
- Demonstrate competency with presentation technology
- Demonstrate critical thinking by fielding questions from the audience

Week 10
No class
### TENTATIVE WINTER QUARTER SESSION OUTLINE (SUBJECT TO CHANGE)

<table>
<thead>
<tr>
<th>W</th>
<th>Date</th>
<th>Topics/Themes</th>
<th>Pre-class readings</th>
<th>Assignment(s) Due during Week</th>
<th>Tentative Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Week of 1/2</td>
<td>Writing an effective abstract; reviewing and updating the data dictionary; working with raw data files; data management &amp; reduction</td>
<td>APA Manual, Chapter 1 Sproull, Chapter 15</td>
<td>Critique video of own presentation Data dictionary</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>1/9</td>
<td>Creating new variables; assumptions about the data; running descriptive statistics</td>
<td>Review material in Blackboard Prior to class Corty, Chapters 1, 2, and 4 Norman &amp; Streiner, Chapter 11-3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>1/16</td>
<td>Data workshop</td>
<td>Corty, Chapters 1, 2, and 4 Norman &amp; Streiner, Chapter 11-3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>1/23</td>
<td>Assumptions about the data; bivariate and multivariate tests</td>
<td>Allison Chapters 2, 3, 4, 6 (projects with multiple linear regression) Corty, Chapters 1, 2, and 4 Norman &amp; Streiner, Chapter 11-3</td>
<td>Descriptive statistics in tabular format</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>1/30</td>
<td>Data workshop</td>
<td>Corty, Chapters 1, 2, and 4 Norman &amp; Streiner, Chapter 11-3</td>
<td>Critique of committee process</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>2/6</td>
<td>Addressing data issues and data workshop</td>
<td>Corty, Chapters 1, 2, and 4 Norman &amp; Streiner, Chapter 11-3</td>
<td>Bivariate and multivariate results in tabular format</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>2/13</td>
<td>Interpreting the results; writing the results, conclusions and implications sections</td>
<td>APA Manual, Chapter 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>2/20</td>
<td>Writing the abstract; describing the conclusions and implications to a lay audience; final presentation slides</td>
<td></td>
<td>Results – narrative and tables</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>2/27</td>
<td>Dry run presentations and Finalizing the Project</td>
<td>APA Manual, Chapter 2 Sproull, Chapter 16</td>
<td>Draft presentation slides Draft discussion</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>3/6</td>
<td>Presenting the project</td>
<td></td>
<td>Final presentation slides Final Master’s Project presentation</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>3/13</td>
<td>Wrapping up the project</td>
<td>Final paper</td>
<td>Critique of committee process</td>
<td>No class</td>
</tr>
</tbody>
</table>

Copyright © 2009 the Department of Health Systems Management, Rush University. All rights reserved worldwide.
## Winter Quarter Detailed Descriptions of Assignments for the Quarter and Grading Rubric for Each

### Deliverable 1: Critique of presentation video

1. Clearly describes at least one strength and one opportunity for improvement  
   Is a reflection on the student investigator’s oral presentation skills, content and fielding of questions

0.5 Fails to clearly describe at least one strength or one opportunity for improvement  
   Primarily describes how well everything went rather than being a reflection

0 Fails to identify either strengths or opportunities for improvement

### Deliverable 2: Final data dictionary

1
   - Identifies each original and created variable (variables)
   - Defines each variable (definition)
   - Describes how each variable is measured (measurement)
   - Lists the categories for each categorical variable (categories)

0.5 Fails to include one element of the data dictionary (variables, definition, measurement, categories)

0 Fails to include two or more elements of the data dictionary (variables, definition, measurement, categories)

### Deliverable 3: Revised Paper

1 Addresses all of the feedback on the written proposal from the course instructor and committee members

0.5 Addresses some of the feedback, but does not address all feedback or explain why feedback has not been incorporated

0 Does not address course instructor and committee feedback from fall quarter

### Deliverable 4: Descriptive statistics in tabular format and relevant output

1 Presents descriptive statistics for each relevant variable (dependent, independent, control, moderator, mediator, etc.)  
   Presents results in tabular format appropriate for final paper  
   Includes relevant SPSS output as a Word or PDF file

0.5 Omits some relevant variables from the descriptive statistics

0 Does not present results in tabular format (e.g., only includes SPSS output)  
   Submits SPSS output in SPSS file format rather than Word or PDF file format

### Deliverable 5: Critique of committee process

1 Clearly describes at least one strength and one opportunity for improvement  
   Is a reflection on the student’s progress in terms of committee management

0.5 Fails to clearly describe at least one strength or one opportunity for improvement  
   Primarily describes how well everything is going rather than being a reflection
Deliverable 6: Bivariate and multivariate results in tabular format and relevant output

1. Presents bivariate and multivariate results for each relevant variable (dependent, independent, control, moderator, mediator, etc.)
   Presents results in tabular format appropriate for final paper
   Includes relevant SPSS output as a Word or PDF file

0.5 Omits some relevant variables from the results

0 Omits results in tabular format (e.g., only includes SPSS output)
   Submits SPSS output in SPSS file format rather than Word or PDF file format

Deliverable 7: Results – narrative and tables

1. Describes sample in narrative format
   Describes bivariate and multivariate test results in narrative format
   Describes results relevant to research problem and hypothesis(es) when used
   Presents results in tabular format

0.5 Omits one key element from the deliverable

0 Omits more than one key element from the deliverable

Deliverable 8: Draft of presentation slides

1. Includes content related to the introduction, methods, results and conclusions/implications

0.5 Omits one important element

0 Omits more than one element

Deliverable 9: Draft discussion

1. Interprets results of statistical analysis
   Describes how your results relate to previous findings
   Describes how the result impact managerial or healthcare practice
   Discusses the study limitations and opportunities for future studies

0.5 Omits one important element

0 Omits more than one element

Deliverable 10: Final presentation slides

1. Submitted in final format

0 Not submitted or are incomplete

Deliverable 10a: Final presentation (no electronic submission for this deliverable)

The evaluation of the final presentation is based on the average of all written faculty evaluations from the oral presentation session. The evaluation is described in the Master’s Project Presentation Evaluation Form located in the Resources folder of Blackboard.
**Deliverable 11: Final paper**
Final papers must be submitted electronically. The course director’s assessment of the final written paper is described in the Master’s Project Course Instructor Final Report Grading Rubric located in the Resources folder of Blackboard. The final grade will be reduced one full letter grade for each calendar day that the final written proposal or final written report is late.

The committee’s assessment of the final written paper is described in the Master’s Project Committee Grading Rubric located in the Resources folder of Blackboard.

**Deliverable 12: Critique of committee process**
1  Clearly describes at least one strength and one opportunity for improvement
   Is a reflection on the student’s progress in terms of committee management

0.5  Fails to clearly describe at least one strength or one opportunity for improvement
   Primarily describes how well everything is going rather than being a reflection

1  Fails to identify either strengths or opportunities for improvement
Week 1
Writing a professional abstract; reviewing and updating the data dictionary; working with raw data files; managing and reducing the data

This session is dedicated to preparing the data for analysis and writing an abstract for a professional conference. At the end of this session, you will be able to

- Write an abstract suitable for conference presentation
- Finalize a data dictionary that accurately reflects your data
- Determine and describe the format of the raw data
- Manipulate the raw data files in various software packages
- Manipulate the raw data files to create a final working data set in the format appropriate for your analysis

Week 2
Creating new variables; understanding assumptions about the data relevant to descriptive statistics; running descriptive statistics

In this session, we will focus on preparing the data analysis and running descriptive statistics. At the end of this session, you will be able to

- Create new variables from the original data fields
- Understand how to identify and manager outliers
- Evaluate the extent to which missing data exist
- Determine how to handle missing data
- Evaluate whether the descriptive statistics described in your Master’s Project proposal are accurate
- Revise the statistical analysis plan relevant to descriptive statistics to accurately reflect your data and project
- Run descriptive statistics
- Create tables to present descriptive statistics

Week 3
Addressing data issues and data workshop

This session will be a hands-on session dedicated to creating new variables and running descriptive statistics. We will also address issues that you have encountered with your data. You are expected to bring your own data to class or work with the sample data, if your data are not available.

Week 4
Understanding assumptions about the data relevant to inferential statistics; running bivariate and multivariate statistics

In this session, we will focus on running inferential statistics. At the end of this session, you will be able to

- Identify whether parametric or non-parametric tests are appropriate for your data
- Evaluate whether the inferential statistics described in your Master’s Project proposal are accurate
- Revise the statistical analysis plan to accurately reflect your data and project
- Run bivariate statistical tests

Copyright © 2009 the Department of Health Systems Management, Rush University. All rights reserved worldwide.
- Run multivariate models
- Understand whether to reject the null hypothesis(es)

Week 5
**Addressing data issues and data workshop**

This session will be a hands-on session dedicated to creating new variables, running descriptive statistics, and running inferential statistical tests. We will also address issues that you have encountered with your data. You are expected to bring your own data to class or work with the sample data, if your data are not available.

Week 6
**Addressing data issues and data workshop**

This session will be a hands-on session dedicated to creating new variables, running descriptive statistics, and running inferential statistical tests. We will also address issues that you have encountered with your data. You are expected to bring your own data to class or work with the sample data, if your data are not available.

Week 7
**Presenting data and results; interpreting the results; writing the results, conclusions and implications sections**

This session will be dedicated to interpreting and presenting data and results and identifying the conclusions and implications of your results. At the end of this session, you will be able to

- Clearly and concisely describe the results of your study
- Effectively present the results of your study to a lay audience and professionals in the field
- Interpret the results in light of your original research question and hypothesis(es)
- Draw conclusions about your results
- Delve into the potential implications of your study for the health care management and policy fields

Week 8
**Addressing data issues; writing the project abstract; describing the conclusions and implications**

In this session, we will address issues with your data analysis and drafting the final aspects of the project. At the end of this session, you will be able to

- Clearly describe the implications of your study for the health care management and policy fields
- Demonstrate a rich understanding of your project results in context of the health care delivery system
- Describe how the results could be translated into practice
- Write a compelling abstract that will convince others to read your final report

Week 9
**Finalizing the project; preparing the presentation slides**

This session will be dedicated to finalizing the written report and preparing the presentation slides. At the end of this session, you will be able to

- Describe your project in a way that raises enthusiasm and interest in the question that you studied
- Convince others that your study is novel and intriguing
- Demonstrate a rich understanding of the project in context of the health care delivery system
- Clearly communicate the study goals, methodology and results to a lay audience
Week 10
Presenting the project

This week’s class session will be replaced by a special session to present your project to the Department of Health Systems Management students, faculty and alumni, key project stakeholders and the broader health care community. At the end of this session, you will be able to

- Prepare and deliver a professional quality presentation
- Concisely communicate relevant issues
- Demonstrate competency with presentation technology
- Demonstrate critical thinking by fielding questions from the audience
College of Health Sciences
Department of Health Systems Management

HSM 597B -
Master’s Project
Course Syllabus – Winter 2017
Credit Hours: 4

Rev. 2016-12-28

Course Director
Tricia J. Johnson, Ph.D.
Phone: 312.942.7107
Tricia_J_Johnson@rush.edu
Office hours: By appointment

Co-Instructor
Jeff Canar, Ph.D.
Phone: 312-942-5402
Jeff_Canar@rush.edu
Office hours: By appointment

Co-Instructor
Chien-Ching Li, Ph.D.
Phone: 312-942-5402
chien-ching_li@rush.edu
Office hours: By appointment

Co-Instructor
Shital Shah, Ph.D.
Phone: 312.942.7926
Shital_C_Shah@rush.edu
Office hours: By appointment

Course Days: Mondays and Wednesdays
Times: 3:00 p.m. – 4:50 p.m.
Location: Armour Academic Center Room METC903, unless otherwise specified

Required Course Textbook(s)
None

Other Assigned Readings


Statistical methods:


Other Recommended Readings


Course Description and Primary Aims

The overall goal of this course is to integrate quantitative methods and health care management knowledge to address a problem that is important to health care delivery, management or policy. In this course, students will design and conduct an applied quantitative research project that results in a high quality, compelling management report and two professional oral presentations to key stakeholders. The key components of this course include integrating and synthesizing information from multiple sources; developing an appropriate research question; developing an appropriate research design and analysis plan; integrating rigorous analytic methods with data management skills to analyze data; and interpreting quantitative or qualitative results in light of the existing literature and best practices to provide new insight for health care management or policy.

Quarter I: During Quarter I, students formulate the Master's Project proposal. This phase includes defining the problem statement and hypotheses, conducting a thorough synthesis of what has and has not been done in prior work, defining the analytic plan and potential policy and/or management implications, and submitting a request for Institutional Review Board (IRB) and HIPAA approval. The project proposal must be approved by the Rush University Medical Center IRB before data collection begins, regardless of the nature of the study and data source(s). Either the student or a committee member/stakeholder can submit the IRB proposal.
for the project. **No project can proceed with data collection until notice of IRB approval is submitted to the course instructors.**

A thorough proposal substantially increases the probability of a high quality final report. Before final preparation of the written proposal and after the student has submitted a complete draft, the student will prepare and deliver an oral presentation of the proposal to the project committee and other members of the faculty, student body and other interested persons. The oral presentations are scheduled during a special session during the Fall Quarter. The completed proposal paper is then submitted to the project committee and course instructors for grading.

**Quarter II:** During Quarter II, students execute the proposed study by collecting the necessary data, analyzing the data, interpreting the results and writing the final Master’s Project report. Student will make a formal oral presentation of the findings to the health care community during a special session during the Winter Quarter and will submit a final written report to the course instructors and committee. Students are encouraged to submit an abstract to either the Rush University Forum on Clinical Research and Investigation for presentation or another professional conference (e.g., American College of Healthcare Executives, AcademyHealth, American Public Health Association) for presentation.

**Course Pre-requisites**
Successful completion of the first year of coursework for the Master of Science in Health Systems Management. Enrollment in HSM597B Master’s Project requires successful completion of HSM597A Master’s Project.

**Teaching and Learning Methods Used in this Course**
This course uses a combination of learning methods, but by design, the primary focus is on external field experience, where the student investigator conducts a real-world project. Other learning methods include lecture and class discussion; reflective learning through the committee and project self reflections; and formal presentations of the project proposal and final project.

**Learning Outcomes**
At the conclusion of this class, students will be able to:

- Develop the scope of a policy or management problem for analysis
- Define a specific applied research problem and hypothesis
- Conduct a comprehensive policy and/or management implications on the study and methods used in the project
- Analyze and synthesize the reviewed background information
- Identify sources of data for the project analysis
- Gather and analyze data
- Demonstrate effective project management skills by developing and following a project plan and successfully completing the project on time
- Manage a committee structure
- Identify, describe and apply appropriate quantitative and analytical methods for hypothesis testing
- Interpret the results in light of the existing literature to provide new insight for health care management or policy
- Demonstrate the ability to communicate effectively in oral and written forms
- Demonstrate proficiency in key NCHL competencies such as communication skills, self confidence, and, initiative, among others.

**Scholarly Publications**
The Master’s Project course instructors and project committees are dedicated to identifying projects that are important to Rush and/or the health care community more broadly, and therefore, have a vested interest in following these projects through to scholarly publication when project findings may benefit the broader health care management profession. The student investigator and committee will be encouraged by the Master’s Project course instructors to pursue publication. Students are not required to pursue a scholarly publication based on their Master’s Project, but students are required to discuss their intentions and their committee’s intentions for publication at the beginning of the Fall Quarter. This discussion must be documented in the committee meeting minutes.

To pursue a scholarly publication as the lead author, the student must enroll in HSM597C, Master’s Project III: Writing for Publication, during the Spring Quarter of the second year (more information about HSM597C is available from the MP course instructors). Early communication of these intentions helps to further focus the written proposal and report. Students are required to confirm their plans to pursue (or not pursue) publication with their committee at the last committee meeting in the Spring Quarter. Manuscripts that are accepted for scholarly publication must acknowledge the student investigator’s affiliation with Rush University Department of Health Systems Management.

If the student investigator does not elect to pursue publication, the “right of first refusal” falls to the committee chair, followed by other committee members. For manuscripts that are accepted for publication, the student will be listed as a co-author, and the acknowledgments will indicate that the work was based on the student’s Master’s Project.

The likelihood of a project being accepted for scholarly publication decreases significantly (very close to zero probability) if a student stops pursuing a writing project for a period of greater than several weeks. Students working on “Writing for Publication” projects are required to show evidence of continual pursuit for publication (e.g., submitting the manuscript for publication, responding to reviewer comments and revising the manuscript as required for publication; re-submitting the manuscript to another journal for review when not accepted by one journal). If the student does not show evidence of continual pursuit for publication, the student will be asked to turn over the reins of the project to other members of his or her committee.

Student investigators are also encouraged to submit an abstract for presentation at a professional conference in collaboration with their committee. Committee members must be listed as co-investigators in abstracts and presentations (oral and poster).

**Curriculum Goals/Competencies**

HSM 597 is designed to build students’ knowledge, skills, abilities and values in the following competency areas associated with the NCHL model (NCHL competency level in parentheses):

**Accountability:** The ability to hold people accountable to standards of performance or ensure compliance as demonstrated by setting limits. Evidence includes establishing high but achievable performance, firmly saying no to unreasonable requests and setting limits for others’ behavior and actions. (L2)

**Achievement orientation:** Concern for surpassing a standard of excellence as demonstrated by setting and working to meet challenging goals. (L4)

**Analytical thinking:** The ability to understand a situation, issue or problem by breaking it into smaller pieces or tracing its implications in a step-by-step way as demonstrated by developing complex plans or analyses. (L4)
**Collaboration:** The ability to work cooperatively with others, to be part of a team, to work together as opposed to working separately or competitively as demonstrated by soliciting input. Evidence includes genuinely valuing others’ input and expertise, actively seeking the input of others, displaying a willingness to learn from others, and working to create a common mindset. (L3)

**Communication skills:** The ability to speak and write in a clear, logical and grammatically correct manner in formal and informal situations as demonstrated by making persuasive oral arguments and facilitating group interactions. (L3, L4)

**Information seeking:** An underlying curiosity and desire to know more about things, people or issues, including the desire for knowledge and staying current with health, organizational, industry and professional trends and developments, as demonstrated by conducting research to maintain knowledge. Evidence includes making a systematic effort over a limited time to obtain needed data or feedback; conducting in-depth investigation from unusual sources; and seeking expert perspective and knowledge. (L4)

**Initiative:** Identifying a problem, obstacle, or opportunity and taking action in light of this identification to address current or future problems or opportunities as demonstrated by taking action on longer term opportunities. Evidence includes anticipating short-term and long-term opportunities, obstacles and problems and proactively taking action to create an opportunity or avoid future crisis. (L3, L4)

**Professionalism:** The demonstration of ethics, sound professional practices, social accountability, and community stewardship specifically related to acting openly and honestly. Evidence includes acting consistent with and according to the organization’s expressed core values, dealing with team in an open and truthful manner, and sharing information, insights and comments when it would be easier to refrain from doing so. (L1)

**Project management:** The ability to plan, execute and oversee a large-scale project involving significant resources, scope and impact as demonstrated by preparing a detailed project plan and managing the project effectively. Evidence includes establishing phases and steps with realistic time frames, identifying required knowledge and skills of team members, and tracking performance against plan. (L1)

**Self-confidence:** A belief in your own capability to accomplish a task and select an effective approach to a task or problem as demonstrated by acting confidently at the limits or slightly beyond the limits of a job or role. Evidence includes making decisions without asking others, making decisions even when others disagree, acting in uncertain circumstances, communicating self-assuredness, and seeking challenges and being excited by these challenges. (L2)

**Self development:** The ability to have an accurate view of your own strengths and development needs, including the impact that you have on others as demonstrated by improving your own performance. Evidence includes regularly reflecting on your performance, including events that were successful and those that were less so; learning from less successful events, missteps and challenges; being open to coaching; and modifying your behavior in response to informal cues and formal feedback. (L2)

**Team leadership:** Sees oneself as a leader of others, from forming a team that possesses balanced capabilities to setting its mission, values and norms, as well as holding the team members accountable individually as demonstrated by keeping people involved. Evidence includes conducting efficient and effective meetings; stating meeting agendas and objectives; providing essential information for decision making and fulfillment of responsibilities individually and collectively; letting people affects by the team know what is happening and the status of these decisions; building team spirit to promote effectiveness of the group; and establishing norms for team behavior. (L2)
General Expectations

- Students are expected to maintain a professional demeanor at all times. This includes:
  - Arriving for classes on time, and remaining attentive throughout.
    - If you need to arrive late to a specific class, communicating this well in advance so that the course director, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
    - If you will need to leave prior to the end of the class session, you should communicate this prior to the beginning of the class, in all cases generally and especially if there is a guest lecturer present. Leaving in the middle of a guest’s lecture without explanation, for any reason (even to go to the bathroom) can be highly disruptive.
  - Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in session. Your full attention during class sessions is a basic expectation of the MS-HSM graduate program. It is also a common courtesy in many formal meetings and an important professional habit to develop.
  - Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate. Dressing professionally sends the message that you are a professional and should be taken seriously. Failing to dress professionally sends the message that you are “just a student.” It reflects poorly not only on yourself but also on your peers.
  - Expressing disagreements respectfully.

- Active participation is critical and expected.
- Listed readings are to be completed prior to the class period listed in the syllabus.
- Assignments are due at the start of the class period listed; lateness, regardless of cause, will result in loss of some credit. Some assignments (e.g. the discussion questions and most pre-work assignments) will not be accepted late.

Policy on Missed Classes

Attendance at all classes is expected.

Assignments

Assignments throughout the quarter are designed to draft the components of the Master’s Project proposal and final project paper. Final assignments include a formal presentation of the proposal and final project to the health care community and written papers. Details are provided later in the syllabus.

Grading Scale (Percentage)

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100</td>
<td>A</td>
</tr>
<tr>
<td>80-89</td>
<td>B</td>
</tr>
<tr>
<td>70-79</td>
<td>C</td>
</tr>
<tr>
<td>Below 70</td>
<td>Not passing</td>
</tr>
</tbody>
</table>

Elements of Final Course Grade

Each student earns a total of eight quarter hours of credit for HSM597. Four credit hours are earned in HSM597A (Fall Quarter), and four credit hours are earned in HSM597B (Winter Quarter). Letter grades will be awarded each quarter according to the adequacy of the phases completed.

Timely completion of each phase is essential to successful achievement of the course objectives. The course director submits each quarter’s grades to the Registrar. Recommendations by the committee chair, after consultation with the committee members, will be used along with input from the course instructor to determine grades. The committee will evaluate the students on the demonstration of various NCHL competencies twice per quarter. These evaluations will be used to calculate the committee grade. The course
instructor grade will be based on the overall project quality including analytical rigor, timeliness, written reports, and oral presentations. Students must meet with their committee at least two times during the quarter and maintain written meeting minutes as a record of these meetings. In addition, progress should be routinely discussed with the committee chair. Unprofessional behavior in the classroom can result in a reduction in the final quarter grade of up to 10 percentage points.

A grade of “incomplete” may only be considered in extraordinary circumstances beyond the student’s control. In addition, an “incomplete” grade may only be considered if the completed coursework has been qualitatively satisfactory. Components of the grade for each quarter are as follows:

Quarter I Master’s Project Grades
Total points = 100 (45 from committee, 55 from course instructor)

<table>
<thead>
<tr>
<th>Committee process &amp; competencies evaluation</th>
<th>Committee</th>
<th>Course Instructor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Presentation</td>
<td>35</td>
<td>--</td>
</tr>
<tr>
<td>Deliverables (quality and timeliness)</td>
<td>--</td>
<td>10</td>
</tr>
<tr>
<td>Written project proposal</td>
<td>--</td>
<td>35</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>45</strong></td>
<td><strong>55</strong></td>
</tr>
</tbody>
</table>

Quarter II Master’s Project Grades
Total points = 100 (45 from committee, 55 from course directors)

<table>
<thead>
<tr>
<th>Committee process &amp; competencies evaluation</th>
<th>Committee</th>
<th>Course Instructor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Presentation</td>
<td>35</td>
<td>--</td>
</tr>
<tr>
<td>Deliverables (quality and timeliness)</td>
<td>--</td>
<td>10</td>
</tr>
<tr>
<td>Written final project report</td>
<td>--</td>
<td>35</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>45</strong></td>
<td><strong>55</strong></td>
</tr>
</tbody>
</table>

Late deliverables are not accepted. The final grade will be reduced one full letter grade for each calendar day that the final written proposal or final written report is late. All other deliverables will receive 0 credit if submitted later than the specified due date and time.

Students are required to attend at least fifty percent of the Master’s Project Proposal Presentations and at least fifty percent of the Master’s Project Final Presentations, as demonstrated by the completion and submission of student presentation evaluations. Attending and completing written evaluations for fewer than fifty percent of the presentations will result in a three point reduction in the presentation grade for the given quarter.

Privacy and Information Security
Rush University faculty and students must always ensure the proper handling of information related to patients, other students, and employees. Maintaining the privacy and security of this information is essential to the integrity and trust placed in us as individuals and in the institution as a whole. The following guidance is provided in your requesting, receiving, and handling of information. Questions or concerns about privacy and security should be directed to your faculty advisor or by calling the Rush Privacy Office at 312-942-4416.
 Ensure that all requests for data made to Information Services or other sources have been approved through the IRB as part of a Rush Research Study. The approval letter for the study should accompany your data request.

 Check that the data received contains only the data elements requested. Report any differences to your faculty advisor and to Information Services immediately.

 All data from Rush Information Services must be stored and processed only on the Rush network, unless otherwise approved by the Department Chair. If available, students should utilize the VDI (Virtual Desktop Infrastructure) whenever possible.

 Any use of USB drives for the storage of patient identifiable information (also known as “protected health information”, or, “PHI”) must be pre-approved by the Department Chair. USB/”Flash” drives used for this purpose must be encrypted.

 PHI may only be sent to individuals within Rush with an authorized need for the information. When sending information by electronic means, only Rush email may be used and the recipient must also have a “rush.edu” email address. NEVER use a personal email address to send or receive PHI.

 PHI may not be sent to ANY location external to Rush; any such requests must be reviewed by the Department Chair. Only de-identified data may be sent outside of Rush or stored on personal computers.

 Data analysis involving PHI must only be shared with committee members who are considered core faculty. Only de-identified data may be shared with other Committee members or those that are not directly part of the Study team.

 Upon course completion a determination must be made with your faculty advisor as to the disposition of data that you have used and stored during the course. If the Study is closed, all data must be deleted from personal devices/storage. Coordination must be made with the faculty advisor as to the storage location for data existing on the Rush network (such as personal “H: drives”). If the Study will be continued, IRB application and study data must be transferred to Committee Chair, and then deleted by the student.

 If there is ever a suspected loss or theft of items containing any information or if you ever suspect that information has been sent to a wrong location (such as emailed to a wrong email address) immediately notify the course faculty office. Reports of lost or stolen devices must also be reported to Rush Security Services at 312-942-5678.

Accommodations
Rush University is committed to attracting and educating students who will help to make the health care profession representative of the national population, including individuals with disabilities. In keeping with Rush University’s mission to promote diversity among its student population and providing equal access to its facilities, programs, services and learning opportunities, the University encourages students with disabilities to engage the Office of Student Disability Services as soon as they begin their program. Students should feel free to contact Marie Ferro-Lusk, Manager of Student Disability Services for Rush University to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings.

Accommodations are not provided retroactively and students are encouraged to register with the Office of Student Disability Services as soon as they begin their program. Additional information can be found online at the Office of Student Disability website or by contacting the Office of Student Disability Services. In order to respect student’s privacy and ensure a thoughtful interactive discussion, students should not make accommodation requests to individual faculty members, lecturers, or course directors, instead please contact:
Marie Ferro-Lusk, MBA, MSW, LSW
Manager, Student Disability Services
Rush University
600 S. Paulina St. Suite 440
Chicago, IL. 60612
Phone: (312) 942-5237
Fax: (312) 942-2778
Email: marie_s_ferro-lusk@rush.edu
Website: https://www.rushu.rush.edu/students-disabilities
# TENTATIVE WINTER QUARTER SESSION OUTLINE

<table>
<thead>
<tr>
<th>W</th>
<th>Date</th>
<th>Topics/Themes</th>
<th>Pre-class readings</th>
<th>Assignment(s) Due during Week</th>
<th>Tentative Location</th>
</tr>
</thead>
</table>
| 1 | Week of 1/2 | Writing an effective abstract; reviewing and updating the data dictionary; working with raw data files; data management & reduction | APA Manual, Chapter 1  
Sproull, Chapter 15                       | Critique video of own presentation  
Data dictionary                      |                                                |
| 2 | 1/9    | Creating new variables; assumptions about the data; running descriptive statistics | Review material in Blackboard Prior to class  
Corty, Chapters 1, 2, and 4  
Norman & Streiner, Chapter 11-3     | Revised paper based on fall feedback                                             |                                                |
| 3 | 1/16   | Data workshop                                                                | Corty, Chapters 1, 2, and 4  
Norman & Streiner, Chapter 11-3     |                                                |                                                |
| 4 | 1/23   | Assumptions about the data; bivariate and multivariate tests                  | Allison Chapters 2, 3, 4, 6 (projects with multiple linear regression)  
Corty, Chapters 1, 2, and 4  
Norman & Streiner, Chapter 11-3     | Descriptive statistics in tabular format                                           |                                                |
| 5 | 1/30   | Data workshop                                                                | Corty, Chapters 1, 2, and 4  
Norman & Streiner, Chapter 11-3     | Critique of committee process                                                    |                                                |
| 6 | 2/6    | Addressing data issues and data workshop                                     | Corty, Chapters 1, 2, and 4  
Norman & Streiner, Chapter 11-3     | Bivariate and multivariate results in tabular format                             |                                                |
| 7 | 2/13   | Interpreting the results; writing the results, conclusions and implications sections | APA Manual, Chapter 3                                                                 |                                                |                                                |
| 8 | 2/20   | Writing the abstract; describing the conclusions and implications to a lay audience; final presentation slides |                                                                                          | Results – narrative and tables                        |                                                |
| 9 | 2/27   | Dry run presentations and Finalizing the Project                             | APA Manual, Chapter 2  
Sproull, Chapter 16                   | Draft presentation slides  
Draft discussion                         |                                                |
| 10| 3/6    | Presenting the project                                                       |                                                                                          | Final presentation slides  
Final Master’s Project presentation       |                                                |
| 11| 3/13   | Wrapping up the project                                                      |                                                                                          | Final paper  
Critique of committee process            | No class                                      |
Winter Quarter Detailed Descriptions of Assignments for the Quarter and Grading Rubric for Each

**Deliverable 1: Critique of presentation video**

1  Clearly describes at least one strength and one opportunity for improvement
   Is a reflection on the student investigator’s oral presentation skills, content and fielding of questions

0.5  Fails to clearly describe at least one strength or one opportunity for improvement
   Primarily describes how well everything went rather than being a reflection

0  Fails to identify either strengths or opportunities for improvement

**Deliverable 2: Final data dictionary**

1  Identifies each original and created variable (variables)
   Defines each variable (definition)
   Describes how each variable is measured (measurement)
   Lists the categories for each categorical variable (categories)

0.5  Fails to include one element of the data dictionary (variables, definition, measurement, categories)

0  Fails to include two or more elements of the data dictionary (variables, definition, measurement, categories)

**Deliverable 3: Revised Paper**

1  Addresses all of the feedback on the written proposal from the course instructor and committee members

0.5  Addresses some of the feedback, but does not address all feedback or explain why feedback has not been incorporated

0  Does not address course instructor and committee feedback from fall quarter

**Deliverable 4: Descriptive statistics in tabular format and relevant output**

1  Presents descriptive statistics for each relevant variable (dependent, independent, control, moderator, mediator, etc.)
   Presents results in tabular format appropriate for final paper
   Includes relevant SPSS output as a Word or PDF file

0.5  Omits some relevant variables from the descriptive statistics

0  Does not present results in tabular format (e.g., only includes SPSS output)
   Submits SPSS output in SPSS file format rather than Word or PDF file format

**Deliverable 5: Critique of committee process**

1  Clearly describes at least one strength and one opportunity for improvement
   Is a reflection on the student’s progress in terms of committee management

0.5  Fails to clearly describe at least one strength or one opportunity for improvement
   Primarily describes how well everything is going rather than being a reflection

0  Fails to identify either strengths or opportunities for improvement
Deliverable 6: Bivariate and multivariate results in tabular format and relevant output
1 Presents bivariate and multivariate results for each relevant variable (dependent, independent, control, moderator, mediator, etc.)
   Presents results in tabular format appropriate for final paper
   Includes relevant SPSS output as a Word or PDF file

0.5 Omits some relevant variables from the results

0 Does not present results in tabular format (e.g., only includes SPSS output)
   Submits SPSS output in SPSS file format rather than Word or PDF file format

Deliverable 7: Results – narrative and tables
1 Describes sample in narrative format
   Describes bivariate and multivariate test results in narrative format
   Describes results relevant to research problem and hypothesis(es) when used
   Presents results in tabular format

0.5 Omits one key element from the deliverable

0 Omits more than one key element from the deliverable

Deliverable 8: Draft of presentation slides
1 Includes content related to the introduction, methods, results and conclusions/implications

0.5 Omits one important element

0 Omits more than one element

Deliverable 9: Draft discussion
1 Interprets results of statistical analysis
   Describes how your results relate to previous findings
   Describes how the result impact managerial or healthcare practice
   Discusses the study limitations and opportunities for future studies

0.5 Omits one important element

0 Omits more than one element

Deliverable 10: Final presentation slides
1 Submitted in final format

0 Not submitted or are incomplete

Deliverable 10a: Final presentation (no electronic submission for this deliverable)
The evaluation of the final presentation is based on the average of all written faculty evaluations from the oral presentation session. The evaluation is described in the Master’s Project Presentation Evaluation Form located in the Resources folder of Blackboard.
Deliverable 11: Final paper
Final papers must be submitted electronically. The course director’s assessment of the final written paper is described in the Master’s Project Course Instructor Final Report Grading Rubric located in the Resources folder of Blackboard. The final grade will be reduced one full letter grade for each calendar day that the final written proposal or final written report is late.

The committee’s assessment of the final written paper is described in the Master’s Project Committee Grading Rubric located in the Resources folder of Blackboard.

Deliverable 12: Critique of committee process
1 Clearly describes at least one strength and one opportunity for improvement
   Is a reflection on the student’s progress in terms of committee management

0.5 Fails to clearly describe at least one strength or one opportunity for improvement
   Primarily describes how well everything is going rather than being a reflection

0 Fails to identify either strengths or opportunities for improvement
Winter Quarter Detailed Class Descriptions and Class Objectives

Week 1
Writing a professional abstract; reviewing and updating the data dictionary; working with raw data files; managing and reducing the data

This session is dedicated to preparing the data for analysis and writing an abstract for a professional conference. At the end of this session, you will be able to

- Write an abstract suitable for conference presentation
- Finalize a data dictionary that accurately reflects your data
- Determine and describe the format of the raw data
- Manipulate the raw data files in various software packages
- Manipulate the raw data files to create a final working data set in the format appropriate for your analysis

Week 2
Creating new variables; understanding assumptions about the data relevant to descriptive statistics; running descriptive statistics

In this session, we will focus on preparing the data analysis and running descriptive statistics. At the end of this session, you will be able to

- Create new variables from the original data fields
- Understand how to identify and manage outliers
- Evaluate the extent to which missing data exist
- Determine how to handle missing data
- Evaluate whether the descriptive statistics described in your Master’s Project proposal are accurate
- Revise the statistical analysis plan relevant to descriptive statistics to accurately reflect your data and project
- Run descriptive statistics
- Create tables to present descriptive statistics

Week 3
Addressing data issues and data workshop

This session will be a hands-on session dedicated to creating new variables and running descriptive statistics. We will also address issues that you have encountered with your data. You are expected to bring your own data to class or work with the sample data, if your data are not available.

Week 4
Understanding assumptions about the data relevant to inferential statistics; running bivariate and multivariate statistics

In this session, we will focus on running inferential statistics. At the end of this session, you will be able to

- Identify whether parametric or non-parametric tests are appropriate for your data
- Evaluate whether the inferential statistics described in your Master’s Project proposal are accurate
- Revise the statistical analysis plan to accurately reflect your data and project
- Run bivariate statistical tests
• Run multivariate models
• Understand whether to reject the null hypothesis(es)

Week 5
Addressing data issues and data workshop

This session will be a hands-on session dedicated to creating new variables, running descriptive statistics, and running inferential statistical tests. We will also address issues that you have encountered with your data. You are expected to bring your own data to class or work with the sample data, if your data are not available.

Week 6
Addressing data issues and data workshop

This session will be a hands-on session dedicated to creating new variables, running descriptive statistics, and running inferential statistical tests. We will also address issues that you have encountered with your data. You are expected to bring your own data to class or work with the sample data, if your data are not available.

Week 7
Presenting data and results; interpreting the results; writing the results, conclusions and implications sections

This session will be dedicated to interpreting and presenting data and results and identifying the conclusions and implications of your results. At the end of this session, you will be able to

• Clearly and concisely describe the results of your study
• Effectively present the results of your study to a lay audience and professionals in the field
• Interpret the results in light of your original research question and hypothesis(es)
• Draw conclusions about your results
• Delve into the potential implications of your study for the health care management and policy fields

Week 8
Addressing data issues; writing the project abstract; describing the conclusions and implications

In this session, we will address issues with your data analysis and drafting the final aspects of the project. At the end of this session, you will be able to

• Clearly describe the implications of your study for the health care management and policy fields
• Demonstrate a rich understanding of your project results in context of the health care delivery system
• Describe how the results could be translated into practice
• Write a compelling abstract that will convince others to read your final report

Week 9
Finalizing the project; preparing the presentation slides

This session will be dedicated to finalizing the written report and preparing the presentation slides. At the end of this session, you will be able to

• Describe your project in a way that raises enthusiasm and interest in the question that you studied
• Convince others that your study is novel and intriguing
• Demonstrate a rich understanding of the project in context of the health care delivery system
• Clearly communicate the study goals, methodology and results to a lay audience
Week 10
Presenting the project

This week’s class session will be replaced by a special session to present your project to the Department of Health Systems Management students, faculty and alumni, key project stakeholders and the broader health care community. At the end of this session, you will be able to

- Prepare and deliver a professional quality presentation
- Concisely communicate relevant issues
- Demonstrate competency with presentation technology
- Demonstrate critical thinking by fielding questions from the audience
College of Health Sciences
Department of Health Systems Management

HSM 545 -
Organizational Analysis & Change

Course Syllabus – Winter Quarter 2017
Credit Hours:  4

Version 2016-12-27

Mondays and Wednesdays
1:00 – 2:50pm
975 Ac Fac

Course Director
Andrew Garman PsyD
Professor, HSM &
CEO, NCHL
312- 942-7892
Andy_N_Garman@rush.edu

Office Hours:
I am holding Fridays, 12-2 on my calendar as priority scheduling for office hours. Please send me a calendar invite via Outlook at least 24 hours in advance to ensure my availability. If an alternative time is needed, please contact me directly so we can arrange.
**Required Course Textbooks:**


**Additional Readings** (will be made available on Blackboard)


- “Managing the temporary team (ch 11),” pp. 127-135
- “Pretended agreement versus constructive controversy (Ch 5),” pp. 33-46
- “Handling conflict and confusion in teams (Ch 10),” pp. 113-125
- “Reducing inter-team conflict (Ch 13),” pp. 143-149


- “Defining organizational culture”

Other articles may be assigned with advance notice provided in class. If so, these will also be made available via Blackboard.

**Course Description and Primary Aims:**

This course is designed to help students develop a solid conceptual understanding of organizational processes from a socio-technical perspective, and gain experience in using this understanding to plan successful change efforts for individuals, teams, and organizations. The course places particular emphasis on developing student skills in observation and reflection on individual behavior, group processes, and systems. The course draws heavily on organizational and behavioral theory, but emphasizes application through team-based learning, experiential exercises and reflection on the exercises.
Course Prerequisites:

Placement of this course in the second year of full-time study in the M.S. in Health Systems Management Program (MS-HSM) is designed to ensure students have ample work experience upon which to reflect in expanding their understanding of management as it relates to individual behavior, team or work group performance, and organizational change.

- This course is designed to complement the Human Resources Management and the Health Planning and Marketing courses, by developing an understanding of how management and human resource practices can and should support strategic goals.
- This course provides a foundation for both the Strategic Management of Health Care Organizations course and the Governance, Inter-professionalism & Leadership course, which expand on students’ understanding and skills in applying concepts to the leadership role.

The formal prerequisites for this course are HSM 502 Health Care Organization and HSM 515 Human Resource Management.

Teaching and Learning Methods Used in this Course:

Teaching methods include:
- Individual preparation outside of class
- Brief lectures ("lecturettes")
- Team-based learning and experiential exercises in class (including case studies, in-class exercises and role-based simulations)
- Personal and collective (team) feedback
- Structured class discussions

Learning Outcomes:

Upon completion of this course, students will be able to:
- Describe organizational phenomena using the perspectives of motivation and control at the individual, team and organizational levels. (L4.1)
- Assess elements of organizational culture, and describe how they relate to organizational effectiveness and to the need for change. (L18.3)
- Prepare for, and more successfully navigate, interpersonally challenging discussions concerning performance and related topics (L15.1-2; L25.3)
- Assume a variety of team-based roles (including facilitator) in support of shared goals (L6.4)
- Explain work motivations at the individual and group levels, including appropriate interventions to improve motivation. (L5.5)
- Talk about and contribute, in a meaningful way, to discussions about appropriate interventions or plans for addressing organizational issues such as communication, work design, conflict management, process improvement, and organizational design or structures.
- Actively engage others in approaching a challenge so that problems are resolved and barriers removed for more effective outcomes. (L4.2)
- Understand and create conditions that enable a team to perform at its best, including soliciting input from others to promote the effectiveness of the group or process (L26.3)

Competency references are in parentheses; full competency descriptions follow.
Curriculum Goals/ Competencies:

HSM 545 is designed to shape your thinking about each of the following competencies associated with the National Center for Healthcare Leadership (NCHL) model:

- **Change leadership: Identifies Areas for Change and Expresses Vision for Change**: Publicly defines one or more specific areas where change is needed; identifies what needs to change (L4.1).
- **Change leadership**: Defines an explicit vision for change; modifies or redefines a previous vision in specific terms; outlines strategies for change (L4.2)
- **Collaboration: Builds team commitment**: Creating conditions of high performance in teams by building morale and cooperation within teams, breaking down participation barriers, and encouraging / facilitating beneficial resolutions to conflict (L5.5)
- **Communication: Facilitates group interactions**: Managing effective group processes, including time and participation management (L6.4)
- **Interpersonal Understanding: Recognizes emotions and concerns of others**: Recognizing and attending to thoughts and concerns expressed or evidenced by others (L15.1)
- **Interpersonal Understanding – Interprets emotions and verbal content**: Understands both emotion (by reading body language, facial expression, and/or tone of voice) and the content of what the person is saying; Accurately interprets emotion and content of what others say; Recognizes when the emotion and content do not appear to be in sync (L15.2).
- **Process Management and Organizational Design: Evaluates organization structure and design**: Using organization structure principles to design and improve performance (L18.3)
- **Talent Development: Provides constructive feedback and support**: Giving feedback in a balanced, behavioral, and constructive manner; providing constructive development expectations (L25.3)
- **Team Leadership: Promotes team effectiveness**: Creating conditions that enable a team to perform at its best; obtaining input from others to promote the effectiveness of the group or process (L26.3)

General Expectations:
Students are expected to maintain a professional demeanor at all times. This includes:

- **Timeliness**: Ensuring that you arrive to classes on time, and actively participate throughout the class period.
  - If you need to arrive late to a specific class, communicating this well in advance so that the course faculty, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
  - If you need to leave prior to the end of the class period, communicating this prior to the beginning of the class.
- **Focus**: This includes silencing or turning off laptops and other electronic mobile devices while class is in session, **unless they are being used specifically as tools to support your team’s work**. In addition to your full attention during class sessions being a basic expectation of the MS-HSM graduate program, it is also a common courtesy in many formal meetings and an important professional habit to develop.
- **Business casual dress attire**, at a minimum, is required when guest lecturers/discussants/panelists are scheduled to participate.
- **Expressing different opinions and disagreements respectfully**.
- **Submitting assignments** at the start of the class period listed if not otherwise instructed.
Policy on Missed Classes:

As an experiential and competency-focused class, participation in the in-class exercises is particularly important to mastering the course concepts. Missed classes will result in a commensurate loss of participation credit, and generally cannot be replaced through alternative assignments.

Assignments:

Homework assignments
There are four preparatory homework assignments during the quarter that involve applying the readings to your own experiences. Completion of these courses in advance very important to the in-class discussions. When you see a homework assignment due, you will need to submit it via Blackboard and also bring either a hardcopy or reliable electronic access to a copy with you to class for discussion.

I-RATs / G-RATs
The purpose of the “Readiness Assessment Tests” is to provide additional practice in understanding and applying the concepts covered by the readings and in-class exercises. There will be four iRATS during the quarter, at the times marked on the syllabus.

You will first take the I-RAT by yourself and turn it in for grading. Your team will then complete the same test (G-RAT) using a scratch-off form.

It is important to keep up with the readings! If you do not complete pre-class readings, it will show up in both in your I-RAT scores and in the team work necessary to complete the G-RAT as well as other experiential tasks assigned during each class. Doing the necessary preparation is key to being effective as a member of your team and potentially as a leader.

Team project: Organizational Change Assessment
The culminating assignment for the class is an organizational change assessment, which will involve applying the Kotter model and other course concepts to a change process. This assignment is described in more depth in a separate handout you will be receiving during class.

Elements of Final Course Grade:

Student Assessment
The final course grade will be computed as follows:

<table>
<thead>
<tr>
<th>Component</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class preparation, readiness, and participation**</td>
<td>10%</td>
</tr>
<tr>
<td>Individual assessments (I-RAT)*</td>
<td>20%</td>
</tr>
<tr>
<td>Group assessments (G-RAT)</td>
<td>20%</td>
</tr>
<tr>
<td>Individual homework assignments***</td>
<td>20%</td>
</tr>
<tr>
<td>Organizational change analysis (group)</td>
<td>30%</td>
</tr>
<tr>
<td>**</td>
<td>**</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
</tr>
</tbody>
</table>

*I-RAT grades will be monitored at the class level. If the class-as-a-whole does not perform significantly better than ‘chance’ on a given item, the item will be tossed out, and the remaining items will be pro-rated.
**Participation is a function of both class attendance and active, appropriate participation in class. “C” – level participation indicates suboptimal performance due to absences, tardiness, lack of preparation for class, under/over participation, and/or unprofessional behavior (a pattern of this behavior and/or performance over the entire quarter can result in a grade of “F”). “B” – level participation means arriving to class on-time, with assigned readings completed, and participating appropriately (not over-participating or under-participating, as well as demonstrating a professional level of respect for divergent opinions). “A” – level participation includes all of these elements, and adds the following: tying readings into the team and class discussion, asking insightful and (respectfully) provocative questions, synthesizing/building on discussion “themes,” and finding ways to apply course content to management practice.

***Individual homework assignments are primarily designed to prepare your participation in the in-class exercises, and to ensure your understanding of important concepts. Generally these assignments will involve applying concepts from the text and/or readings to your own experience, or to the experiences described in a case-study assignment. Assignments are described in Blackboard, and due dates are identified below. Please be sure to submit your assignments on time. Late assignments will still be accepted, but will not be eligible for as much credit as on-time assignments.

**Chronological Listing of all Turn-in Assignments and Due Dates**

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Due Date/Time</th>
<th>Class discussion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introductory assignment</td>
<td>Friday, 1/6, 9:00am</td>
<td>Monday, 1/9</td>
</tr>
<tr>
<td>Homework #1 (‘Org.Change’)</td>
<td>Monday, 1/9, 9:00am</td>
<td>Mon &amp; Wed 1/9 and 1/11</td>
</tr>
<tr>
<td><strong>Team assignment topics due</strong></td>
<td><strong>Friday 1/13, 5:00pm</strong></td>
<td></td>
</tr>
<tr>
<td>Homework #2 (‘Temp.team’)</td>
<td>Tuesday, 1/17, 9am</td>
<td>Wednesday, 1/18</td>
</tr>
<tr>
<td>Homework #3 (‘Culture’)</td>
<td>Monday, 1/23, 9am</td>
<td>Monday, 1/23</td>
</tr>
<tr>
<td>Homework #4 (‘Re-eng’)</td>
<td>Wednesday, 1/25, 9am</td>
<td>Wednesday, 1/25</td>
</tr>
<tr>
<td>Homework #5 (‘Org.Des’)</td>
<td>Monday, 2/13, 9am</td>
<td>Monday, 2/13</td>
</tr>
<tr>
<td>Team assignments</td>
<td>Monday 3/6, 9am</td>
<td>Mon 3/6 and Wed 3/8</td>
</tr>
</tbody>
</table>

This course uses the following grading scale (percentages) to determine the final course grade:

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100</td>
<td>A</td>
</tr>
<tr>
<td>80-89</td>
<td>B</td>
</tr>
<tr>
<td>70-79</td>
<td>C</td>
</tr>
<tr>
<td>Below 70</td>
<td>Not Passing</td>
</tr>
</tbody>
</table>

**Accommodations**

Rush University is committed to attracting and educating students who will help to make the health care profession representative of the national population, including individuals with disabilities. In keeping with Rush University’s mission to promote diversity among its student population and providing equal access to its facilities, programs, services and learning opportunities, the University encourages students with disabilities to engage the Office of Student Disability Services as soon as they begin their program. Students should feel free to contact Marie Ferro-Lusk, Manager of Student Disability Services for Rush University to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings.
Accommodations are not provided retroactively and students are encouraged to register with the Office of Student Disability Services as soon as they begin their program. Additional information can be found online at the Office of Student Disability website or by contacting the Office of Student Disability Services. In order to respect student’s privacy and ensure a thoughtful interactive discussion, students should not make accommodation requests to individual faculty members, lecturers, or course directors, instead please contact:

Marie Ferro-Lusk, MBA, MSW, LSW  
Manager, Student Disability Services  
Rush University  
600 S. Paulina St. Suite 440  
Chicago, IL. 60612  
Phone: (312) 942-5237  
Fax: (312) 942-2778  
Email: marie_s_ferro-lusk@rush.edu  
Website: https://www.rushu.rush.edu/students-disabilities

**Academic Integrity**

You are expected to demonstrate the highest level of academic integrity, be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the *Student Manual* and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the *Rush University Bulletin*.

**Summary Class Schedule**

A detailed description of assignments for the quarter is attached at the end of this document.
Class Schedule (note: may be subject to revisions in the interest of student learning, with advanced notice via e-mail or in class)

<table>
<thead>
<tr>
<th>Content Domain</th>
<th>Org. Level</th>
<th>Session</th>
<th>Pre-readings / Assignments</th>
<th>Competencies / Objectives</th>
<th>In-class agenda</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Introduction</td>
<td>(1/2)</td>
<td>None</td>
<td>Introduction to the course</td>
<td>-Review syllabus</td>
<td><strong>Complete / submit introductory assignment by 9am Friday, 1/6</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Livingston text – section 4.1 (does not need to be read ahead of time)</td>
<td>The psychological contract</td>
<td>-Psychological contracts exercise</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Complete / submit introductory assignment by 9am Friday, 1/6</strong></td>
<td>Introduction to organizational change</td>
<td>-Introduce OA Team Project</td>
<td></td>
</tr>
<tr>
<td>Introduction to organizational change</td>
<td>1 (1/4)</td>
<td>Livingston section 3.2</td>
<td>Individual motivations to work</td>
<td></td>
<td><strong>Complete / submit HW#1 – Org.Change assignment by 9am Monday, 1/9</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Kotter “Leading change” – Section 1</td>
<td>Leading and managing organizational change efforts</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Complete / submit HW#1 – Org.Change assignment by 9am Monday, 1/9</strong></td>
<td>(Guest facilitator: Elizabeth Wurth)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Kotter “Leading assignment” – Section 2</td>
<td>Leading and managing organizational change efforts</td>
<td>-Kotter model – discussion and application (part two)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>OA Team Project Topics Due by COB Friday 1/13</strong></td>
<td>(Guest facilitator: Elizabeth Wurth)</td>
<td>-Continue OA Team Project discussion</td>
<td></td>
</tr>
</tbody>
</table>

(Continues)
<table>
<thead>
<tr>
<th>Content Domain</th>
<th>Org. Level</th>
<th>Session</th>
<th>Pre-readings / Assignments</th>
<th>Competencies / Objectives</th>
<th>In-class agenda</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Motivation</strong></td>
<td>Individuals, Groups/teams</td>
<td>(1/16)</td>
<td><em>No Class will be held today in observance of the Martin Luther King Day of Service.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Complete / submit HW#2 – Temp.teams assignment by 9am Tuesday (1/17)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Reading from Osland text (Ch 2: “Theories of Managing People”)</td>
<td>Work motivations &amp; management</td>
<td>(Guest facilitator: Elizabeth Wurth)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Dyer: Managing the temporary team</td>
<td>Managing a temporary team</td>
<td>Managing others – class discussion</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Class exercise – Managing a temporary team</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4 (1/18)</td>
<td>Livingston – ch. 15 —Organizational Culture</td>
<td>Evaluating organization structure and design</td>
<td><strong>RAT #1</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Cameron and Quinn — excerpts (from Chapters 2-4, 7, and Appendix C)</td>
<td></td>
<td>Class exercise/discussion – Mini Organizational Culture and Climate Assessment</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Homework #3: Mini Organizational Culture and Climate Assessment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Homework #4: “Re-engineering” discussion</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>5 (1/23)</td>
<td>“Case study - reengineering for non-engineers”</td>
<td>Evaluating organization structure and design</td>
<td>Class discussion — “Re-engineering” case</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>6 (1/25)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Content Domain</td>
<td>Org. Level</td>
<td>Session</td>
<td>Pre-readings / Assignments</td>
<td>Competencies / Objectives</td>
<td>In-class agenda</td>
</tr>
<tr>
<td>----------------</td>
<td>------------</td>
<td>---------</td>
<td>-----------------------------</td>
<td>---------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Control</td>
<td>Individuals</td>
<td>7 (1/30)</td>
<td>Livingston ch 8</td>
<td>Interpersonal Communication in organizational control</td>
<td>Class exercise—Active Listening</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8 (2/1)</td>
<td>Livingston section 6.3</td>
<td>Performance management</td>
<td><strong>RAT #2</strong></td>
</tr>
<tr>
<td></td>
<td>Groups/teams</td>
<td>9 (2/6)</td>
<td>Livingston ch. 9</td>
<td>Working with group dynamics in work teams</td>
<td>Class discussion – Group Dynamics</td>
</tr>
<tr>
<td></td>
<td></td>
<td>10 (2/8)</td>
<td><strong>This class period is being made available for Team Project Interviews / Meetings and/or check-ins</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organizations</td>
<td></td>
<td>11 (2/13)</td>
<td>Livingston section 14.1</td>
<td>Organization design</td>
<td>Class discussion – Organization design</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Homework #5: Application Assignment, Org.Des</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>12 (2/15)</td>
<td>Likierman, 2009.</td>
<td>Sociotechnical systems and structures (cont’d)</td>
<td><strong>RAT #3</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Other reading(s) TBD.</td>
<td></td>
<td>Class exercise: “Balanced scorecard”</td>
</tr>
<tr>
<td>Content Domain</td>
<td>Org. Level</td>
<td>Session</td>
<td>Pre-readings / Assignments</td>
<td>Competencies / Objectives</td>
<td>In-class agenda</td>
</tr>
<tr>
<td>----------------</td>
<td>------------</td>
<td>---------</td>
<td>----------------------------</td>
<td>---------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Change</td>
<td>Individuals</td>
<td>13</td>
<td>Livingston – ch 13</td>
<td>Power and Influence</td>
<td>Class exercise: Power and influence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>14</td>
<td>Livingston - ch 11</td>
<td>Problem Solving</td>
<td>Class exercise – CincoTronics Role-Play</td>
</tr>
<tr>
<td></td>
<td>Groups/teams/Organizations</td>
<td>15</td>
<td>Livingston – ch 10</td>
<td>Conflict and Negotiation</td>
<td>RAT #4</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Working with team conflict</td>
<td>Class activity – negotiation exercise: film-making equipment</td>
</tr>
<tr>
<td></td>
<td></td>
<td>16</td>
<td></td>
<td></td>
<td><strong>This class period is being made available for finalizing team projects</strong></td>
</tr>
<tr>
<td>Synthesis / Integration</td>
<td>(All)</td>
<td>17</td>
<td><strong>Organizational Change Team Projects (All Team’s Written Assignments are Due at Beginning of this Class)</strong></td>
<td>Groups 1-3</td>
<td>Report-outs on Team Projects</td>
</tr>
<tr>
<td></td>
<td></td>
<td>19</td>
<td><strong>Organizational Change Team Projects</strong></td>
<td>Groups 4-5</td>
<td>Report-outs on Team Projects</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Summary discussion/ preview of HSM 593</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
College of Health Sciences  
Department of Health Systems Management

HSM 596 –  
Capstone: Strategic Management of  
Healthcare Organizations

Course Syllabus – Spring Quarter 2017  
Credit Hours: 4.0

Rev. 03.24.2017

Course Days: Tuesdays and Thursdays  
Times: 3:00-4:50  
Location: Armour Academic 952

Course Director:  
Deval Daily, MS-HSM  
Neurosciences Service Line Administrator  
Director, Offsite Ambulatory Practice Development  
Office Phone: 312-942-9217  
E-mail: Deval_Daily@rush.edu

Office Hours: Office hours can be accommodated by appointment. Please contact Deval Daily for availability.

Course Director:  
Robert Spadoni  
Vice President, Hospital Operations, Rush Oak Park Hospital  
Office Phone: 708-660-6660  
E-mail: Robert_Spadoni@rush.edu

Office Hours: Office hours can be accommodated by appointment. Please contact Cherise Williams (cherise_c_williams@rush.edu) or (708-660-6659) for availability and scheduling.

Required Course Textbook(s) & Additional Readings:  
- None  
- Case Studies are available for purchase and download at the following link:  
  http://cb.hbsp.harvard.edu/cbmp/access/62814575  
  Cases will need to be purchased individually by each student, as not to violate copyright regulations.

Optional Course Textbook(s): None

Additional Readings: As assigned.
Course Description and Primary Aims:
HSM 596 provides students with opportunities to apply the fundamentals of strategic planning and marketing, economics, finance, information system, and operations acquired in previous courses in the HSM curriculum to practical problems and decisions faced by real health care organizations. Students apply techniques of situational assessment, data analysis, strategy development and problem solving. As the capstone course for the HSM program, students are encouraged to integrate and refine their knowledge from all sources of learning in the HSM program to apply to business case studies. They conduct strategic analyses and develop and present strategic recommendations consistent with the mission, vision and values of an organization under the guidance of a teaching team of senior health care managers. The result is an improved ability to think critically, identify strategic challenges, complete strategic analyses for different business problems, and communicate clearly.

Course Pre-requisites: HSM 545, 552, 557, 559, 567, 572

Teaching and Learning Methods Used in this Course:
Students are expected to attain the basic knowledge contained in the course through readings/assigned materials and through short lectures and strategically-selected guest speakers. In addition, much of the class time will be geared more toward experiential teaching and learning methods (i.e. cases, role-playing, reflective learning, debates, student presentations, and class discussion), which require application of knowledge, skills, and abilities contained in the course. The course relies on a combination of assignments for practice of skills and abilities and for assessment of student attainment of competencies contained in the course.

Learning Outcomes:
At the conclusion of this class, students will be able to:
1. Describe the fundamentals of strategic planning, strategic analysis, decision making and analytical techniques.
2. Apply techniques of situational assessment, strategy analysis, and problem solving to real-world data sets.
3. Conduct strategic analysis and make strategic recommendations consistent with the mission, vision, and values of an organization.
4. Demonstrate an improved ability to think and write and present critically, identify strategic challenges and develop a complete strategic analysis for many different business problems.

Curriculum Goals/Competencies:
HSM 596 is designed to build students’ knowledge, skills, abilities and values in the following competency areas associated with the NCHL model:

L3 Analytical Thinking
Ability to understand situations, issues, or problems by organizing them into smaller pieces and identifying important relationships to help decipher future impact and/or implications.
- L3.2 Identifies Basic Relationships
- L3.3 Recognizes Multiple Relationships
- L3.4 Develops Complex Plans or Analyses
L6 Communication Skills
Ability to speak, write, and present in a clear, logical, and grammatical manner.
- L6.2 Prepares Effective Written Business Cases or Presentations
- L6.3 Makes Persuasive Oral Presentations

L11 Information Seeking
A desire for gaining knowledge and staying current with health, organizational, and industry trends.
Includes identifying exact information, investigating all avenues to resolve discrepancies, and scanning for potential opportunities.
- L11.2 Investigates Beyond Routine Questions
- L11.3 Delves Deeper

L14 Innovative Thinking
Ability to apply complex concepts, develop creative solutions, or adapt previous solutions in new ways.
- L14.1 Applies Basic Rules

L24 Strategic orientation
The ability to consider the business, demographic, ethno-cultural, political, and regulatory implications of decisions.
- L24.1 Conducts Environmental Scanning

General Expectations
- Students are expected to maintain a professional demeanor at all times. This includes:
  - Arriving for classes on time, and remaining attentive throughout.
    - If you need to arrive late to a specific class, communicating this well in advance so that the course director, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
    - If you will need to leave prior to the end of the class session, you should communicate this prior to the beginning of the class, in all cases generally and especially if there is a guest lecturer present. Leaving in the middle of a guest’s lecture without explanation, for any reason (even to go to the bathroom) can be highly disruptive.
  - Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in session. Your full attention during class sessions is a basic expectation of the MS-HSM graduate program. It is also a common courtesy in many formal meetings and an important professional habit to develop.
  - Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate. Dressing professionally sends the message that you are a professional and should be taken seriously. Failing to dress professionally sends the message that you are “just a student.” It reflects poorly not only on yourself but also on your peers.
  - Expressing disagreements respectfully.
- Active participation is critical and expected.
- Listed readings are to be completed prior to the class period listed in the syllabus.
- Assignments are due at the start of the class period listed; lateness, regardless of cause, will result in loss of some credit. Some assignments (e.g. the discussion questions and most pre-work assignments) will not be accepted late.
Policy on Missed Classes:
Absences should always be communicated in advance and every effort should be made to complete work in advance of the missed sessions. Students should notify Deval Daily ahead of any absences. Attendance is 5% of the grade.

Assignments:
All written assignments are to be double-spaced utilizing Times New Roman, size 12 font.
(Further details for specific assignments are provided later in the syllabus)

Grading Scale (Percentage):

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Grade Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100</td>
<td>A: reflects EXCELLENT work and superior understanding of material</td>
</tr>
<tr>
<td>80-89</td>
<td>B: reflects GOOD work</td>
</tr>
<tr>
<td>70-79</td>
<td>C: reflects ACCEPTABLE work, meeting the course objectives</td>
</tr>
<tr>
<td>Below 70</td>
<td>Not Passing</td>
</tr>
</tbody>
</table>

Elements of Final Course Grade:

- Attendance/Participation: 5%
- Guest Lecture Preparation: 5%
- Case Studies (3 Total): 30%
- Current Events: 10%
- Company Interview/Presentations: 30%
- Final Case: 20%

Total: 100%
Accommodations
In keeping with its goal to promote diversity among its student population, Rush University is committed to attracting and educating students who will help to make the population of health care professional’s representative of the national population, including students with disabilities. In addition, Rush University wishes to insure that access to its facilities, programs and services are available to students with disabilities. The University provides reasonable accommodations to all students on a nondiscriminatory basis consistent with legal requirements as outlined in the Americans with Disabilities Act (ADA) of 1990 and the Rehabilitation Act of 1973. A reasonable accommodation is a modification or adjustment to an instructional activity, facility, program or service that enables a qualified student with a disability to have an equal opportunity to participate in all Rush University student activities. To be eligible for accommodations, a student must have a documented disability as defined by the ADA and Section 504 of the Rehabilitation Act of 1973. Both the ADA and Section 504 define disability as (a) a physical or mental impairment that substantially limits one or more major life activities of such individual; (b) a record of such impairment; or (c) being regarded as having such a condition. Further information or questions can be directed to the College of Health Sciences faculty member, Richard Peach, PhD. He can be reached at (312) 942-3293 or Richard_Peach@rush.edu.

Further information can be found at:
http://www.rushu.rush.edu/catalog/aboutrush/disabilityrights.html

Academic Integrity
Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.

Further information can be found at:
http://www.rushu.rush.edu/catalog/acadresources/academichonesty.html
<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week One</td>
<td>Tuesday, March 28</td>
<td>Preparation: Review Syllabus; Assignment Due: N/A</td>
</tr>
<tr>
<td></td>
<td>Thursday, March 30</td>
<td>Preparation: N/A; Assignment Due: Submit questions for Mike Kasper, CEO, DuPage Medical Group; Class Time Agenda: 1. Environmental Assessment 2017 (B. Elegant), 2. Case Review – Presence Health; Guest Speaker(s): N/A</td>
</tr>
<tr>
<td>Week Two</td>
<td>Tuesday, April 4</td>
<td>Preparation: N/A; Assignment Due: Submit to Deval Current Event Analysis; Class Time Agenda: 1. Lecture – Developing and Evaluating Strategies (B. Elegant), 2. Current Events (3 Students); Guest Speaker(s): N/A</td>
</tr>
<tr>
<td></td>
<td>Thursday, April 6</td>
<td>Preparation: Review information on DuPage Medical Group; Assignment Due: Submit to Deval Current Event Analysis; Class Time Agenda: 1. Case study briefing (D. Daily), 2. Current Events (3 Students), 3. Guest Speaker; Guest Speaker(s): Mike Kasper, CEO, DuPage Medical Group</td>
</tr>
<tr>
<td>Week Three</td>
<td>Tuesday, April 11</td>
<td>Preparation: Review information on Humana Healthcare; Assignment Due: 1. Submit to Deval Current Event Analysis, 2. Submit to Deval Interview Correspondence, 3. Submit questions for Joan Moss, Senior VP &amp; CNO, Sg2; Class Time Agenda: 1. Lecture – Organizing for Successful Strategic Planning (R. Spadoni), 2. Current Events (3 Students); Guest Speaker(s): N/A</td>
</tr>
<tr>
<td></td>
<td>Thursday, April 13</td>
<td>Preparation: Read and Submit Case 1 – Virginia Mason; Assignment Due: 1. Submit to Blackboard Case Study 1, 2. Submit to Deval Current Event Analysis, 3. Submit questions for Michael Raymond, Chief Medical Officer, Rush Health; Class Time Agenda: 1. Case Overview (R. Spadoni), 2. Current Events (3 Students); Guest Speaker(s): N/A</td>
</tr>
</tbody>
</table>
## HSM 596 Syllabus (2017)

### WEEK FOUR

**Tuesday, April 18**

<table>
<thead>
<tr>
<th>Preparation</th>
<th>N/A</th>
</tr>
</thead>
</table>
| **Assignment Due** | Submit to Deval Current Event Analysis  
Submit questions for Praveen Thadani, President, Chicago Market for Humana |
| **Class Time Agenda** | 1. Lecture – Formulating Strategies (B. Elegant)  
2. Current Events (3 Students)  
3. Guest Speaker |
| **Guest Speaker(s)** | Joan Moss, Senior Vice President & CNO, Sg2 |

**Thursday, April 20**

<table>
<thead>
<tr>
<th>Preparation</th>
<th>Review information on Health Care Service Corporation (HCSC)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assignment Due</strong></td>
<td>1. Submit to Deval Environmental Assessments</td>
</tr>
</tbody>
</table>
| **Class Time Agenda** | 1. Environmental Assessment Presentations (3 groups)  
2. Guest Speaker |
| **Guest Speaker(s)** | Michael Raymond, Chief Medical Officer, Rush Health |

### WEEK FIVE

**Tuesday, April 25**

<table>
<thead>
<tr>
<th>Preparation</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assignment Due</strong></td>
<td>N/A</td>
</tr>
</tbody>
</table>
| **Class Time Agenda** | 1. Environmental Assessment Presentations (3 groups)  
2. Guest Speaker |
| **Guest Speaker(s)** | Praveen Thadani, President, Chicago Market for Humana |

**Thursday, April 27**

<table>
<thead>
<tr>
<th>Preparation</th>
<th>Review information on Trinity Health</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assignment Due</strong></td>
<td>Submit to Deval Current Event Analysis</td>
</tr>
</tbody>
</table>
| **Class Time Agenda** | 1. Current Events (2 Students)  
2. Lecture – Implementing Strategies (D. Daily) |
| **Guest Speaker(s)** | N/A |

### WEEK SIX

**Tuesday, May 2**

<table>
<thead>
<tr>
<th>Preparation</th>
<th>N/A</th>
</tr>
</thead>
</table>
| **Assignment Due** | Submit to Deval Current Event Analysis  
Submit to Blackboard Questions for Mike Dandorph, President & COO, RUMC |
| **Class Time Agenda** | 1. Lecture – Planning Considerations (R. Spadoni)  
2. Current Events (2 Students) |
| **Guest Speaker(s)** | N/A |

**Thursday, May 4**

<table>
<thead>
<tr>
<th>Preparation</th>
<th>Read and Submit Case 2 – Mt. Auburn</th>
</tr>
</thead>
</table>
| **Assignment Due** | Submit to Deval Current Event Analysis  
Submit to Blackboard Case 2 |
| **Class Time Agenda** | 1. Case 2 (R. Spadoni)  
2. Current Events (2 Students) |
<p>| <strong>Guest Speaker(s)</strong> | N/A |</p>
<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Preparation</th>
<th>Assignment Due</th>
<th>Class Time Agenda</th>
<th>Guest Speaker(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Seven</strong></td>
<td><strong>Tuesday, May 9</strong></td>
<td></td>
<td>Submit to Deval Current Event Analysis</td>
<td>1. Current Events (2 Students)</td>
<td>Michael Dandorph, President &amp; Chief Operating Officer, RUMC</td>
</tr>
<tr>
<td></td>
<td></td>
<td>N/A</td>
<td>Submit questions for Richard Byrne, MD, Chairman, University Neurosurgery</td>
<td>2. Guest Speaker</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Thursday, May 11</strong></td>
<td></td>
<td>Submit to Deval Current Event Analysis</td>
<td>1. Lecture – Healthcare Reform (R. Spadoni)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>N/A</td>
<td></td>
<td>2. Current Events (2 Students)</td>
<td></td>
</tr>
<tr>
<td><strong>Eight</strong></td>
<td><strong>Tuesday, May 16</strong></td>
<td></td>
<td></td>
<td></td>
<td>Richard Byrne, MD, Chair, University Neurosurgery</td>
</tr>
<tr>
<td></td>
<td></td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Thursday, May 18</strong></td>
<td></td>
<td>Read and Submit Case 3 – Hillside Hospital</td>
<td>1. Case 3 (D. Daily)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>N/A</td>
<td>Submit to Blackboard Case 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Tuesday, May 23</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>N/A</td>
<td>Submit to Deval Company Presentation and Write-up</td>
<td>1. Company Presentations (3 groups)</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Thursday, May 25: No Class – Commencement</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Notes:**
- Commencement: No class since it is Commencement Day.

---

**WEEK SEVEN**
- Preparation: N/A
- Assignment Due:
  - Submit to Deval Current Event Analysis
  - Submit questions for Richard Byrne, MD, Chairman, University Neurosurgery
- Class Time Agenda:
  1. Current Events (2 Students)
  2. Guest Speaker
- Guest Speaker(s):
  - Michael Dandorph, President & Chief Operating Officer, RUMC

**WEEK EIGHT**
- Preparation: N/A
- Assignment Due:
  - Submit to Deval Current Event Analysis
- Class Time Agenda:
  1. Lecture – Healthcare Reform (R. Spadoni)
  2. Current Events (2 Students)
- Guest Speaker(s):
  - Richard Byrne, MD, Chair, University Neurosurgery

**WEEK NINE**
- Preparation: N/A
- Assignment Due:
  - Submit to Blackboard Case 3
  - Submit questions for Peter Butler, President Emeritus, Rush University Medical Center
- Class Time Agenda:
  1. Case 3 (D. Daily)
- Guest Speaker(s):
  - N/A
<table>
<thead>
<tr>
<th>Preparation</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assignment Due</td>
<td>Submit to Deval “Thank You” note to company</td>
</tr>
<tr>
<td>Class Time Agenda</td>
<td>1. Company Presentations (3 groups)</td>
</tr>
<tr>
<td>Guest Speaker(s)</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**Tuesday, May 30**

<table>
<thead>
<tr>
<th>Preparation</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assignment Due</td>
<td>N/A</td>
</tr>
<tr>
<td>Class Time Agenda</td>
<td>1. Guest Speaker</td>
</tr>
<tr>
<td>Guest Speaker(s)</td>
<td>Peter Butler, President Emeritus, Rush University Medical Center</td>
</tr>
</tbody>
</table>

**Thursday, June 1**
## HSM 596 Assignment Schedule

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Due Date/Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submit Questions for Mike Kasper</td>
<td>3/30/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit to Deval Current Event Analysis</td>
<td>4/4/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit to Deval Current Event Analysis</td>
<td>4/6/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit to Deval Event Analysis</td>
<td></td>
</tr>
<tr>
<td>Submit to Deval Interview Correspondence</td>
<td>4/11/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit Questions for Joan Moss</td>
<td></td>
</tr>
<tr>
<td>Submit to Blackboard Case Study 1</td>
<td>4/13/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit to Deval Current Event Analysis</td>
<td></td>
</tr>
<tr>
<td>Submit Questions for Michael Raymond</td>
<td></td>
</tr>
<tr>
<td>Submit Questions for Praveen Thadani</td>
<td>4/18/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit to Deval Environmental Assessments</td>
<td>4/20/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit to Deval Current Event Analysis</td>
<td>4/27/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit to Deval Current Event Analysis</td>
<td></td>
</tr>
<tr>
<td>Submit to Blackboard Questions for Mike Dandorph</td>
<td>5/2/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit to Deval Current Event Analysis</td>
<td>5/4/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit To Blackboard Case Study 2</td>
<td>5/9/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit to Deval Current Event Analysis</td>
<td>5/11/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit to Deval Current Event Analysis</td>
<td>5/16/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit to Blackboard Case Study 3</td>
<td>5/18/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit to Deval Company Presentation and Write-up</td>
<td>5/23/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit Questions for Peter Butler</td>
<td></td>
</tr>
<tr>
<td>Submit to Deval &quot;Thank You&quot; note to Company</td>
<td>5/30/2017 by 9:00am</td>
</tr>
<tr>
<td>Submit to Deval Current Event Analysis</td>
<td>6/1/2017 by 9:00am</td>
</tr>
</tbody>
</table>
Detailed Descriptions of Assignments for the Quarter and Grading Rubric for Each

**Guest Lecture Preparation**
- Students are required to submit two thoughtful questions one week ahead of the guest speaker. Questions should reflect knowledge of the organization and person’s role. An assignment will be posted on Blackboard to enable question submissions and are due at 9:00 a.m. that day. Guest lecturers will be aware of your questions ahead of the topic, but students are expected to ask additional questions and actively engage in the discussions.
- Additional materials may be distributed in advance of certain guest lectures. Preparation of these materials is expected.
- Students are also asked to complete an online evaluation for each guest lecturer. Evaluations are available for you to complete via Blackboard.

**Class Participation**
- Students should be prepared to participate in class discussions by doing assigned readings and completing all other assignments.
- A significant amount of the class participation grade will be based on participation during case class sessions.

**Case Studies**
- Class sessions utilizing cases will be discussion based classes that require participation from all members of the class. Individual preparation is required to be able to participate fully in class. Students may wish to form informal groups to discuss the details of the case ahead of the discussion in class.
- Cases 1-4 will require a 1000 word or fewer write-ups and must be submitted to Blackboard prior to the start of class. The rubric used to evaluate the write-up is attached.

**Current Events**
- Starting April 5th, students (based on the current event sign-up sheet) will be required to find a recent article, health care related, and prepare a 250 word write-up on how the article is relevant to strategic management. Students are also asked to create 2 questions related to the article that they wish to discuss in class. The actual article is not required for submission, but the proper reference should be included.
- Assignment dates will be selected on the first day of class.
- Students will speak to the class about the article summary and their written synopsis and engage fellow classmates in a short discussion based on questions submitted.
- All submissions are due to Blackboard by 9 a.m. the day the article is presented.

**Company Interview and Presentations**
Students will meet with senior management of healthcare companies to interview them about their strategic planning processes. Students should treat these meetings like any professional interview—professional dress and behavior are required.

Objectives:
- Gather information from the field about the executive level approach to strategic planning and leadership in health care
- Apply strategic planning concepts learned through textbook and class discussions
- Share learning perspectives with the class
- Network with senior healthcare executives in a productive manner
March 29: Group Assignment
• Groups are selected and assigned a company

Prior to April 5th
• Contact executive at company and schedule an interview date and time

April 12: Turn in Interview Correspondence for Review by Instructor (Email directly to Deval)
Correspondence to include: Letter of introduction, student resumes, summary of interview questions, and confirmation of interview date and time
• The following topics/questions should be addressed in your interviews and should reflect some basic knowledge of the organization
  o How does the company try to meet the needs of its constituents/ community?
  o What is your organization’s strategic planning process?
  o What is leadership’s role in this process?
  o How is the strategic plan integrated throughout the organization? How is it implemented?

April 21 & 26: Presentations on Environmental Assessment (Submit to Deval by 9a.m.)

Presentations (Grading rubric is provided later in the syllabus):
• 10 minute PowerPoint presentation on company’s environmental analysis (external and internal)
• Each member is required to present
• Audience members are encouraged to ask questions

April 28th to May 20: Company Meetings

May 26 and May 31: Presentation and Write-up (Submit to Deval by 9 a.m.)
• Presentation
  ▪ 10 minute PowerPoint presentation related to interview with company executive
  ▪ Each member is required to present
  ▪ Audience members are encouraged to ask questions
• Write-Up
  ▪ 5 page (double spaced) written summary of organization’s interview and reflection on their strategic planning process
Follow-Up Letter to Company – Must be sent to Deval Daily prior to sending

- Should include a thank you message and share your observations / impressions of the company and of the strategic planning process

### Contacts for Company Interviews

<table>
<thead>
<tr>
<th>Company</th>
<th>Contact</th>
<th>Title</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advocate Health Care</td>
<td>Scott Powder</td>
<td>Senior Vice President, Chief Strategy Officer</td>
<td>(Schedule through Linda Annese) 630-929-8744</td>
</tr>
<tr>
<td>Advocate Lutheran General Hospital</td>
<td>Richard B. Floyd</td>
<td>President and CEO</td>
<td>(Schedule through Joanna Werling 847-723-8446)</td>
</tr>
<tr>
<td>North Shore University Health System</td>
<td>Doug Silverstein</td>
<td>President and CEO</td>
<td>847-570-2006</td>
</tr>
<tr>
<td>Rush – Copley Medical Center</td>
<td>Barry Finn</td>
<td>President and CEO</td>
<td>630-978-4976</td>
</tr>
<tr>
<td>Swedish Covenant Hospital</td>
<td>Anthony Guaccio</td>
<td>President and CEO</td>
<td>(Schedule through Laura Weiss 773-878-8200 Ext. 5032)</td>
</tr>
<tr>
<td>Northwest Community Hospital</td>
<td>Stephen Scogna</td>
<td>President and CEO</td>
<td>Stacy Reynolds EA 847-618-5007</td>
</tr>
</tbody>
</table>

- You should call to schedule the appointment as soon as possible.
- When calling to schedule the appointment, please let the administrative assistant know that you are a student at Rush University and that Mr. Elegant from Rush Oak Park Hospital had spoken to the person about serving as a contact for the class.
- Also let them know your time constraints – interviews are to take place between April 11 and May 9.
- One hour should be adequate for the interview.
- Also let them know that you will be sending a packet with interview questions in advance of the meeting. Get mailing information if needed.
- Please let Deval Daily or Bruce Elegant know IMMEDIATELY if you are having any problems scheduling the appointment

---

**Company Interviews**

13
GRADING CRITERIA
HSM 596: STRATEGIC ANALYSIS

GROUP NAMES___________________________________________________________

Correspondence /5
- Letter of Introduction
- Student Resumes
- List of Interview questions—these should reflect that the group has done some basic research on the company

Environmental Assessment Presentation /30
The presentation should be 10 minutes in length allowing for an additional 5 minutes of questions/answers.
- Is a comprehensive environmental and competitor assessment provided? This should highlight the key market issues that the group thinks are relevant to the organization’s strategy.
- Is the organization’s position assessed (strength, weakness, etc.)? This should highlight service lines and resources.
- The background analysis should identify and highlight what the group believes are the critical issues for the organization.
- Based on this, what does the group recommend the organization’s strategies should be? Did the group provide evidence to support the recommendations?

Final Company Presentation /30
The presentation should be 10 minutes in length allowing for an additional 5 minutes of questions/answers.
- Review key findings from the environmental assessment
- Describe the strategic planning process of the organization, including how is the plan integrated, incorporated and implemented throughout the organization
- Critique the company’s process—pros/cons of their process relative to what you know from class, industry knowledge and other sources. How well did the company’s strategy match the group’s recommendations?
  - Was the presentation clear, organized and well-communicated?
  - Did the team work together productively, with all team members participating?
  - How well did the team field questions and defend its position?

Final Company Write-up /30
The paper should be 5 pages in length, typed and double-spaced (exclusive of any supporting figures or graphs).
- Paper includes everything listed above for the Final Company Presentation
- Is the paper well-written, grammatically correct, and spell-checked?
- Did the author appropriately cite any references and include them in the bibliography?

Group turns in a copy of the final thank-you note /5

Total Points: /100

Comments:________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Company Interview Write-up (30%)
5 pages double spaced. Total summary length should not exceed 5 pages.

<table>
<thead>
<tr>
<th>Description</th>
<th>Possible Points</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well-written, using correct grammar and sentence structure</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>A: 18-20;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Well-written sentences and consistent and proper use of grammar</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Writes with clarity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B: 16-17;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Includes minor spelling, grammar and punctuation errors</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Includes some contradictory statements between sections of paper</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C: 14-15;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Includes spelling, grammar and punctuation errors</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Includes contradictory statements between sections of paper</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F: &lt;13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Commits major errors in</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Format</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Spelling</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Punctuation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ English grammar</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Provides written work that is difficult to follow the discussion at times</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Environmental assessment and critical issue identification</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>A: 27-30;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Critical Issues and Assessment were done well</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B: 24-26;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Less complete/accurate assessment and issue identification was provided</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C: 21-23;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Either an assessment or issue identification was not completed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F: &lt;21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Neither an assessment or issue identification was not completed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clear, specific recommendations and reasoning</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>A: 27-30;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Clear and specific</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B: 24-26;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Provided, but more vague reasoning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C: 21-23;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Reasoning for recommendation was not provided</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F: &lt;21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Recommendation was not provided.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Incorporates class concepts</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>A: 18-20;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Mentions terms and concepts consistently in paper</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B: 16-17;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Makes brief mention/use of concepts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C: 14-15;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Mentions concepts but uses incorrectly</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F: &lt;13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Does not mention</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Presentation (30%)

<table>
<thead>
<tr>
<th>Written presentation/slide format and clarity</th>
<th>Possible Points</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A: 18-20;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Slides are easily read and formatted well; Convey message of slide well</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B: 16-17;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Slides are less consistent in formatting and in message</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C: 14-15;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Slides cannot be read</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Contain too much or too little information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F: &lt;13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Formatting is unacceptable for formal presentation or do not exist</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Verbal presentation skills                  | 20              |                |
| A: 18-20;                                   |                 |                |
| - Student speaks clearly and concisely and stays within timeframe |                 |                |
| B: 16-17;                                   |                 |                |
| - Student speech includes some ‘ums’ and has opportunity to convey message more directly |                 |                |
| C: 14-15;                                   |                 |                |
| - Student is long-winded and less directed with comments |                 |                |
| F: <13                                      |                 |                |
| - Improper language used                    |                 |                |

| Clear, specific recommendations and reasoning | 40              |                |
| A: 36-40;                                    |                 |                |
| - Clear and specific                         |                 |                |
| B: 32-35;                                    |                 |                |
| - Provided, but more vague reasoning         |                 |                |
| C: 28-31;                                    |                 |                |
| - Reasoning for recommendation was not provided |                 |                |
| F: <28                                       |                 |                |
| - Recommendation was not provided.           |                 |                |

| Responses to Questions                      | 20              |                |
| A: 18-20;                                   |                 |                |
| - Answers all questions in non-defensive manner |                 |                |
| - Has good, clear answers                   |                 |                |
| B: 16-17;                                   |                 |                |
| - Misses opportunity to answer question completely |                 |                |
| C: 14-15;                                   |                 |                |
| - Indications that student does not understand question and does not answer completely |                 |                |
| F: <13                                       |                 |                |
| - Cannot answer questions consistently       |                 |                |

| Point Total                                 |                 |                |

Additional Comments:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
**Class Participation Grading Rubric: General Guidance on class presence, professional demeanor, and participation**

**Class Participation**
- In-class participation will be evaluated based on the rubric below.
- Credit for participation is earned through your contributions to the quality of the class learning environment.
- Participation is judged based on current performance in class – in other words, a grade assigned on a particular day only relates to that day.

<table>
<thead>
<tr>
<th>Criteria considered in grading:</th>
<th>Not Passing (&lt;70%)</th>
<th>“C” Level (70 – 79%)</th>
<th>“B” Level (80-89%)</th>
<th>“A” Level (90-100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participation</td>
<td>Does not ask / answer any questions; does not make relevant comments during the session; or significantly derails the agenda of the class. Does not submit questions for guest lecture.</td>
<td>Does not contribute to class discussion, or participates but comments are off-topic and/or reflective of a lack of preparation (e.g. asking questions that the readings already clearly addressed). Does not submit questions on time for guest lectures</td>
<td>Contributes at a good level (but without dominating); contributions add to the class discussion. Submits questions on time, but are do not address topic presented nor speaker’s background</td>
<td>Contributions augment; synthesizes / incorporates readings and assignments into the class discussion. Submits two thoughtful questions on-time</td>
</tr>
<tr>
<td>Professionalism</td>
<td>Noticeably off-task during the class and/or distracting to others. Examples include, but not limited to: attending to non-class matters (checking e-mails / PDAs and/or using a personal laptop not directly relevant to what’s going on in the class), cell phone/pager noise, off-topic conversations / passing notes / texts</td>
<td>Generally attentive but engages in one or more side conversations or other off-task activities. Cell phone / pager noise is heard once during class.</td>
<td>Conversations are focused on the in-class discussion. No peripheral noises or distractions (cell phones, pagers, and other devices).</td>
<td>Conversations are focused on the in-class discussion. No peripheral noises or distractions (cell phones, pagers, and other devices).</td>
</tr>
<tr>
<td>Professionalism</td>
<td>Professionalism is lacking in one or more major ways (e.g. unprofessional dress, derogatory and/or other highly unprofessional language)</td>
<td>Professionalism is lacking in one or more minor ways (e.g. overly casual dress, use of slang and/or disrespectful or arrogant language)</td>
<td>Class participation reflects a good level of professionalism</td>
<td>Class participation reflects a noticeably high level of professionalism</td>
</tr>
</tbody>
</table>
Case Study Rubric

<table>
<thead>
<tr>
<th>Trait</th>
<th>Level 1 Minimal</th>
<th>Level 2 Emerging</th>
<th>Level 3 Competent</th>
<th>Level 4 Exemplary</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Problem Definition</strong></td>
<td>Does not identify and summarize the problem, is confused or identifies a different or inappropriate problem.</td>
<td>Identifies only the main problem and does not recognize or state any subsidiary, imbedded or implicit aspects of the issue. General problem statement with wide applicability.</td>
<td>Clearly identifies the main problem with some subsidiary or implicit aspect of the issue. Specific issues are defined in relationship to the case facts.</td>
<td>Identifies and clearly states not only the basics of the problem, but recognizes all of the nuances of the issue. Sufficiently focused and supported by case facts to allow for executive action.</td>
<td>/10</td>
</tr>
<tr>
<td><strong>Critical Issues</strong></td>
<td>Does not surface the critical challenges and issues that underlie the problem.</td>
<td>Identifies at least 1 of the critical challenges and/or issues that underlie the problem and presents a general argument as to why it is important.</td>
<td>Identifies most of the critical challenges and/or issues that underlie the problem and presents case facts to support why they are important.</td>
<td>Identifies all of the critical challenges and/or issues that underlie the problem and presents case facts to support why they are important.</td>
<td>/15</td>
</tr>
<tr>
<td><strong>Provides Quality Evidence</strong></td>
<td>Provides insufficient evidence of the problem and/or other statements in the report. Repeats information provided, taking it as truth or denies evidence without adequate justification.</td>
<td>Evidence is used but not carefully examined. Sources are not questioned for accuracy, precision, relevance, and completeness. Inferences of cause and effect are made but not complete or accurate. Facts and opinions are not stated as such and not distinguished from value judgments.</td>
<td>Examines the evidence and its sources, questions its accuracy, precision, relevance and completeness. Cause and effect are stated but not complete or accurate. Facts and opinions are stated as such although not clearly distinguished from value judgments.</td>
<td>Evidence is identified and carefully examined. Sources are questioned for accuracy, precision, relevance and completeness. Accurately observes cause and effect. Facts and opinion are stated and clearly distinguished and value judgments acknowledged.</td>
<td>/15</td>
</tr>
<tr>
<td><strong>Analysis</strong></td>
<td>The analysis is superficial and/or inaccurate. Analysis is based on the thinking and assumptions of the writer and may not support the goals and recommendations.</td>
<td>The analysis is based on various facts from the case but not presented in a clear or comprehensive manner. Logical inferences are not drawn to make a compelling argument. Analysis of the environment, the industry, the company’s resources, and competitors may be presented but are not clearly connected to the recommendations.</td>
<td>The analysis is consistent with the material in the case and provides sufficient evidence to make a compelling argument for the chosen recommendation. Analyses of the environment, the industry, company resources, and competitors are appropriately drawn from the case but inferences are not drawn to support the chosen recommendations.</td>
<td>The analysis is consistent with the material in the case and provides sufficient evidence to make a compelling argument for the chosen recommendation. Analyses of the environment, the industry, company resources, and competitors are appropriately drawn from the case and correct inferences are drawn to support the chosen recommendations.</td>
<td>/15</td>
</tr>
<tr>
<td>Trait</td>
<td>Level 1 Minimal</td>
<td>Level 2 Emerging</td>
<td>Level 3 Competent</td>
<td>Level 4 Exemplary</td>
<td>Score</td>
</tr>
<tr>
<td>------------------------</td>
<td>--------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
<td>-------</td>
</tr>
<tr>
<td>Goals and Recommendation</td>
<td>No goals or recommendations are made or are so general as to be of no value.</td>
<td>Goals and recommendations are stated but not explained and are too general to support specific strategic action items. Recommendations are one of the alternatives listed.</td>
<td>Goals and recommendations are clearly stated and explained but may not be specific enough to serve as the basis for strategic actions. Recommendations are one of the alternatives listed that support the goal in general.</td>
<td>Goals and recommendations are clearly stated and explained and are specific enough to serve as the basis for strategic actions. Recommendations are one of a combination of the alternatives listed that best support the stated goals.</td>
<td>/15</td>
</tr>
<tr>
<td>Strategic Actions</td>
<td>Action items are limited or missing or do not support the recommendations in whole or part.</td>
<td>Actions are general in nature and support the recommendations. They may not be completely feasible and may not fit well or provide a distinct approach.</td>
<td>Clear, specific and feasible action items are listed that include who, what, and when. They directly support the recommendations but may not fit with each other or may not be unique to the industry with appropriate tradeoffs discussed.</td>
<td>Clear, specific and feasible action items are listed that include who, what, and when. They fit with each other and directly support the recommendations. They are unique to the industry with appropriate tradeoffs discussed.</td>
<td>/15</td>
</tr>
<tr>
<td>Writing</td>
<td>Organization is not logical and word choice is haphazard. Significant spelling or grammar errors exist. Exhibits are nonexistent or repeat from the case or do not support the statements made.</td>
<td>The paper is logically organized but word choice may not be precise, or may be redundant and verbose. Some spelling and grammar errors exist. Connections among ideas may not be clear. Exhibits may not support the statements in the report or may be merely copies or restatements of those in the case.</td>
<td>The paper is logically organized and word choice is precise and economical. Relationships among the ideas are evident but may not be clearly expressed. A few spelling and grammar errors may exist. Exhibits support the statements in the main body. They have been developed by the writer but may not be clear and effective.</td>
<td>The paper is logically organized and word choice is precise and economical. Ideas in the report and the relationships among them are clearly expressed. Spelling and grammar are accurate. Exhibits are developed by the author and are clear and effective in supporting the statements in the report.</td>
<td>/15</td>
</tr>
</tbody>
</table>
College of Health Sciences
Department of Health Systems Management

HSM 590
Practice Management
Course Syllabus – Spring 2016
Credit Hours: 2

Course Days: Monday
Times: 4:00 – 5:50 pm
Location: AAC 969

Course Director:
Michelle Hirschman, MBA
Adjunct Faculty, HSM
Department Administrator, CVT Surgery
Phone: (312) 563-4518
Office: POB 1156
Email: Michelle_Hirschman@rush.edu
Office Hours: by appointment

Course Co-Director:
Sara Turley, MBA
Adjunct Faculty, HSM
Division Administrator, Cardiology
Phone: (312) 563-2309
Office: Kellogg 333
Email: Sara_Turley@rush.edu
Office Hours: by appointment

Required Course Textbook(s): There is no required textbook for this course.

Additional Readings:
Additional required readings will be assigned and will be posted on Blackboard at least one week prior to class. Students are encouraged to review the MGMA Body of Knowledge for Medical Practice Management prior to the start of this course: http://www.mgma.com/education-certification/certification/body-of-knowledge/medical-practice-management-body-of-knowledge

Course Description:
As the healthcare landscape continues to evolve, it is essential that today’s healthcare leader can manage and grow medical practices. This course will focus on equipping students with a fundamental understanding of the complexities of ambulatory care including: patient care workflows, patient access, resource utilization, legal and compliance guidelines, technology integration, provider and staff recruitment and engagement, principles of reimbursement and revenue cycle, and the patient experience. Students will observe medical practice operations first-hand as well as participate in a series of real-time analytic exercises to better recognize the significance of various influences on practice success and growth.

Course Pre-requisites:
Enrolled in Health Systems Management Program or by Instructor Permission.
Teaching and Learning Methods Used in this Course:
Students are expected to attain the basic knowledge contained in the course through readings/assigned materials and through preparation prior to class. While short lectures and strategically-selected guest speakers may be used, the majority of class time will be geared more toward experiential teaching and learning methods (i.e. cases, role-playing, individual and group reflective learning, group and class discussion, and sharing of homework and other assignments), which require application of knowledge, skills, and abilities contained in the course. The course relies on a combination of individual and small team assignments for practice of skills and abilities and for assessment of student attainment of competencies contained in the course.

Learning Outcomes:
At the conclusion of this class, students will be able to:
• Understand key principles of ambulatory care management and leadership
• Analyze data and performance metrics to develop programmatic growth strategies
• Manage resource utilization to maximize profits
• Understand the importance of aligning provider and medical group incentives and compensation
• Manage the implementation of medical group policies and procedures
• Understand the importance of legal, compliance and risk management within a medical practice

Curriculum Goals/Competencies:
HSM 590 is designed to build students’ knowledge, skills, abilities and values in the following competency areas associated with the NCHL model:

• L3.3 Analytical Thinking: Recognizes Multiple Relationships
• L4.1 Change Leadership: Identifies Areas for Change
• L9.3 Human Resources Management: Aligns Human Resource Functions with Strategy
• L11.2 Information Seeking: Investigates Beyond Routine Questions
• L12.1 Information Technology Management: Recognizes the Potential of Information Systems in Process and Patient Service Improvement
• L13.3 Initiative: Looks Ahead to Take Action Short-Term
• L14.2 Innovative Thinking: Recognizes Patterns Based on Life Experiences
• L17.1 Performance Management: Monitors Indicators of Performance
• L19.2 Professionalism: Promotes Organizational Integrity
• L24.1 Strategic Orientation: Conducts Environmental Scanning

General Expectations
• Students are expected to maintain a professional demeanor at all times. This includes:
  • Arriving for classes on time and remaining attentive and engaged throughout.
    • If you need to arrive late to a specific class, communicating this well in advance so that the course director, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
    • If you will need to leave prior to the end of the class session, you should communicate this prior to the beginning of the class in all cases generally and especially if there is a guest lecturer present. Leaving in the middle of class or a guest’s lecture without explanation, for any reason (even to go to the bathroom) can be highly disruptive.
  • Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in session. Your full attention during class sessions is a basic expectation of the MS-HSM graduate program. It is also a common courtesy in many formal meetings and an important professional habit to develop.
  • Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate. Dressing professionally sends the message that you are a professional and should be taken seriously. Failing to dress professionally sends the message that you are “just a student.” It
reflects poorly not only on yourself but also on your peers.

- Expressing disagreements respectfully.
- Active participation is critical and expected.
- Listed readings are to be completed prior to the class period listed in the syllabus.
- Assignments are due at the start of the class period listed; lateness, regardless of cause, will result in loss of some credit. Some assignments (e.g. the discussion questions and most pre-work assignments) will not be accepted late.

Accommodations:
In keeping with its goal to promote diversity among its student population, Rush University is committed to attracting and educating students who will help to make the population of health care professionals representative of the national population, including students with disabilities. In addition, Rush University wishes to insure that access to its facilities, programs and services are available to students with disabilities. The University provides reasonable accommodations to all students on a nondiscriminatory basis consistent with legal requirements as outlined in the Americans with Disabilities Act (ADA) of 1990 and the Rehabilitation Act of 1973. A reasonable accommodation is a modification or adjustment to an instructional activity, facility, program or service that enables a qualified student with a disability to have an equal opportunity to participate in all Rush University student activities. To be eligible for accommodations, a student must have a documented disability as defined by the ADA and Section 504 of the Rehabilitation Act of 1973. Both the ADA and Section 504 define disability as (a) a physical or mental impairment that substantially limits one or more major life activities of such individual; (b) a record of such impairment; or (c) being regarded as having such a condition. Further information or questions can be directed to the College of Health Sciences faculty member, Richard Peach, PhD. He can be reached at (312) 942-3293 or Richard_Peach@rush.edu.

Further information can be found at:
http://www.rushu.rush.edu/catalog/aboutrush/disabilityrights.html

Academic Integrity
Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.

Further information can be found at:
http://www.rushu.rush.edu/catalog/acadresources/academichonesty.html

Policy on Missed Classes:
One class may be excused with a one-page written case study.
Two classes will result in a letter grade deduction.

Grading Scale (Percentage):

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>90-100%</td>
</tr>
<tr>
<td>B</td>
<td>80-89%</td>
</tr>
<tr>
<td>C</td>
<td>70-70%</td>
</tr>
<tr>
<td>Not Passing</td>
<td>Below 70%</td>
</tr>
</tbody>
</table>
Elements of Final Course Grade:

- Class Participation: 20 points
- Assignment 1: Observation Summary: 10 points
- Assignment 2: Policies & Procedures: 10 points
- Assignment 3: Current Event Article: 10 points
- Final Project & Presentation: 50 points
- Total: 100 points

Class Participation:
- Attendance requires one to be on time, seated and ready to engage the teacher and cohort in discussion pertinent to the course material.
- Attention requires a student to focus on class conversations without extraneous distractions and with respect for the opinions of others.
- Participation means the student will contribute to dialogue on the subject matter in a constructive manner while referencing articles or book materials that enhance the quality of the dialogue to a higher level.
- Professional demeanor for students in this program is evidenced by a high level of maturity towards others and respect for the course director.

Participation Rubric:
Credit for participation is earned through your contributions to the quality of the class learning environment. Participation is judged based on current performance in class – in other words, a grade assigned on a particular day only relates to that day.

<table>
<thead>
<tr>
<th>Criteria considered in grading</th>
<th>Not Passing</th>
<th>“C” Level</th>
<th>“B” Level</th>
<th>“A” Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class attendance</td>
<td>Substantially late to or absent from class; no advance explanation provided.</td>
<td>Arrives to class later than the the scheduled start time. (Note: absence from class means no participation credit is earned for that session.)</td>
<td>Arrives on time, is seated and ready to begin at class start time.</td>
<td>Arrives on time, is seated and ready to begin at class start time, immediately ceases other activities at the time the class actually starts</td>
</tr>
<tr>
<td>Attention</td>
<td>Noticeably off-task during a portion of the class and/or distracting to others. Examples include, but are not limited to: attending to non-class matters (checking e-mails / PDAs and/or using a personal laptop for any task not directly relevant to what's going on in the class at the moment), cellphone/pager noise, off-topic conversations / passing notes / texts</td>
<td>Generally attentive but engages in one or more side conversations or other off-task activities. Cellphone / pager noise is heard once during class.</td>
<td>Conversations are focused on the in-class discussion. No peripheral noises or distractions (cellphones, pagers, and other devices).</td>
<td>Conversations are focused on the in-class discussion. No peripheral noises or distractions (cellphones, pagers, and other devices).</td>
</tr>
<tr>
<td>Participation</td>
<td>Does not ask / answer any questions; does not make comments (or relevant comments) during the session; or significantly derails the agenda of the class</td>
<td>Does not contribute to class discussion, or participates but comments are off-topic and/or reflective of a lack of preparation (e.g. asking questions that the readings already clearly addressed.)</td>
<td>Contributes at a good level (but without dominating); contributions add to (do not derail) the class discussion</td>
<td>Contributions augment / add to comments from peers; synthesizes / incorporates readings and assignments into the class discussion</td>
</tr>
<tr>
<td>Professional Demeanor</td>
<td>Professionalism is lacking in one or more major ways (e.g. unprofessional dress, uses derogatory and/or other highly unprofessional language)</td>
<td>Professionalism is lacking in one or more minor ways (e.g. overly casual dress, use of slang and/or mildly disrespectful or arrogant language)</td>
<td>Class participation reflects a good level of professionalism</td>
<td>Class participation reflects a noticeably high level of professionalism</td>
</tr>
<tr>
<td>Week</td>
<td>Date</td>
<td>Class Objective</td>
<td>Topic</td>
<td>Assignment Due</td>
</tr>
<tr>
<td>------</td>
<td>--------</td>
<td>----------------------------------------</td>
<td>-------------------------------------------------</td>
<td>---------------------------------------------------</td>
</tr>
<tr>
<td>1</td>
<td>28-Mar</td>
<td>Introductions and Syllabus Review</td>
<td>Overview of Practice Management</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>In Class Assignment</td>
<td>Sign up for RUMG Clinic Shadow Experience to take place the week of 4/4</td>
</tr>
<tr>
<td>2</td>
<td>4-Apr</td>
<td>NO CLASS</td>
<td>Complete Rush University Medical Group (RUMG) Clinic Shadow Experience</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>11-Apr</td>
<td>Clinic Operations and Workflow</td>
<td>Front End Operations: Scheduling, Insurance Verification, Authorization, Co-Payment, Deductibles</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Patient Care Operations: Medical Records, Environment of Care, Care Coordination</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Resource Utilization: Exam Rooms, Staffing, Supplies, Facilities</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Assignment Due</td>
<td>Assignment 1: Clinic Observation Summary</td>
</tr>
<tr>
<td>4</td>
<td>18-Apr</td>
<td>Financial Management</td>
<td>Principles of Reimbursement and Revenue Cycle: Billing, Coding, Payer Contracts</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Cash Flow: Accounts Receivable, Accounts Payable, Payroll, Audit</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Measuring Productivity: wRVUs, Volume, Quality, Cost</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>25-Apr</td>
<td>Patient Access and Engagement</td>
<td>Patient Satisfaction</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Elements of Timely Access: Capacity Management, Policies &amp; Procedures, Templates</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Measuring Access: Scorecards, Metrics, Supply/Demand</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>2-May</td>
<td>Human Resources and Organizational Governance</td>
<td>Provider: Recruitment, On-Boarding, Credentialing, Compensation Models, Benchmarking</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Staff: Models of Care, Recruitment, Interviewing, Evaluating Performance</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Defining Culture and Engaging the Team</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Assignment Due</td>
<td>Assignment 2: Implementation of Policies &amp; Procedures</td>
</tr>
<tr>
<td>7</td>
<td>9-May</td>
<td>Legal, Compliance, and Risk Management</td>
<td>Maintaining a Safe Environment</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Legal Relationship between Patient and Provider: HIPAA, ethical dilemmas</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Quality Management, Process Improvement, and Technology</td>
<td>Understanding quality assessment tools, metrics, and processes</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Quality Management, Process Improvement, and Technology</td>
<td>Information Integrity</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Quality Management, Process Improvement, and Technology</td>
<td>How to define, implement, and report on Process Improvement/Project Management Opportunities</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Assignment Due</td>
<td>Assignment 3: Current Event Article</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>16-May</td>
<td>Strategy and Growth</td>
<td>Building a Budget and Strategic Plan</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Marketing, Communications, and Branding</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Development: Identifying and Implementing Practice Growth Opportunities, Contract Negotiations</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>23-May</td>
<td>Final Presentations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>31-May</td>
<td>NO CLASS – Memorial Day Holiday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>6-June</td>
<td>NO CLASS – Finals Week</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Assignments
All written assignments should be single spaced, Times New Roman font, size 11. Students should focus on writing in a concise format, utilizing bullet points and other organization tactics to express information succinctly and effectively. Students will receive up to ten points for each assignment. Points will be deducted if the assignment is not turned in on time or fails to meet the instructions as outlined below.

Assignment 1: Clinic Observation Summary
In two pages or less, summarize the findings of your clinic observation. Do not summarize a play-by-play of the actual events that occurred during your observation, but rather, consider the following:
- What processes appeared to go smoothly? What processes appear to have opportunity for improvement?
- How did the staff interact with each other? How and where did the hand-offs of care occur between staff members?
- Are there opportunities to improve the patient experience, and if so, what?
- How was patient privacy and confidentiality addressed?
- What technologies were present in the clinic, and how did they appear to influence the patient and/or provider experiences?

Assignment 2: Implementation of Policies & Procedures
Using the Rush Policy & Procedure intranet site (http://inside.rush.edu/policies), identify three policies or procedures that are important to an ambulatory practice. In two pages or less, analyze the policies from the perspective of a practice manager, and explain how you will implement these policies within your practice. For each policy, consider the following:
- Who is affected by the policy?
- What training or communication is necessary for implementation? How will the training be accomplished?
- During your clinic observation, did you witness any of the policies in action, and if so, what is your assessment of the policy or procedure adherence?
- List anything that you believe the current policy fails to address.

Assignment 3: Current Event Article
Identify a new technology that may have a positive impact on the ambulatory environment. Bring a hard-copy article, website link, or other representation of the technology to class. Also, prepare a brief (less than one page) summary of the technology that includes at a minimum the following information:
- Benefit of the technology
- Definition of the population that the technology may impact (patient, physician, staff, etc.) including volume
- Cost of the technology, assume the technology will be used for 1 year
- Time required to implement technology
- Financial impact

Final Presentation
Throughout the course, you will be provided with actual clinic data that pertains to that week’s course topic. In preparation for your final presentation, you should review the data provided, analyze the trends or outcomes, and reflect on how the lessons learned in class relate to the data. For your final presentation, you will be put into small groups and given a particular challenge that your assigned clinic is facing. Using the data and lessons learned throughout the course, you and your group will serve as an internal consulting team to develop recommendations for the clinic to address their challenge. Each group will be given 15 minutes to present their recommendations, 10 minutes for presentation and 5 minutes for questions by the entire class. An electronic copy of all deliverables should be emailed to the course instructors prior to class, and a hard copy of all deliverables should be provided to the instructors at the time of the presentation.
<table>
<thead>
<tr>
<th>Criteria considered in grading:</th>
<th>Not Passing</th>
<th>“C” Level</th>
<th>“B” Level</th>
<th>“A” Level</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Content &amp; Format (5 points)</strong></td>
<td>The presentation generally rambles on with little or no construction. The main points are not stated upfront and the body section begins quickly. Discussion of the main points meanders with little or no logical support. The closing is weak and comes to an end with little or no recommendations or conclusions. Slides are poorly designed and show many flaws in content and structure. Little or no graphic &amp; color use that adds little to the presentation.</td>
<td>The presentation has a faulty design with opening, body and closing not easily being delineated. The main points in the opening may contain too much information that would typically be put into the body. The body contains relevant information but does not flow well. The closing may not restate the main points or moves to a quick close. Slides have minimal design and may show flaws such as no consistency among points on a slide. Graphic &amp; color use may need improvement.</td>
<td>The presentation has an acceptable design with a good opening, body and closing. The opening introduces the subject and the main points are stated but may not be clear. The body covers the main points broadly with little or no supporting information and could use more depth. The closing may restate the main points covered but moves to a close with little or no conviction. Slides have good design &amp; execution. Slide information may be too wordy or too much information on some slides. Graphic &amp; color use may be good but could be more appropriate for the presentation.</td>
<td>The presentation is well designed with an excellent opening, body and closing. The opening introduces the subject using a creative attention-getter, and the main points are stated clearly. The body discusses the main points in depth with appropriate supporting information. The closing summarizes the main points previously stated and the conclusions/recommendations are logical bringing the presentation to a strong close. Slides are designed &amp; executed well. Slides follow 4 x 4 rule with appropriate information given. Slide information is clear, understandable &amp; supports what is being said. Graphic &amp; color use is good and appropriate for the presentation.</td>
</tr>
<tr>
<td><strong>Delivery skills (5 points)</strong></td>
<td>Greater voice level &amp; modulation needed for the size of the room. Eye contact is non-existent or very superficial. Little or no appropriate gestures &amp; movement around the room. Does not address audience directly but reads slide information with back to audience. Shows little or no energy in the delivery.</td>
<td>Voice level &amp; modulation need improvement for size of the room. Eye contact is minimal and much scanning the audience exists. Gestures &amp; movements are labored and/or repetitive. Reads much slide information from screen, not addressing the audience. Little energy &amp; enthusiasm shown in the delivery.</td>
<td>Voice level &amp; modulation is acceptable for the size of the room. Good eye contact with individual audience members but some scanning exists. Gestures &amp; movements are reasonable but may seem unnatural. Mostly addresses audience directly but occasionally turns back to audience to read slide information. Some enthusiasm &amp; energy shown in the delivery.</td>
<td>Voice level &amp; modulation is appropriate for the room. Eye contact is deliberate and direct contact is made with audience members. Gestures &amp; movements are appropriate for the topic and natural. Addresses audience directly using computer screen as a prompter for slide information. Much enthusiasm and energy shown in the delivery.</td>
</tr>
<tr>
<td><strong>Critical Issues (5 points)</strong></td>
<td>Does not surface the critical challenges and issues that underlie the problem.</td>
<td>Identifies at least 1 of the critical challenges and/or issues that underlie the problem and presents a general argument as to why it is important.</td>
<td>Identifies most of the critical challenges and/or issues that underlie the problem and presents case facts to support why they are important.</td>
<td>Identifies all of the critical challenges and/or issues that underlie the problem and presents case facts to support why they are important.</td>
</tr>
<tr>
<td><strong>Analysis (10 points)</strong></td>
<td>The analysis is superficial and/or inaccurate. Analysis is based on the thinking and assumptions of the presenter and may not support the goals and recommendations.</td>
<td>The analysis is based on various facts from the case but not presented in a clear or comprehensive manner. Logical inferences are not drawn to make a compelling argument. Analysis of the environment, the industry, the company’s resources, and competitors may be presented but are not clearly connected to the recommendations.</td>
<td>The analysis is consistent with the material in the case and provides sufficient evidence to make a compelling argument for the chosen recommendation. Analyses of the environment, the industry, company resources, and competitors are appropriately drawn from the case and correct inferences are drawn to support the chosen recommendations.</td>
<td>The analysis is consistent with the material in the case and provides sufficient evidence to make a compelling argument for the chosen recommendation. Analyses of the environment, the industry, company resources, and competitors are appropriately drawn from the case and correct inferences are drawn to support the chosen recommendations.</td>
</tr>
<tr>
<td><strong>Goals and Recommendations (10 points)</strong></td>
<td>No goals or recommendations are made or are so general as to be of no value.</td>
<td>Goals and recommendations are stated but not explained and are too general to support specific strategic action items. Recommendations are one of the alternatives listed.</td>
<td>Goals and recommendations are clearly stated and explained but may not be specific enough to serve as the basis for strategic actions. Recommendations are one of the alternatives listed that support the goal in general.</td>
<td>Goals and recommendations are clearly stated and explained and are specific enough to serve as the basis for strategic actions. Recommendations are one or a combination of the alternatives listed that best support the stated goals.</td>
</tr>
<tr>
<td><strong>Strategic Actions (5 points)</strong></td>
<td>Action items are limited or missing or do not support the recommendations in whole or part.</td>
<td>Actions are general in nature and support the recommendations. They may not be completely feasible and may not fit well or provide a distinct approach.</td>
<td>Clear, specific and feasible action items are listed that include who, what, and when. They directly support the recommendations but may not fit with each other or may not be unique to the industry with appropriate trade-offs discussed.</td>
<td>Clear, specific and feasible action items are listed that include who, what, and when. They fit with each other and directly support the recommendations. They are unique to the industry with appropriate trade-offs discussed.</td>
</tr>
</tbody>
</table>
College of Health Sciences
Department of Health Systems Management

HSM 590 - Consulting
Course Syllabus – Spring 2016
Credit Hours: 2

Course Days: Monday
Times: 4:00 – 5:50 PM
Location: AAC 960

Course Director:
Kevin McCarthy, MS
Adjunct Faculty, HSM
Associate Director, Navigant
Phone: (312) 583-5741
E-mail: kevin.mccarthy@navigant.com
Office hours: By appointment

Co-Directors:
Brian Fisher, MS
Adjunct Faculty, HSM
Managing Consultant, Navigant
Phone: (312) 583-5875
E-mail: brian.fisher@navigant.com
Office Hours: By Appointment

Required Course Textbook(s):
None

Optional Course Textbook(s):
None

Additional Readings:
Case Studies and Materials provided in class
Course Description and Primary Aims:
This course is designed to introduce the skills/tool kit recommended to be successful in a standard healthcare consulting model; we will be introducing and reviewing tools that are also transferable into becoming a great manager and have applicability throughout the health care industry.

Course Pre-requisites:
Enrolled in Health Systems Management Program or by Instructor Permission.

Teaching and Learning Methods Used in this Course:
Students are expected to attain the basic knowledge contained in the course through in class materials and through preparation prior to class. While short lectures and strategically-selected guest speakers may be used, the majority of class time will be geared more toward experiential teaching and learning methods (i.e. case studies and real world examples and collaboration), which require application of knowledge, skills, and abilities contained in the course. The course relies on rotating small team assignments for practice of skills and abilities and for assessment of student attainment of competencies contained in the course.

Learning Outcomes, Curriculum Goals & Competencies:
At the conclusion of this class (specific to consulting), students will be able to:
1) Be comfortable with case studies and the case study interview process
2) Be competent with establishing a Methodology / Approach
3) Be competent with analytics / Problem Solving
4) Be competent with storyboarding
5) Be competent with “What does it mean and why does it matter?” analysis
6) Be competent with client interviews
7) Be competent with client presentations

Other competencies students should gain from this course (NCHL):
1) Analytical Thinking
2) Collaboration
3) Communication Skills
4) Information Seeking
5) Professionalism
6) Project Management
7) Relationship Building
8) Team Leadership

General Expectations
• Students are expected to maintain a professional demeanor at all times. This includes:
  • Arriving for classes on time, and remaining attentive throughout.
  • If you need to arrive late to a specific class, communicating this well in advance so that the course director, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
  • If you will need to leave prior to the end of the class session, you should communicate this prior to the beginning of the class, in all cases generally and especially if there is a guest lecturer present. Leaving in the middle of a guest’s lecture without explanation, for any reason (even to go to the bathroom) can be highly disruptive.
• Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in session. Your full attention during class sessions is a basic expectation of the MS-HSM graduate
program. It is also a common courtesy in many formal meetings and an important professional habit to develop.

- **Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate.** Dressing professionally sends the message that you are a professional and should be taken seriously. Failing to dress professionally sends the message that you are “just a student.” It reflects poorly not only on yourself but also on your peers.

- **Expressing disagreements respectfully.**

- **Active participation is critical and expected.**

- **Students are expected to attend the scheduled lecture, prepare for the lectures, and complete the suggested readings.**

- **Students will be required to attend class on the days of the Case Studies. If the student is unable to attend for any reason, the student must notify course instructors a minimum of 1 week in advance of the class. Students will be given an alternative assignment to complete by the date of the missed course for alternate credit.**

- **All submitted course material is expected to be of professional quality in terms of content, format, and presentation.**

### Policy on Missed Classes:
Missed classes will be reflected in the student’s grade. If there are specific circumstances, contact both of the course directors to make arrangements.

### Assignments:
**CLASS PARTICIPATION** (possible 15 points)

**CASE STUDY #1** (possible 25 points)

**CASE STUDY #2** (possible 25 points)

**FINAL CASE STUDY** (possible 35 points)

The goal of this effort is to put into practice the tools of consulting. The secondary goal is to make it enjoyable and realistic via case study presentations to instructors and peers.

**Case Study Point Allocation:**
- Team demonstrates and executes on topics and competencies identified as *focus areas* for the case study presentation (e.g. establishing a methodology, analytic approach, etc.) = 25 points
- Team demonstrates a general understanding of *focus areas*, but does not execute or demonstrate applicable use of *focus areas* in case study presentation = 15 points
- No Show / Minimal Effort = 0 points

**Final Case Study Point Allocation:**
- Team demonstrates and executes on topics and competencies identified as *focus areas* for the case study presentation (e.g. establishing a methodology, analytic approach, etc.) = 35 points
- Team demonstrates a general understanding of *focus areas*, but does not execute or demonstrate applicable use of *focus areas* in case study presentation = 25 points
- No Show / Minimal Effort = 0 points
Grading Scale (Percentage):

<table>
<thead>
<tr>
<th>Percentage Range</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>≥80 to 100</td>
<td>A</td>
</tr>
<tr>
<td>≥65 to &lt; 80</td>
<td>B</td>
</tr>
<tr>
<td>≥50 to &lt; 65</td>
<td>C</td>
</tr>
<tr>
<td>&lt; 50</td>
<td>Not passing</td>
</tr>
</tbody>
</table>

Elements of Final Course Grade:

- Class Participation: 15 points
- Case Study #1: 25 points
- Case Study #2: 25 points
- Case Study FINAL: 35 points

Total: 100 points

Academic Integrity

Rush University students and faculty belong to an academic community with high scholarly standards. As essential as academic honesty is to the relationship of trust fundamental to the educational process, academic dishonesty violates one of the most basic ethical principles of an academic community, and will result in sanctions imposed under the University's disciplinary system. A partial list of academically dishonest behaviors that would subject a student to disciplinary action includes cheating, fabrication, facilitating academic dishonesty, plagiarism, and unauthorized examination behavior.

Further information can be found at:
http://www.rushu.rush.edu/catalog/acadresources/academichonesty.html

The College of Health Sciences will not condone cheating in any form. Allegations of cheating will be reviewed by the departmental Committee on Progress and Promotions. Any student found to be cheating on an examination may receive a “0” for the examination and will be subject to formal disciplinary action, which may include suspension or dismissal from the program. Failure to report incidents involving scholastic dishonesty on the part of another student will be considered unprofessional conduct and may also result in disciplinary action. Students should refer to the Rush University Policy on Academic Honesty for further information.

Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.

Rush University Policies And Procedures For Students With Disabilities

Rush University is committed to attracting and educating students who will help to make the health care profession representative of the national population, including individuals with disabilities. In keeping with Rush University’s mission to promote diversity among its student population and providing equal access to its facilities, programs, services and learning opportunities, the University encourages students with disabilities to engage the Office of Student Disability Services as soon as they begin their program. Students should feel free to contact Marie Ferro-Lusk, Manager of Student Disability Services for Rush University to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings.
Accommodations are not provided retroactively and students are encouraged to register with the Office of Student Disability Services as soon as they begin their program. Additional information can be found online at the Office of Student Disability website or by contacting the Office of Student Disability Services. In order to respect student’s privacy and ensure a thoughtful interactive discussion, students should not make accommodation requests to individual faculty members, lecturers, or course directors, instead please contact:

Marie Ferro-Lusk, MBA, MSW, LSW
Manager, Student Disability Services
Rush University
600 S. Paulina St. Suite 440
Chicago, IL. 60612
Phone: (312) 942-5237
Fax: (312) 942-2778
Email: marie_s_ferro-lusk@rush.edu
Website: https://www.rushu.rush.edu/students-disabilities
<table>
<thead>
<tr>
<th>W</th>
<th>Date</th>
<th>Pre-class readings</th>
<th>Topics / Themes</th>
<th>In Class Activities</th>
<th>Class Lead</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3/27</td>
<td>TBD</td>
<td>Intro to Consulting</td>
<td>Team Formation</td>
<td>McCarthy/Fisher</td>
</tr>
<tr>
<td>2</td>
<td>4/3</td>
<td>TBD</td>
<td>Establishing a Methodology / Approach</td>
<td>Materials Review and Team Activity</td>
<td>McCarthy/Fisher</td>
</tr>
<tr>
<td>3</td>
<td>4/10</td>
<td>TBD</td>
<td>Analytics/Problem Solving</td>
<td>Materials Review and Team Activity</td>
<td>McCarthy/Fisher</td>
</tr>
<tr>
<td>4</td>
<td>4/17</td>
<td>TBD</td>
<td>Case Study #1</td>
<td>Case Study</td>
<td>McCarthy/Fisher</td>
</tr>
<tr>
<td>5</td>
<td>4/24</td>
<td>TBD</td>
<td>Storyboarding</td>
<td>Materials Review and Team Activity</td>
<td>McCarthy/Fisher</td>
</tr>
<tr>
<td>6</td>
<td>5/1</td>
<td>TBD</td>
<td>What does it mean/Why does it matter</td>
<td>Materials Review and Team Activity</td>
<td>McCarthy/Fisher</td>
</tr>
<tr>
<td>7</td>
<td>5/8</td>
<td>TBD</td>
<td>Case Study #2</td>
<td>Case Study</td>
<td>McCarthy/Fisher</td>
</tr>
<tr>
<td>8</td>
<td>5/15</td>
<td>TBD</td>
<td>Client Interviews</td>
<td>Materials Review and Team Activity</td>
<td>McCarthy/Fisher</td>
</tr>
<tr>
<td>9</td>
<td>5/22</td>
<td>TBD</td>
<td>Client Presentations</td>
<td>Materials Review and Team Activity</td>
<td>McCarthy/Fisher</td>
</tr>
<tr>
<td></td>
<td>5/29</td>
<td>TBD</td>
<td>Memorial Day – No Class</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>6/5</td>
<td>TBD</td>
<td>Case Study FINAL</td>
<td>Final</td>
<td>McCarthy/Fisher</td>
</tr>
</tbody>
</table>
Detailed Descriptions of Assignments for the Quarter and Grading Rubric for Each

Case Studies (2) Points: 50
- There will be a total of 2 case studies
- Each Case Study will be a team based competition
- All materials for the case study will be provided in class the day of the case study, not in advance
- The case studies will require synthesis of the materials covered in previous classes and will build on each other

Final Case Study Points: 35
- There will be 1 final case study
- The final case study will be a team based competition
- All materials for the case study will be provided in class the day of the case study, not in advance
- The final case studies will require synthesis of all of the materials covered throughout the quarter

Class Participation Points: 15
- Will be based on attendance
- And participation in class discussions and exercises
College of Health Sciences  
Department of Health Systems Management  

HSM 590 -  
Lean Six Sigma in Healthcare  
Course Syllabus – winter 2016  
Credit Hours: 2  

Rev. December 22, 2016  

Course Days: Thursday  
Times: 1 pm – 2:50 pm  
Location: AAC 968  

Course Director:  
Phil Shaw, MEM CSSBB  
Director, Patient Relations  
Phil_Shaw@rush.edu  
312-563-4136  

Office Hours:  
Call 3-4136 to schedule  

Course Assistant:  
Katie Bogey  
Performance Improvement Consultant, Patient Relations  
Kathryn_Bogey@rush.edu  
312-942-0084  

Office Hours:  
Call 2-0084 to schedule  

Required Course Textbook(s):  

Optional Course Textbook(s):  
Learning to See: Value Stream Mapping to Create Value and Eliminate Muda, Mike Rother and John Shook  

Additional Readings:  
To be provided.
Course Description and Primary Aims:
Students will work in teams of 3-6 members each. Each team will participate in observations in select areas at RUMC. Areas for observation will be selected based on clinical importance and management implications. Students will develop an understanding of the problem, conduct an assessment (using data, interviews, observations and a limited literature review), and make recommendations. Class room time will be used partially for lectures pertaining to use of performance improvement tools, for report out from students on progress to date. Faculty advisors will provide coaching and guidance, but will not lead observations and report outs of findings. This experience is expected to simulate what students will encounter in real-life jobs or as consultants.

Course Pre-requisites:
Prerequisites for HSM students: Completion of all prerequisites required for HSM 596 and concurrent registration in HSM 596. Prerequisites of all other Rush University students: HSM 510 (2 elective credits)

Teaching and Learning Methods Used in this Course:
The primary mode of learning in this course is experiential. There will be preparatory readings and discussions within project teams, but the emphasis is on learning by doing – experiencing the actual patient care micro-systems. Classroom time will be focused on project-related discussions and problem-solving.

Learning Outcomes:
Students are expected to acquire at least basic skills in use of tools such as process mapping, root cause analysis, failure modes and effects analysis, and develop an understanding of the Lean performance improvement and change management framework.

At the conclusion of this class, students will be able to:
1. Define organizational problems in succinct, actionable terms.
2. Measure and analyze problems using multiple diagnostic interventions.
3. Develop recommendations that are appropriate and feasible in the local context.
4. Describe key challenges in managing change.
5. Develop skills in working closely with others as a member of a team.

Curriculum Goals/Competencies:
HSM 590 is designed to build students' knowledge, skills, abilities and values in the following competency areas associated with the NCHL model:

L3.4 Analytical Thinking: Develops complex plans or analyses: Identifies multiple elements of a problem and breaks down each of those elements in detail, showing causal relationships between
them; Peels back multiple layers of a problem; Uses several analytical techniques to identify potential solutions and weigh the value of each.

**L14.4 Innovative Thinking: Clarifies Complex Ideas or situations:** Makes complex ideas or situations clear, simple or understandable; Assembles ideas, issues, and observations into a clear and useful explanation; Restates existing observations or knowledge in a simpler fashion; Takes intricate data and puts it into lay terms; “boils down” information.

**L5.1 Collaboration: Conducts work in a cooperative manner:** Supports team decisions; Does his or her share of the work; Keeps other team members informed and up to date about what is happening in the group; Shares all relevant or useful information.

**L15.2 Interprets Emotions and Verbal Content:** Understands both emotion (by reading body language, facial expression, and/or tone of voice) and the context of what the person is saying. Accurately interprets emotion and content of what others say; Recognizes when the emotion and content do not appear to be in sync.
General Expectations

- Students are expected to maintain a professional demeanor at all times. This includes:
  - Arriving for classes on time, and remaining attentive throughout.
  - If you need to arrive late to a specific class, communicating this well in advance so that the course director, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
  - If you will need to leave prior to the end of the class session, you should communicate this prior to the beginning of the class, in all cases generally and especially if there is a guest lecturer present. Leaving in the middle of a guest’s lecture without explanation, for any reason (even to go to the bathroom) can be highly disruptive.
  - Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in session.

Your full attention during class sessions is a basic expectation of the MS-HSM graduate program. It is also a common courtesy in many formal meetings and an important professional habit to develop.

- Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate. Dressing professionally sends the message that you are a professional and should be taken seriously. Failing to dress professionally sends the message that you are “just a student.” It reflects poorly not only on yourself but also on your peers.

- Expressing disagreements respectfully.

- While most of the classroom time will be dedicated for project discussion, students will be expected to work on the projects outside of class time to complete the outlined deliverables.

- Active participation is critical and expected.

- Listed readings are to be completed prior to the class period listed in the syllabus.

- Assignments are due at the start of the class period listed; lateness, regardless of cause, will result in loss of some credit. Some assignments (e.g. the discussion questions and most pre-work assignments) will not be accepted late.

Policy on Missed Classes:

No more than 1 class can be missed unless prior permission is obtained from the Course Director and the student’s work group.

Assignments:

(Details are provided later in the syllabus)

Grading Scale (Percentage):

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100</td>
<td>A</td>
</tr>
<tr>
<td>80-89</td>
<td>B</td>
</tr>
<tr>
<td>70-79</td>
<td>C</td>
</tr>
<tr>
<td>Below 70</td>
<td>Not passing</td>
</tr>
</tbody>
</table>

Elements of Final Course Grade:
Homework  
- HW #1  5 points  
- HW #2  5 points  
- HW #3  5 points  
- HW #4  5 points  

Project  
- Current State Process Map  20 points  
  - Waste Walk Form  
  - Flows of Medicine  
  - Standard Operations-Time Observation  
- Staff and Patient Interviews  20 points  
- Presentation/Report Out  20 points  

Participation  
- Class Participation  20 points  

Total  100 points

Accommodations

Rush University is committed to attracting and educating students who will help to make the health care profession representative of the national population, including individuals with disabilities. In keeping with Rush University’s mission to promote diversity among its student population and providing equal access to its facilities, programs, services and learning opportunities, the University encourages students with disabilities to engage the Office of Student Disability Services as soon as they begin their program. Students should feel free to contact Marie Ferro-Lusk, Manager of Student Disability Services for Rush University to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings.

Accommodations are not provided retroactively and students are encouraged to register with the Office of Student Disability Services as soon as they begin their program. Additional information can be found online at the Office of Student Disability website or by contacting the Office of Student Disability Services. In order to respect student’s privacy and ensure a thoughtful interactive discussion, students should not make accommodation requests to individual faculty members, lecturers, or course directors, instead please contact:

Marie Ferro-Lusk, MBA, MSW, LSW  
Manager, Student Disability Services  
Rush University  
600 S. Paulina St. Suite 440  
Chicago, IL. 60612  
Phone: (312) 942-5237  
Fax: (312) 942-2778  
Email: marie_s_ferro-lusk@rush.edu  
Website: https://www.rushu.rush.edu/students-disabilities

Copyright © 2010 the Department of Health Systems Management, Rush University. All rights reserved worldwide.
Academic Integrity
Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin.

Further information can be found at:
http://www.rushu.rush.edu/catalog/acadresources/academichonesty.html
<table>
<thead>
<tr>
<th>Date</th>
<th>Assigned Reading Completed before Class</th>
<th>Topic</th>
<th>In Class</th>
<th>Assignments Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/5</td>
<td>- Syllabus Review</td>
<td>- Introduction to Lean Principles</td>
<td>Content</td>
<td>- Student Experiences Video</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Introduction to ASQ/SME Lean Bronze Certification</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Class Project(s) Introduction</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1/12</td>
<td>Lean Production Simplified (pp 1-88)</td>
<td>Stability</td>
<td>In Class Exercise</td>
<td>- HW #1 Questions Based on Class Topics and Assigned Reading (Individual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The 5S’s</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Standardized Work</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Visual Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total Productive Maintenance</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Daily Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1/19</td>
<td>Lean Production Simplified (pp 89-121)</td>
<td>Just in Time</td>
<td>In Class Exercise</td>
<td>- HW#2 Questions Based on Class Topics and Assigned Reading</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Pull vs. Push</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- One piece flow</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Takt Time</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Heijunka</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Kanban</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Cell Design</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Set Up Reduction</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1/26</td>
<td>Lean Thinking (pp 15-49)</td>
<td>Understanding Current state</td>
<td>In Class Exercise</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Flows of Medicine</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Std Operations</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Value Stream Mapping</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Process Mapping</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2/2</td>
<td>Lean Thinking (pp 50-98)</td>
<td>On Site Observations</td>
<td>3 Actuals</td>
<td>- HW#2 Questions Based on Class Topics and Assigned Reading</td>
</tr>
<tr>
<td>2/9</td>
<td>Lean Production Simplified (pp. 123-141)</td>
<td>Quality</td>
<td>Student Lead Project Assignment #1 Presentation</td>
<td>- Project Assignment #1 Current Process Map</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Jidoka</td>
<td></td>
<td>- Waste Walk Form</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Andon</td>
<td></td>
<td>- Flows of Medicine</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Driver Diagrams</td>
<td></td>
<td>- Standard Operations - Time Observation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Root Cause Analysis</td>
<td></td>
<td>- Process Map</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- 5 Why’s</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td>Assigned Reading Completed before Class</td>
<td>Topic</td>
<td>In Class</td>
<td>Assignments Due</td>
</tr>
<tr>
<td>--------</td>
<td>-----------------------------------------</td>
<td>------------------------------------</td>
<td>--------------</td>
<td>---------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>2/16</td>
<td>Lean Production Simplified (pp. 143-160)</td>
<td>On Site Interviews Patient and Staff 3x3</td>
<td></td>
<td>HW #3 Questions Based on Class Topics and Assigned Reading</td>
</tr>
<tr>
<td>2/23</td>
<td>Lean Production Simplified (pp 161-206)</td>
<td>Respect for People Hoshin Planning Lean Culture</td>
<td>Guest Lecture</td>
<td></td>
</tr>
<tr>
<td>3/2</td>
<td></td>
<td>Future State</td>
<td>Student Lead Project Assignment #2 Presentation</td>
<td>Project Assignment #2 Patient and Staff Interviews</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>HW #4 Questions Based on Class Topics and Assigned Reading</td>
</tr>
<tr>
<td>3/9</td>
<td></td>
<td>Final Project Presentation</td>
<td>Final Project Presentation</td>
<td>Final Project assignment #3-Presentation to Stakeholders (Team)</td>
</tr>
<tr>
<td>3/16</td>
<td>Open Session</td>
<td>-Book review questions</td>
<td>Optional Lean Bronze Practice Exam</td>
<td></td>
</tr>
</tbody>
</table>
### Detailed Descriptions of Assignments for the Quarter

<table>
<thead>
<tr>
<th>Project obse</th>
</tr>
</thead>
</table>

### Detailed Class Descriptions and Class Objectives

See summary class schedule and project above.
College of Health Sciences  
Department of Health Systems Management

HSM 590 -  
Data Analytics

Course Syllabus – Winter 2014
Credit Hours: 2

Course Director:
Shital Shah, PhD  
Assistant Professor, Department of Health Systems Management  
Office Phone: 312-942-7926  
FAX: 312-942-4957  
E-mail: Shital_C_Shah@rush.edu  
Office hours: By appointment.

Required Course Textbook(s):
A selection article and reading materials will be provided (See Syllabus).

Additional Readings: Summary Class Schedule

Course Description and Primary Aims:
This course provides students with the knowledge, skills and abilities needed to manage emerging data challenges in the health care domain. Potential main topics covered in the course will include emerging health care domain, characteristics of emerging data, decision support and expert systems in health care, data analytic tools (pre-processing tools, population based analysis, customization based analysis), mining social media for clinical/surveillance trends and potential opportunities in the emerging healthcare systems. Emphasis is placed on developing students’ abilities to identify, understand, manage, and smart utilization of emerging health care data. Students will appreciate the importance of emerging big data and its utility in improving health care delivery and operations. The course uses a combination of learning methods, including group discussion, multi-media, lectures by expert in the fields followed by discussion, and data project.

Course Pre-requisites: HSM 551 (Health Informatics)
Teaching and Learning Methods Used in this Course:
The course uses a combination of learning methods, including group discussion, multi-media, lectures by expert in the fields followed by discussion, and data project.

Learning Outcomes:

At the conclusion of this class, students will:

- Learn about emerging trends in healthcare data analytics
- Understand importance of data analytics in improving efficiency, safety, quality and patient experience in healthcare.
- Develop capabilities and tools to handle emerging healthcare data for healthcare decision making
**Curriculum Goals/Competencies:** HSM 572 is designed to build students’ knowledge, skills, abilities and values in the following competency areas associated with the NCHL model:

<table>
<thead>
<tr>
<th>Learning Objectives</th>
<th>NCHL Competencies</th>
<th>Related Assignments</th>
<th>Bloom's Taxonomy</th>
</tr>
</thead>
</table>
| 1. Understand and explain healthcare data trends | L11.1 Consults Available Resources  
L12.1 Recognizes the Potential of Information Systems in Process and Patient Service Improvement  
L12.4 Seeks and Challenges the Organization to Use Leading-Edge and Developing Information Technology | Quizzes  
Group Discussions | Cognitive  
Knowledge/Comprehension |
| 2. Identify and describe potential opportunities to improve healthcare systems using data | L11.2 Investigates Beyond Routine Questions  
L12.2 Actively Promotes Information Systems Implementation  
L12.4 Seeks and Challenges the Organization to Use Leading-Edge and Developing Information Technology  
L24.1 Conducts Environmental Scanning | Quizzes  
Group Discussions | Cognitive  
Knowledge/Comprehension |
| 3. Develop data management skills using statistical and data mining techniques for improving healthcare operations | L3.3 Recognizes Multiple Relationships  
L3.4 Develops Complex Plans or Analyses  
L24.1 Conducts Environmental Scanning | Quizzes  
Project | Cognitive  
Application/Syntheses |
| 4. Utilize data for intelligent decision making to improve health care organizations | L14.5 Creates New Concepts or Breakthrough Thinking  
L3.3 Recognizes Multiple Relationships | Group Discussion  
Project | Cognitive  
Application |
| 5. Creating an appreciation for applicability of innovative data management skills to manage emerging data | L12.4 Seeks and Challenges the Organization to Use Leading-Edge and Developing Information Technology  
L14.5 Creates New Concepts or Breakthrough Thinking | Group Discussion and Project | Affective  
Receiving |
Curriculum Goals/Competencies:

L3. Analytical Thinking: The ability to understand a situation, issue, or problem by breaking it into smaller pieces or tracing its implications in a step-by-step way. It includes organizing the parts of a situation, issue, or problem systematically; making systematic comparisons of different features or aspects; setting priorities on a rational basis; and identifying time sequences, causal relationships, or if-then relationships.

L3.3 Recognizes Multiple Relationships: Makes multiple causal links: several potential causes of events, several consequences of actions, or multiple-part chain of events (A leads to B leads to C leads to D); Analyzes relationships among several parts of a problem or situation (e.g., anticipates obstacles and thinks ahead about next steps, in detail, with multiple steps).

L3.4 Develops Complex Plans or Analyses: Identifies multiple elements of a problem and breaks down each of those elements in detail, showing causal relationships between them; Peels back multiple layers of a problem; Uses several analytical techniques to identify potential solutions and weigh the value of each.

L12. Information Technology Management

The ability to see the potential in and understand the use of administrative and clinical technology and decision-support tools in process and performance improvement. Actively sponsors their utilization and the continuous upgrading of information management capabilities.

L12.1 Recognizes the Potential of Information Systems in Process and Patient Service Improvement

Is familiar with current technology for patient tracking (especially registration, billing and records management), financial automation and reporting, and reimbursement management; Is open to automation of paper-based processes.

L12.2 Actively Promotes Information Systems Implementation

Understands PC and network technologies and uses this knowledge to advocate integrated systems that collect, track and share information across local- and wide-area networks; Understands how information technology tools simplify, streamline and improve care, including the ability to make a cogent case for using these tools to clinical and administrative audiences; Personally uses and supports investment in databases, Web-based tools, and information systems.

L12.4 Seeks and Challenges the Organization to Use Leading-Edge and Developing Information Technology

Stays up to date on the latest developments in information technology; Identifies new opportunities to use latest information technology in the organization. These uses fundamentally alter the way the organization operates or promotes wellness; Partners with the latest thinkers and developers to identify and implement breakthrough systems.

L11. Information Seeking

An underlying curiosity and desire to know more about things, people, or issues, including the desire for knowledge and staying current with health, organizational, industry, and professional trends and developments. It includes pressing for exact information; resolving discrepancies by asking a series of questions; and scanning for potential opportunities or information that may be of future use, as well as staying current and seeking best practices for adoption.

L11.1 Consults Available Resources

Asks direct questions of the people who are knowledgeable about the situation, such as people who are directly involved; Uses readily available information, or consults other resources.
L11.2 Investigates Beyond Routine Questions
Conducts preliminary investigations regarding a problem or situation beyond routine questioning; Finds those closest to the problem and investigates further, such as asking, “What happened?”

L11.5 Is Recognized as a User of Best Practices
Establishes ongoing systems or habits to get information; for example, walks around, holds regular informal meetings, or scans publications that feature best practices; Enlists individuals to do regular, ongoing information gathering; Adopts the best practices from other industries

L14. Innovative Thinking
The ability to apply complex concepts, develop creative solutions, or adapt previous solutions in new ways for breakthrough thinking in the field.

L14.5 Creates New Concepts or Breakthrough Thinking
Creates new concepts that are not obvious to others and not learned from previous education to explain situations or resolve problems; Looks at things in new ways that yield new or innovative approaches – breakthrough thinking; Shifts the paradigm; starts a new line of thought

L24. Strategic Orientation
The ability to consider the business, demographic, ethno-cultural, political, and regulatory implications of decisions and develop strategies that continually improve the long-term success and viability of the organization.

L24.1 Conducts Environmental Scanning
Performs analyses that identify the competitive/market, governmental and regulatory, public opinion, scientific, and technological forces that currently and will shape the organization; Identifies the strengths and challenges of the organization vis-à-vis the forces today and into the future; Identifies the required social and economic position of the organization in light of the environmental scan

General Expectations

- Students are expected to maintain a professional demeanor at all times. This includes:
  - Arriving for classes on time, and remaining attentive throughout.
  - If you need to arrive late to a specific class, communicating this well in advance so that the course director, your fellow students, and/or class guests are not wondering where you are or are interrupted by your late arrival.
  - If you will need to leave prior to the end of the class session, you should communicate this prior to the beginning of the class, in all cases generally and especially if there is a guest lecturer present. Leaving in the middle of a guest’s lecture without explanation, for any reason (even to go to the bathroom) can be highly disruptive.
  - Turning laptops, cell phones, mobile e-mail devices, and pagers off while class is in session. Your full attention during class sessions is a basic expectation of the MS-HSM graduate program. It is also a common courtesy in many formal meetings and an important professional habit to develop.
  - Business casual dress attire, at a minimum, is required when guest lecturers / discussants are scheduled to participate. Dressing professionally sends the message that you are a professional and should be taken seriously. Failing to dress professionally sends the message that you are “just a student.” It reflects poorly not only on yourself but also on your peers.
• Expressing disagreements respectfully.
• Active participation is critical and expected.
• **Listed readings are to be completed prior to the first class for that week as listed in the syllabus.** Based on the reading material total of 4 to 6 quizzes will be administered.
• Assignments are due at the assigned date and time as stated on Blackboard; lateness, regardless of cause, will result in loss of credit. Late assignments will not be accepted.
• Students are expected to attend the scheduled lecture, prepare for the lectures, and complete the suggested reading.
• **All submitted course material is expected to be of professional quality in terms of content, format, and presentation.**
• The course director would provide feedback on the submitted assignment within seven days or the time allocated for the student to submit the assignment, whichever is later.

**Policy on Missed Classes:**
• Students are expected to be present for all lectures and attendance sheets would be used to track attendance.

**Assignments:**
Details are provided later in the syllabus

**Grading Scale (Percentage):**

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100</td>
<td>A</td>
</tr>
<tr>
<td>80-89</td>
<td>B</td>
</tr>
<tr>
<td>70-79</td>
<td>C</td>
</tr>
<tr>
<td>Below 70</td>
<td>Not passing</td>
</tr>
</tbody>
</table>

**Elements of Final Course Grade:**

<table>
<thead>
<tr>
<th>Component</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quizzes</td>
<td>15</td>
</tr>
<tr>
<td>Project (Information Seeking + Data Analysis)</td>
<td>50</td>
</tr>
<tr>
<td>Status Report (1 page)</td>
<td>05</td>
</tr>
<tr>
<td>Final Report (≤10 pages)</td>
<td>25</td>
</tr>
<tr>
<td>Presentations</td>
<td>20</td>
</tr>
<tr>
<td>Participations</td>
<td>35</td>
</tr>
<tr>
<td>Class Attendance</td>
<td>10</td>
</tr>
<tr>
<td>Participation</td>
<td>25</td>
</tr>
</tbody>
</table>

Total 100 points

In keeping with its goal to promote diversity among its student population, Rush University is committed to attracting and educating students who will help to make the population of health care professionals representative of the national population, including students with disabilities. In addition, Rush University wishes to insure that access to its facilities, programs and services are available to students with disabilities. The University provides reasonable accommodations to all students on a nondiscriminatory basis consistent with legal requirements as outlined in the Americans with Disabilities Act (ADA) of 1990 and the Rehabilitation Act of 1973. A reasonable accommodation is a modification or adjustment to an instructional activity, facility, program or service that enables a qualified student with a disability to have an equal opportunity to participate in all Rush University student activities. To be eligible for accommodations, a student must have a documented disability as defined by the ADA and Section 504 of the Rehabilitation Act of 1973. Both the ADA and Section 504 define disability as (a) a physical or mental impairment that substantially limits one or more major life activities of such individual; (b) a record of such impairment; or
(c) being regarded as having such a condition. Further information or questions can be directed to the College of Health Sciences faculty member, Richard Peach, PhD. He can be reached at (312) 942-3293 or Richard_Peach@rush.edu. Further information can be found at: http://www.rushu.rush.edu/catalog/aboutrush/disabilityrights.html

**Academic Integrity**

Students in this class and at Rush University are expected to demonstrate the highest level of academic integrity. Students are expected to be familiar with and understand both the Department of Health Systems Management Policy on Academic Integrity (contained in the Student Manual and signed for by all HSM students) and the University Statement on Academic Honesty which is stated in the Rush University Bulletin. Further information can be found at: http://www.rushu.rush.edu/catalog/acadresources/academicichonesty.html
<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Reading</th>
<th>Topic</th>
<th>In Class</th>
<th>Assignments</th>
<th>Lead</th>
</tr>
</thead>
</table>
| W1   | 1/8  |         | Emerging Healthcare Domain | Characteristics of emerging data | • Affordable care act and HITECH act (Data Influx)  
  • Emerging technology advances  
  • Health Information Exchanges/Data Sharing  
  • Social Media trends  
  • Research  
  • Others  
  • Data types  
    o Clinical, genetic, detail administrative and billing  
    o Granular and frequent data reporting  
    o Multi-sourced  
    o Discrete as well as text data type | | S. Shah/ J. Silva |
| W2   | 1/15 |         | Decision Support (DSS) and Expert Systems in Healthcare | | • Decision Support System  
  • Potential trends  
  • Demonstration of DSS | | S. Shah |
| W3   | 1/22 |         | Data Analytic Tools | | • Population based analysis  
  o Statistical analysis | | S. Shah/C. Li |
| W4   | 1/29 |         | Data Analytic Tools | | • Customization based analysis  
  o Data Mining | | S. Shah |
| W5   | 2/5  |         | Mining Social Media for clinical/surveillance trends | | • Social media data  
  • Tools  
    o Relevance to healthcare | | S. Shah/ Guest Lecturer |
<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Reading</th>
<th>Topic</th>
<th>In Class</th>
<th>Assignments</th>
<th>Lead</th>
</tr>
</thead>
<tbody>
<tr>
<td>W6</td>
<td>2/12</td>
<td>Applications</td>
<td></td>
<td>• Data analytics at UHC</td>
<td>Project Status Report Due</td>
<td>S. Shah/S. Meurer</td>
</tr>
<tr>
<td>W7</td>
<td>2/19</td>
<td>Applications</td>
<td></td>
<td>• Data analytics at Rush Health</td>
<td></td>
<td>S. Shah/ T. Burkhart</td>
</tr>
<tr>
<td>W8</td>
<td>2/26</td>
<td>Project</td>
<td></td>
<td>Class project working session</td>
<td></td>
<td>Students</td>
</tr>
</tbody>
</table>
| W9   | 3/5  | Data Analytic Tools | | • Pre-processing tools  
  ○ Natural language processors  
  • Customization based analysis  
  • Artificial Intelligence | | M. Waddell |
| W10  | 3/12 | Presentations |       | • Future Direction | Project Presentation and Final Report Due | S. Shah/J. Silva |
|      |      | Potential opportunities in the emerging healthcare systems |       | | Class Discussion | |

Additional Readings:

- Barry List, Big Election, Big Data, INFORMS ORMS Today, December 2012, pp. 10,12
- Maksim Tsvetovat, Jacqueline Kazil and Alex Kouznetsov, Implicit sentiment mining, INFORMS ORMS Today, December 2012, pp 20-24
- Michael Scherer, How Obama’s data crunchers help him win, CNN.com, November 8, 2012
• Additional reading as assigned on blackboard
Detailed Descriptions of Assignments for the Quarter and Grading Rubric for Each

Quizzes (4 to 6) Points: 15
- There will be total of 4 to 6 quizzes - approximately 1 quiz per two weeks.
- Each quiz will be of 5 points with about 5 to 10 questions.
- Each quiz will be allocated approximately 10 minutes of class time.
- Quiz questions may be true/false, multiple choice, short open ended types
- Each student is expected to work on the quiz independently
- Quiz will be open book open notes. No access to internet search/content will be permitted except lecture material on blackboard.

Project Information Points: 50
1. Pre Project Assignment Phase
   - Course director will assign the projects to the teams. Student can select their own team members.
2. Project Understanding Phase
   - Brief introduction of projects by course instructor
   - Understand and develop of project plan
   - Submit status report (One to two page )
     i. Project refined goals and initial findings
     ii. Provide project status in terms of completed and unfinished activities
     iii. Identify strengths, weaknesses, opportunities, and threats to the project in terms of completion on time
3. Information Seeking Phase
   - Gather big data trend information
   - Gather clinical and administrative domain information
   - Synthesis information
4. Application Phase
   - Recommend strategic plan to improve healthcare delivery including patient experience, efficiency, cost, and quality using data for your service line
   - Apply the techniques/quantitative approaches covered in the lectures/book among others to demonstrate utilization of data for improvement in healthcare industry.
5. Communication Phase
   - Presentation: Approximately 20 minutes each + 5 minutes for discussion and questions.,
   - Prepare a comprehensive and professional report.

Class participation Points: 35
- Attendance (10 Points)
  - Students are expected to be present for all lectures and attendance sheets are used to track attendance.
  - Students attending all lectures will receive full credit. For every missed class attendance credit is reduced by 1/20.
- Regular class participation (25 points)
  - Students are encouraged to actively participate in class discussions during regular classes as well as online on blackboard.
  - Each student is expected to participate and will be required to ask at least three questions (in-class as well as on discussion board) during the course duration. Part of the participation grade is based on the active participation and quality of the questions asked.
    - Each student is encouraged to submit the questions asked during the class on the blackboard discussion board.
  - Course director will base the class participation grade on active participation of the student, the quality of added value to the discussion, and relevance to the topics discussed.
Detailed Class Descriptions and Class Objectives

Emerging Healthcare Domain
- In Class 1/8/2014:
  - Syllabus Review
  - Affordable care act and HITECH act (Data Influx)
  - Emerging technology advances
  - Health Information Exchanges/Data Sharing
  - Social Media trends
  - Research
  - Others
  - Data types
    - Clinical, genetic, detail administrative and billing
    - Granular and frequent data reporting
    - Multi-sourced
    - Discrete as well as text data type
- Objectives
  - Exposure to changing landscape of healthcare and emergence of big data
  - Identify data sources
  - Understand data type
  - Understand data power potential to improve healthcare

Decision Support and Expert Systems in Healthcare
- In Class 1/15/2014:
  - Current Decision Support System
  - Potential trends
  - Demonstration of DSS
- Objectives
  - Introduction to decision support system in healthcare
  - Leveraging current and future data sources for building robust decision support system to improving health care

Data Analytic Tools
- In Class 1/22/2014:
  - Population based analysis
    - Statistical analysis
- Objectives:
  - Exposure to standard statistical tools to assist decision making

- In-Class 1/29/2014:
  - Data Mining
- Objectives:
  - Exposure to data mining approaches
  - Exposure to artificial intelligence approaches

Mining Social Media for clinical/surveillance trends
- In-Class 2/05/2014:
  - Social media data
  - Tools
  - Relevance to healthcare
• Objectives:
  o Relevance social media in healthcare trend mining
  o Exposure to mining tools

Applications
• In-Class 2/12/2014:
  o Presentation from UHC about their data analytics initiatives

  • Objectives:
    o Understand priority areas
    o Approaches used for extracting useable information
    o Future directions

• In-class : 2/19/2014
  o Presentation from Rush Health about their data analytics initiatives
    ▪ Reporting tools
    ▪ Other tools

  • Objectives:
    o Understand priority areas
    o Approaches used for extracting useable information
    o Future directions

Working Session
• In Class 2/26/2014:
  o Class project working session

  • Objectives:
    o Class session to resolve any outstanding project issues

Data Analytics Tools
• In-class : 3/5/2014
  o Pre-processing tools
    ▪ Natural language processors
  o Customization based analysis
    ▪ Artificial Intelligence

  • Objectives:
    o Exposure to managing information rich “free text” fields

Project Presentations & Potential opportunities in the emerging healthcare systems
• In-Class 3/12/2014
  o Project Presentation
  o Future Direction
  o Discussion

  • Objectives:
    o Demonstration of understanding of emerging healthcare data and utilization of decision making tools.
    o Understanding data trends and future potential to perform data driven decision making
<table>
<thead>
<tr>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
<th>THURSDAY</th>
<th>FRIDAY</th>
<th>SATURDAY</th>
<th>SUNDAY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>7</td>
<td>8 ACC 968</td>
<td>9</td>
<td>10</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td>13</td>
<td>14</td>
<td>15 ACC 968</td>
<td>16</td>
<td>17</td>
<td>18</td>
<td>19</td>
</tr>
<tr>
<td>20</td>
<td>21</td>
<td>22 ACC 968</td>
<td>23</td>
<td>24</td>
<td>25</td>
<td>26</td>
</tr>
<tr>
<td>27</td>
<td>28</td>
<td>29 ACC 968</td>
<td>30</td>
<td>31</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MONDAY</td>
<td>TUESDAY</td>
<td>WEDNESDAY</td>
<td>THURSDAY</td>
<td>FRIDAY</td>
<td>SATURDAY</td>
<td>SUNDAY</td>
</tr>
<tr>
<td>--------</td>
<td>---------</td>
<td>-----------</td>
<td>----------</td>
<td>--------</td>
<td>----------</td>
<td>--------</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ACC 968</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Project Status Report</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Due at 11:59 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>11</td>
<td>12</td>
<td>13</td>
<td>14</td>
<td>15</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ACC 968</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>18</td>
<td>19</td>
<td>20</td>
<td>21</td>
<td>22</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ACC 968</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>25</td>
<td>26</td>
<td>27</td>
<td>28</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MONDAY</td>
<td>TUESDAY</td>
<td>WEDNESDAY</td>
<td>THURSDAY</td>
<td>FRIDAY</td>
<td>SATURDAY</td>
<td>SUNDAY</td>
</tr>
<tr>
<td>-------------</td>
<td>------------</td>
<td>-------------</td>
<td>------------</td>
<td>--------</td>
<td>----------</td>
<td>--------</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>Project Status Report Due at 11:59 PM</td>
<td>ACC 968 Class Discussion</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>11</td>
<td>12</td>
<td>13</td>
<td>14</td>
<td>15</td>
<td>16</td>
</tr>
<tr>
<td>Project Presentation Due at 11:59 PM</td>
<td>ACC 968 Project Report Due at 11:59 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>18</td>
<td>19</td>
<td>20</td>
<td>21</td>
<td>22</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>25</td>
<td>26</td>
<td>27</td>
<td>28</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>