CAHME®

Industry Update

Advancing the quality of healthcare management education.

July 8, 2026

Website
www.cahme.org

Rev. 7/8/2026

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Commission on Accreditation of Healthcare Management Education

Thank you to our Corporate Partners

American College of Healthcare Executives — for leaders who care®

AUPHA — The Voice of Academic Healthcare Management

American Hospital Association™ — Advancing Health in America

hfma™

PEREGRINE GLOBAL SERVICES

Thank you to our Award Sponsors and Donors

PEREGRINE GLOBAL FOUNDATION

Canon

JOINT COMMISSION™ — ELEVATING CARE. TOGETHER.

Modern Healthcare — Exclusive Media Partner for CAHME Awards

BALDRIGE FOUNDATION — BALDRIGE - America's Best Investment

George and Regi Herzlinger Charitable Fund

GP Gail Peace, LLC — Motivating Entrepreneurs

Robert S. Bonney

Dr. Dolores Clement

JUDY BAAR Topinka CHARITABLE FOUNDATION

Thank you to our over 250 volunteers

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Welcome from CAHME's Board Chair

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Commission on Accreditation of Healthcare Management Education

Ron Holder,
MHA, FACHE, FACMPE, CAE
Chair, CAHME Board of Directors

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Strategic Focus Areas

Enhancing Value for Stakeholders
Continuing to strengthen the value and impact of CAHME accreditation for programs, students, employers, and the broader healthcare management community.

Growing Our Reach
Expanding awareness and engagement to increase access to high-quality healthcare management accreditation.

Advancing Accreditation Excellence
Continuing to enhance the quality, consistency, and effectiveness of the accreditation process while supporting the evolving needs of the profession.

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- Board of Directors
- Executive Committee
- Finance
- Audit
- Strategic Issues
- Governance
- Accreditation Council
- Standards Council
- Site Visitors
- AUPHA
- ACHE
- AHA
- MGMA
- HFMA
- Industry Partners
- Friends
- Candidacy
- Program Change
- CAHME Mentorship Circle
- Health, Quality, & Safety
- Population Health
- Global Advisory
- AI Task Force

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Accreditation Updates

Dr. Maureen Jones, RN
Chief Executive Officer ,CAHME

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What's Happening at CAHME?

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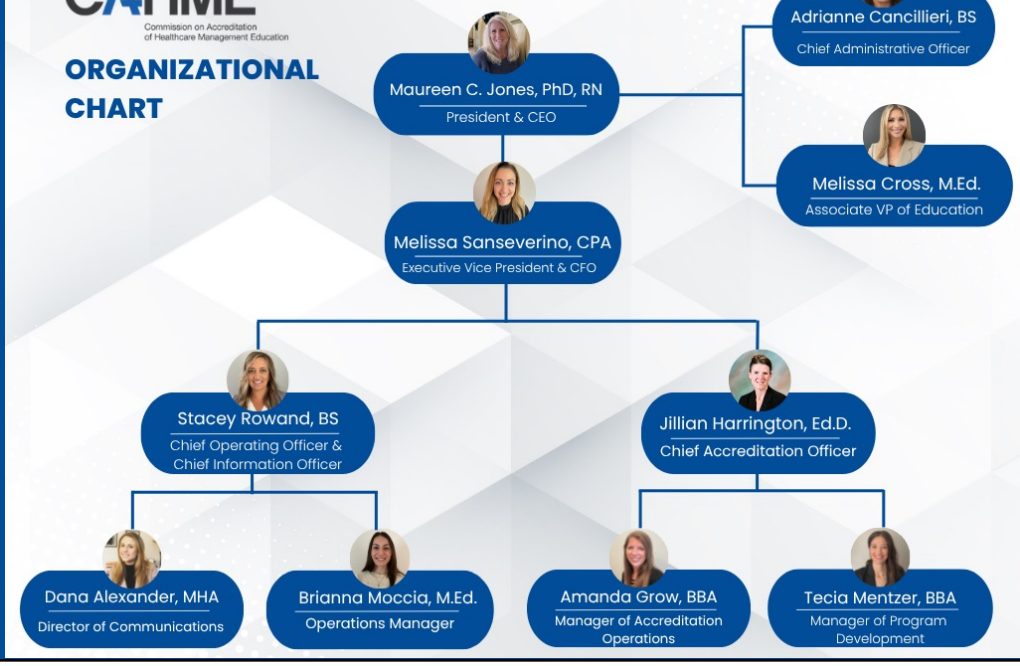
ORGANIZATIONAL CHART



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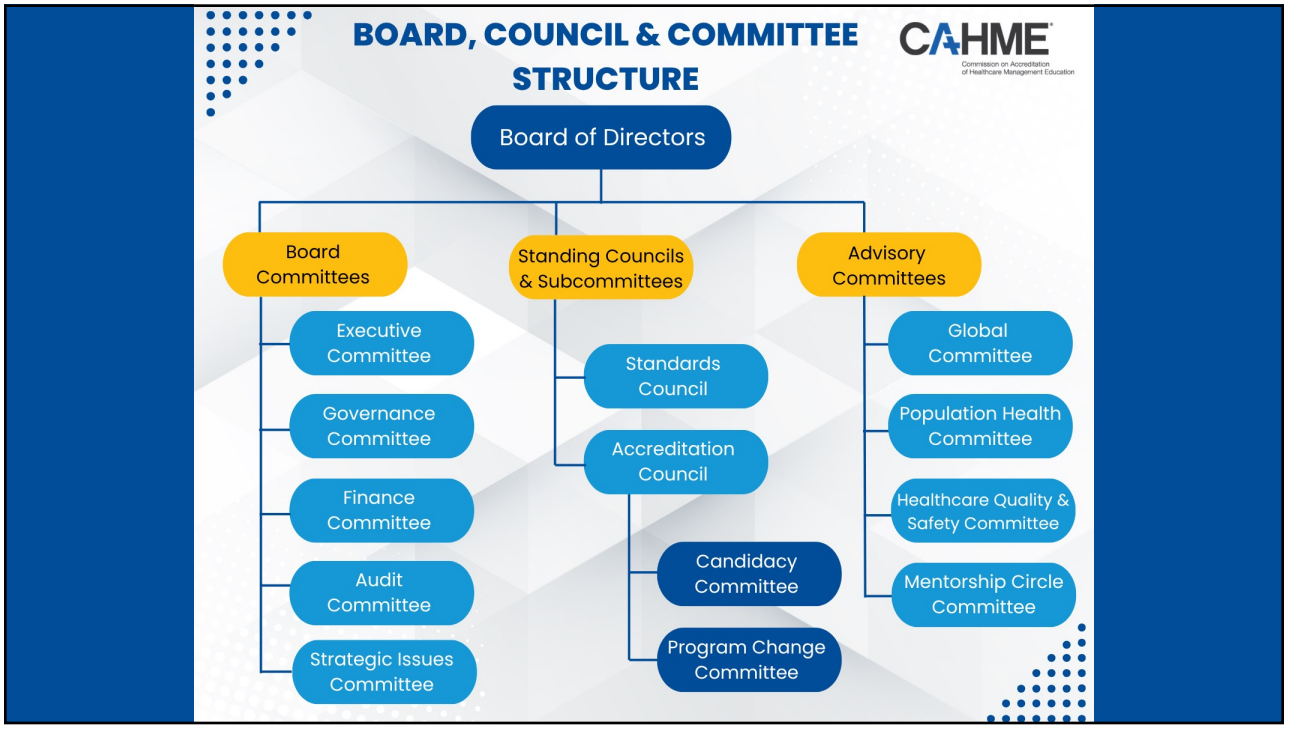
BOARD, COUNCIL & COMMITTEE STRUCTURE
CAHME
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Board of Directors
Board Committees
Standing Councils & Subcommittees
Advisory Committees
Executive Committee
Governance Committee
Finance Committee
Audit Committee
Strategic Issues Committee
Standards Council
Accreditation Council
Candidacy Committee
Program Change Committee
Global Committee
Population Health Committee
Healthcare Quality & Safety Committee
Mentorship Circle Committee

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CAHME
Building Better Leaders for a Better Healthcare Future
2026 STANDARDS CORE PRINCIPLES
1. Mission-Driven and Purpose-Aligned
2. Sustainability and Institutional Effectiveness
3. Stakeholder Engagement and Shared Governance
4. Transparency and Accountability
5. Competency-Based Education and Industry Relevance
6. Continuous Quality Improvement and Evidence-Based Practice
7. Graduate-Level Rigor and Integrative Learning
8. Student Success and Career Preparedness
9. Faculty Excellence and Andragogical Development
Empowering leaders. | Strengthening programs. | Advancing healthcare management education.
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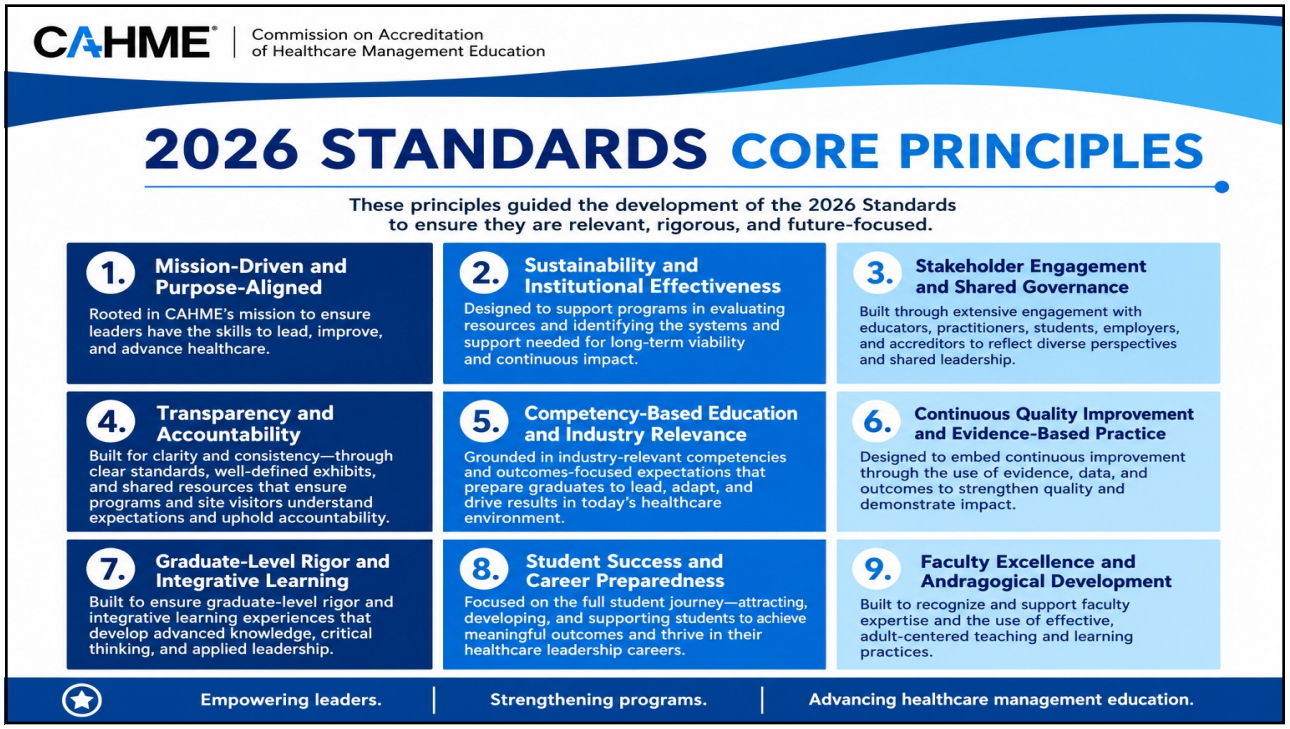
CAHME
Commission on Accreditation of Healthcare Management Education
2026 STANDARDS CORE PRINCIPLES
These principles guided the development of the 2026 Standards to ensure they are relevant, rigorous, and future-focused.
1. Mission-Driven and Purpose-Aligned
Rooted in CAHME's mission to ensure leaders have the skills to lead, improve, and advance healthcare.
2. Sustainability and Institutional Effectiveness
Designed to support programs in evaluating resources and identifying the systems and support needed for long-term viability and continuous impact.
3. Stakeholder Engagement and Shared Governance
Built through extensive engagement with educators, practitioners, students, employers, and accreditors to reflect diverse perspectives and shared leadership.
4. Transparency and Accountability
Built for clarity and consistency—through clear standards, well-defined exhibits, and shared resources that ensure programs and site visitors understand expectations and uphold accountability.
5. Competency-Based Education and Industry Relevance
Grounded in industry-relevant competencies and outcomes-focused expectations that prepare graduates to lead, adapt, and drive results in today's healthcare environment.
6. Continuous Quality Improvement and Evidence-Based Practice
Designed to embed continuous improvement through the use of evidence, data, and outcomes to strengthen quality and demonstrate impact.
7. Graduate-Level Rigor and Integrative Learning
Built to ensure graduate-level rigor and integrative learning experiences that develop advanced knowledge, critical thinking, and applied leadership.
8. Student Success and Career Preparedness
Focused on the full student journey—attracting, developing, and supporting students to achieve meaningful outcomes and thrive in their healthcare leadership careers.
9. Faculty Excellence and Andragogical Development
Built to recognize and support faculty expertise and the use of effective, adult-centered teaching and learning practices.
Empowering leaders. | Strengthening programs. | Advancing healthcare management education.

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CAHME
Building Better Leaders for a Better Healthcare Future
BUILT TOGETHER. EVOLVED FOR IMPACT.
The 2026 Standards reflect extensive input from across the field.
We listened, learned, and built a stronger, more meaningful framework.
1. The self study is a coherent system, not a checklist
Organized to tell your program's story clearly and logically—demonstrating alignment, integration, and impact.
2. More exhibits and targeted narrative with supporting evidence
Evidence expectations are clear and focused through structured exhibits and concise, targeted narrative that show what matters most.
3. Mission, vision, target students, and post-graduate outcomes drive everything
Your program's purpose, the outcomes you expect, and the students you serve form the foundation for every decision and design choice.
4. Competencies are the backbone of the entire self-study
Competencies connect your mission, curriculum, assessment, outcomes, and continuous improvement across the entire program.
5. Assessment is competency based, program-level, and required data support
Assessment is aligned to competencies and provides required, program-level data that demonstrate learning and inform improvement.
6. CQI is a living process, not a compliance exercise
Continuous Quality Improvement is embedded throughout the program and drives ongoing enhancement and innovation.
7. Stakeholders are active contributors, not symbolic
Meaningful engagement informs decisions, strengthens programs, and reflects shared ownership and accountability.
8. Sustainability and resources are strategic and holistic
Holistic and ongoing planning demonstrates the right faculty, leaders, and support systems are in place and evaluated regularly to ensure long-term success.
9. Transparency and student experience matter
Clear information and a positive student experience build trust, support success, and strengthen outcomes.
Extensive input. | Meaningful collaboration. | Stronger standards. | Greater impact. | Advancing healthcare leadership.

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2026 Standards – What's New Checklist

- ❑ **Criterion 1.2:** Sustainability Plan
- ❑ **Criterion 3.1:** Required Program Topics (Exhibit 3.1.3)
- ❑ **Criterion 3.2:** Program-level Integrative Assessment
- ❑ **Criterion 5.2:** Andragogical Development – every two years
- ❑ **PIC Tool:** Program Improvement Cycle Tool (CAHME Website - 2026 Standards)

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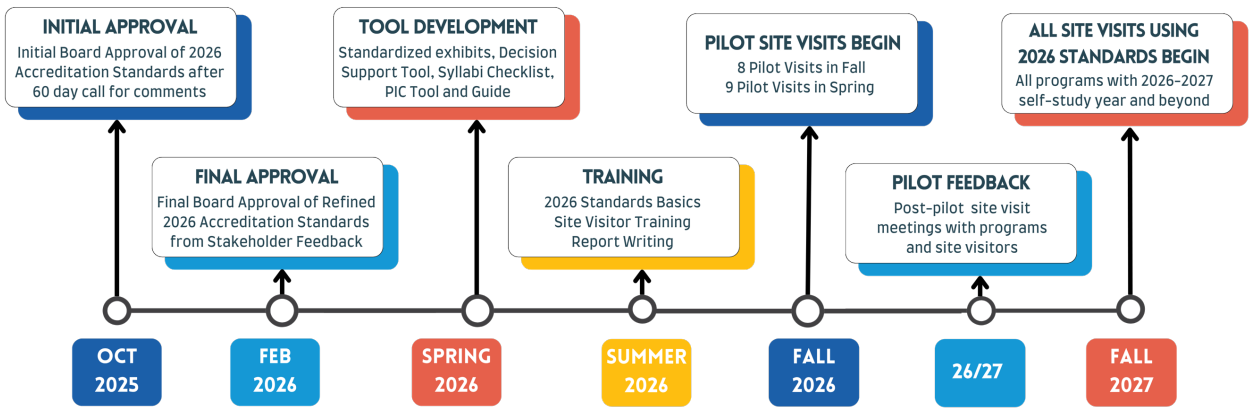
2026 STANDARDS IMPLEMENTATION TIMELINE



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CONTINUOUS QUALITY IMPROVEMENT AT CAHME

CAHME is building a comprehensive Quality Assurance (QA) Plan to ensure our standards, materials, and accreditation processes remain effective, relevant, and trusted.

A structured and continuous process used by CAHME increases consistency, accuracy, reliability, integrity, and alignment with established standards and expectations throughout the accreditation process.

WHY CQI MATTERS AT CAHME

1. Increases consistency across accreditation reviews, findings, and decisions
2. Supports accuracy, fairness, and transparency in the evaluation process
3. Strengthens alignment across site visit teams, councils, and reviewers
4. Reinforces continuous quality improvement within the accreditation process

FOCUS ON INTER-RATER RELIABILITY

- Upcoming site visitor training will introduce tools and best practices to promote consistency.
- Annual training and calibration activities will be guided by our QA Plan and data findings.
- Ongoing monitoring ensures our reviewers apply standards consistently and fairly.

Continuous improvement. Stronger consistency. Trusted accreditation. | Advancing healthcare management education.

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ENHANCED CAHME ANNUAL SITE VISITOR TRAINING

Building Expertise. Promoting Alignment. Strengthening Quality.

FOUNDATION BUILDING

Tools, resources, and processes that ensure consistency and quality across all site visits.

- Standardized Exhibits
- Decision Support Tool (DST)
- Findings Database
- These tools are required for all site visits.

LAUNCH

Key training initiatives to prepare for the 2026 Standards implementation.

- 2026 Standards Basics Training
- Pilot Training
- Resources and materials aligned to the 2026 Standards

PILOT SITE VISITOR TRAINING

Testing and refining training through real-world pilot site visits.

- Site visitors apply tools and processes in pilot site visits.
- Collect feedback and evaluate effectiveness
- Refine training based on lessons learned

ANNUAL SITE VISITOR TRAINING

Comprehensive annual training to maintain excellence and support site visit performance.

- Mock program used for hands-on application
- Builds in key elements:
  - Interrater Reliability
  - Interpretive Guidance
  - Enhanced Site Visit Report Training
  - Reader Report Training
- Refreshes skills and reinforces best practices

BUILDING BADGES FOR SPECIALTY VISITS

Specialized badges to recognize expertise in focused areas of accreditation.

- Global
- Health, Quality, & Safety
- Population Health
- AACSB Joint Visits

Building Expertise. | ***Promoting Alignment.*** | ***Strengthening Quality.***

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2027 CAHME RECOGNITION PROGRAM

VETERANS WEEK

- **Robert S. Bonney Scholarship** for Veterans of the US Armed Services.

CAHME RECEPTION AT ACHE 2027

- **Canon Award** for Excellence in Sustainability in Healthcare Management Education
- **Joint Commission** Fellowship Award
- **Gail Matejcic Peace** Scholarship for Visionary Healthcare Leaders

BOOT CAMP AT AUPHA 2027

- **Olin Oedekoven** Scholarship for Most Improved Student
- **Dolores Clement** Fellow of the Year Award
- **Baldrige Foundation** Award for Leadership Excellence

SPRING EDUCATIONAL EVENT

- **Judy Baar Topinka** Foundation Scholarship for Health Policy

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CAHME Accredited Program Benefit

American Hospital Association's (AHA) Professional Membership Groups (PMGs):

Bridging Academia and Healthcare Leadership

Association for the Healthcare Environment (AHE)	Access infection prevention, environmental services, and sustainability resources that can bring real-world healthcare operations data into the classroom.
Association for Health Care Resource & Materials Management (AHRMM)	Strengthen supply chain teaching through case competitions, continuing education, and resources aligned with healthcare resource management and CMRP competencies.
American Society for Health Care Engineering (ASHE)	Keep curriculum current with healthcare facility regulations, operational standards, and opportunities for research and industry collaboration.
American Society for Health Care Risk Management (ASHRM)	Incorporate current risk, compliance, patient safety, and legal frameworks into healthcare management coursework.
Society for Health Care Strategy & Market Development (SHSMD)	Access current strategy, market, and healthcare trend resources while connecting with industry leaders, speakers, and potential research partners.

Through AHA's Professional Membership Groups, CAHME-accredited programs connect students and faculty with expert resources, real-world insights, and meaningful partnerships.

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NEW: AHA Professional Membership Groups for Faculty

Complimentary PMG's available for all faculty in CAHME-Accredited Programs.

What Faculty Receive

- Up to 5 complimentary AHA PMG memberships to select from
- Access to professional communities and networking
- Industry resources, tools, and educational content
- Insights to support teaching, curriculum, and classroom learning

How to Enroll

Enrollment period: July 8 – August 15

- Program directors will receive a sign-up link to share with faculty in CAHME-accredited programs.
- Once the form is submitted, **AHA will follow up directly** to complete enrollment.
- Scan to access the form.

Questions? Contact Dana Alexander, MHA, Director of Communications, CAHME, at dalexander@cahme.org.

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Accreditation Updates

Dr. Jillian Harrington, Chief Accreditation Officer

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Accreditation Process Updates

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Candidacy Updates

- **Essential Criteria Defined**
  - 10 Criteria
  - Foundational, framework, program essentials
- **Earlier, Heavier Engagement**
  - The groundwork happens in candidacy, fewer surprises, smoother self-study and site visit
- **New 'On-Track' Determination Label**
  - Program has a defined a plan
  - Implementation has begun
  - Reviewers can evidence that it will meet required elements

Candidacy Process Roundtables (CPRs)

- 5 Candidacy Prep Sessions a year
- Guidance for each step
- Optional 1:1 tailored program check-ins

Better Preparation

- Clearer expectations
- Earlier and more frequent engagement
- Gain insights along the journey

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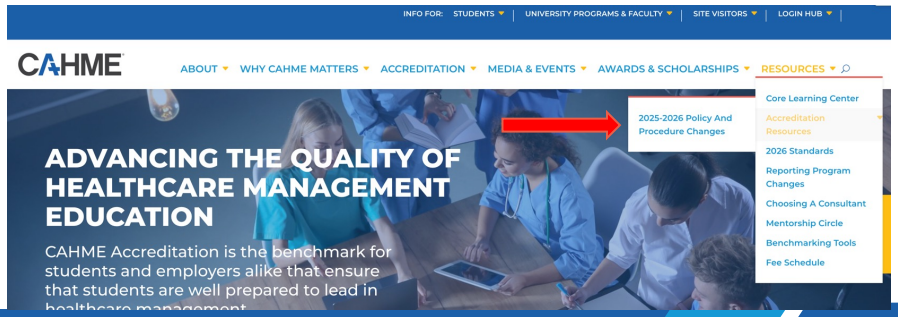
2025-2026 POLICY CHANGES

https://cahme.org/policy-and-procedure-changes/

- Summary and Effective Date of Process Changes for 2025-2026
  - Length of Accreditation
  - Progress Report Changes and Submission Dates
  - New Findings Language
  - Site Visit Schedule and LMS Access Requirements



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LMS ACCESS FORM & VIRTUAL DOCUMENT DAY:

SUPPORTING A MORE EFFICIENT, EFFECTIVE ACCREDITATION PROCESS

LMS ACCESS FORM
WHY WE ADDED IT

- **Communicate self-study evaluation needs early**, give program time to process requests and get access.
- **Provide detailed rationale** and criterion-based details on access needs for information technology partners.
- **NEW – 30 calendar-day** LMS access to site visit team.
- **Rare Instance Option:** Additional options are provided if 30 calendar-day access cannot be given.
- **Actions Needed:** Agreement Form Signed by Program and College. To be submitted along with site visit dates.

VIRTUAL DOCUMENT DAY

Getting materials during the self-study review allows the entire team to have all the information when evaluating the evidence provided against the criterion.

This virtual approach enables the site visit team to:

- Evaluate evidence thoroughly and consistently against the standards.
- Assess competency-based assessments, faculty feedback, and progress to attainment communication to students.
- Ensure all team members have the same complete information before the virtual document review and on-site visit.

KEY BENEFITS

- **Improved Planning & Preparation** Program has time to process requests and ensure complete access.
- **Detailed & Targeted Access** Information technology partners receive clear, criterion-based access details.
- **Increased Efficiency** Early access enables a smoother, more effective review process.
- **Consistency & Quality** Supports high-quality, fair, and consistent reviews.
- **Stronger Evaluation Outcomes** Enables comprehensive evaluation of evidence, feedback, and communications that demonstrate student learning and program progress.

These enhancements help ensure a more predictable, efficient, and transparent accreditation experience for programs and site visit teams alike.

Better process. Stronger reviews. Better outcomes.

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Single Progress Report Process

- **Reasoning behind new process**
  - With the move from two progress reports to one, we have created these additional processes to be put in place to ensure the program understand what is needed for the submission of the single progress report.
  - This process allows for more follow-through with the program and regular reminders of their progress report due date.
- **Leadership Acknowledge Letter**
  - Letter that must be signed by University Leadership (Dean or Dean equivalent) acknowledging the findings of the site visit and that a progress report will be due where the not fully met criteria will need to be resolved.

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Tools and Website Updates

Stacey Rowand
CAHME COO & CIO

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3-Step Report Writing

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Step 1: Decision Support Tool

Required for all Site Visits

- Centralized documentation
- Creates a record that can be referenced during subsequent Accreditation Council review
- SVT consistency

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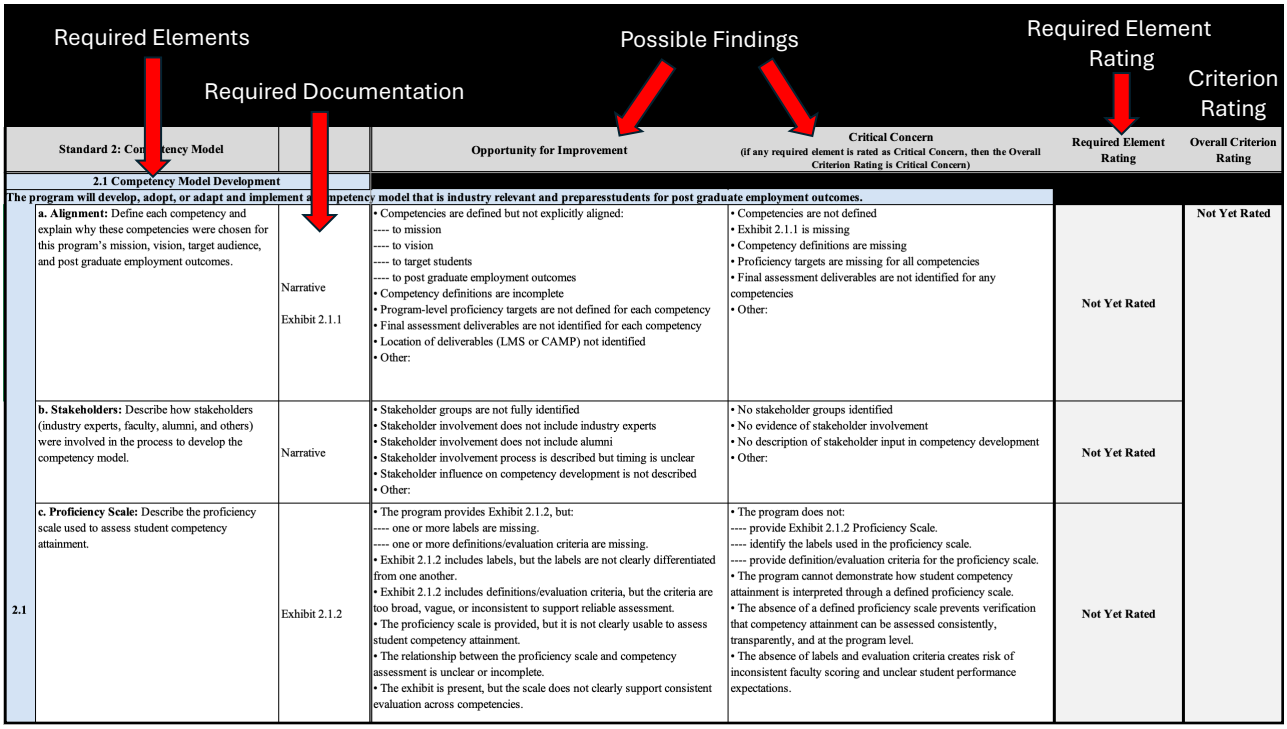

	Standard 2: Competency Model		Opportunity for Improvement	Critical Concern (if any required element is rated as Critical Concern, then the Overall Criterion Rating is Critical Concern)	Required Element Rating	Overall Criterion Rating
	2.1 Competency Model Development					
	The program will develop, adopt, or adapt and implement a competency model that is industry relevant and preparesstudents for post graduate employment outcomes.					
2.1	**a. Alignment:** Define each competency and explain why these competencies were chosen for this program's mission, vision, target audience, and post graduate employment outcomes.	Narrative Exhibit 2.1.1	• Competencies are defined but not explicitly aligned: ---- to mission ---- to vision ---- to target students ---- to post graduate employment outcomes • Competency definitions are incomplete • Program-level proficiency targets are not defined for each competency • Final assessment deliverables are not identified for each competency • Location of deliverables (LMS or CAMP) not identified • Other:	• Competencies are not defined • Exhibit 2.1.1 is missing • Competency definitions are missing • Proficiency targets are missing for all competencies • Final assessment deliverables are not identified for any competencies • Other:	**Not Yet Rated**	**Not Yet Rated**
	b. Stakeholders: Describe how stakeholders (industry experts, faculty, alumni, and others) were involved in the process to develop the competency model.	Narrative	• Stakeholder groups are not fully identified • Stakeholder involvement does not include industry experts • Stakeholder involvement does not include alumni • Stakeholder involvement process is described but timing is unclear • Stakeholder influence on competency development is not described • Other:	• No stakeholder groups identified • No evidence of stakeholder involvement • No description of stakeholder input in competency development • Other:	**Not Yet Rated**	
	c. Proficiency Scale: Describe the proficiency scale used to assess student competency attainment.	Exhibit 2.1.2	• The program provides Exhibit 2.1.2, but: ---- one or more labels are missing. ---- one or more definitions/evaluation criteria are missing. • Exhibit 2.1.2 includes labels, but the labels are not clearly differentiated from one another. • Exhibit 2.1.2 includes definitions/evaluation criteria, but the criteria are too broad, vague, or inconsistent to support reliable assessment. • The proficiency scale is provided, but it is not clearly usable to assess student competency attainment. • The relationship between the proficiency scale and competency assessment is unclear or incomplete. • The exhibit is present, but the scale does not clearly support consistent evaluation across competencies.	• The program does not: ---- provide Exhibit 2.1.2 Proficiency Scale. ---- identify the labels used in the proficiency scale. ---- provide definition/evaluation criteria for the proficiency scale. • The program cannot demonstrate how student competency attainment is interpreted through a defined proficiency scale. • The absence of a defined proficiency scale prevents verification that competency attainment can be assessed consistently, transparently, and at the program level. • The absence of labels and evaluation criteria creates risk of inconsistent faculty scoring and unclear student performance expectations.	**Not Yet Rated**	

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Step 2: Findings Database

Required for all Site Visits

- Consistency across report writing
- Detailed actions to achieve met for program

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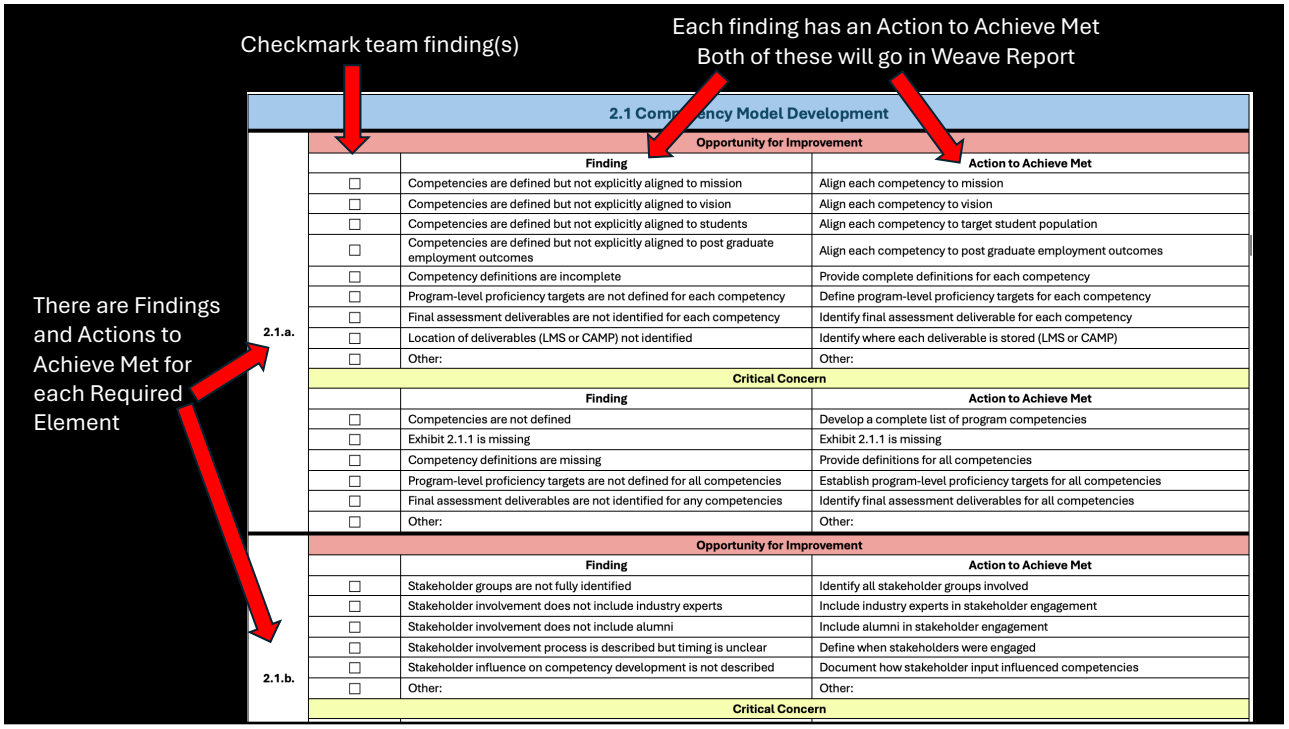

2.1 Competency Model Development

2.1.a.

	Finding	Action to Achieve Met
Opportunity for Improvement		
☐	Competencies are defined but not explicitly aligned to mission	Align each competency to mission
☐	Competencies are defined but not explicitly aligned to vision	Align each competency to vision
☐	Competencies are defined but not explicitly aligned to students	Align each competency to target student population
☐	Competencies are defined but not explicitly aligned to post graduate employment outcomes	Align each competency to post graduate employment outcomes
☐	Competency definitions are incomplete	Provide complete definitions for each competency
☐	Program-level proficiency targets are not defined for each competency	Define program-level proficiency targets for each competency
☐	Final assessment deliverables are not identified for each competency	Identify final assessment deliverable for each competency
☐	Location of deliverables (LMS or CAMP) not identified	Identify where each deliverable is stored (LMS or CAMP)
☐	Other:	Other:
Critical Concern		
	Finding	**Action to Achieve Met**
☐	Competencies are not defined	Develop a complete list of program competencies
☐	Exhibit 2.1.1 is missing	Exhibit 2.1.1 is missing
☐	Competency definitions are missing	Provide definitions for all competencies
☐	Program-level proficiency targets are not defined for all competencies	Establish program-level proficiency targets for all competencies
☐	Final assessment deliverables are not identified for any competencies	Identify final assessment deliverables for all competencies
☐	Other:	Other:

2.1.b.

	Finding	Action to Achieve Met
Opportunity for Improvement		
☐	Stakeholder groups are not fully identified	Identify all stakeholder groups involved
☐	Stakeholder involvement does not include industry experts	Include industry experts in stakeholder engagement
☐	Stakeholder involvement does not include alumni	Include alumni in stakeholder engagement
☐	Stakeholder involvement process is described but timing is unclear	Define when stakeholders were engaged
☐	Stakeholder influence on competency development is not described	Document how stakeholder input influenced competencies
☐	Other:	Other:
Critical Concern		

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Step 3: Read-Out Report

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Required for all Site Visits

- Centralized location that contains information presented to program director at end of site visit
- Ratings, Findings, Strengths
- Next steps of the Accreditation Process

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Read-Out Report

Instructions:

1. Select criterion rating from the dropdown box
2. Enter the team's findings as selected in the Findings Database
3. Enter the strength if the site visit team identified one

Standard 2:

Competency Model

2.1 Competency Model Development	
The program will develop, adopt, or adapt and implement a competency model that is industry relevant and prepares students for post graduate employment outcomes.	
Criterion Rating:	Not Yet Rated
Findings:	• • •
Strength:	
2.2 Competency Model Effectiveness	
The program measures student competency attainment at the program level.	
Criterion Rating:	Not Yet Rated
Findings:	• • •
Strength:	

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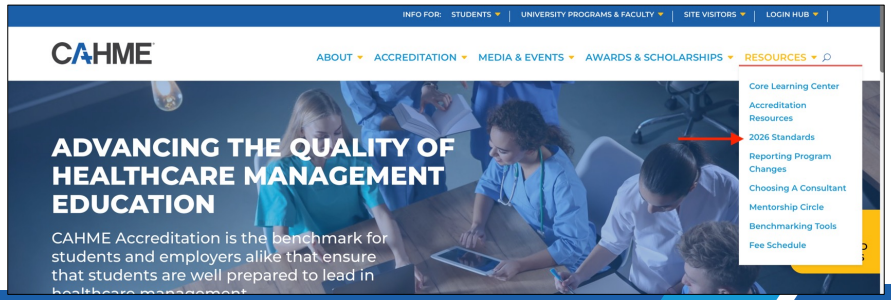
2026 STANDARDS HUB

New 2026 CAHME Standards Hub: https://cahme.org/2026-standards/

- Standards
- Exhibits
- Tools
- Timeline
- Candidacy Essential Standards
- **2026 Standards Basics Training Recordings and Slide deck**



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2026 STANDARDS HUB

Prepare for the 2026 Standards

The 2026 CAHME Standards emphasize practices that are most effective when implemented over time. Regardless of your self-study year, these are four important areas every program should begin planning for and incorporating into their ongoing operations.

- Required Program Topics — Learn More
- Andragogical Development — Learn More
- Sustainability Plan — Learn More
- Process Improvement Cycle (PIC) Tool — Learn More
- Integrative Final Assessment — Learn More

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Program Changes

https://cahme.org/programchanges/

Programs are required to notify CAHME of any of the following program changes:

Change in Leadership
(ex. program director, department chair)

Submission Type: Email

Program Variants or Degrees

- Addition of new program variants or degrees
- Change to existing track or degree: curriculum change, degree, competency model, primary method of delivery (in-person, online, etc), change to credit hours

Submission Type: Program Change Form

Other Changes
(ex. merger, withdrawal, etc.)

Submission Type: Formal Letter via Email

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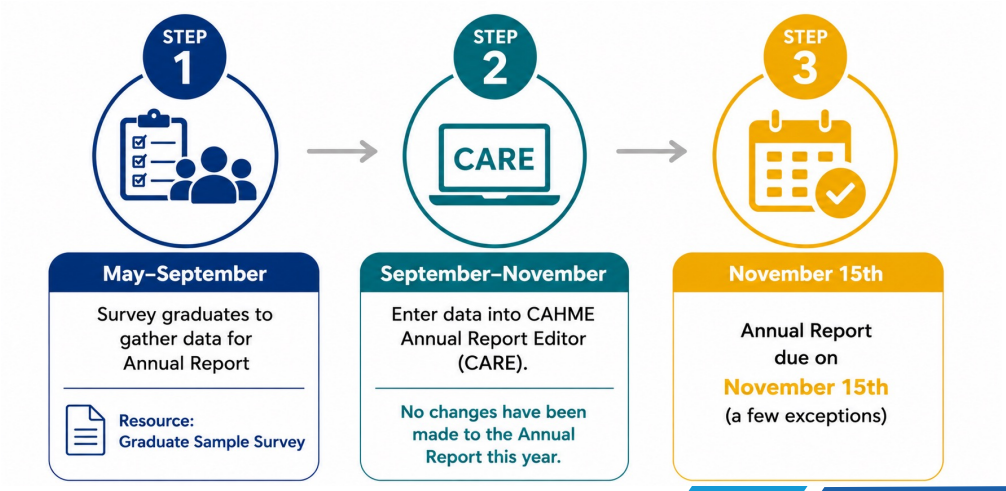
Annual Report

https://cahme.org/annual-report-process/



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Core Learning Center and Mentorship Circle Updates

Melissa Cross
AVP of Education

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New Core Learning Center Model

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More Resources. Greater Value. Stronger Accreditation Outcomes.

ENHANCED VALUE FOR PROGRAMS

Program Feedback and CQI
New focus, more resources to support continuous quality improvement.

New Price Model
FY subscription (July 1 – June 30)
- $1,200 – 1 Year Access
- $2,400 – 2 Year Access
- $3,500 – 3 Year Access

Program Director +1 Flex Virtual Attendee
Additional flexibility to engage your team.

TAILORED RESOURCES TO SUPPORT YOUR SUCCESS

4 Asynchronous Learning Modules

Guarantee of 7 Virtual Education Sessions per Year
- Covers Standards 1–5
- Site Visit Preparation
- Utilizing AI in the Accreditation Process
- Learning Labs

Enhanced Exhibit Examples

4-Year Cycle Program:
CQI and self-study preparation focus

Live Document/Evidence Reviews

Note: Bootcamp is no longer included as part of the CLC subscription

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Interested in presenting?
Visit: https://cahmevolunteers.secure-platform.com:443/a

Want access to these upcoming trainings? Send an email to mcross@cahme.org to learn more!

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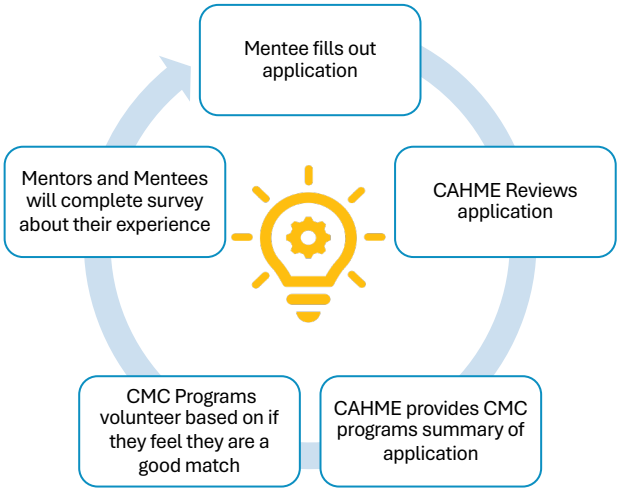
CAHME Mentorship Circle

- 32 Mentor Programs
- 8 current mentor/mentee partnerships

- New/renewal application via Open Water (by Fall)
- Looking for more mentor programs!

- Updated Matching Process



https://cahme.org/accreditation/cahme-mentorship-circle/

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2026 Upcoming Events

See CAHME Events page for dates

CLC EVENTS

- **2026 Standards Q&A** — *July 29, 2026*
- **Utilizing AI in Accreditation** — *August 20, 2026*
- **Site Visit Prep and Readiness** — *September 18, 2026*

PROGRAM READINESS

- **5 CPRs (Candidacy)**
- *See CAHME Events page for dates*

FREE EDUCATION SESSIONS

- **Sustainability** — *October 1, 2026*
- **Direct and Indirect Assessment with Peregrine Global Services** — *November 6, 2026*

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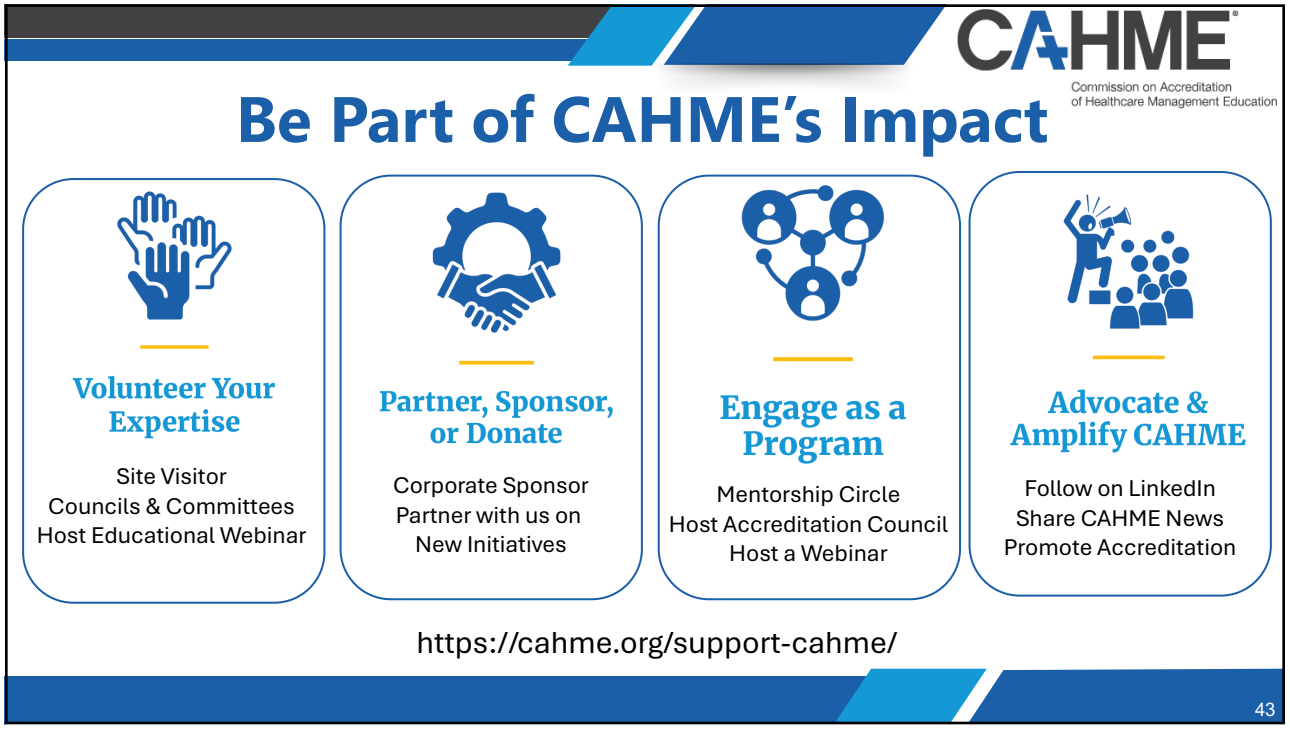
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Q & A

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