CAHME®
Commission on Accreditation
of Healthcare Management Education

ACCREDITATION STANDARDS
AND
SELF-STUDY HANDBOOK

2021 Standards

*For Graduate Programs
In Healthcare Management, Population Health Management and
Healthcare Quality & Safety*

based on the
Criteria for Accreditation
Effective Fall 2021

REVISION HISTORY

Date	Section	Description
4/7/2025	General Instructions	Addition of III.B.1 and III.C.1 to Candidacy Application requirements
	Figure I.A.2.1	Removal of goals needing to be in required categories of Education, Research, Service as these categories are not specifically called out in the standard
	II.A.3	Removal of financial advising from required item 3 as standard only states that resources MAY include financial aid advisement. Change required item 5 to 5, 6 and 7 to have evaluation of extent to which resources are available for all programs, not just online programs
	II.A.5	Figure II.A.5.2 replaced word 'placement' with 'employment'
	III.B.1	Removal of mention of "syllabus cover sheet"
	III.C.2	Addition of the word 'individual' in Required item 1
	III.D.2	Addition of the word 'ongoing' in Required item 2
	IV.A.1	Change in interpretation for program to describe how all faculty are kept informed of changes, not just adjuncts. Also added required element 5 to reflect this.
	IV.C.2	Addition of the use of LMS
9/4/2024	IV.A.1 & Glossary	Definition of Core Faculty
8/5/2024	Revision History Table	Spelling Error Fixes
5/9/2024	All	Reviewed and modified to become a single self-study guide for Healthcare Management, Healthcare Quality and Safety, and Population Health Management Addendums added at bottom of document
10/11/2023	General Instructions	Clarification of Candidacy Standards
	Glossary of Terms	Removal of "Corporate Members" and "Officers of the Board."
3/16/2023	Glossary of Terms	Revision to 'Advance Search Program Profile'
3/13/2023	II.A.1	Update to Requirement 3
	Glossary of Terms	Addition of 'Advance Search Program Profile'
	IV.C.1	Clarification on guidelines
3/6/2023	II.A.5 Number 7	Provides the recommendation for programs to use the link for the CAHME Advance Search Program Report specific to the modality.
2/9/2023	II.A.5	Added REQUIRED step 6 regarding Figure 11
2/8/2023	IV.C.1	Updated revised guidelines, completion guide, and added new Figure 23. Changed number for Figure 24.
	IV.C.2	Revised number of former Figure 23 to new number Figure 24.
	Figure 4	Removed footnote from Figure
	Glossary	Updated Glossary to be consistent with Glossary in CAHME Handbook of Policies and Accreditation Procedures_2023_02_01.
11/1/2022	General Instructions & Glossary	References to Accreditation Management Portal changed from eAccreditation to CAMP
	I.A.1	Changes to Required list adding additional detail to items 1 through 5
	I.A.2	Figure 1 revised
	IV.A.1	Figure 17 revised

INTRODUCTION

CAHME's mission is to advance the quality of healthcare management education, and accreditation is at the core of that mission.

Students look for CAHME-accredited programs as assurance that they will offer a high-quality educational experience that will best prepare them for leadership. Hospitals and health systems look to hire graduates of CAHME-accredited programs knowing that these new executives are coming to them not just with academic credentials, but with proven competencies in meeting the challenges of providing healthcare in communities across the country and around the world.

This Self-Study Handbook outlines the steps programs must take to achieving accreditation, or re-accreditation. The Handbook includes direction to programs on creating their Eligibility Statement and their Self-Study document. These documents, along with the CAHME Site Visit, are critical pieces in the accreditation process for programs to demonstrate that they meet CAHME standards.

Through accreditation, programs support CAHME's mission to advance the quality of healthcare management education. We appreciate your interest and are ready to answer any questions you might have about the process and about the benefits of accreditation for programs and students. You may also find more information on the CAHME web site, www.cahme.org.

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GENERAL INSTRUCTIONS

Academic accreditation was developed by graduate Programs to provide a basis for self-evaluation and collaborative peer review in support of continuous quality improvement. The process is designed to contribute directly to educational quality as well as to monitor the quality of service to the public who depend on health services. CAHME offers accreditation to individual academic Programs offering a major course of study in healthcare management, population health management, and healthcare quality and safety leading to a professional master's degree.

A Program of accreditation is reflective of the professional field it represents. Some fields are narrowly defined, with a specificity of content and knowledge that develops competency in such a way as to make it consistently measurable, replicable, documented and codified. Other fields are broad and diverse, requiring a myriad of skills, knowledge and flexibility in adjusting to the varying degrees of content application. Healthcare management, population health management, and healthcare quality and safety are diverse fields, compelling the use of terminology that reflects diversity, range of competency preparation and variety of practice settings. There is no one "standard" practice setting.

The development and maturation of the fields of healthcare management, population health management, and healthcare quality and safety have been characterized by diversity. That diversity has always been considered a strength allowing different educational institutions to organize their resources in support of education from a variety of perspectives, with differing resources, and with the objective of meeting a variety of needs through varying curricular structures. The CAHME Program of service seeks to *include* rather than *exclude* and has organized its Program of service accordingly.

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

The awarding of accreditation demands a continuing commitment to assessing and delivering quality education. The accreditation process is designed so that a Program can prepare for a site visit which leads to the accreditation decision by the Board of Directors.

About the Eligibility Statement

Before entering Candidacy, a set of eligibility requirements, as described in this document, must be satisfied. The Eligibility Statement must be completed online on the CAHME Accreditation Management (CAMP) system at the following site: www.cahme.org. All programs seeking initial accreditation and reaccreditation will include the Eligibility Statement with the Self-Study document submission.

The Eligibility Statement is a declaration that the Program has met the 11 Eligibility Requirements. These requirements are fundamentals that must be satisfied before a Program can proceed with the accreditation process. All Programs applying for initial CAHME accreditation and all Programs seeking CAHME Accreditation must first demonstrate that they completely meet these Requirements. The declarations made in the Eligibility Statement are subject to verification by CAHME Staff and the Site Visit Team.

NOTE: CAHME accreditation may be sought only for individual academic Programs of study. CAHME does not accredit degrees, departments, or any other academic unit. When completing the Eligibility Statement, Programs must clearly delineate which Program(s) of study, including delivery formats, are to be included under the accreditation action (e.g., the MHA Program only; dual track Program (e.g., MHA/MBA, MHA/MPH), Residential versus Executive Program, online Program, etc). In Programs offering multiple pathways to pursue degree completion, evidence provided by the Program will assist CAHME in determining whether a single or more than one accreditation process is required.

About the Candidacy Application Submission (for initial accreditation only)

The Candidacy Application is a subset of the self-study submission. The candidacy application requires a response for 11 out of the 35 criteria required for the self-study. Refer to the chart in the "Submission Requirements" section for more details on the specific criterion. Note that the Self-Study submission is not required until you have been formally approved into Candidacy and have been assigned a Self-Study year by the Candidacy Committee.

About the Self-Study Submission

The Self-Study Submission provides the details needed to conduct the review of a Program which is necessary for the accreditation decision by the Board of Directors. This Self-Study Submission is based upon the Self-Study year. The Program should refer to the Handbook of Policies and Procedures for additional information about the activities of CAHME.

Documentation for the Self-Study should be based on information from the most recently **completed academic year.** The exact dates of the academic year are defined by the program. This information may be supplemented with more recent data to add to understanding of the Program and its future direction. Evidence should focus exclusively on information related to the specific Program for which accreditation is sought. For dual degree Programs (e.g., MHA/MBA), only the Healthcare Management Degree Program data should be presented if the Program curricula are distinct and separate. If the curricula are merged, then the Program data should be aggregated into a single response for each question. This aggregation should be indicated in the text whenever it occurs.

The **Self-Study Handbook** is arranged in the same order as the Criteria for Accreditation.

This handbook serves as a guide for preparing the completed Self-Study. The complete Self-Study document must be submitted eight (8) weeks prior to the site visit. **The Self-Study submission must be completed online on the CAHME CAMP system located on the CAHME web page:** www.cahme.org.

Narrative

The Program's narrative should be well organized, written, and checked for grammatical and spelling accuracy. The **required Self-Study figures** are available on the CAMP system.

In writing the narrative, avoid language which presents generalizations, implications of competitive merit of the Program or University with respect to other units, and other "marketing" which boasts about Programmatic or institutional accomplishments. **Programs should be succinct and use the best method of presenting information (including bulleted lists, tables and diagrams) over lengthy narrative where appropriate.**

In most cases, data will be requested for the most recently completed Self-Study year as previously defined. The definition is specified the first time it appears, and then should be used consistently throughout the questionnaire and other documents submitted. Similarly, where data vary over the

course of the Self-Study year (e.g., number of students), specify the date on which the data were collected, and use this date for all comparable data (e.g., full-time, part-time, first-year, second-year, on-campus, off-campus students). In particular, course syllabi should be for the defined year, and should not be from past years (unless the course was not offered in the Self-Study year). If changes have been made or proposed since the course offering in the Self-Study year, the new syllabus may also be attached and described. Similarly, faculty accomplishments should reflect those faculty present and the Program content and organization during the Self-Study year; the document should not reflect faculty accomplishments while holding full-time appointments at another university or organization, except on faculty resumes.

Course-Related Materials and Other Program Documents

Syllabi for **all courses that include competencies from the Program competency model** must be provided (even if offered in another administrative unit of the University). During the campus visit**,** the Program should be prepared to provide the site visit team with graded papers, examinations and evaluations corresponding to each course in a format that is easily accessible. A checklist of other documents to be made available to the Site Visit Team is available as a separate publication available on www.cahme.org: Site Visit Instructions "Appendix 1: List of Documents for Records Review".

Alumni association documents, advisory board documents, and Program evaluation instruments should also be included with the submission. Note that faculty curricula vitae are to be uploaded in the Evidence section of the Program's CAMP account.

The Program must maintain copies of all significant student course deliverables generated during the Self-Study year. Whether a particular course requirement is defined as 'significant' can be defined by the Program but work that comprises a majority of a course grade, the culminating exercise, or other major deliverable must be retained for review by the Site Visit Team.

Completed Self-Study Format

The complete Self-Study must be submitted online on the CAHME CAMP system available at: www.cahme.org. The CAMP system is accessible from the CAHME home page. Programs interested in initial accreditation can register their Program here. If you are a faculty member at an accredited Program and do not have a working username and password, please contact CAHME staff.

Consultation with CAHME

Programs are encouraged to consult with the Site Visit Team or CAHME Staff during the preparation of the Self-Study for guidance and advice. Program faculty may review other Programs' self-studies and identify models for completion of the documentation consistent with CAHME's Conflict of Interest policy.

Submission Deadlines

The Eligibility Statement must be submitted prior to the first full candidacy application and must be reviewed and updated as necessary with each subsequent accreditation review. For more information, please see "Article 10 of Handbook of Policies and Accreditation Procedures (AKA Candidacy Application Handbook)." For all accreditation reviews, the completed Self-Study must be submitted online at: www.cahme.org no later than eight (8) weeks prior to the scheduled visit.

Submission Requirements

Below is a chart which describes which requirements are necessary for each of the three key documents

that must be completed as part of the accreditation process: (1) Eligibility Statement, (2) Candidacy Application (initial programs), and (3) Self-Study

Requirement	Eligibility Statement	Candidacy Application	Self-Study			
			Healthcare Management or Population Health		Healthcare Quality & Safety	
			Initial	Reaccreditation	Initial	Reaccreditation
Program Overview (PO/D)		X	X	X	X	X
Progress Since Last Visit (PROG)				X		X
Eligibility Statement Requirements A-J	X		X	X	X	X
Criterion I: Program Mission, Values, Vision, Goals and Support						
I.A.1		X	X	X	X	X
I.A.2		X	X	X	X	X
I.A.3			X	X	X	X
I.B.1			X	X	X	X
I.B.2		X	X	X	X	X
I.B.3			X	X	X	X
I.B.4			X	X	X	X
Criterion II: Students and Graduates						
II.A.1			X	X	X	X
II.A.2		X	X	X	X	X
II.A.3			X	X	X	X
II.A.4			X	X	X	X
II.A.5			X	X	X	X
Criterion III: Curriculum						

Requirement	Eligibility Statement	Candidacy Application	Self-Study			
			Healthcare Management or Population Health		Healthcare Quality & Safety	
			Initial	Reaccreditation	Initial	Reaccreditation
III.A.1		X	X	X	X	X
III.A.2		X	X	X	X	X
III.A.3			X	X		
III.A.4			X	X		
III.A.5			X	X		
III.A.6			X	X		
III.B.1		X	X	X	X	X
III.B.2			X	X	X	X
III.B.3			X	X	X	X
III.B.4			X	X	X	X
III.C.1		X	X	X	X	X
III.C.2		X	X	X	X	X
III.D.1			X	X	X	X
III.D.2		X	X	X	X	X
Criterion IV: Faculty Teaching, Scholarship and Service						
IV.A.1		X	X	X	X	X
IV.A.2			X	X	X	X
IV.A.3			X	X	X	X
IV.A.4			X	X	X	X
IV.B.1			X	X	X	X
IV.B.2			X	X	X	X
IV.C.1			X	X	X	X
IV.C.2			X	X	X	X
IV.D.1			X	X	X	X
Annual Report (AR)		X	X	X	X	X

ELIGIBILITY STATEMENT

The Eligibility Statement is a declaration that the Program has met each of the 10 Eligibility Requirements listed below. These requirements are fundamentals that must be satisfied before a Program can proceed with the accreditation process. The declarations made in the Eligibility Statement are subject to verification by CAHME Staff and the Site Visit Team.

The Eligibility Statement is to be submitted within the CAMP system as the Program's Eligibility Application. Eligibility for CAHME accreditation must be determined prior to the submission of a candidacy application.

In addition, for initial and reaccreditation reviews, a new Eligibility Statement will be completed as part of the Self-Study.

REQUIREMENT A
The University will have established healthcare management as a major course of study leading to a master's degree for the programs in which accreditation is sought. Establishment of the Program will have been approved by the appropriate University governing body.

1. State the name of the master's degree Program(s) for which accreditation is sought. Indicate the name of the degree(s) and the abbreviation(s) used (e.g., Master of Health Administration, MHA; Masters of Science in Population Health, MS). Indicate the sites where the Program is taught that are covered by this accreditation.

2. Identify the year the degree Program(s) was (were) established and approved by the university governing body; identify the appropriate university governing body.

REQUIREMENT B
Programs will be a part of an institution of higher learning which has achieved regional accreditation or equivalent recognition.

INTERPRETATION
In the United States the institution will be accredited by of one of the six regional accrediting associations or equivalent national accreditor recognized by the US Department of Education.

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.

1. Specify regional or equivalent **University** accreditation status, including date of most recent accreditation, and length of accreditation.
2. Provide any appropriate comments or recommendations relevant to the Program made during this accreditation.

REQUIREMENT C

If the Program is in a specialized graduate school or schools (such as a medical school, school of public health, or school of business administration) within the University, the school(s) must be accredited by the appropriate recognized specialized accrediting agency (agencies). In the absence of such accreditation(s), a determination will be made by CAHME as to the extent to which lack of specialized accreditation is detrimental to the quality of the Program.

1. Indicate the school in which the Program is located.
2. Indicate the school accreditation: Specify the accrediting agency, the date of the most recent accreditation and the length of accreditation.
3. Indicate any comments or recommendations relevant to the Program made during this accreditation (if appropriate).

REQUIREMENT D

The Program will have graduated at least one class.

1. Identify the first class of students graduated, indicating the year and semester of graduation. Where a Program is primarily part-time, provide the number of students in the first graduating class and the date of their graduation.

REQUIREMENT E

The Program will ensure that facilities, equipment, and supplies are sufficient to support Program quality and achieve the Program's mission, goals and objectives. This will include:

A. Library and/or access to information resources

1. Provide the URLs that describe information service resources available to students and faculty of the Program and assess their adequacy to support the graduate Program and faculty research.
2. If the Program uses online instruction, describe how students are provided library resource access.

B. Computing technology and the appropriate management software

1. Assess the adequacy of computer technology available to the faculty and describe any barriers to access.
2. Describe computer technology available to students, including available hardware (number of personal computer labs, computer terminals, printers, etc.) and software. Assess the adequacy of computer technology available to students and identify any barriers to utilization, such as scheduling, location, etc.
3. If the Program uses online instruction, describe the availability of assistance in the online environment **and** state the required response times to help requests from students, faculty, and the Learning Management System Help Desk.

C. Classroom and other learning space, and physical facilities for students, faculty, and staff, as appropriate to the method of course / Program delivery

1. Describe the office and other workspace available to Program faculty and staff, including the adequacy of faculty offices for private study as well as for advising and counseling students.
2. Describe classroom and learning space. Assess how adequately these facilities meet the educational needs of the Program and allow it to fulfill its mission, goals and objectives.

REQUIREMENT F

There will be no discrimination on the basis of gender, age, creed, race, 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 policy regarding equal opportunity requirements. Nothing herein will be construed to prevent a University 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.

1. Describe the University and/or Program statements on nondiscrimination and equal opportunity requirements.
2. Reference the links to the appropriate policies on the University/Program website.

REQUIREMENT G

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

1. Reference the links to the appropriate policies on the University/Program website. Describe the procedure available to students for making formal complaints against the Program.
2. Describe how students are made aware of this policy.
3. Describe how complaint policies and procedures provide for a timely response to the complaint that is fair and equitable to all parties.
4. Describe or demonstrate how information from student complaints and their resolution has been used for Program evaluation and improvement.

REQUIREMENT H

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

1. Describe the University and/or Program statements on academic freedom, academic standards and the faculty grievance procedures.
2. Reference the links to the appropriate policies on the University/Program website.

REQUIREMENT I

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 while remaining consistent with the mission of the University.

1. Describe the appropriate University policies and comment on their effectiveness.

2. Reference the links to the appropriate policies on the University/Program website.

REQUIREMENT J
Faculty evaluation will be equitable and fair and faculty responsibilities will be consistent with University policies.

1. Provide the URLS on the University/Program public website to the appropriate policies for faculty responsibility, and assess whether the responsibilities of the Program faculty are consistent.
2. Provide the URLs on the University/Program public website to the appropriate policies for faculty evaluation, and assess whether the procedure for Program faculty evaluation is consistent with these policies.
3. Describe the relative priority (i.e., weight) of research activities vis-à-vis teaching, service, etc., in evaluation of faculty for tenure and promotion.

OVERVIEW OF THE PROGRAM

In approximately 500 words, provide a general overview of the Program and its organizational setting. Relevant information includes the degree offered, the setting of the Program within the university, the types of students served, and other information that distinguishes the Program and would be of relevance for the accreditation team. While CAHME realizes that much of this information will also be included later in the Self-Study, a general introduction at the beginning of the document will serve to orient the site visit team and facilitate their work.

PROGRESS SINCE PREVIOUS SITE VISIT

(Note: Not applicable for initial accreditation)

List the criteria related recommendations from the last site visit report and provide a brief description of the actions taken to address these. (Discussion of the consultative recommendations is not required.)

CRITERION I: PROGRAM MISSION, VALUES, VISION, GOALS AND SUPPORT

I.A. Mission and Metrics

I.A.1   The Program will have statements of mission, vision, and values that guide the Program's design, evaluation and quality improvement initiatives, and strategic intent and/or market focus.

INTERPRETATION
The mission, vision, and value statements will define the focus of the Program. The mission, vision and values will provide the basis for reviewing the Program and for assessing Program effectiveness.

MISSION
The mission statement defines the purpose, direction and any unique aspects of the Program. It guides curriculum focus and clarifies the level and type of scholarly activity of faculty. The mission statement should identify the Program's strategic purpose and provide clarity regarding the target student population and the types of jobs/markets graduates enter. In addition, the Program should describe and demonstrate how the Program mission relates to the mission of the University and of the parent College/School.   The mission statement will be considered in relation to the mission of the University regarding graduate education, research and service.

VISION
The Program's vision is a statement that communicates the Program's ideal state. The vision statement articulates the end result of the Program's work, or of what it aspires to be. It serves to motivate the Program to move towards this ideal state.

VALUES
The Program's values reflect commonly held beliefs and principles of behavior that define the culture of the Program and to which the Program leadership, faculty and students feel a strong emotionally-toned commitment. The values statement provides a standard for behavior and decisions.

REQUIRED
1. Provide statements of the Program's mission, vision and values.
   - CAHME acknowledges that definitions of what is a mission and vision statement may vary based on organizational norms. Site visitors will look for consistency in application of the way that mission and vision are defined with the Program and the University.
2. Define the target students and the program's expected outcome for graduated students in a separate statement. If the target students are stated in the mission, restate here to ensure that site visitors are clear on the target.
   - Target students may be defined related to age, experience, socio-economic status, first generation college students, race, ethnicity, geographic location, or others to be defined.

- Outcomes may be defined in any of the outcomes categories as listed on the CAHME Annual report, such as position, placement, income, satisfaction levels, retention rate, time to graduate, research outcomes, or others to be defined.

3. For multi-track Programs, you <u>may</u> define the mission, vision, values, target students and student outcomes (e.g. expected position level, work setting, healthcare sector) for each track <u>if different</u>.
4. Describe how these statements provide direction for student selection, curriculum design, and scholarly activity of the faculty.
5. Comment and demonstrate how the Program statements relate to the mission, vision, and values of the University and of the parent College/School. Include statements of University and College/School missions and provide the relevant URL's.

I.A.2   The Program will establish goals, objectives and performance outcomes that are aligned with the Program's mission, vision and values and are action-based, observable, and measurable.

INTERPRETATION
CAHME will seek evidence that specified goals and objectives and expected performance outcomes provide direction and criteria for evaluating ongoing Program and curriculum enhancement. Goals must support the mission, vision and values statement by identifying specific areas of emphasis within the Program. Objectives serve to operationalize the goals and must include separate educational, scholarship, service, and other appropriate subcategories of the goals. Objectives serve as indicators of successful performance and must be actionable, observable, and measurable.

REQUIRED
1. Prepare a narrative describing how the Program has established goals, objectives, and performance outcomes based on its mission, vision and values. The narrative should demonstrate how the various constituencies of the Program, e.g., students, graduates, faculty, preceptors, and advisory groups, are involved in this process. Briefly describe the results of the ongoing evaluations in the last two years and what improvements have resulted from the evaluation results.
2. Prepare **I.A.2.1** (or similar document) to illustrate outcome assessments used routinely by the Program to evaluate the extent to which each Program objective is met. Indicate actual performance against set targets. List all goals, objectives, assessments, measures, and actions as illustrated by the Example (**Figure I.A.2.1**) below.
3. Assess the Program's evaluation process highlighting strengths and/or problems. Suggest desired changes in the process and identify steps and a timeframe for making changes.

Figure 1.A.2.1: Goals Objectives & Performance Outcomes (Example)

VISION STATEMENT *(Reiterate your vision statement from Criterion I.A.1 to ensure goal alignment)***:** The vision of Program X is to be a notable and trustworthy source of knowledgeable, motivated, and highly-trained executive leaders for the healthcare industry.

Completion Guide

- Step 1: Set and understand your program's mission, vision, and values statements (Criterion I.A.1).
    - See section for Criterion I.A.1.
- Step 2: Set goals designed to achieve your program's mission and vision.
    - Goals: Goals are statements of ambition that support the overall mission, vision, and value statements of your program by identifying specific areas of emphasis.
        - *Example: Educational Goal #1 - To provide outstanding executives to the healthcare industry.*
- Step 3: For each goal, set at least one measurable target your program can seek to hit within an academic year.
    - Target: Targets are indicators of successful performance towards the goal. Targets must be actionable and measurable, preferably with a quantitative metric such as a number or percentage.
        - *Example: All students will achieve at least an 80% score on the comprehensive core competency exam at the end of their studies.*
- Add or delete any rows that are not necessary.
- Candidate programs - Candidate Programs must complete the Goals and Targets to be Met and Measurement Description sections. These sections are shaded in gray. The other sections (in white) are optional for Candidate Programs and will be required in the Self Study
- Self-study year programs - Programs in Self-Study must complete this Figure in its entirety.
- Pro-tip: For information on the average number and lengths of goals, see our Core Learning Center (CLC) on our CAHME website.

Example 1:

Research Goal #1: Encourage and support innovative research in health economics, health policy, and healthcare administration.						
PLAN		**DO**		**STUDY**		**ACT**
Why is this important? How does it align with your mission, vision, values?	Target	Measurement	Date of Assessment	Results	Achieved	Actions Based on Results
	100% of faculty will be involved in at least one research effort each academic year	Annual faculty review forms have a designated space to note research efforts currently involved in	2020-2021	100% full-time faculty met this target	Yes	Continue to monitor and assess. Consider hosting a research presentation event for staff members to present to students and the public.
+more						

Example 2:

Educational Goal #1 - To provide outstanding executives to the healthcare industry						
PLAN		**DO**		**STUDY**		**ACT**
Why is this important? How does it align with your mission, vision, values?	Target	Measurement	Date of Assessment	Results	Achieved	Actions Based on Results
	All students will achieve at least an 80% score on the comprehensive core competency exam at the end of their studies	Score on core competency exam	2020-2021	100% of our students achieved at least an 80% score on the core competency exam	Yes	Continue to monitor and improve.

	All professors will achieve at least 90% score on didactic core competency knowledge exam	Score on didactic core competency training exam	2020-2021	92% of our professors achieved a score of at least 80% on the didactic core competency training exam	No	Continue to work with professors who did not reach the satisfactory score and improve knowledge of core competencies across faculty members.
	Add another target here					

I.A.3. The Program will monitor changes in the health sector, the University environment, and management theory and practice and adjust its mission, goals, objectives and competency model as necessary.

INTERPRETATION

Utilization of market research of the health sector and strategic planning assessment tools will enable the Program to identify the changing needs for essential competencies in graduates. This should include appropriate strategic plans and evidence of external stakeholder input into the curriculum. The Program will be expected to demonstrate a big picture examination of the market, including population served and demonstrate changes effected in response, consistent with the Program's mission. Stakeholder (e.g. alumni, employers, advisory board) involvement in planning and ongoing monitoring of the environment is important.

REQUIRED
1. Describe the ongoing process for monitoring the health sector and University environments, such as strategic plans, the use of community and/or advisory boards, alumni engagement, student feedback, and the process for incorporating this information into the process of Program review and change.
2. Describe how the Program uses market research, assessment tools, and/or stakeholder input to evaluate the relevance of the Program competencies and identify changing needs for essential competencies in the Program's graduates.
3. Provide examples of findings from the monitoring process, and how these findings have been utilized for planning Programmatic changes, including any changes to the competencies or curriculum.

I.B. Institutional Support

I.B.1 The Program will have sufficient financial support, stability, and administrative support to ensure that its mission, goals and objectives can be achieved.

INTERPRETATION

This criterion requires an assessment of the Program's ability to meet its stated objectives in light of its current financial resources, identification of the most significant current resources and the most critical resource constraints. Included should be the Program's ability to make recommendations for future resource development, identify steps planned to implement these recommendations, and describe the likely timeline for implementation.

REQUIRED
1. Identify resources such as people, facilities, and university support available to the Program and indicate the nature and extent of utilization, as well as any barriers to utilization.
2. Identify Unit or Department activities other than those being reviewed (e.g., undergraduate, other master's, doctoral, extension, management development, etc.), and indicate their relation to the Program with regard to allocation of resources (funds, faculty, space, etc.).
3. Upload the current Program or Department budget. Describe the administrative procedures involved in determining budgetary allocation to the Program, and indicate if these resources are sufficient to support the mission and goals and objectives of the Program.

4. Describe the extent and adequacy of administrative support services available to the Program, such as secretarial, clerical and graduate research assistants. Indicate whether these positions are supported by the Program budget, grants or other sources.
5. Provide a summary assessment of the Program's ability to meet its stated goals and objectives in light of its current resources and identify most critical resource constraints. Include recommendations for future resource development, identify implementation steps for these recommendations, and describe the likely timeline for implementation.

I.B.2   *Program leadership will have sufficient authority and autonomy to develop and guide the Program.*

INTERPRETATION
This criterion evaluates the authority of the personnel responsible for the Program. As guided by the framework of the University's rules and regulations, Program faculty and administration should have sufficient prerogatives to assure the integrity of the Program and facilitate achievement of the Program's mission, goals and objectives. Program faculty should have formal opportunities for input in decisions affecting student admissions and progress, resource allocation, faculty recruitment and promotion, program competencies, curriculum design and evaluation, assessment methods, research and service activities, and degree requirements.

REQUIRED
1. Provide a qualitative assessment regarding the extent of authority the Program leadership has in leading the Program and determining its strategic direction. Include specific discussion of the Program leadership authority with respect to:
    a. Admissions, scheduling and student advisement to ensure academic progress
    b. Resource allocation
    c. Faculty recruitment and promotion
    d. Competency model development
    e. Curriculum design and evaluation
    f. Assessment methods
    g. Research and service activities
    h. Degree requirements
2. Upload the Program's organizational chart(s) locating the Program within the University and include as **Figure I.B.2.1.**
3. Describe the organization of the Program and its relationships with the primary academic unit in which it is located. Address topics such as the part of the University to which the Program is most closely related, whether the Program is organized as a separate department or is part of another administrative entity; whether the faculty hold appointments in the Program or in other elements of the University; and other information relevant to understanding how the Program fits into the structure of the University.
4. Assess the suitability of the structural location of the Program in the university and in relation to the Program's current and projected development. Include projections of future support and/or problems. Identify any recommendations for desired change in the setting, steps planned to implement these recommendations and the timing of these steps.

I.B.3   Program and University leadership will ensure that supportive resources are available to all Program faculty and are appropriate for individual faculty workload to support positive student educational outcomes.

INTERPRETATION
CAHME recognizes that faculty research requirements, large class sections, blended or online instruction place additional demands on course faculty. In addition, CAHME seeks to ensure that adequate physical infrastructure is in place to support quality instruction. Further, CAHME will seek evidence that faculty are supported with additional resources where and when warranted, and that the majority of instruction is with the faculty of record who are qualified content experts.

REQUIRED
1. Describe how the Program balances faculty workload with available resources. Describe the methods the Program uses to ensure that qualified faculty have responsibility for the majority of instructional time.
2. Describe the accommodations made for, or resources available to, faculty to handle the additional workload associated with large classes, administrative obligations, service commitments and research requirements.
3. For programs that are primarily delivered on campus in a classroom or are blended, describe the physical space used for classroom instruction.
4. For Programs with online or blended instruction, describe the resources available to faculty to support the on-line environment, including information about the on-line platform.
5. Describe (and include links to if possible) the policies governing the use of Graduate Teaching Assistants (TA's) and co-teaching in the Program.

I.B.4   The Program will support and enable all students to draw broadly on academic resources available throughout the University.

INTERPRETATION
CAHME recognizes that the educational goals of Programs can best be met if all students (including full-time, part-time, or in distance learning) have access to and utilize, to the greatest extent possible, the resources of the entire University for courses, independent study and research.

REQUIRED
1. Assess the availability of University-wide academic resources (e.g., courses, student activities) and describe how they are made available to all students in the Program. Specifically describe how these academic resources are made available to online or distance learning students.
2. Describe any barriers to access for students in the Program and options that have been considered for addressing those barriers. In addition, describe the extent to which the program utilizes the principles of universal design to ensure the accessibility of courses and other educational activities for students with disabilities.

CRITERION II: STUDENTS & GRADUATES

Note: In lieu of manual completion of figures **related to II.A**, programs are encouraged to export the figures from CARE and attach as an Evidence file within CAMP. For instructions, see *Glossary of Terms: Exporting Figures from CARE.* If completing manually, the academic years shown must include the current year, the Self-Study year, and the year prior to the Self-Study year.

II.A.1. The Program will make publicly available complete and accurate information regarding its mission; application process; the competencies that form the basis for its curriculum; the content and sequence of its curriculum; teaching, learning and assessment methods; outcomes measures and differences among accredited degree offerings.

INTERPRETATION
The Program will provide sufficient information to allow prospective students to make informed decisions prior to entering the Program, and to allow other interested parties to understand the Program and its purpose. This information typically includes recruiting, admissions criteria and practices, tuition/degree costs, academic calendars, grading policies, degree requirements, and student outcomes including **retention rate (or graduation rate)** and **employment rate (or placement rate)**. Since competencies define the nature and content of a Program and establish student expectations, information about them should be widely available to students and prospective students. Accredited Programs with multiple tracks must clearly differentiate between CAHME accredited and non-accredited offerings in their formal and informal communications.

REQUIRED
1. Describe how **students** receive information about your Program (e.g. website, brochures, etc.) Provide relevant URLs, and brief descriptions of what these pages contain, as appropriate. Copies of print materials not available via the Internet should be available for the site visit team during the site visit. Include in this section a description of how information about competencies, teaching, learning and assessment methods are made available to students and prospective students.

2. Describe how **other stakeholders** (the public, employers, preceptors, and other interested parties as defined by your Program) receive information about the Program. Copies of print materials not available via the Internet should be made available to the site visit team during the site visit.

3. Provide the URL from the Program's website that shows the publication of measures of student achievement (student outcomes) for each modality similar to what is on the program's Advance Search Program Profile page such as retention rate, time to graduation, employment rate, and satisfaction. CAHME recommends linking to the program's Advance Search Program Profile webpage directly from the program's website for each accredited modality. For instructions on how to do this, see Glossary of Terms: Advance Search Program Profile.

II.A.2. The Program will have recruiting practices and well-defined admission criteria designed to recruit and admit qualified students and to pursue a diverse student population as reflected in the Program's mission-defined market.

INTERPRETATION

The Program's admission criteria should be derived from its mission and provide metrics by which the Program monitors its performance. Recruitment practices and admission criteria should be designed to recruit qualified students and a student population that generally reflects the target market of the Program as identified in the mission statement.

REQUIRED

1. Describe the target applicant market, annual recruitment goals, and the activities involved with pursuing those goals.

2. Describe recruitment activity outcomes in Figure II.A.2.1.

3. Prepare Figure II.A.2.2 to reflect the characteristics of <u>entering</u> students.

4. Provide an assessment of the recruitment and admissions process with respect to the Program's effectiveness in meeting its goals and objectives.

5. Prepare Figure II.A.2.3 to describe the distribution of <u>enrolled</u> students. Provide definitions used for classifying students by year, and as part-time versus full-time status.

    a. Prepare Figure II.A.2.4 and Figure II.A.2.5 to describe the distribution of <u>graduating</u> students by gender and by race/ethnicity. Use NCES (National Center for Education Statistics) Standards for race and ethnicity. <u>https://nces.ed.gov/ipeds/report-your-data/race-ethnicity-definitions.</u>

6. List the criteria used in the student selection process for each degree-granting Program that is part of the CAHME accreditation process. Include any specific rules or guidelines concerning previously earned grade point averages, standardized test scores, previously earned degrees, prerequisite courses, prerequisite majors, work experience, career objectives, and/or assessments made by the admissions committee / review team.

7. Explain policies and procedures allowing for exceptions in the Program's selection criteria, and describe the extent to these exceptions are made, including the percentage of students admitted based on exceptions to your criteria.

8. Describe efforts aimed at the recruitment of a diverse student population, and the commitment to giving full opportunity for admission regardless of gender/gender orientation, race/ethnicity national origin, or on any other basis not prohibited by applicable law.

Figure II.A.2.1: Recruitment Activity Outcomes

Note: Repeat for each degree, or joint degree, Program, as applicable.

	Degree Program: _____ **Self Study Year:** _____		
	Academic Year Start Date: End Date:	**Academic Year Start Date: End Date:**	**Academic Year Start Date: End Date:**
Complete applications received			
Applicants offered admission			
Total applicants enrolled *(aka new students enrolled)*			

Figure II.A.2.2: Characteristics of Newly Enrolled Students

Note: Repeat for each degree, or joint degree, Program, as applicable

	Degree Program: _____ **Self Study Year:** _____		
	Academic Year Start Date: End Date:	**Academic Year Start Date: End Date:**	**Academic Year Start Date: End Date:**
Median Entering GPA of Newly Enrolled Students Only			

Figure II.A.2.3: Distribution of Enrolled Students

Enrolled Students	**Degree Program**: _____ **Self Study Year:** _____		
	Academic Year Start Date: End Date:	**Academic Year Start Date: End Date:**	**Academic Year Start Date: End Date:**
Full-Time			
Part-Time			

TOTAL			

Figure II.A.2.4: Gender of <u>Graduating</u> Students

	Degree Program: _____ **Self Study Year:** _____		
	Academic Year Start Date: End Date:	**Academic Year Start Date: End Date:**	**Academic Year Start Date: End Date:**
Male			
Female			
Other Gender Identity			
Unknown			
Total Students			

Figure II.A.2.5: Race and Ethnicity of <u>Graduating</u> Students *(Gender, race and ethnicity percentages not applicable to Programs outside of the United States and its Territories)*

		Degree Program: _____ **Self Study Year:** _____		
		Academic Year Start Date: End Date:	**Academic Year Start Date: End Date:**	**Academic Year Start Date: End Date:**
Hispanic Students (A)				
Non-Hispanic Students	American Indian or Alaska Native			
	Asian			
	Black or African American			
	Native Hawaiian or Other Pacific Islander:			
	White or Caucasian			
	Other (including more than one races/ethnicities)			
	Unknown Race			
	Sub-total (B)			
Unknown Ethnicity (C)				
Total Graduating Students (A + B + C)				

II.A.3   The Program will ensure that all students are provided access to academic advising, career counseling, and other support services and that these services are evaluated regularly as a part of the Program's continuous improvement.

INTERPRETATION

The Program needs to ensure students receive assistance that is appropriate to their career interests and goals, including, but not limited to: resume writing and job search preparation; training on interviewing skills; assisting students with fellowship and job placements; working with alumni and others in placing students; and offering alumni and healthcare executive contacts. Program advising and support services will include those provided at the Program level such as mentoring, academic advising, career planning and counseling by faculty and preceptors. University-wide resources may include counseling, dispute resolution, and financial aid advisement.

REQUIRED

1. Describe the system of academic and career advising.
2. Describe the mechanisms for evaluating the effectiveness of the Program's approach to advising and how changes are made. Provide evidence that the effectiveness of these systems is evaluated and used for Program improvement.
3. Describe how financial aid information is systematically made available to students in the Program.
4. Describe any other Programmatic or university-wide support services (e.g. counseling, tutoring) available to Program students.
5. Describe the mechanisms for evaluating the Programmatic or University-wide support services listed above and how this evaluation is used for Program improvement.
6. Describe how your program identifies students who may be experiencing academic difficulty.
7. Describe the mechanisms for evaluating the resources available for students experiencing academic difficulty and how this evaluation is used for Program improvement.

II.A.4   The Program will involve students, alumni, and practitioners in appropriate areas of Program decision-making and evaluation.

INTERPRETATION

Student, alumni and practitioner involvement in such areas as evaluation of courses, instructors, curriculum, career and academic advising, decisions on student recruitment and admission and selection of new faculty is critical to ensuring the ongoing relevance of the Program to the changing needs of the profession, and will be evaluated in the context of overall University policy.

Successful Programs have used these stakeholders creatively to demonstrate currency and relevancy of their Programs. Some examples include: Advisory Groups, Executive in Residence Programs, Annual Program Retreats, students serving on Program related committees, and Strategic Planning sessions.

REQUIRED

1. Describe how students, alumni and practitioners are involved in appropriate areas of Program decision-making and evaluation, including the frequency of involvement.

2. Provide substantiating documentation, such as meeting minutes, survey results, etc., that will be available for review by the site visit team.

II.A.5   The Program will ensure that graduates' career preparedness is monitored, documented and used for continuous improvement.

INTERPRETATION

In a Program's efforts to monitor graduate achievement, career paths of the graduates will be tracked. The Program will provide information on Program retention rates, employment status, and other indicators such as preparedness for functioning in the workplace and student satisfaction with their education. The Program will provide information on graduates' estimated annual salary, including signing and other bonuses. All Programs, from the time of candidacy acceptance and going forward, are required to compete an annual report each year to report this data, among others. The Program will follow the below parameters for surveying graduates to obtain this data consistently:

- The Program will conduct the survey annually for recently graduated students who graduated between July 1 Prior Year-June 30 Current Year. This graduate population will match the graduates from the most recent academic year as reported in the annual report.
- The Program will send the survey following the close of the academic year, typically July 1- September 15 with time to compile results to meet the fall annual report process deadlines, which are typically early November.
- Student Satisfaction questions to be conducted as such:
  - Q1. How likely are you to recommend your program to a friend or an acquaintance looking to advance their careers in healthcare?

Not at all likely										Extremely likely
0	1	2	3	4	5	6	7	8	9	10

  - Q2. How satisfied are you with your program of study?
    - 1=Very Dissatisfied; 2=Somewhat Dissatisfied; 3=Neutral; 4=Somewhat Satisfied; 5=Very Satisfied
  - Q3. All things being equal, if you had to do it all over again, would you choose to go to your program?
    - 1=No; 2=Yes

Supplementing graduating student survey data with data from other sources, such as using LinkedIn, is permitted.

Additionally, the Program will track retention rates and time to graduate metrics. The primary intent of this criterion is to ensure the Program remains engaged with and actively monitors alumni to ensure graduates meet industry expectations and can secure and retain employment.

The *Retention Rate* reflects the percent of students who continued in the program past the *"initial period of study"*. Programs should define the *"initial period of study"* as either the first semester, first quarter, or period that reflects approximately 25% of the total course of study.

The *Time to Graduate* reflects the variability in the length of time it takes students to graduate in the program. CAHME examines the median (50th percentile) time to graduate and compares it to the outlier (80th percentile). This data enables students to understand how long and how much variation occurs in

completing the program.

REQUIRED

1. Describe any assessment techniques or other indicators used to measure graduates' career achievements.

2. Provide a self-assessment and present results from any external assessments of the preparedness of graduates to pursue careers consistent with the Program goals.

3. Provide information on the Retention Rate and Time to Graduation over the past **three years** (one year for Programs undergoing initial accreditation). If retention rates are less than 80%, provide an explanation. Upload the Figure II.A.5.1 Retention Rate/Time to Graduation Worksheet.

4. Using your program's annual report data, complete the following figures:
   a) Prepare Figure II.A.5.2 to describe by category the employment settings of Program graduates.
   b) Prepare Figure II.A.5.3 to detail the positions held by Program graduates and provide the URL for the alumni directory.

5. Comment on the relationship between the employment settings/positions of Program graduates listed in **Figures II.A.5.2 and II.A.5.3** and the Program's educational goals and objectives. Categories of employment setting and position types may be modified to best represent the mission of the Program and the employment settings it serves. If job placement rates in health care services or related fields for Program graduates are less than 80 percent over the last three years, provide an explanation.

6. Complete Figure II.A.5.4. Programs should report the median (**not the average**) salary data of each graduating class from the respective designated academic year. The data source is an annual survey of graduating students.

   Income includes signing and other bonuses. Salary information is required in CAHME's annual report, and you should use the data that was submitted in the annual report. Report income from all graduates, including those students who had a position while in the program such as those in an executive program. Report Fellowships salaries as distinct from the more traditional "job" salaries.

   CAHME expects that the program should make its best efforts to gather data from all graduating students, but recognizes that may be difficult. However, programs with data that represents less than 20% of all graduating students will require a Progress Report. For comparison, the typical mean sample size from all CAHME programs is 60%, and better performing programs exceed 80%

   The data to be gathered should follow the close of the academic year. submitted through the CAHME Annual Report Editors, and must be completed and submitted by the close of the annual report date which is November after the close of the academic year.

Figure II.A.5.1: Retention Rate/Time to Graduate Worksheet

	Degree Program: _____ Self Study Year: _____		
The *Retention Rate* reflects the percent of students who continued in the program past the *"initial period of study"*. Programs should define the *"initial period of study"* as either the first semester, first quarter, or period that reflects approximately 25% of the total course of study. This measure reflects how well the program keeps students engaged.	Academic Year Start Date: End Date:	Academic Year Start Date: End Date:	Academic Year Start Date: End Date:
Enter the number of enrolled students in the first semester/quarter/ *"initial period of study"* in question. **(a)**			
Enter the number of enrolled students **who were enrolled in (a) who subsequently re-enrolled** in the immediately following semester/quarter/period of the time period in question. (b)			
Retention rate: This is the percent of students who continued in the second "period of study" after initially enrolling in the "first period of study". If percentage is less than 80 percent, in any year, comment on the percent of students returning. If improvement is needed, describe the initiatives in place to improve.	%	%	%
The *Time to Graduate* reflects the variability in the length of time it takes students to graduate in the program. CAHME examines the median (50th percentile) time to graduate and compares it to the outlier (80th percentile). This data enables students to understand how long and how much variation occurs in completing the program.			
Enter the median (50th percentile) months to graduate for students in the graduating class of the time period in question. Note that this is **NOT** the mean or average. **(a)**			
Enter the months to graduate of the student at the 80th percentile in the graduating class of the time period in question. (b)			
Comment on the variability in the time to graduate. If improvement is needed, describe the initiatives in place to improve.			

Figure II.A.5.2: Employment Settings of Program Graduates

Position	Degree Program: _____ Self Study Year: _____		
	Academic Year Start Date: End Date:	Academic Year Start Date: End Date:	Academic Year Start Date: End Date:
	Count	Count	Count
Not Eligible International student returned home without seeking employment			
Pursuing other Graduate Degree			
TOTAL NOT ELIGIBLE/NOT SEEKING TO BE EMPLOYED (A)			
Employed Students Post-Graduate Fellowship			
Hospital/Health System			
Physician Practice			
Military Health System or Veterans Health Administration			
Governmental agencies (i.e., local, state & federal agencies)			
Trade Association (e.g., AHA, HFMA, ACHE, Blue Cross/Blue Shield Association)			
Foundation or Voluntary Agency (e.g., RWJ Foundation, Red Cross)			
Long-Term Care Facility			
Home Health Agency			
Consulting			
Insurance/HMO			
Information Technology/Analytics			
Pharmaceutical/Biotech/Medical Device Company			
National health organizations (CVS/Aetna, Walgreens, Haven aka Amazon-JP Morgan-Berkshire)			
Investment banking re: healthcare (merger & acquisition, etc.)			
Venture Capital or Private Equity			
Employed outside Healthcare			
Employed overseas in healthcare (but site is unknown)			
Other			
TOTAL EMPLOYED (B)			
Not Employed(C)			
Unknown (D)			
Students Eligible to be Employed (E = B + C + D)			
Employment Percentage (B / E)			

Figure II.A.5.3: Positions Currently Held by Program Graduates
*You may supplement survey data with data from LinkedIn. The **total** number of graduates in this table should equal the number of graduating students in Figure II.A.5.2, Row E.*

	Degree Program: _____ Self Study Year: _____		
Positions by Type	**Academic Year Start Date: End Date:**	**Academic Year Start Date: End Date:**	**Academic Year Start Date: End Date:**
Executive Office (e.g. CEO, President, Chief Medical Officer, Chief Information Officer, Chief Operating Officer, Executive Director, Partner, Owner, etc.)			
Other Executive Management (e.g. Vice President, Senior Vice President, Executive Vice President, Associate Vice President, Other Executive Management, etc.)			
Management (e.g. Director, Manager, Unit Administrator, Practice Manager, etc.)			
Administrative Staff (e.g. Senior Analyst, Senior Consultant, Financial Officer, Information Officer, Analyst, Consultant)			
Clinical Staff (e.g. Registered Nurse, Pharmacist, Physical Therapist, Radiology Technician, etc.)			
Physician			
Educator / Faculty Member			
Fellow / Intern			
Other (list)			
Unknown			
Not Employed			
Total Graduates Eligible for Employment (equals Figure II.A.5.2, Row E)			

Figure II.A.5.4: Graduate Student Salary

Report: Programs should report salary data of each graduating class from the respective designated academic year.

Purpose: Income is a key outcomes measure.

Data source: each year's annual survey of graduating students.   Graduates should report estimated annual income to the program.   Income includes signing and other bonuses.

Directions: Report salary for Fellowships separately from employed job positions.

Round to whole numbers.

Report the median Income of each Class. Median is the 50th percentile. ***Do not provide the mean or average.***

	Degree Program: _____ Self Study Year: _____		
	Academic Year Start Date: End Date:	**Academic Year Start Date: End Date:**	**Academic Year Start Date: End Date:**
Median Fellowship Income			
Number of Reporting Graduates (Fellowship Income)			
Median Job Income			
Number of Reporting Graduates (Jobs Income)			

CRITERION III. CURRICULUM

III.A. Curriculum Design

III.A.1: The Program will adopt a set of competencies that aligns with the Program's mission and types of jobs graduates enter. The Program will use these competencies as the basis of its curriculum, course content, learning objectives, and teaching and assessment methods.

OVERVIEW
Competence is the ability to effectively engage in an activity. A competency is "an observable ability of a health professional, integrating multiple components such as knowledge, skills, values, and attitudes. Since competencies are observable, they can be measured and assessed to ensure their acquisition" (Frank et al., 2010). A competency statement reflects the related knowledge, skills, and attitudes someone must demonstrate for competence, measured at a point in time. Competencies acquired contribute to competence (Howat, Lower, James, & Shilton, 2001; Kianna, 2018; Winterton, 2009). A set of competencies define a program's curriculum and course of study.

INTERPRETATION
For Healthcare Management and Population Health Management, reference **ADDENDUM: Healthcare Management and Population Health Competencies**

For Healthcare Quality and Safety programs, reference **ADDENDUM: HealthCare Quality and Safety Competencies**

REQUIRED
1. Provide a list of the competencies used by the Program, and describe how these competencies align with the Program's mission and the types of jobs graduates enter.
2. Describe the process by which the Program's competencies are developed and periodically reviewed with faculty for relevance. Include information on any faculty or committee approval needed for changes to Program competencies.
3. Complete the matrix which lists Program competencies and illustrates competency coverage across required core courses and other required components of the Program as in Figure III.A.1.1.
4. Describe the design, including sequencing, of the Program courses including activities beyond the classroom, and their relationship to the competencies.

Figure III.A.1.1: Competency Coverage across the Curriculum

Competency (abridged)	Required Courses (abridged)				Other Requirements	
	HSMP 800 Health Care Organization I	HSMP 815 Health Services Organizational Management.	BIO 701 Design & Analysis of Studies in the Health Sciences Organization I	EPI 710 Principles of Epidemiology	Summer Admin Residency	Professional Development
Domain: Communications & interpersonal effectiveness.						
Organizational Behavior Theory		3		1	2	
Organizational Management		3			2	
Management of Human Resources & Health Professionals	1	2			1	1
Domain: Critical thinking, analysis & problem solving						
Financial Skills					1	
Project Management					1	
Domain: Management & leadership						
Performance Measurement	1		1		2	
Structural Design of Health Care Organizations	1	3		1	2	1
Operations Assessment & Improvement	1			1	2	
Information Technology Management & Assessment	1				1	
Domain: Professionalism & ethics						
Health Care Ethics		1			2	1

Key: e.g. 1 = Beginning Competency; 2=Basic Competency; 3=Professional Competency (as defined by the program).

Note: This is an EXAMPLE only. The domains and competencies of the figure should align with the Program's mission and competency model. The orientation of this figure can be changed to list competencies across the top and courses in the leftmost column. Note: Develop a key to indicate the skill level students are expected to develop within each of the competencies in each course.

III.A.2 The Program curriculum will facilitate development of a depth and breadth of knowledge of the health-sector and healthcare, aligned with the Program's mission and competency model.

INTERPRETATION

Programs must ensure that graduates are receiving an appropriate depth and breadth of knowledge of the mission-defined health sector, healthcare management and, if appropriate, healthcare quality & safety. Programs should articulate major content areas, describe how the Program monitors appropriate content areas for inclusion, identify how the curriculum's design exposes students to these areas. Areas of focus will differ by Program dependent on each Program's mission and core requirements. Content knowledge may be provided to students through a single course, a field activity, or provided in an integrated manner across a series of courses or activities. CAHME anticipates that the equivalent of 40 semester hours or 60 quarter hours is the minimum required to develop the set of competencies, exclusive of the residency or internship component of the Program. If a Program is less than 40 semester hours or the equivalent, a detailed description of the implementation of the set of competencies is required. During the site visit, faculty should be prepared to discuss the scope and depth of the course offerings, with particular reference to what they consider to be the key concepts provided by their particular course(s) and expected student competency outcomes.

REQUIRED

1. Describe how the curriculum defines the Program by delineating the knowledge areas in healthcare and of the health sector.
2. Describe the process by which your Program identifies essential healthcare sector and healthcare knowledge areas your curriculum is expected to cover and how the Program ensures students are exposed to these areas.
3. Provide a complete list of required courses offered in the curriculum including course numbers, full course titles, credit hours, department (if non-Program), names of faculty teaching in the Self-Study year, and enrollment data on **Figure III.A.2.1**. The list should be organized by the typical course of study, by academic period, for each Program offered. Typical elective courses should be listed separately and clearly labeled as such. Note also which courses are delivered online.
4. If required courses are taught outside of the Program, describe the procedures for incorporating healthcare management content, as appropriate, into those courses and ensuring integration across the curriculum.
5. Describe the policy on core course waivers, and the frequency of students receiving waivers. Include in your description how this policy assures attainment of the competencies of the waived course(s).
6. Provide course syllabi for each course listed in **Figure III.A.2.1**. Use the CAHME Syllabi checklist (***see Definition of Terms: CAHME Syllabi checklist***) to ensure all required elements are included in all syllabi. If required elements are not included in all syllabi, explain how the program communicates these to the students.
7. For Programs less than 40 semester credit hours (or the equivalent quarter or trimester credit hours) not inclusive of the residency or internship component of the Program, describe how Program graduates attain the competencies specified in the Program's competency model.

Figure III.A.2.1: Courses Offered in Self-Study Year
Describe the typical course of study for full-time and (if different) part-time students in each major degree Program offered.

Year in Program	Session	Course Number & Title	Credits	Instructor(s)	Dept	Student Enrollment Program students (non Program)	Offered: Online Only (O,) Traditional (T), Blended/Hybrid (B)
CORE/REQUIRED COURSES							
Year One	Fall	HM503 Healthcare Finance	3	L.Garroway	MGMT	15 (4)	O
ELECTIVES							

Criteria III.A.3 through III.A.6 apply *only* to Healthcare Management and Population Health Management Programs

III.A.3 The Program curriculum will facilitate development of students' competencies in communications and interpersonal effectiveness.

INTERPRETATION

CAHME recognizes these competencies as 'core' to the profession of healthcare management, and so should be represented in any competency model chosen or developed by the Program It is anticipated that a Program's competency model will also add other competencies according to its specific mission and the positions students take upon graduation. CAHME does not prescribe a maximum number of competencies.

Communications and interpersonal effectiveness: "Communications" should include competencies associated with giving and receiving of verbal and non-verbal information between an individual and other individuals or groups, including individuals and groups that represent the diverse populations of the Program's target market. "Interpersonal effectiveness" involves competencies associated with developing and maintaining effective, inclusive working relationships with others. The following are examples of the kinds of competencies that may fall into this domain and be addressed in course content: Collaboration, Oral and/or Written Communications, Listening, Observing, and Relationship Building.

REQUIRED

1. Describe how the competencies identified in III.A.3 are addressed by the Program's set of competencies.

2. Explain where these competencies are developed in the required curriculum and Program activities.

III.A.4 The Program curriculum will facilitate development of students' competencies in critical thinking, analysis, and problem solving.

INTERPRETATION

Critical thinking, analysis, and problem solving: This domain should include competencies related to the appropriate use of information, data, and judgment to inform sound management decisions. The following are examples of the kinds of competencies that may fall into this domain: Analytical thinking, Financial Management, Information Seeking, Health Information Management, Performance Measurement, and Process Management.

REQUIRED

1. Describe how the competencies identified in III.A.4 are addressed by the Program's set of competencies.

2. Explain where these competencies are developed in the required curriculum and Program activities.

III.A.5 The Program curriculum will facilitate development of students' competencies in management and leadership.

INTERPRETATION

Management and leadership: This domain should include competencies related to a student's ability to successfully pursue organizational goals that involve getting things done through and in collaboration with others. The following are examples of the kinds of competencies that may fall into this domain: Governance, Change leadership, Human Resource Management, Initiative, IT Management, Organizational Awareness, Project Management, and Strategic Orientation.

REQUIRED

1. Describe how the competencies identified in III.A.5 are addressed by the Program's set of competencies.

2. Explain where these competencies are developed in the required curriculum and Program activities.

III.A.6 The Program curriculum will facilitate development of students' competencies in professionalism, ethics, and transparency.

INTERPRETATION

Professionalism, ethics, and transparency: This domain should include competencies that relate to upholding high professional, ethical, and transparent standards. The following are examples of the kinds of competencies that may fall into this domain: Accountability, Acting with Integrity, Achievement Orientation, Ethical decision-making, Professionalism, Life-long learning, and Self-Confidence.

REQUIRED

1. Describe how the competencies identified in III.A.6 are addressed by the Program's set of competencies.

2. Explain where these competencies are developed in the required curriculum and Program activities.

III.B. Teaching and Learning Methods

III.B.1 The Program will incorporate teaching and learning methods driven by adult learning principles. The teaching and learning methods will be based on higher education taxonomic levels appropriate to graduate education.

INTERPRETATION

Throughout the curriculum, the Program should incorporate teaching and learning methods as appropriate to the course objectives and competencies. The teaching and learning methods should be aligned with the curriculum design and should seek to emphasize methods that involve active student participation (i.e. higher-level methods), which tend to be more effective in developing competencies. Examples of lower and higher-level methods are provided below, and benchmark information will be made available by CAHME.

REQUIRED

1. Discuss the overall percentage of time a typical student spends on higher vs. lower level teaching and learning methods, according to the level definitions provided.

2. Evaluate the extent to which the balance between higher vs. lower level teaching and learning methods is appropriate given the mission and goals of your Program, as well as any plans / methods you are pursuing to implement higher level methods. Reference Figure III.B.1.1.

Figure III.B.1.1 Teaching & Learning Methods - Competency Integration

Level	Teaching and Learning Method	Definition
Lower	Readings	Students complete assigned readings in textbook , articles, websites, etc.
	Lecture no media	Professor does most of the talking, without any media support.
	Lectures with media	Professor does most of the talking, with some sort of media support (e.g. PowerPoint, overheads, video, whiteboards, etc.). Students participate via discussion that is primarily characterized by students asking clarifying questions, etc.
	Guest Speakers	Individual/panel of experts from the field present to student.
	Online discussions	Students actively engage in an online discussion, either synchronous or asynchronous, with the professor and with each other. Students can stimulate or respond to discussion.
	Class Discussions	Students actively engage in open discussion with the professor and with each other. Students can stimulate or respond to discussion.
	Web-based modules	Interactive learning via CD/DVD/Internet that is more than searching for information or reading websites.
Higher	In-class Presentations	Students formally deliver information to the rest of the class in a well-prepared format that required analysis and preparation.
	Cases	Students actively engage in analyzing a case study to determine causes, implications, strategies etc. Case analysis is either shared with the class through open and interactive discussion or debate, or students prepare a written case analysis for review and feedback.
	Team activities	Three or more students collaborate as a group to complete one deliverable.
	Simulation exercises	Interactive learning in which students' actions significantly affect how the learning unfolds and the subsequent outcomes of the learning. Simulations may or may not be computer based (e.g. tabletop simulations).
	External Field Experiences	Students are placed in non-academic applied or real-world work settings and allowed to learn from the work experience, including externships and internships. Learning outcomes are shared in the academic environment and evaluated.
	Strategic/Consulting Projects	Students actively engage in completing an actual consulting project for a health organization. Alternatively, students complete an assignment that simulates a realistic project in a health organization.
	Reflective learning	Students complete structured process (e.g. journaling, one-minute response, assessment instruments, weekly reports) to review, understand, analyze, and evaluate their own learning and/or performance. The evaluation should be based on pre-selected criteria. In addition, the assessment could include a comparison of their performance assessment with their peers and/or experts in the field.

Adapted from NCHL (2006): Competency Integration in Health Management Education: A Resource Series for Program Directors and Faculty. Used with permission.

III.B.2 The Program will provide, throughout the curriculum, opportunities for students to participate in team-based activities.

INTERPRETATION

CAHME recognizes that the opportunity for practical collaboration and teamwork serve to develop students' interpersonal skills and prepare them for the workplace. As part of the educational experience students should have opportunities to continuously improve their ability to work in teams, facilitate meetings and practice leadership skills.

REQUIRED

1. Describe major team-based activities in the curriculum, distinguishing which activities take place in optional elective courses and which activities students are exposed to as a required element of the curriculum. Identify any Programmatic or curricular based approach to teaming your Program has adopted.

2. Discuss how the Program collects feedback from team members on each student's contribution, leadership, and collaboration.

III.B.3 The Program will provide experiences for students to gain an understanding of, and to interact with, a variety of healthcare professionals and organizations.

INTERPRETATION

CAHME recognizes the importance of interdisciplinary exposure to health care professionals in graduate education. Students need the opportunity for exposure to other professions. It is this cross-discipline collaboration and professional understanding that will lead to the success of graduates as they enter the field. Opportunities should be provided for students to work with others inside or outside the Program and across other disciplines such as nursing, medicine, allied health professions, public health, information technology, policy, insurance, suppliers, long-term care and/or engineering. Programs are expected to offer students these opportunities in a number of ways as appropriate to the mission of the Program. The Program will develop relationships with a variety of employers to integrate the field of practice into both teaching and career guidance. The Program will design formal and informal avenues for such exposure into the total student experience. These include, but are not limited to, site visits; business case competitions; career panels; informational interviews; professional conference attendance; mentoring Programs; guest speakers; adjunct and clinical faculty.

For Healthcare Quality and Safety: Healthcare quality improvement and safety initiatives often directly impact patient care and can have an effect on overall care experiences. Patients have different needs and expectations of their care, and these needs and expectations should be incorporated into quality improvement and patient safety programs.   Programs need to ensure that students have the opportunity to develop an understanding of the needs of patients and families and/or their advocacy organizations.

REQUIRED

1. Describe the opportunities students have to participate in activities that expose them to- and support interactions with a range of health professionals. Describe how the experiences are appropriate to the mission of the Program and the career fields students are generally pursuing.
2. Describe the opportunities students have to participate in inter-professional activities.
3. Describe how inter-professional interaction experiences are used in student development and learning.
4. Provide a listing of individuals from other health organizations engaged by the Program during the Self-Study year as shown in Figure III.B.3.1. Engagements can include, but are not limited to, preceptors, adjunct and clinical faculty, guest speakers, career advisors and/or mentors. The level and type of engagement of individuals from other organizations is defined by the program and based on student educational needs

Figure III.B.3.1: Health Organizations Utilized by Program

Organization Name	POC Name and Title	Location	Utilization Purpose

III.B.4 The Program curriculum will include integrative experiences, including field-based applications that require students to draw upon, apply and synthesize knowledge and skills covered throughout the Program of study.

INTERPRETATION

Students should participate in integrative experiences, including field-based applications, which foster continuous learning through information access, synthesis, and use in critical thinking. Students should draw upon learning and content provided throughout the Program of study in an integrative manner. Examples of integrative experiences include a well-supervised field experience with a didactic component, internship, a thesis or major paper, oral or written comprehensive exams, a well-managed integrative planning or management simulation, a structured group activity, or any other appropriate activities. Field based settings should be consistent with the Program's mission and educational goals and objectives and be appropriate to the needs of the student. Programs should be able describe the opportunities to assess that students can apply these skills if there are no field based assignments or other field-based applications.

REQUIRED
1. Describe how the Program's integrative experiences connect to the mission, goals, objectives and competency model and how they are sequenced and integrated into the curriculum. Explain how students are prepared for the integrative experience, and how they are evaluated
2. For field-based applications, describe how students' needs for field-based applications are determined and decisions made for these applications. Also describe the processes whereby field based applications are monitored and evaluated. Include an example of completed forms used in completing these processes. Describe the method(s) for informing preceptors or faculty about their responsibilities and the objectives of the field experience, faculty and preceptor meetings, preceptor conferences, how faculty/preceptors are evaluated and the means by which preceptors are added to or removed from the Program's approved list of preceptors.
3. If a major paper, thesis or research project is required, describe the nature of the requirement and provide sample projects for review by the Site Visit Team for work completed in the past two years.

III.C. Assessment of Student Learning & Competency Assessment

III.C.1 The Program will incorporate a range of assessment methods driven by adult learning principles. The methods will be based on higher education taxonomic levels appropriate to graduate education and aligned with defined competencies.

INTERPRETATION
Throughout the curriculum, the Program should incorporate a range of assessment methods as appropriate to the Program's objectives and competencies. These methods should reflect the rigor expected of graduate education and should therefore emphasize methods beyond those associated with knowledge evaluation. Examples of lower and higher-level methods will be provided. Examples of lower and higher-level methods are provided below, and benchmark information will be made available by CAHME.

REQUIRED
1. Using the CAHME Syllabi Checklist, estimate the overall percentage of student evaluations that are focused on higher vs. lower level assessment methods, according to the level definitions provided.
2. Evaluate the extent to which the balance between higher vs. lower level assessment methods is appropriate given the mission and goals of your Program, as well as any plans / methods you are pursuing to implement higher level methods. Reference **Figure III.C.1.1.**

Figure III.C.1.1: Assessment Methods

Level	Assessment Method	Definition
Lower	Pre/Post knowledge or skill testing	Any formal comparative assessment of the student's knowledge or skills both before and after a learning intervention.
	Knowledge Based Exams	Any formal exam that evaluates student knowledge attainment.
	Papers/reports	Student generated written work that is part of the learning process or is the final documentation of learning, including research reports, mid-term and or final papers.
Higher	Observation Checklists	Faculty or student-generated observational assessment of skills or behaviors; could be completed by self, peers, faculty, or other experts etc.
	Synthesis & Analysis Based Exams	Any formal exam that evaluates student synthesis, analysis and/or evaluation ability.
	Case review and feedback	Utilization of a predetermined set of variables/criteria to evaluate case analysis work, and to provide effective suggestions/recommendations for improvement.
	Project review and feedback	Utilization of a predetermined set of variables/criteria to evaluate case analysis work, and to provide effective suggestions/recommendations for improvement.
	Team effectiveness assessment	Criterion-based observational feedback of student behavior (and possibly work products) in team projects.
	Journals	Collection of reflective writings, either structured or free form, about a topic.
	Experiential Report/Portfolios	Collection of evidence, prepared by the student and evaluated by the faculty member, to demonstrate mastery, comprehension, application, and synthesis against a standardized assessment rubric.
	Reflective Modeling	Standardized techniques to facilitate awareness and evaluation of one's behavior and to generate plans for improvement, including self, peer, faculty, preceptor or other expert assessment.
	Class participation	Active monitoring, assessment, and feedback focused on the frequency, consistency, and quality of the student's participation during face to face and online discussions.
	Strategic or Consulting Projects	Students actively engage in completing an actual consulting project for a health organization. Alternatively, students complete an assignment that simulates a realistic project in a health organization.

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III.C.2 The Program will regularly evaluate the extent to which each student attains the competencies at the level targeted by the Program, and will have a process in place for communicating that information to students.

INTERPRETATION

Programs will have a process which regularly evaluates the extent to which students attain the competencies defined in III.A.1. The program will measure individual student's progress towards the targeted attainment of the competencies at the program level. Competencies should be the primary measure against which student achievement is measured and there should be efforts for both direct and indirect assessment.

Direct assessment methods are based on actual student performance and outcomes in the learning environment – either classroom or Program-sponsored experiential learning opportunities.

Indirect assessment methods are based on opinions and perceptions of student learning, such as those gained in exit interviews, focus groups, surveys, self-reflection assignments, etc.

Students will be given a clear understanding of the extent to which they attained the competencies specified by the Program at the target levels.

REQUIRED
1. Describe how the Program measures individual student progress towards mastery of Program competencies. Include a description of the types of evaluation tools (preceptor assessments, student evaluations, course deliverables, etc.) used in these processes. Clearly specify assessments at the course and at the Program level.

2. Describe how the results of these measurements are communicated to students.

III.D. Program Evaluation

III.D.1 The Program will evaluate its curriculum, teaching and learning methods, assessment methods, and Program Faculty effectiveness and use the results for continuous quality improvement of the teaching and learning environment.

INTERPRETATION

Evaluating a Program's curriculum, teaching, learning and assessment methods, and instructor effectiveness are essential to a process of continual improvement. Programs should demonstrate a plan which outlines specific methods of curricular review taken; evaluation of courses, student experiences and environments; and how this information is used for improvement.

REQUIRED
1. Describe the body or person(s) primarily responsible for ongoing evaluation of the curriculum and course instruction.
2. List the methods of ongoing evaluation for course instruction and the Program's curriculum and demonstrate how these results are used for quality improvement. (Programs may use bulleted lists or tables as appropriate).

III.D.2 The Program will collect, analyze, and use the assessments of student competency attainment for continuous improvement.

INTERPRETATION

Evaluating student attainment of competencies across the curriculum and extra-curricular activities is essential to a process of continual improvement. Programs should demonstrate that they collect and analyze data related to competency attainment to ensure that the curriculum design, sequencing and extra-curricular activities are systematically developing the student competencies at the target level. The Program must outline how the student competency attainment data are collected, analyzed, and used for Programmatic improvement. As required in criterion III.C.1, Programs are expected to demonstrate links between health-sector expectations and alumni feedback in the development and modification of student competencies.

REQUIRED

1. Describe how the Program collects and analyzes course and Program level measures of competency attainment. Include a discussion of the frequency of collection and a description of the types of reports or analytic tools that are used to assess how well the Program is facilitating competency development.
2. Describe how the results of the analysis are presented to stakeholders such as faculty, advisory or alumni boards or Institutional stakeholders and how these results are used for Programmatic improvement.

CRITERION IV. FACULTY TEACHING, SCHOLARSHIP AND SERVICE

IV.A Qualifications and Responsibilities

IV.A.1 Program and University leadership will ensure that the complement, involvement and qualifications of Program Faculty are sufficient to accomplish the mission of the Program.

INTERPRETATION
The Program must describe and illustrate how all Program Faculty, i.e. instructors of record, including those who are full time, holding dual appointments, etc., have opportunities for involvement in the design and delivery of the Program, the development of the curriculum and assessment of competency attainment. The Program should describe how all faculty are kept informed of changes in the competency model, curriculum, and assessment processes.

Academically Qualified are those faculty holding a relevant doctorate to teach the assigned courses.
Professionally Qualified are those faculty who have the expertise based on professional and career service to teach assigned courses.
Core Faculty are those faculty who are engaged in the daily operations of the Program, and share major responsibility for the teaching, advising, and administrative functions of the Program. Core faculty is not defined by full-time, part-time, or adjunct status, but by involvement in the Program.

REQUIRED
1. Write a brief assessment of the Program's ability to meet its identified goals and objectives in light of the current size and composition of its faculty. Describe the most significant faculty characteristics and any identified deficits. Identify steps being taken or planned to make changes to the complement of faculty. If a Program has less than **three** core Program faculty, demonstrate how this complement meets the stated objectives. See above definition of Core Faculty.
2. Prepare **Figure IV.A.1.1** describing all current faculty in the academic unit within which the Program is located who have responsibility for teaching, advising and/or Program administration. Provide information on the highest degree earned, date faculty member was appointed to the program, faculty rank, whether the faculty member is academically or professionally qualified to teach in the program, a breakdown of core Program and departmental responsibilities, the percent of the faculty member's salary that is paid for from departmental/Program funds, and the courses taught in the self-study year.
3. Ensure complete and current curriculum vitae for each faculty member listed in **Figure IV.A.1.1** are available on the University website or submitted electronically.
4. Discuss faculty teaching responsibilities, including: (a) normal and minimal teaching loads (class hours/week); (b) how teaching assignments are allocated to the various faculty members; (c) procedures whereby a faculty member might be released from teaching obligations for

research, community service or administration; and (d) policy regarding consulting and other activities outside the University.

5. Describe how you keep all faculty informed of program updates.

Figure IV.A.1.1: Summary of Current Program Faculty

Faculty Name (last, first)	Highest degree earned & year	Year appointed to Program	Qualified (academic)/ (practitioner)	Faculty(Core)/ (Adj)	Program responsibility	Percent of renumeration carried in budget	Courses Taught in Self-Study Year (# of credits)	Significant Experiences Qualifying the Faculty for Courses Taught
Thomassen, Robert	PhD, 2010	2014	Academic	Core	Teaching =40% Admin =50% Research =10% Service = 0% Non-Program =0%	100%	HM 502 Management of Healthcare Organizations (3)	• 4 years as Managing Director, Cardiology Associates of Denver Physician Practice • Taught organizational management in graduate program at Big State University
							HM 509 Governance and Ethics in Healthcare (3)	• 8 years COO at Sisters of Health

IV.A.2 The Program will foster faculty diversity and a culture of inclusiveness in the learning environment.

Note: In lieu of manual completion of figures **related to IV.A.2**, programs are encouraged to export the figures from CARE and attach as an Evidence file within CAMP. For instructions, see *Glossary of Terms: Exporting Figures from CARE.* If completing manually, the academic years shown must include the current year, the Self-Study year, and the year prior to the Self-Study year.

INTERPRETATION
The expectation is that the Program will prepare students within an environment that enables them to understand the diversity of cultures, values, and behaviors in contemporary healthcare organizations and the need for inclusiveness. "Inclusiveness" refers to a cultural characteristic that values the roles and contributions of all in a diverse environment. The Program may expose students to diversity through a variety of methods, e.g. guest speakers, mentors, etc. Consideration will be given to a program's location.

REQUIRED
1. Describe the Program's efforts towards achieving diversity and a culture of inclusiveness. This should include a discussion of faculty composition and the extent to which guest lecturers, preceptors, speakers and mentors help to achieve diversity in the learning environment.

2. Prepare a faculty profile by completing **Figures IV.A.2.1, IV.A.2.2, IV.A.2.3, IV.A.2.4.**

Figure IV.A.2.1: Faculty by Status

	Degree Program: _____ Self Study Year: _____		
Status	**Academic Year** Start Date: End Date:	**Academic Year** Start Date: End Date:	**Academic Year** Start Date: End Date:
Professor			
Associate Professor			
Assistant Professor			
Adjunct Faculty			
Instructor			
Lecturer			
Clinical			
Total			

Figure IV.A.2.2: Faculty by Full-Time Status

Note: Within the CAHME Annual Report Editor (CARE), Full-Time status is defined as Full-Time at the university level, not the program level.

	Degree Program: _____ **Self Study Year:** _____		
	Academic Year Start Date: End Date:	**Academic Year Start Date: End Date:**	**Academic Year Start Date: End Date:**
Full Time Faculty			
All Other Faculty			
Total Faculty			

Figure IV.A.2.3: Gender of Faculty

	Degree Program: _____ **Self Study Year:** _____		
	Academic Year Start Date: End Date:	**Academic Year Start Date: End Date:**	**Academic Year Start Date: End Date:**
Male			
Female			
Other Gender Identity			
Total Faculty			

Figure IV.A.2.4: Race and Ethnicity of <u>Faculty</u> (United States and US Territories only)

		Degree Program: _____ Self Study Year: _____		
		Academic Year Start Date: End Date:	Academic Year Start Date: End Date:	Academic Year Start Date: End Date:
Hispanic Faculty (A)				
Non-Hispanic Faculty	American Indian or Alaska Native			
	Asian			
	Black or African American			
	Native Hawaiian or Other Pacific Islander:			
	White or Caucasian			
	Two or more races			
	Unknown/Not Reported			
	Sub-total (B)			
Unknown Ethnicity (C)				
Total Faculty (A + B + C)				

IV.A.3 The Core Program faculty will have responsibility for making recommendations regarding admission of students, specifying competencies, evaluating student performance and awarding degrees.

INTERPRETATION

CAHME recognizes the responsibility of other organizational units within the University regarding decisions to admit students and award degrees. This criterion will assess the role of Core Program faculty in Program administration and improvement.

REQUIRED

1. Describe procedures for admission decisions including the role of Core Program faculty.
2. Describe procedures for conferring degrees, including the role of Core Program faculty.
3. Describe the role of Core Program faculty in designing the curriculum and specifying healthcare management content.
4. Describe the process by which course content and curriculum structure is assessed by the faculty as a unit.

IV.A.4 Core Program faculty will participate in defining faculty needs and in recruiting faculty to teach in the Program in accordance with University policy.

INTERPRETATION

CAHME will seek evidence of faculty membership on appropriate search committees.

REQUIRED

Describe the mechanism by which faculty appointments are made in the Program. Include the origin of recommendations to add faculty, recruitment processes, search procedures, membership on search committees and the system of processing and approving appointments. Indicate any differences in procedures for different types of appointment (e.g., tenure-track vs. non-tenure track).

IV.B. Research and Scholarship

IV.B.1 Core faculty will demonstrate a record of research, scholarship and /or professional achievement appropriate to their career stage, role and responsibilities associated with the Program, and the Program's mission and goals.

INTERPRETATION

CAHME encourages individual, collaborative and multi-disciplinary research and scholarship and/or other relevant professional achievements, including involvement of practitioners and students where appropriate. This should be consistent with university policy on faculty research and scholarship. Research and scholarship may be demonstrated through publications in refereed journals, books, and book chapters, case studies, funded and sponsored projects, presentations at professional meetings and other forms of dissemination.

Professional achievements may be demonstrated through accomplishments in the professional practice realm, such as leadership positions held in healthcare organizations or other parts of the health industry. The nature and volume of such achievements should be individually consistent with the stage of the faculty member's career and collectively adequate to support a Program of graduate education, consistent with the Program's mission and goals.

REQUIRED
1. Complete **Figure IV.B.1.1** to describe Program research and scholarship activity.
2. Discuss the content and quantity of current scholarship and/or professional achievement activities of each faculty member, and its relationship to their current stage of career, and their role and responsibilities in the Program, and their appointment type.
3. Assess the relationship between scholarly and professional achievement activities and the stated Program mission, goals and objectives. Based on this assessment, describe any recommendations for change in the foci and/or composition of faculty, and any steps being taken or planned to implement them, if appropriate.

Figure IV.B.1.1: Listing and Description of Program Research and Scholarship Activity
(Aggregate Summary for Self-Study Year and Prior Two Years)

| Core Program Faculty | Competitive Grants & Consulting | | | | | Publications | | | | Presentations | |
	Grants Awarded As PI		Grants Awarded with other PI		Contracts awarded	Books/chapters Published	Monographs published	Journal articles published	Reviews performed	Paper Presentations	Invited lectures/ presentations
	#	$	#	$	#	#	#	#	#	#	#
John Smith											
TOTALS											

IV.B.2 The Program will ensure that there is a systematic plan for, and investment in, individual faculty research and scholarship.

INTERPRETATION

The purpose of this criterion is to determine how goals to improve research and scholarly activities are identified, and a plan for meeting those goals, including resource requirements, is developed and implemented. CAHME will seek evidence of continuous development of faculty research and scholarship to support the Program's mission and research goals. It is expected that Programs will develop individual plans that includes all core Program faculty.

REQUIRED
1. Describe the ongoing faculty development activities within your Program. Include a description of Program-level resources available for faculty development.
2. Describe your Program's approach to providing and monitoring individual faculty development in research and scholarship. Include a description of resources available to individuals for their development.

IV.C. Teaching

IV.C.1 The Program will ensure that there is a systematic plan for, and investment in, individual faculty pedagogical improvement.

INTERPRETATION

The purpose of this criterion is to determine how goals to improve teaching are identified, and a plan for meeting those goals, including resource requirements, is developed and implemented. CAHME will seek evidence of continuous development of faculty teaching and assessment methods to support Program competency development as well as discipline-based and applied knowledge of the field (e.g. Master of Health Administration, MHA; Master of Science in Population Health, MS). It is expected that Programs will develop a systematic plan that includes all core Program faculty.

REQUIRED
1. Describe your program's plan for faculty pedagogical improvement. In your description demonstrate how the plan is aligned with the program competency development and assessment plan.
2. Describe how teaching improvement goals are developed and monitored for individual faculty including the frequency of progress evaluation.
3. Describe the regular faculty development activities within your program. Examples include seminars, workshops, peer review and/or other means of updating and feedback to improve teaching skills.
4. Describe your program's approach to providing and monitoring individual faculty pedagogical development, including the frequency of progress evaluation. Include a description of program or university-level resources available to individuals for their development.

Completion Guide

- As a part of the IV.C.1 r**ecords review process,** provide documentation that illustrates how you track the <u>pedagogical development</u> of each of your faculty members**.**
- You have the <u>option</u> of providing this information in the format your program uses <u>or</u> using the provided example Faculty Pedagogical Development Table template below.
- Each faculty member should have at least one goal.

Figure IV.C.1.1: Faculty Pedagogical Development Table Template
From self study year defined as _____ to _____.

FACULTY	PLAN		DO	STUDY	ACT
Faculty Name	**Faculty Goals**	**Learning opportunities *(trainings, workshops, professional affiliations, research, etc.)* Date**	**How did faculty apply their learnings to their classroom, community, or healthcare field as a healthcare field educator?**	**Evaluation Tools**	**What outcomes are achieved?**
Sarah Winston, PhD	Goal #1: To understand the extent to which the COVID-19 pandemic has influenced the role of healthcare management workers	ACHE Congress 3/2023 session on impact of COVID 19. AUPHA Annual Meeting 6/2023. Session on epidemiological evaluation of disease. NCHL Conference: Healthcare: managers and the pandemic: how to adapt to the COVID-19 world? 11/2022	Dr. Winston incorporated her learning by introducing a new section in her syllabus dedicated to discussing COVID-19, the history of pandemics, and how to deal with them as healthcare managers.	Knowledge Assessment score from LMS tests	Knowledge scores of students on COVID-19 increased 35%
	Goal #2: Stay up to date on new healthcare software used by hospitals and private practices	HIMSS 2021: Healthcare software: what is on the horizon in 2023? 7/2022	Dedicated a class session with an outside speaker to discuss different software that students may need to use in future positions at healthcare settings	Student Assigned Coursework	Student paper of the software tools they would use in the position that they have set as a goal.
Faculty #2					
Faculty #3					

IV.C. 2 The Program Faculty will demonstrate that they draw on current and relevant research and scholarship in their teaching activities.

INTERPRETATION
The purpose of this criterion is to enhance faculty teaching by using research and scholarship to influence the field to provide current and relevant material for the classroom.

REQUIRED
Describe how faculty stay current and use Evidenced-Based Research in their courses and identify where reflected in their syllabus/LMS.

IV.D Community and Professional Service

IV.D.1 Core Faculty will participate in health-related community and professional activities and will draw upon their experience, as appropriate, in their teaching.

INTERPRETATION
The Program should articulate its role and involvement in service to governmental agencies, voluntary and community organizations and health care institutions. Community service can include service to the profession, or the community at large. The purpose of this criterion is to enhance faculty teaching and research activities; serve as a model to students of the role of service in professionalism; and provide faculty with the opportunity to influence the field. While CAHME recognizes that some of these activities may be compensated, e.g., participation in NIH study sections, this criterion will not be fully satisfied by activities that are a part of a faculty member's established consulting business.

REQUIRED
1. Describe the policies and procedures of the Program and the University regarding faculty participation in community service activities. Describe the relationship between faculty community service activities and Program goals.
2. Using **Figure IV.D.1.1,** describe current community service projects (funded/unfunded, sponsored) currently being carried out or completed in the Self-Study year by faculty members, or in which the Program is substantially involved. Organize projects alphabetically by name of responsible faculty.

Figure IV.D.1.1: Description of Faculty Health Related Community Service and Continuing Education Activities (For Self-Study year only)

Faculty	Health Related Community Service Activities	Professional Affiliations / Continuing Education

ADDENDUM: Healthcare Management and Population Health Competencies

Student learning is a central focus of graduate education and is driven by each Program's unique mission and the varied employment settings of its graduates. Therefore, it is important that Programs be able to articulate the expected competencies of Program graduates. These competencies should be driven by the mission; form the basis of the Program's curriculum; serve to link course content in pursuit of competencies; and foster appropriate levels of teaching and methods of assessment. Programs may choose to create and validate their own competency model based on their mission or adapt a commonly used competency model (NCHL, HLA, SLU, etc.). CAHME does not prescribe a specific number of competencies, but the competency model must be aligned with the Program's mission.

CAHME recognizes the following competencies as 'core' to the professions of Healthcare Management and Population health Management, and so should be represented in any competency model chosen or developed by the Program. It is anticipated that a Program's competency model will also add other competencies according to its specific mission and the positions students take upon graduation. CAHME does not prescribe a maximum number of competencies.

1. *Communications and interpersonal effectiveness:* "Communications" should include competencies associated with giving and receiving of verbal and non-verbal information between an individual and other individuals or groups, including individuals and groups that represent the diverse populations of the Program's target market. "Interpersonal effectiveness" involves competencies associated with developing and maintaining effective, inclusive working relationships with others. The following are examples of the kinds of competencies that may fall into this domain and be addressed in course content: Collaboration, Oral and/or Written Communications, Listening, Observing, and Relationship Building.

2. *Critical thinking, analysis, and problem solving:* This domain should include competencies related to the appropriate use of information, data, and judgment to inform sound management decisions. The following are examples of the kinds of competencies that may fall into this domain: Analytical thinking, Financial Management, Information Seeking, Health Information Management, Performance Measurement, and Process Management.

3. *Management and leadership:* This domain should include competencies related to a student's ability to successfully pursue organizational goals that involve getting things done through and in collaboration with others. The following are examples of the kinds of competencies that may fall into this domain: Governance, Change leadership, Human Resource Management, Initiative, IT Management, Organizational Awareness, Project Management, and Strategic Orientation.

4. *Professionalism, ethics, and transparency:* This domain should include competencies that relate to upholding high professional, ethical, and transparent standards. The following are examples of the kinds of competencies that may fall into this domain: Accountability, Acting with Integrity,

Achievement Orientation, Ethical decision-making, Professionalism, Life-long learning, and Self-Confidence.

ADDENDUM: Healthcare Quality and Safety Competencies

For Healthcare Quality and Safety programs, a minimum of one competency per the following content domains are required. For further definition of these domains, see Glossary of Terms: HQS Content Domains:

HQS Content Domains:

1. *Safety and Error Science*: Safety and Error Science is the study of complex interactions across space and time. Safety science includes elements that constrain human action and principles that guide design of the human-technology interface and that facilitate understanding of the state of the system. Errors include actual events, near misses, and lapses. 'Safety' is a dynamic property that optimizes operational and organizational environments across varying conditions and recognizes intrinsic hazards and risks.

2. *Improvement Science and Quality Principles*: Improvement Science and Quality Principles refer to the concept, based on the work of Deming (2000), Donabedian (1998, 2005), and others, of exploring how to undertake quality improvement by applying research methods to examine the impact of quality improvement efforts on outcomes. Improvement Science and Quality Principles provides the conceptual and methodological framework to improve the quality, patient safety, and value of healthcare.

3. *Evidenced-Based Practice*: Evidence-Based Practice refers to the process of decision-making using critical thinking and the best evidence available, at the time, to inform practice. Obtaining best available evidence requires information-seeking skills of published literature, "pre-appraised" resources that have undergone a filtering process, internal business information, and professional experience. Evidence-based practice is conscientious, explicit and judicious in its use of the best available evidence from multiple sources. Evidence-based practice requires consideration of the context in which it is being applied. Evidence-based practice evolves and is informed, over time, by outcomes.

4. *Measurement and Process Evaluation*: Measurement and Process Evaluation refers to the use of valid and reliable tools and methods to accurately collect and analyze data to assess the need for change, to achieve desired outcomes, and to assess the effectiveness or impact of the change. Tools can include, but are not limited to, scorecards, dashboards, and statistical process controls.

5. *Communication*: Communication refers to the process of messaging from a sender to a receiver through verbal, nonverbal, written or some other medium. The message contains content and has context. The message must be synthesized and understood by the receiver. The meaning of content is shaped by the meanings associated with the message itself, as well as the emotions triggered by the message. Perspectives, culture, biases, and language barriers are important elements in the communication process. Meaning is influenced by the relationship between the parties. Communication is affected by factors such as location, environmental conditions, and time of day.

6. *Health Informatics*: Health informatics refers to the interdisciplinary field that draws upon the fields of information science, information technology, and social and behavioral science, as applied to health. Health Informatics is the application of health information technology in the interdisciplinary field that studies and pursues the effective uses of biomedical data, information, and knowledge for scientific inquiry, problem solving and decision making,

motivated by efforts to improve human health. The content domain encompasses concepts of stakeholder analysis, adoption of technology, and sociotechnical systems.

7. *Human Factors*: Human Factors refers to the interdisciplinary field that focuses on the interaction between humans and products, processes, and systems in order to reduce human error, enhance human safety and comfort, and improve processes. Human factors decision-making integrates user-centered inquiry and design from a systems perspective to ensure effective representation and use of biomedical and other data. The content domain reflects theories of human perception and cognition, and applies methods of systems analysis, knowledge elicitation, user-centered design, usability, and technology evaluation.

8. *Professionalism*: Professionalism refers to the status, methods, character or standards expected of a professional in quality and patient safety and is demonstrated by the shared attitudes, beliefs and values held by members of the profession. Among these shared attitudes, beliefs and values is a commitment to lifelong learning, leadership development, reflective practice, interdisciplinary collaboration, advocacy and policy-making at the local and national levels, and relies on critical thinking, communication, decision making and judgment. Professionals demonstrate trustworthiness, accountability, reliability and ethical behavior.

9. *Leadership*: Leadership in quality and patient safety sustains and promotes the commitment to quality in all aspects of care provision as well as ensuring a safe and just environment within which all stakeholders can speak up to protect the integrity of safe care processes within a culture of transparency. Applying models of leadership, leaders strategically plan, manage and sustain initiatives to achieve organizational goals, create and manage teams, monitor and respond to environmental dynamics, eliminate barriers, optimize resource utilization, manage change, and coach and motivate others. Leaders demonstrate self-awareness and seek self-improvement.

10. *Systems Thinking*: Systems Thinking is the ability to recognize, understand, and synthesize the linkages, relationships, interactions, behaviors and interdependencies among a set of components designed for a specific purpose. The components, including human agents/actors who drive a system and function, must be understood together, in a dynamic architecture of interactions and synergies that characterize the entire system.

11. *Legal and Regulatory Issues*: Legal and Regulatory Issues refers to applicable requirements and accreditation standards that are foundational to healthcare quality and patient safety practice. The impact of laws, regulations and standards on health care delivery, institutional policy, financing and resource allocation are part of this content domain. Included are concepts associated with planning for, implementing, and monitoring requirements and standards to achieve compliance, to predict costs, to deliver effective and efficient care, and to promote value. Risk management efforts enhance awareness of legal and regulatory requirements and support measures to prevent untoward outcomes, financial loss and to maintain community trust.

12. *Interprofessional Collaborative Work*: Interprofessional Collaborative Work refers to the practice of multiple disciplines working together in the spirit of mutual trust and respect, cooperation, and open communication to support attainment of the shared goal of improving patient safety and quality. Collaborative work is characterized by shared responsibility and accountability, teamwork, and coordination while developing and maintaining effective working relationships with all members of the interdisciplinary team.

13. *Patient and Family-Centered Engagement*: Patient and Family-Centered Engagement refers to the integration of patients and families as critical stakeholders in the structure, process and

outcomes of the health care delivery continuum. Methods of engagement can include strategies incorporating the patient and family voice in quality and patient safety initiatives and the use of tools and measures to elicit input and feedback from this group. This content domain encompasses social determinants of health, cultural competence, and health literacy.

CAHME recognizes the following competencies as 'core' to the profession of Healthcare Quality, and so should be represented in any competency model chosen or developed by the Program. It is anticipated that a Program's competency model will also add other competencies according to its specific mission and the positions students take upon graduation. CAHME does not prescribe a maximum number of competencies.

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GLOSSARY OF TERMS

CAHME: The Commission on Accreditation of Healthcare Management Education

Accreditation: The credential accorded to those programs which meet all of the criteria for accreditation.

Accreditation Council: Oversees the accreditation process and makes recommendations to the Board of Directors on individual accreditation decisions.

Advance Search Program Profile: Webpage which displays program-specific annual report data including student outcomes.

To find a program profile page:

      1. Navigate and log in to CAHME Annual Report Editor (CARE): https://cahme.org/_pdlogin/

      2. Open Section I: Program Description

      3. Copy the *Program Profile URL* located within the red dotted box

      4. Include the Program Profile URL on your webpage and explicitly state that student outcomes can be found at the link(s) to the "Program Profile".

Program Profile URL:

Your program's unique Program Profile URL to include on your website (as per Criteria II.A.1 & II.A.5 Outcomes):
https://cahme.org/programs/?exampleurl

Board of Directors: The entity that governs the affairs of CAHME and is responsible for acting on accreditation recommendations as defined in Article VII of the Bylaws.

CAHME Accreditation Management Portal (CAMP)
CAHME's web-based accreditation system on which candidacy applications are received and processed. The system can be accessed on www.cahme.org in the following location:

CAHME Annual Report Editor (CARE)

The tool used by a program to enter their annual report data. This tool can be found at www.cahme.org in the following location:

CAHME Syllabi Checklist:

This tool can be found at www.cahme.org in the following location:
Resources -> Program Resources
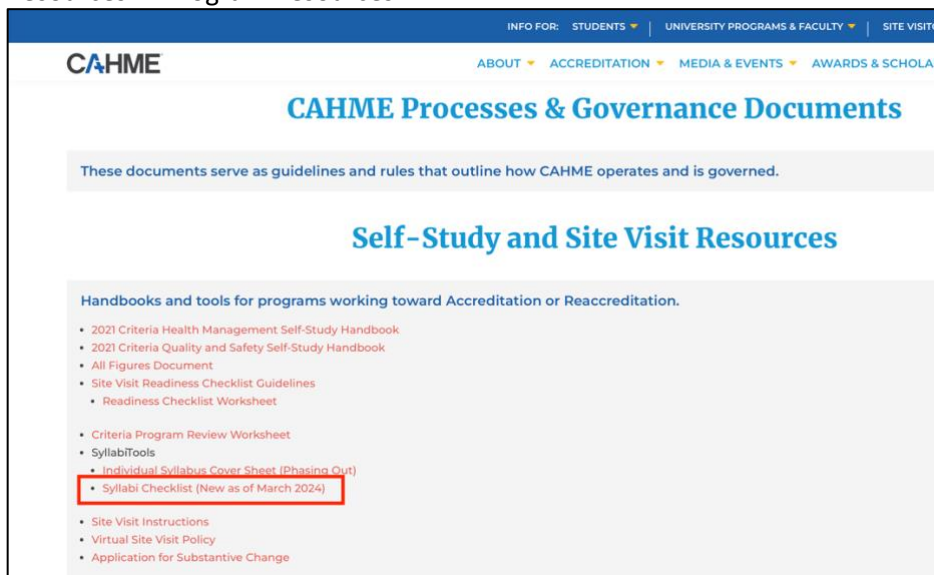
Core Faculty are those faculty who are engaged in the daily operations of the Program, and share major responsibility for the teaching, advising, and administrative functions of the Program. Core faculty is not defined by full-time, part-time, or adjunct status, but by involvement in the Program.

Degree: An academic title given by a college or university to a student who has completed a specific course of study.

Exporting Figures From CARE:
Note: In lieu of manual completion of figures **related to II.A and IV.A.2**, programs are encouraged to

export the figures from CARE and attach as an Evidence file within CAMP.

If completing manually, the academic years shown must include the current year, the Self-Study year, and the year prior to the Self-Study year.

1. Navigate and log in to CAHME Annual Report Editor (CARE): https://cahme.org/_pdlogin/
2. In the header section at the top of the page, select the 'CAMP: Download Figures for Self-Study Evidence Files' button.
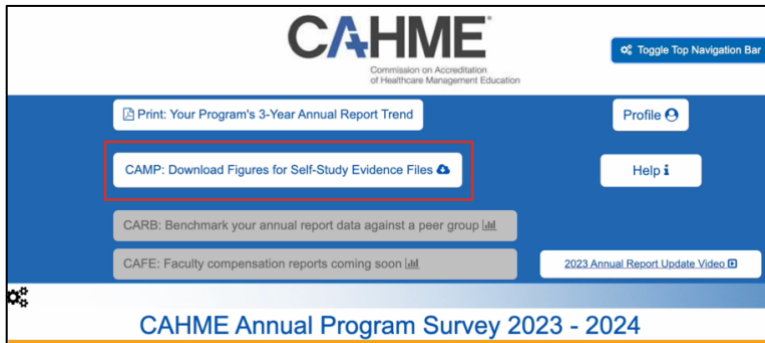
3. Enter the program's Self-Study year to appear on all Figures
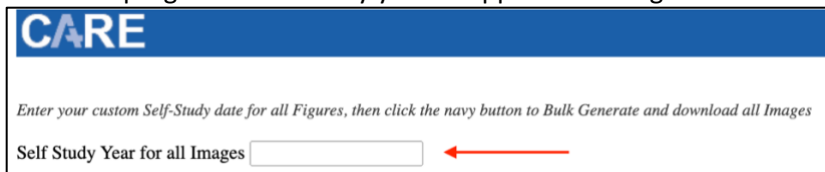
4. Then download images in one of three ways:
   a. All at once with a bulk download*
   b. Per Standard

    c. Individually

*Note: If Generating All Images at once, then browser settings may need changed to allow bulk downloads for https://care.cahme.org

5. Figures can then be "drag and dropped" or uploaded into the Evidence section of a standard within CAMP

Program (also Academic Unit): The entity within a department or school offering a single or multiple courses of academic study (tracks).

Program Seeking Accreditation: A program is considered to be seeking accreditation if it has submitted a CAHME Eligibility Statement.

Standards Council: Maintains and continuously improves the accreditation standards; recommends new/revised standards for consideration and action by the board of directors.

Track: (also Instructional Sequence): A course of academic study; a curriculum.

REFERENCES

Agency for Healthcare Research and Quality (AHRQ). (2017 February). Guide to patient and family engagement in hospital quality and safety. Retrieved from https://www.ahrq.gov/professionals/systems/hospital/engagingfamilies/index.html

Anderson, L.W., and D. Krathwohl (Eds.) (2001). A Taxonomy for Learning, Teaching and Assessing: a Revision of Bloom's Taxonomy of Educational Objectives. Longman, New York

Barends, E., Rousseau D. M., Briner, R. B. (2014). Evidence-based management: The basic principles. Amsterdam: Center for Evidence-Based Management. Retrieved from https://www.cebma.org/wp-content/uploads/Evidence-Based-Practice-The-Basic-Principles-vs-Dec-2015.pdf

Benner, P (1984) From novice to expert. Excellence and Power in clinical nursing practice. Menlo Park CA: Addison-Wesley