



Program Name & Location

BARUCH COLLEGE
New York, NY

Dates of the Site Visit

November 16-18th, 2011

Accreditation: 7 year CAHME Accreditation, effective 2011 through 2018

Accreditation History

Season	Year	Action
Summer	1971	Accreditation-5 Years
Fall	1976*	Reaccreditation-2 Years-Interim Visit Scheduled for Fall 1978
Fall	1977	Progress Report Accepted
Spring	1978	Interim Visit Report Accepted
Fall	1979	Site Visit Postponed to Fall 1980
Spring	1981*	Reaccreditation-5 Years
Spring	1982	Progress Report Accepted; Additional Progress Report Requested
Spring	1983	Progress Report Accepted; Additional Progress Report Requested
Fall	1984	Progress Report Accepted
Fall	1986*	Reaccreditation-5 Years
Fall	1987	Progress Report Accepted
Spring	1989	Granted 6-Month Extension in Date of Next Site Visit
Spring	1991	Program Request for Further Delay; Interim Visit Proposed By Commission to Determine Extent of Delay
Fall	1991	Report of Interim Visit Accepted; Progress Report Requested
Spring	1992	Progress Report Accepted
Fall	1993*	Reaccreditation; 1st and 3rd Year Progress Reports Requested; Site Visit Fall 1998
Fall	1994	Progress Report Accepted
Fall	1996	Third Year Progress Accepted
Spring	1999*	Reaccreditation; 2nd Year Progress Spring 2001, 4th Year Spring 2003; Site Visit Fall 2005
Spring	2001	2nd Year Progress Report Accepted
Spring	2003	4th Year Progress Report Accepted
Spring	2006*	Accreditation - 5 Years- 1st Year Progress Report Due February 1, 2007



Spring	2007	1st Year Progress Report Accepted; All Recommendations Completed
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Program Description

The Baruch/Mount Sinai Masters of Business Administration in Health Care Administration (Program) is housed in the Baruch College’s Zicklin School of Business (Zicklin). Zicklin is one of three schools within Baruch College (Baruch). Baruch is a senior college in the City University of New York (CUNY), the largest urban public higher education system in the United States, with over 243,000 degree-seeking and 240,000 adult, continuing, and professional education students.

History

The Program began in 1969, and graduated its first class of seven students in 1971. In the past 41 years the Program’s alumni have grown to over 1000. In 1990 the Program changed its design from a traditional full-time delivery to an “executive-style” lock-step cohort that serviced health care professionals who were working in the field. Students attend classes on Tuesday and Thursday evenings from 6 pm – 9:15 pm on a trimester basis. In the first year, students also take classes on some Wednesdays. Students complete 57 credits in three years.

Students

The students tend to be working professionals, highly focused, and committed to the health care field. The average number of years of work experience upon entering the Program is approximately four years and the median age is 28. The average GMAT score for the class of 2013 is 554. The proportion of entering students who finish the Program is over 92 percent. In the graduating classes of 2009, 2010 and 2011, out of a possible 89 candidates 82 graduated on time with their class. The Program attributes the high completion rate to the cohort structure and a careful, thorough admission process. Students form a strong bond, which provides invaluable support over the demanding schedule. Satisfaction with the Program is high; as the vast majority of graduates of graduates in 2009-2011 stated that their graduate experience met their expectations. Satisfaction with the Program continues with alumni who were surveyed three years after graduation with 88.4 percent reporting they were extremely satisfied with the Program.

Findings

CAHME sends a team on-site to review the program. On the first day, the CAHME Fellow reviews the records and resources of the Program. On days two and three, the full team completes an extensive evaluation of the Program based on CAHME requirements. These findings are reported, and programs are designated as being a leader in meeting the requirement (a “strength”), meeting the requirement; partially meeting the requirements, or not meeting the requirement. Sometimes, a program may “meet” a requirement, but the site visitors suggest a recommendation for the program to improve (“Consultative Recommendations”).

Programs need to report to CAHME following their site visit their remediation activity for all requirements that are not “Met” in a “Progress Report”. Thus, evaluating a program based on “Not Mets” or “Partially Mets” may not reflect the progress a program has made since their last site visit. Programs have two years to complete all criteria found partially or not met on their site



visit report. Accreditation past two years indicates that the program has successfully completed progress reporting.

		Number	Percent
Met	Strengths	3	5%
	Other Met	49	88%
Partially Met		5	9%
Not Met		0	0%
Total		56	100%
<i>Consultative Recommendations</i>		6	11%

Program Strengths

I.B.4 PROGRAM LEADERSHIP WILL HAVE THE AUTHORITY TO ENSURE THE INTEGRITY OF THE PROGRAM.

Strength Comment:

The Program Director operates a highly effective program in a complex environment with limited resources and limited formal authority.

III.A.4 THE PROGRAM WILL EVALUATE COURSE INSTRUCTION AND THE CURRICULUM AND USE THE RESULTS TO DEVELOP SPECIFIC PLANS FOR MAINTAINING OR IMPROVING THE QUALITY OF THE TEACHING AND LEARNING ENVIRONMENT.

Strength Comment: The Program’s use of external evaluators in their assurance of learning process is a strength.

III.B.11. THE PROGRAM CURRICULUM SHOULD ADDRESS THE FOLLOWING HEALTHCARE MANAGEMENT CONTENT AREAS, AND IS NOT NECESSARILY COURSE-SPECIFIC, BUT RATHER CONTENT THAT SHOULD BE TAUGHT SOMEWHERE IN THE PROGRAM: CURRICULUM CONTENT AND COMPETENCY DEVELOPMENT, WRITTEN, VERBAL AND INTERPERSONAL COMMUNICATION SKILLS.

Strength Comment:



The integrative nature of the Program’s communication development program is a strength.

Partially Met

I.A.2 THE PROGRAM WILL ESTABLISH GOALS, OBJECTIVES AND PERFORMANCE OUTCOMES THAT ARE ACTION-BASED, OBSERVABLE AND MEASURABLE.

Assessment:

The Program had three clearly articulated goals regarding 1) excellence in graduate business education, 2) scholarly research and professional visibility, and 3) community building through an executive-style cohort system of education.

Criterion Related Concern:

However, these three goals were not linked to their eleven performance objectives and measurements.

Criterion Related Recommendation:

The Program shall have clearly linked goals and objectives, and performance metrics that are tied to the objectives. The Program should consider using the template provided within the CAHME self-study report template in order to ensure all essential components are included and aligned.

I.A.4. STATES THAT THE PROGRAM WILL MONITOR THE HEALTH SYSTEM, THE UNIVERSITY ENVIRONMENT, AND MANAGEMENT THEORY AND PRACTICE AND ADJUST ITS MISSION, VISION, GOALS AND OBJECTIVES IN RESPONSE TO ENVIRONMENTAL CHANGES AND NEEDS WHEN NECESSARY.

Assessment: Criterion

Related Concern:

While the Program did have most of the major components of a strategic planning process (e.g. mission, vision, goals, objectives, measurements, etc.), the Program relied upon the Zicklin School of Business strategic planning process to establish their operational framework and did not routinely incorporate systematic input from all key stakeholders Criterion Related

Recommendation:

The Program shall carry out a formal planning process designed to ensure that their mission, vision, goals, and objectives are consistent with their environment. This process shall engage Program internal and external stakeholders.

II.A.4 THE PROGRAM WILL ENSURE THAT STUDENTS ARE PROVIDED APPROPRIATE SUPPORT SERVICES, AND THAT THESE SERVICES ARE EVALUATED REGULARLY AS A BASIS FOR ONGOING IMPROVEMENT.

Assessment:

Criterion Related Concern:



The Program did not systematically connect the health management students to the career advising and placement services available to the broader set of MBA students. Feedback from both students and alumni supported the finding that Program students had inadequate knowledge of and access to these services. Criterion Related Recommendation:

The Program shall develop a process, in collaboration with the Office of Graduate Career Management, to ensure that the career advising and placement needs of all students are met.

III.A.5. THE PROGRAM WILL PROVIDE EXPERIENCES AT APPROPRIATE POINTS IN THE CURRICULUM FOR STUDENTS TO GAIN AN UNDERSTANDING OF AND TO INTERACT WITH PROFESSIONALS ACROSS THE BROAD RANGE OF HEALTH PROFESSIONS.

Assessment:

Criterion Related Concern:

While the Program did provide ample opportunities for students to interact with professionals from within the healthcare community, the opportunities were concentrated towards the hospital setting. Given the Program's mission statement of "*Program graduates will attain senior positions within the field and will work in a wide range of health care organizations*", student exposure within the program does not align with graduate expectations upon completion of the program.

Criterion Related Recommendation:

The Program shall broaden the student interaction with professionals beyond those professions traditionally found within the hospital and health system settings. The interactions shall be consistent with the mission statement that their graduates "will work in a wide range of health care organizations that reflect the diversity of the field...".

IV.A.2 THE PROGRAM WILL FOSTER A DIVERSE CULTURE WITHIN THE FACULTY AND LEARNING ENVIRONMENT.

Assessment:

Criterion Related Concern:

The Program does not currently portray a diverse culture among the faculty and within the learning environment. While the Program demonstrated some progress towards enhancing faculty diversity since the last CAHME site visit, progress is slow due to the Program's reliance on the Departmental hiring process within the Zicklin School of Business. The Program does have some ability to foster a diverse culture through hiring adjunct faculty and bringing in guest speakers throughout the curriculum.

Criterion Related Recommendation:

The Program shall expose students to diversity in the learning environment through the involvement of minority speakers, adjuncts, etc.

Consultative Recommendations:

I.A.4. THE PROGRAM WILL MONITOR THE HEALTH SYSTEM, THE UNIVERSITY ENVIRONMENT, AND MANAGEMENT THEORY AND PRACTICE AND ADJUST ITS MISSION, VISION, GOALS AND OBJECTIVES IN RESPONSE TO ENVIRONMENTAL CHANGES AND NEEDS WHEN NECESSARY.

Consultative Recommendation:

As part of the planning process in collaboration with the College, the Program should evaluate the market opportunities that exist to enhance their scale, scope, and reputation.

I.B.1 THE PROGRAM WILL HAVE SUFFICIENT FINANCIAL AND ADMINISTRATIVE SUPPORT TO ENSURE THAT ITS MISSION, GOALS AND OBJECTIVES CAN BE ACHIEVED.

Consultative Recommendation:

The College should consider allocating resources in support of Program marketing efforts in order to meet their targets for student quality.

II.A.6. THE PROGRAM WILL ENSURE THAT GRADUATES HAVE COMPLETED THE PROGRAM WELL-PREPARED TO PURSUE CAREERS CONSISTENT WITH PROGRAM GOALS AND RECOGNIZED COMPETENCIES AND THAT THEIR CAREER PREPAREDNESS IS MONITORED, DOCUMENTED AND USED IN PROGRAM EVALUATION AND AS A BASIS FOR CONTINUOUS IMPROVEMENT.

Consultative Recommendation:

The Program should identify a mechanism for remediation (such as individual professional development plans) for students who fail to obtain sufficient levels of competencies.

III.A.3 THE PROGRAM WILL ENSURE THAT COURSE SYLLABI INCORPORATE CURRENT DEVELOPMENTS IN THE FIELD, AND ACCURATELY REFLECT COURSE COMPETENCIES AND CONTENT, PROCESS, EXPECTED OUTCOMES, AND RELATIONSHIP TO OTHER COURSES. Consultative

Recommendation:

The Program should ensure that course syllabi clearly link competencies to course learning objectives.

III.B.16 THE PROGRAM CURRICULUM SHOULD ADDRESS THE FOLLOWING HEALTHCARE MANAGEMENT CONTENT AREAS, AND IS NOT NECESSARILY COURSE-SPECIFIC, BUT RATHER CONTENT THAT SHOULD BE TAUGHT SOMEWHERE IN THE PROGRAM: ETHICS IN BUSINESS AND CLINICAL DECISIONMAKING IS REQUIRED WITHIN THE REQUIRED CURRICULUM.

Consultative Recommendation:



The Program should incorporate a greater emphasis on clinical ethics into the curriculum in order to better meet the ethical awareness component of their competency model.

IV.A.1 THE PROGRAM AND UNIVERSITY LEADERSHIP WILL ENSURE THAT THE COMPLEMENT, INVOLVEMENT AND QUALIFICATIONS OF PROGRAM FACULTY ARE SUFFICIENT TO ACCOMPLISH THE MISSION OF THE PROGRAM.

Consultative Recommendation:

The College should consider adding a full-time, tenured professor, with healthcare expertise, to further develop the leadership, teaching, and research agendas within the Program.