



**GRADUATE HEALTHCARE QUALITY AND SAFETY PROGRAM  
CERTIFICATION HANDBOOK**

**Approved by the CAHME Board of Directors**

**November 2018**

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# **PREAMBLE**

## Background

Over the past ten years, the number of academic degree programs, professional certifications, and workforce development programs focused on healthcare quality and safety (HQS) has increased dramatically. The growth in these programs has been fueled by many factors, including the expansion of value-based payment mechanisms, tighter legal and regulatory environments, greater transparency, the availability of new technologies, and of course, the ongoing pursuit of excellence in healthcare.

In September 2017, directors of standalone academic degree programs in HQS met with representatives from the Commission on Accreditation of Healthcare Management Education (CAHME) to discuss creating a framework for academic program accreditation in healthcare quality and patient safety. It was agreed that the development of the accreditation framework would begin with creating an initial, temporary certification process as an interim step until the final accreditation standards, policies, and procedures are finalized (expected by December 2019).

This document contains the standards, policies, and procedures for the certification of standalone master's degree programs in healthcare quality and safety. These standards, policies, and procedures were created by experts in healthcare quality and patient safety, academic administration, and academic accreditation—within and external to CAHME and existing academic degree programs in HQS. They also use tools for measuring excellence in a variety of academic settings and contain standards that require continued commitment to assessing and delivering high quality graduate programs in HQS.

## Interpretation

Some professional fields are narrowly defined by specific licensing, certification, and/or accreditation standards that mandate precise curricular requirements and learning outcomes that can be consistently measured, replicated, documented, and codified. Other fields, such as HQS, are broader and more diverse, necessitating greater flexibility in certification and accreditation standards so that programs can organize their resources in support of excellence in HQS education from a variety of perspectives, with differing resources, and with the objective of meeting a variety of needs through different curricular structures.

To this end, this document does not employ the term "standard," to mean that certified programs must only adhere to a prescribed list of qualifications. Rather, the term "certification" is used to 1) describe a set of characteristics that are associated with high quality HQS graduate programs, as defined by representatives from the field itself, and 2) the expectation that certified programs should be able to demonstrate how these characteristics are reflected (or exceeded) in their programs.

# **GLOSSARY**

## **Academic Rigor**

Stringent preciseness, accuracy, or adherence to the methods, discipline, standards, or attainments associated with scholarly work.

## **Academic Unit, Primary**

The immediate organizational and administrative unit in which the Program is located.

## **Accreditation**

In the United States, accreditation is voluntarily sought by institutions and Programs, and is conferred by non-governmental bodies. The two fundamental purposes of accreditation are to ensure the quality of the institution or Program, and to assist in the continuous improvement of the institution or Program. It is both a status and a process: a status granted to an educational institution or Program that has been found to meet stated criteria of educational quality; as a process, accreditation illustrates a commitment to Self-Study and peer review. Programs choosing to participate in accreditation not only seek to meet established criteria but also to continuously seek ways in which to enhance the quality of healthcare management education.

## **Accredited Institutions of Higher Education**

In the United States, accredited institutions of higher education will be an accredited member of one of the six regional accrediting associations recognized by the Commission on Recognition of Postsecondary Accreditation. In Canada, accredited institutions of higher education will hold provisional or ordinary membership in the Association of Universities and Colleges of Canada. In all other countries, accredited institutions of higher education will hold the appropriate equivalent accreditation, if such accreditation exists. See Requirement B.

## **Annual Status Report**

A report submitted to CAHME disclosing any changes to the program.

## **Applied Knowledge**

To put into practice or adapt learned information, perceptions, or discoveries that have been gained through experience or study.

## **Blended Instruction**

Where part of a Program is delivered on campus - face-to-face, and the balance is delivered online.

## **Bloom's Taxonomy**

A classification of learning objectives within education proposed in 1956 by a committee of educators chaired by Benjamin Bloom who also edited the first volume of the standard text, Taxonomy of educational objectives: the classification of educational goals.

## **CAHME**

The Commission on Accreditation of Healthcare Management Education, the specialized accrediting body recognized by the U.S. Department of Education and the Council for Higher Education

Accreditation as the only accrediting body for healthcare management Programs at the master's level.

### **CAHME Action**

The decisions of the CAHME Board of Directors regarding accreditation of a Program. Site visits conducted during the Fall are acted on at the Spring meeting, and Spring site-visits are acted on at the Fall meeting. The process leading to an Action consists of: site visit and development of the draft site visit report; Program response to the draft report; presentation to the Accreditation Council by the assigned reader; clarification of fact; presentation of the site visit team recommendation for action to the Accreditation Council; a vote by the Accreditation Council; recommendation by the full Accreditation Council to the CAHME Board of Directors, and the decision of the Board of Directors.

### **CAHME Criteria for Accreditation**

The standards by which a Program is evaluated.

### **CAHME Fellow**

Faculty or practitioners appointed by CAHME to serve as secretary on site visits, to study the activities of CAHME and to learn about accreditation.

### **Career Progression**

A continuous or sequential path or course of development through a chosen pursuit, profession, or occupation. The method by which a Program evaluates its influence in the first three years after a person graduates from the Program.

### **Certification**

A pre-accredited status conferred by CAHME.

### **Certification Period**

A length of time in pre-accredited status.

### **Clerkship**

See Internship.

### **Competence/Competency**

Effective application of available knowledge, skills, attitudes and values (KSAV's) in complex situations. The essential knowledge, skills, and other attributes (KSO's) that are essential for performing a specific task or job.

### **Competence/Competency Assessment**

Measure of student attainment of the KSOs that is undertaken by a Program at the course and Program level using direct and indirect measures. Direct measures are based on student performance of Program activities within courses or Program-sponsored experiential learning opportunities. Indirect measures are based on perceptions of learning such as student self-assessments, focus groups, or surveys.

**Competency levels**

The target level of KSOs that align with the anticipated positions graduates will attain upon completion of the Program. Programs are expected to define the scale used to assess competency attainment, establish target levels of attainment for each competency, and measure students against the scale. CAHME does not require Programs to target expert levels of competency attainment unless this aligns with their mission.

**Competency Model**

A competency model is a framework for defining the skill and knowledge requirements of a job. It is a collection of competencies that jointly define successful job performance. Competency models are widely used in business for defining and assessing competencies within organizations in both hard and soft skills.

**Concentration****Also Specialization, Option, Focus, Track, Emphasis**

Synonymous terms that represent a specified group of courses within or in addition to the accredited Program of study. A subdivision of the graduate major, representing a particular subject focus within the major area. Students may enroll in the subdivision in addition to their graduate major.

**Concepts, Key**

Defined by course instructor/Program for each course. The knowledge, skills and outcomes students are expected to gain from each course.

**Continuing Education**

Non-degree granting Program-sponsored conferences and seminars for faculty and practitioners to further develop their professional competencies and the profession.

**Core**

The specific content that fulfills the requirements for the CAHME accredited Program of study.

**Credit Hours**

The number of hours credited toward the terminal degree upon completion of a course, defined by semester or by quarter.

Page Break

**Degree**

The academic award conferred by a university upon completion of the Program of study. Various degrees are granted by the Programs accredited by CAHME, including the MHA, MBA, MPA, MPH, etc.

**Degree, Dual**

All multi-degree Programs for which information is requested, e.g., MBA/MPH, MHA/MBA Programs.

**Direct Assessment**

Federal regulations define a direct assessment competency-based educational Program as an instructional Program that, in lieu of credit hours or clock hours as a measure of student learning, uses direct assessment of student learning relying solely on the attainment of defined competencies, or recognizes the direct assessment of student learning by others.

### **Distance Education or Distance Learning**

A formal educational process in which the majority, or all of the instruction occurs when the learner and the instructor are not in the same place at the same time. In this process, information or distributed learning technology is the likely connector between the learner and the instructor or the site of Program origin.

### **Diverse**

Composed of distinct or unlike elements or qualities.

### **Domain**

A group of competencies that are related. A broad, distinguishable area of competence that provides a general descriptive framework. A specified sphere of activity or knowledge.

### **Diversity**

Valuing and benefiting from personal differences. These differences address many variables including, race, religion, color, gender, national origin, disability, sexual orientation, age, education, geographic origin, and skill characteristics as well as differences in ideas, thinking, academic disciplines, and perspectives and must be in accordance with the applicable state/provincial and federal laws.

### **eAccreditation**

The online system now used for submission of a Program's Self-Study, Eligibility Statement, annual report and progress reports. The system is available from the CAHME home page and can be found directly using the following link: <https://accred.cahme.org/login>.

### **Eligibility Statement**

The Program document which addresses the CAHME eligibility requirements. For initial accreditation reviews, the statement is submitted with the original candidacy application and a copy is automatically included with the initial Self-Study document. For re-accreditation reviews a new Eligibility Statement is submitted with the completed Self-Study and six months prior to the site visit. (See Eligibility Statement Requirements A-L).

### **Emphasis**

See **Concentration**.

### **Experiential Learning**

Formal and structured faculty and/or preceptor-directed practical experience as part of the requirements for a graduate degree as well as learning from work experience that is evaluated as to level of competency attained.

### **Faculty, Adjunct**

Faculty who are experts in a special field appointed to give instruction or provide other services to the Program on a part-time or discontinuous basis.

**Faculty, Core Program.**

Faculty members who are engaged in the daily operations of Program management to support the activities of the academic life of the Program, share major responsibility for the teaching, advising, administrative functions.

**Faculty, Joint**

Full-time faculty members within the university having primary appointments outside the academic unit of the Program but who share major responsibility for teaching, advising and/or administration of the Program.

**Fellowship**

A full-time, postgraduate work experience, most often one year in duration. The fellowship complements/enhances graduate study in healthcare management and typically is sought immediately after completion of all requirements for the degree Program.

**Field Work**

The time a student spends working in the field as part of the Program; this is defined by the Program in terms of length of time spent in the field, sequencing in the curriculum, meeting objectives for the student, and relationship to course work.

**Fiscal Year**

Most recently completed fiscal year as defined by the university for which data are complete and can be verified. If the University fiscal year does not correspond to the academic year, this should be noted.

**Focus**

See **Concentration**.

**Founding Programs, HQS**

Programs continuously involved in the establishment of HQS accreditation.

**Full Time Students**

Students who are enrolled in sufficient semester or quarter hours to meet the University definition of full-time, regardless of whether those students are enrolled in a day, evening, online, hybrid or executive Program, and regardless of whether such students are employed while enrolled in the Program.

**Glossary, Program**

A list of definitions used by the Program throughout the Self-Study and uploaded to the e-accreditation system.

**Goals and Objectives, Program**

Written targets for achievement that are measurable, aligned with the Program's mission and vision, and provide a baseline against which to evaluate Program effectiveness.

**Graduate Teaching Assistant**

Students that assist faculty or other instructional staff in postsecondary institutions by performing teaching or teaching-related duties, such as teaching lower level courses, developing teaching materials, preparing and giving examinations, and grading examinations or papers. Graduate teaching assistants must be enrolled in a graduate school program.

**Handbook**

The **Handbook of Accreditation Policies and Procedures**, which is a compilation of all policies and procedures related to specific activities of CAHME.

**Higher Education Taxonomic Levels**

In **Bloom's taxonomy**, higher levels refer to more complex skills. For example, Bloom's level one deals with knowledge (e.g. remembering, recall); level 3 deals with application (using learned material in new situations); level 6 deals with evaluation (assessing / judging quality based on a set of criteria).

**HQS**

Healthcare quality and safety.

**Infrastructure**

The underlying base or foundation for an organization or system, including basic facilities, services, and installations needed for its functioning.

**Integrative Experiences**

The combining of a variety of learnings from the Program curriculum into a single coursework environment such as an experiential field experience (for example, an administrative residency or administrative internship), or a capstone course, which makes course content relevant to career advancement: the collection of skills, knowledge and abilities developed over the didactic curriculum.

**Interdisciplinary**

The collaborative/cooperative integration of knowledge and perspective of multiple areas of expertise (e.g., medicine, nursing, allied health, management, and other appropriate professionals) to holistically solve problems through research and education.

**Internship or Clerkship**

A supervised work experience, most often scheduled full-time, ordinarily for three months or less. The internship may or may not be a required part of the Program curriculum, and academic credit may or may not be awarded. The internship allows the student to apply didactic learning in a professional environment while supported by a close mentoring relationship with a preceptor who evaluates student performance. This evaluation is used as an assessment tool.

**Inter-professional activities**

Interactive activities that involve individuals from multiple professions including clinical professions (nursing, medicine, allied health), support professions (information technology, insurance, policy),

or many other fields. The goal of these efforts is to develop knowledge, skills and attitudes that enhance collaborative learning and practice.

### **Job Readiness**

The [relative level of] skills required to find and maintain relevant employment in the chosen field, to include conducting a job search, problem solving skills, oral communication skills, personal qualities and work ethics, and interpersonal teamwork skills [as well as relative competency in job specific technical skills].

### **Longitudinal**

A study designed to follow subjects forward through time.

### **Mission, Program**

A statement that defines the purpose and direction and any unique aspects of the Program. The mission should identify the Program's strategic purpose and provide clarity regarding the target student population and the types of jobs/markets graduates enter.

### **Multiple Sites**

Various geographic locations in which the curriculum for the Program being accredited is offered or administered. All sites covered by the accreditation action must be specified in the **Eligibility Statement**.

### **Objectives, Behavioral**

These objectives indicate the specific behaviors students must demonstrate to indicate that learning has occurred.

### **Objectives, Course**

Objectives for a particular course, including student behavioral learning objectives, which address a subset of curriculum objectives.

### **Objectives, Curriculum**

Program-wide objectives; these are the overarching objectives which the Program seeks to fulfill, and which serve as the basis for the evaluation for accreditation.

### **Objectives, Learning**

Brief, clear, specific statements of what students will be able to perform at the conclusion of instructional activities.

### **Online**

Asynchronous or synchronous, web-based and otherwise electronically transmitted format of instruction.

### **Online Instruction**

Broadly encompasses what in the past was referred to as "distance education" and also includes e-learning and blended instruction. Also see "Distance Learning or Distance Education" above.

**Option**

See **Concentration**.

**Outcomes**

Personal or organizational changes or benefits that follow as a result or consequence of some activity, intervention, or service. Some outcomes relate to the organization and some to a person. Outcomes can be short, intermediate, or long-term.

**Part Time Students**

Students who are not enrolled in sufficient semester or quarter hours to meet the University definition of full-time, regardless of whether those students are enrolled in a day, evening, online, hybrid or executive Program, and regardless of whether such students are employed while enrolled in the Program.

**Pedagogical**

Pertaining to ‘pedagogy’ – the principles, practice, and profession of teaching.

**Professional achievement**

Refers to the attainment of relatively sufficient recognition by credentialing, certifying, and/or licensing organizations so as to confer formal acknowledgement of achievement in such forms as title, diploma, licensure, registry, etc. Recognition generating organizations could include state, regional, national, and/or international level formally structured organizations such as the American College of Healthcare Executives, Healthcare Financial Management Association, American College of Surgeons, State Board of Nursing, and the like.

**Program Director**

The individual primarily responsible for the operation of a program; CAHME’s primary point of contact.

**Program, HQS**

Master’s degree programs in healthcare quality and safety conferred by accredited institutions of higher education.

**Program Readiness**

The relative level of ability/abilities [of an academic Program] to accomplish Program mission, goals and objectives, based upon a predetermined set of criteria and related standards.

**Program of Study**

The complete Program for which accreditation is sought. CAHME grants accreditation to the Program of study, rather than to the degree granted.

**Qualified, Academically**

A faculty member is academically qualified by virtue of formal educational background and continued intellectual contributions to the field.

**Qualified, Professionally**

A faculty member is professionally qualified by virtue of academic preparation (normally at the master's level) and significant professional experience and expertise relevant to the teaching responsibilities.

### **Reader System**

A methodology used during CAHME meetings to audit the site visit team reports and inform the final decision. This approach improves the accuracy, consistency, and value of the CAHME reports and identifies any additional general educational issues worthy of discussion by CAHME.

### **Residency**

A supervised work experience, most often scheduled full-time, for six months or more. The residency is a required part of the Program curriculum and academic credit is awarded. The residency allows the student to apply didactic learning in a professional environment while supported by a close mentoring relationship with faculty or preceptor who evaluates student performance. This evaluation is used as an assessment tool.

### **Scholarly Activities**

The creation of a discipline-appropriate product and the discipline-appropriate presentation of that product. Scholarly activities are framed by discovery, teaching, application, and integration.

### **Scholarship**

Scholarship is the result of academic research in conjunction with institutions of higher education wherein deep mastery of a subject is obtained; it consists of knowledge that results from study and research in a particular field.

### **Self-Study Document**

The documentation submitted for accreditation review.

### **Self-Study Year**

The last full academic year (as defined by the university) for which data is complete and can be verified. This is the year upon which the Self-Study is based; all documentation should relate to this year.

### **Site Visit**

The on-site visit conducted by CAHME, which occurs in two phases. On the first day, the Fellow reviews the records and resources of the Program. On days two and three, the full team completes an extensive evaluation of the Program and provides preliminary findings to the Program.

### **Site Visit Team**

The group of persons appointed by the CAHME to conduct the site visit. The team is normally chaired by a member or former member of the CAHME Accreditation Council; the remainder of the team consists of a faculty member from another accredited Program and/or practitioner, and a Fellow who serves as the secretary to the team. For initial site visits, a fourth member is added (either faculty or practitioner) who also serves on the CAHME Candidacy Committee. Each team includes at least one practitioner. Whenever possible at least one member of each team will

have direct experience with the type of Program under review, e.g., traditional face-to-face, hybrid, and/or online.

### **Specialization**

See **Concentration**.

### **Student Driven/Student Focused**

Designed (driven) to meet the needs of CAHME student customers.

### **Team-based Learning**

An approach to learning which emphasizes the process of transforming heterogeneous students into cohesive teams dedicated to a common set of goals. This can be accomplished via team building: 1. Effective team formation; 2. Accountability based on team/group work; 3. Group-related assignments; 4. Timely feedback on work related goal achievement.

### **Team Building**

Team building is an effort in which a team studies its own process of working together and acts to create a climate that encourages and values the contributions of team members. Their energies are directed toward problem solving, task effectiveness, and maximizing the use of all members' resources to achieve the team's purpose.

### **Values**

An abstract generalized principle of behavior to which members of a group feel a strong emotionally-toned commitment and which provides a standard for judging specific acts and goals.

## **POLICY STATEMENT ON CAHME CERTIFICATION OF HQS PROGRAMS**

### ***Section 1. The Purpose of Certification***

The CAHME Certification Program (“Certification”) is designed to recognize healthcare quality and safety (“HQS”) programs that meet Certification Requirements and have come together to establish distinct academic accreditation standards for master’s degree programs in HQS (“Program” and “Programs”). Certification is intended to serve as a *bridge* to accreditation while CAHME finalizes the accreditation process for HQS programs. Thus, Certified status is not permanent, does not indicate an accredited status, and does not guarantee eventual, future accreditation. Additionally, once the accreditation process is finalized and published on the CAHME web site, Programs will no longer be considered for Certification; instead, they must pursue accreditation.

### ***Section 2. Benefits of Certification***

A Program that has been accepted into the CAHME Certification Program has demonstrated, through the submission of the required documents, that it complies with Certification Requirements, is committed to delivering high quality HQS programs, and plans to pursue eventual accreditation. The Certified Program will benefit from:

- ongoing technical assistance from CAHME that fosters continuous quality improvement;
- access to nationally accepted standards for continuous peer review; and
- recognition by external stakeholders in meeting Certification standards.

CAHME will benefit from the participation of Certified Programs by expanding its knowledge and reference base in HQS. This base will provide helpful illustrations for use in training and technical assistance offered to CAHME staff, Programs, and members of CAHME's various committees.

### ***Section 3. The HQS Certification Committee***

The HQS Certification Committee will direct the CAHME Certification Program and make recommendations to CAHME Accreditation Council regarding Program Certification decisions.

Committee Chair:

- The Chair of the HQS Certification Committee will be appointed by the CAHME Accreditation Council on the recommendation of the Chair of the CAHME Accreditation Council.
- The Chair must be either a current member or past member of the CAHME Accreditation Council.

Committee Membership:

- Additional members of the HQS Certification Committee will be appointed by the CAHME Accreditation Council on the recommendation of the Chair of the CAHME Accreditation Council.
- All members will serve renewable 2-year terms. Consistent with the goal of Certification, the HQS Certification Committee will dissolve when the accreditation process is finalized and published on the CAHME web site.
- At all times, there will be at least five members of the HQS Certification Committee, at least one of whom must be a sitting member of the CAHME Accreditation Council.
- The HQS Certification Committee will ideally be comprised of equal numbers of practitioners and academics.
- The Chairs of the CAHME Accreditation Council and CAHME Standards Council and the President and CEO of CAHME will serve as Ex Officio members.

Committee Meetings:

- The HQS Certification Committee will have at least two regularly scheduled meetings annually that occur immediately prior to the CAHME Accreditation Council meetings so that it may report Program Certification recommendations to the CAHME Accreditation Council.
- The HQS Certification Committee at its regularly scheduled meetings is responsible for:
  - providing technical assistance to Programs applying for Certification;
  - reviewing Certification Applications;
  - recommending to the CAHME Accreditation Council that it grant, deny, or defer Certification status to applicant Programs;
  - recommending to the CAHME Accreditation Council the appropriate Certification Period and Self-Study Year for applicant Programs; and

- assessing Certification policies and procedures and making recommendations for modifications to the CAHME Accreditation Council.
- Actions of the HQS Certification Committee shall be approved by a simple majority vote of the members present. Members may provide their vote in writing to the Chair of the HQS Certification Committee if they are unable to attend the meeting.

#### ***Section 4. Considering Certification***

Programs considering Certification should carefully review the Certification Requirements (see Section 6), the Certification Application (see Appendix), and required fees (see Section 10) to assess whether it is ready to pursue Certification, including whether it has the necessary institutional support and capabilities to pursue eventual accreditation. A Program must have identified a Program Director, have admitted at least one class, and be able to demonstrate compliance with all of the Certification Requirements before a Certification Application can be submitted. Programs interested in CAHME Certification are encouraged to contact CAHME staff before beginning the formal process of seeking Certification.

#### ***Section 5. Procedures for Entering the Certification Program***

Programs interested in CAHME Certification begin by submitting a Letter of Intent addressed to the President and CEO of CAHME. The Letter of Intent must include:

- an expression of the program's commitment to achieve Certification and continue toward accreditation;
- an expression of the institution's support of the program to pursue Certification and accreditation;
- an expression that all Certification Requirements have been met and can be documented (see Section 6);
- an expression that the program or institution will commit the necessary financial resources for the program to achieve Certification and accreditation (see Section 10); and
- contact information and signatures for the Program Director and the Dean or Chief Administrative Officer of the University/College or designated representative.

The Letter of Intent will be reviewed by CAHME staff to determine if the Program is ready for Certification. All declarations made in the Letter of Intent are subject to verification by CAHME staff. If the Program is approved to proceed with Certification, CAHME staff will notify the Program in writing and the Program must submit a Certification Application by a mutually agreeable deadline (see Section 7). If the Program is not approved to proceed with Certification, CAHME staff will notify the Program in writing and will include a reason(s) for the decision. Programs that are not approved to proceed with Certification may submit another Letter of Intent no sooner than four (4) months after receipt of CAHME's decision.

At any time, a Program may withdraw its Letter of Intent by submitting written notice to the President and CEO of CAHME. Upon receipt of the written notice, no further Certification activities will be conducted.

## ***Section 6. Certification Requirements***

### **REQUIREMENT A**

The University/College will have established a master's degree with healthcare quality and safety as a major course of study. Establishment of the Program will have been approved by the appropriate University/College governing body.

### **REQUIREMENT B**

Programs will be a part of an institution of higher education that has achieved regional accreditation or equivalent recognition.

*COMMENT: In the United States the institution will be an accredited member of one of the six regional accrediting associations recognized by the Commission on Recognition of Postsecondary Accreditation. In Canada, the institution will hold provisional or ordinary membership in the Association of Universities and Colleges of Canada. In all other countries, the program will hold the appropriate equivalent accreditation, if such accreditation exists.*

### **REQUIREMENT C**

If the Program is in a specialized graduate school or schools (e.g., medical school, school of public health, school of nursing, school of business administration) within the University/College, the school(s) must be accredited by the appropriate recognized specialized accrediting entity, if such an accrediting entity exists. In the absence of such accreditation(s), a determination will be made by CAHME to determine the extent to which the lack of specialized accreditation is detrimental to the quality of the Program.

### **REQUIREMENT D**

The Program will have admitted at least one class.

### **REQUIREMENT E**

The Program will provide evidence of:

- alignment with University/College/School goals and mission;
- a curricular plan demonstrating alignment between planned student outcomes and program courses/supervised field experiences;
- all courses designed to provide the regular and substantive interaction, either online or face-to-face, or a hybrid thereof, between students and instructors;
- instructional methods that appropriately address the planned student outcomes and consideration of student learning styles; and
- a continuous quality improvement plan.

### **REQUIREMENT F**

The Program will ensure that resources, including but not limited to facilities, equipment, and supplies, are sufficient to support Program quality and achieve the Program's mission, goals, and objectives. These will include:

1. library and/or access to information resources;

2. appropriate technology capable of providing a platform for active student learning, (i.e., a learning management system for online learning and/or in-classroom computer hardware and software to support face-to-face learning); and
3. classroom, and other learning space, and physical facilities for students, faculty, and staff, as appropriate to the method of course/program delivery.

If the Program is delivered online, students should have access to all facilities, equipment, supplies, and resources available to on-campus students.

#### REQUIREMENT G

There will be no discrimination on the basis of gender, age, creed, race, religion, ethnicity, disability or sexual orientation in any aspect of the Program's activities. The Program will be in full compliance with relevant laws and University/College policy regarding equal opportunity requirements. Nothing herein will be construed to prevent a University/College from having a religious affiliation and purpose and adopting policies of admission and employment that directly relate to such affiliation and purpose so long as notice of such policies has been provided to applicants, students, faculty, and employees.

#### REQUIREMENT H

The Program will have a process for handling formal student complaints and use these complaints, where appropriate, for program evaluation and improvement.

#### REQUIREMENT I

The Program will be subject to a defined policy on academic freedom and academic standards for faculty. Faculty in the Program will be aware of Program/University faculty grievance procedures.

#### REQUIREMENT J

University and or Program policies will provide time or support for faculty development, research and/or scholarship, and service, as appropriate to the type of faculty appointment and the conditions of employment. Faculty development and research should support the domain of healthcare quality and patient safety.

#### REQUIREMENT K

Faculty duties and responsibilities will be consistent with University policies. Faculty evaluation will be equitable and fair.

#### REQUIREMENT L

The Program will have a Program Director identified who is affiliated with and responsible for providing academic direction of the Program.

### ***Section 7. The Certification Application and Review Process***

After a Program has been approved by CAHME to proceed with Certification, the Program must complete a Certification Application and submit it to CAHME by a mutually agreeable deadline. Specific documentation must be included in the Certification Application for evaluation by CAHME staff and the HQS Certification Committee. CAHME staff will review the Certification Application

for completeness before the application is sent to the HQS Certification Committee for review. Incomplete applications will be returned to the Program for completion and resubmission.

The HQS Certification Committee will review the Program's Certification Application, request additional information, if needed, and make a recommendation to the CAHME Accreditation Council as follows:

- If a Program has sufficiently demonstrated, through the submission of the required documents, that it is eligible to participate in the Certification Program, the HQS Certification Committee will recommend to the CAHME Accreditation Council that it grant Certification status to the Program. The HQS Certification Committee will also recommend to the CAHME Accreditation Council the Program's Certification Period and Self-Study Year in consultation with the Program.
- If a Program lacks the required documents or qualifications or otherwise has not sufficiently demonstrated, through the submission of the required documents, that it is eligible to participate in the Certification Program, the HQS Certification Committee will recommend to the CAHME Accreditation Council that it either 1) deny Certification status to the Program or 2) defer the decision to a later date.
  - Programs that are denied Certification status may reapply for Certification by submitting another Letter of Intent no sooner than four (4) months after receipt of the denial decision. The Letter of Intent must summarize how the deficiencies in the previous Candidate Application have been remedied, in addition to the other requirements (see Section 5).
  - Programs that receive a deferral must address the deficiencies in the Certification Application and resubmit the required information by a date set by the HQS Certification Committee.

The Program's Certification Period and Self-Study Year will be determined in consultation with the Program and will be based on the amount of time the Program needs to prepare for eventual accreditation. The Certification Period and Self-Study Year can be adapted to a Program's stage of development; however, it cannot extend beyond three years after the date when the accreditation process is finalized and published on the CAHME web site.

The Certification Application must normally be submitted by September 1<sup>st</sup> to be reviewed at the Fall HQS Certification Committee meeting and by February 1<sup>st</sup> to be reviewed at the Spring HQS Certification Committee meeting. Founding Programs may submit Certification Applications starting November 1, 2018. The CAHME Accreditation Council makes the final determination on a Program's Certification Status, Certification Period, and Self-Study Year at its face-to-face meetings in the Spring and the Fall of each calendar year.

At any time, a Program may withdraw its Certification Application by submitting written notice to the President and CEO of CAHME. Upon receipt of the written notice, no further Certification activities will be conducted.

## ***Section 8. Certification Status***

Programs that have been granted Certified status will receive written notification from CAHME. The notification will also contain the Certification Period and the Self-Study Year (when the Accreditation standard is in existence) . Certified Programs may retain their Certification status until they achieve accredited status (as long as that period lasts no longer than 3 years after the date of the beginning of accreditation), provided they adhere to the Self-Study Year stated in the notification letter and complete all reporting and financial requirements. Fees may apply (see Section 10).

The Certification Period begins on the date when the CAHME Accreditation Council grants Certification status and lasts through June 30 of the year, with the exception of the first round of certification by end of Calendar 2018. Certification when either the program receives an Accreditation Designation, is denied Accreditation, or within 3 years of the beginning of availability of accreditation, whichever is sooner. During the Certification Period, Programs must maintain compliance with the Certification Requirements, report any substantive changes to CAHME for approval, submit Annual Status Reports, meet all financial requirements, and participate in the development of the accreditation process.

The Self-Study Year is the academic year when the Program must complete the self-study process and submit all of the required documentation as a part of the accreditation process. During the Self-Study Year, Programs must also submit Annual Status Reports and meet all financial requirements.

On July 1<sup>st</sup> of each year, Certified Programs must submit an Annual Status Report and pay applicable fees. The Annual Status Report documents any changes, or no changes, that have occurred in the Program since it's Certification or last annual review. The Annual Status Reports will be reviewed by the HQS Certification Committee for continued compliance with the Certification Program. Failure to submit an Annual Status Report may result in removal of Certification status.

After receiving approval of Certification status, Programs may call themselves "CAHME Certified" and use approved CAHME Certification logos and marks, subject to the conditions set forth in the notification letter, CAHME policies, and Section 11 below. At no time should the program imply that they are Accredited. Programs that fail to abide by these requirements will be given an initial warning and need to make corrective action within 15 days of notification. Failure to remedy will result in removal from the CAHME Certification status. The program will also be ineligible for a period to be determined by the CAHME Board.

During the time that Certification is available, orientation meetings may be held online or in conjunction with national professional meetings for Program Directors who are new to Certification.

Certification status will not be available to new Programs after the date that the accreditation process is finalized and published on the CAHME web site.

At any time, a Program may terminate its Certification status by submitting written notice to the President and CEO of CAHME. Upon receipt of the written notice, no further Certification activities will be conducted.

### ***Section 9. Advancement from Certified to Accreditation***

Once a Program is CAHME Certified, the Program must proceed toward accreditation on the timeline established in the notification.

During the Self-Study Year, CAHME will take a supportive role with Certified Programs to help them toward accreditation. This may include the provision of resources, access to enhanced benchmarking, the benefits of the Chair's Mentorship Circle, technical assistance, and a consultative approach towards accreditation review.

The accreditation standards, policies, and procedures will be posted on the CAHME web site after they are finalized.

### ***Section 10. Assessment of Fees***

A comprehensive list of fees is posted on the CAHME website. Certification Application Fees are waived for Founding Programs. During the Certification Period, Certified Programs will pay Certification fees. During the Self-Study Year, Certified Programs will pay accreditation fees.

### ***Section 11. Communication Guidelines***

After receiving approval of Certification status, Programs may call themselves "CAHME Certified" and use approved CAHME logos and marks, subject to the conditions set forth in this section, the notification letter, and CAHME policies. The approved "CAHME Certified" logo can be used by Certified Programs on web sites, marketing materials, newsletters, and other printed and digital materials. Certified Programs will also be listed in CAHME's Official List of Certified Programs.

All publications and/or statements by the Certified Program must use the following declaration regarding the Program's Certified status:

*Certified status is a mark of quality. It is also an indication that a program in healthcare quality and safety has committed to participate in the establishment of distinct accreditation standards for master's level healthcare quality and safety education. Certified status is not the same as accredited status and does not guarantee eventual accredited status.*

## **CERTIFICATION APPLICATION**

See link on CAHME website.