2019 Undergraduate Certification Self-Study (2017 Criteria Revisions)

Response ID:65 Data

1. INTRODUCTION AND INSTRUCTIONS

Congratulations! Your program meets the Eligibility Requirements and you are now ready to begin the Self-Study. This page provides you the necessary information needed to complete and submit your Self-Study.

This Self-Study Guide and all documentation is based upon the self-study year, the most recently completed academic year. This may be supplemented with more recent data to add to the understanding of the program and its future direction. Evidence should focus exclusively on information related to the specific program for which certification is sought.

The next page in this survey allows navigation by criterion number as opposed to simply using the Prev and Next buttons to move between criterion pages. The navigation page will also allow the respondent to invite others to assist in the completion of the self-study.

Please do not hesitate to contact at any time if you have questions or concerns about your Self-Study.

2. ABOUT THE PROGRAM

University Name

East Carolina University

School/College Name

College of Allied Health Sciences

Department Name

Health Services and Information Management

Program Name

Health Services Management

Name (with suffix and degrees) of Program Leader

Robert R. Kulesher, PhD, MHA, FACHE

Program Leader Email

kulesherr@ecu.edu

Certification Status

Re-Certification

Start Date of Self-Study Year

July 1, 2017

3. Self Study Page Navigator

4. PROGRAM STRUCTURE, FACULTY, AND RESOURCES (Criterion 1)

Criterion 1. The program will have statements of mission, vision, and values that are reflected in the program's focus, structure, curriculum, faculty, and student composition
Considerations:

Where graduate and undergraduate programs exist in the same unit, the undergraduate program must have its own mission statement.

1a. Please enter below the program's Mission Statement

Our mission is to empower our students to gain competencies and professional preparation to manage and lead in the changing healthcare environment.

1b. Please enter below the program's Vision Statement:

Our vision is to be the preferred source of new healthcare management talent for the providers of health services in Eastern North Carolina, the state of North Carolina, and beyond.

1c. Please enter below the program's Values Statement:

Our values:
Professionalism - Promote ethical standards and respect the roles and dignity of the health professionals with whom we work;
Collaboration - Recognize the value of, and understand our responsibility to nurture internal and external partnerships;
Discovery and Innovation - Seek new evidence to improve healthcare management;
Dedication - Participate and support the profession through networking and professional development.
Excellence - Strive to improve all aspects of academic performance to develop tomorrow's healthcare leaders.

5. PROGRAM STRUCTURE, FACULTY, AND RESOURCES (Criterion 2)

Criterion 2. The Program will have established goals, objectives, and outcomes that are action-based, observable, and measurable.

2a. List below the Program Goals (provide as much narrative description as you would like):

Our mission is to empower our students to gain competencies and professional preparation to manage and lead in the changing healthcare environment. To do so, we have formulated the following program goals:

A. Build HSM Program faculty who demonstrate excellence in teaching, are actively involved in research and professional development, as well as service to the University and the community to enhance the educational program;

B. Offer a curriculum that is designed to help students master competencies needed to succeed in the changing healthcare environment: knowledge of the healthcare environment, business skills and knowledge, leadership and teamwork, communication and relationship management, and professionalism;

C. Develop new strategies and innovative approaches to delivering courses in both face to face and virtual formats;

D. Educate and prepare students for employment with the understanding of the need for the mastery of tools for population health management, quality assessment, health data management, and research while respecting the importance of ethical individualized care for each patient;

E. Prepare students for graduate study;

F. Prepare students to become lifelong learners;

G. Facilitate student opportunities to participate in practicum in healthcare administration; and

H. Facilitate student opportunities to participate in a service learning experience in the community.

2b. List below the Program Objectives (as distinct from student learning objectives) (provide as much narrative description as you would like):

A. Program Objective: Recruit tenure-track faculty who have the potential to conduct research and develop curriculum that address population health, marketing, reimbursement, and the regulatory environment of healthcare delivery.

B. Program Objective: Develop faculty competency in the technological aspects of curriculum delivery both face-to-face and distance education modalities.

C. Program Objective: Develop the membership of the Advisory Board to reflect the contemporary skills and leadership styles that will be required by our program graduates.

D. Program Objective: Provide opportunities for representatives from graduate programs to meet with undergraduate students.

E. Program Objective: Emphasize the need for student to become lifelong learners by demonstrating that healthcare management is a dynamic applied discipline with ever changing regulations, technology, and industry trends. To be successful, healthcare managers need to be proactive in keeping themselves current on the trends and future paths of the industry.

F. Program Objective: Expand course assignments to better prepare students for their internship.

G. Program Objective: Engage students in service opportunities through course assignment and student organization participation in health fairs.

2c. List below the Program Outcomes (as distinct from student learning outcomes) (provide as much narrative description as you would like):

• Established HSMA 4080 Economics for Health Care Managers
• Established HSMA 4056 Marketing for Health Care Organizations
• Reconfigured Advisory Board to include more program alumni and a broader range of healthcare management practitioners.
• Established 5 competency areas with delineated Entrustable Professional Activities (EPAs) modeled after the Association of American Medical Colleges (AAMC) for undergraduate medical education which were then reviewed and adapted to undergraduate health service management education and subsequently approved by the program's advisory board and faculty.
• Implemented Situation-Background-Assessment-Recommendation (SBAR) report writing technique that promotes critical thinking in class assignments.

6. PROGRAM STRUCTURE, FACULTY, AND RESOURCES (Criterion 3)

Criterion 3. The program must have a designated leader (Chair, Director, Coordinator, etc.) who is responsible for the organization, administration, continuous program review, planning, development, and general effectiveness of the program. The program director must be given adequate release time to devote to curriculum development and evaluation, counseling of students, program management and administrative duties within the institution

3a. Describe the authority and responsibility of the Program Director.

The Program Director is responsible to the Chair of the Department of Health Services and Information Management. The Program Director is responsible for recruiting and retaining students, teaching courses, reviewing the curriculum, assessing outcomes of the educational program, and obtaining and maintaining the program's certification as appropriate. The Program Director is expected to conduct research and to provide service as appropriate to the rank and role.

3b. Describe release time or other support for administrative duties granted to the Program Director.

During the first half of the self-study year, the program director position was held by Dr. Leigh Cellucci, who received a course reduction from teaching one course. During the second half of the self-study year, the program director position was held by Dr. Robert Kulesher. In lieu of course reduction, Dr. Kulesher's expectation for conducting scholarly research was reduced. The program director receives assistance from two department administrative associates, an undergraduate student assistant, and a dedicated college supported academic adviser for developing applicants for admission to the program and meeting the curriculum needs of students in the program.

7. PROGRAM STRUCTURE, FACULTY, AND RESOURCES (Criterion 4)

Criterion 4. Program Directors must demonstrate continuing professional development related to their role and responsibilities, and the healthcare management profession.

4. Describe how the Program Director pursues continuing professional development and how these endeavors relate to his/her role and responsibilities as Program Director, as well as to the profession of healthcare management.

The program director pursues continuing professional development through membership in AUPHA, attendance at its annual meetings, participation on program certification review panels, and participation in networks and forums. Additionally, the director participates in professional development through the American College of Healthcare Executives (ACHE), the North Carolina Chapter of the Healthcare Financial Management Association (HFMA), and the American Society of Healthcare Human Resources Administrator (ASHHRS) a professional membership group of the American Hospital Association (AHA). Thorough these professional development programs and professional memberships the program director is better informed on the current and future challenges in health services administration and can initiate changes in courses and the curriculum.

8. PROGRAM STRUCTURE, FACULTY, AND RESOURCES (Criterion 5)

Criterion 5. Teaching loads and student/faculty ratios must be consistent with the program's mission, goals and objectives as well as the college/university's standards for promotion and tenure.

5a. For each full time faculty member for whom you have submitted a CV, please indicate their teaching load in the following format:

Academic Calendar = Semester
Smith, John, Teaching Load = 3:4
Brown, Janet, Teaching Load = 4:2

If Summer Semester is applicable
Smith, John, Teaching Load = 3:4:2
Brown, Janet, Teaching Load = 4:2:1

Asagbra, Elijah, Teaching Load = 2:2
Bell, Paul, Teaching Load = 3:2:1
Campbell, Robert, Teaching Load = 3:2:4
Cellucci, Leigh, Teaching Load = 4:2
Hardy, Katelyn, Teaching Load = 0:1
Jacobs, Molly, Teaching Load = 2:2
Kulesher, Robert, Teaching Load = 3:4:2
Mose, Jason, Teaching Load = 4:0:1
Rhodes, Melissa, Teaching Load = 3:2:1
Sasmett. Bonita, Teaching Load = 3:2
Zeng, Xiaoming, Teaching Load = 4:4:2

5a. Upload the section of the faculty handbook that speaks to teaching load and the criteria the program/university uses in promotion and tenure evaluation, and post-tenure review. If not available as a file upload, cut and paste the relevant content

into the box below.

ECU_Faculty_Workload_Policy.docx

5b. If you were unable to upload a file above, please cut and paste the relevant policy regarding teaching load and criteria for promotion, tenure, and post-tenure review here.

Uploaded to 5a.

5c. Provide any additional information regarding teaching loads and/or promotion and tenure (i.e. differences between teaching loads and those required for promotion and tenure)

Appointment, Tenure, Promotion, and Advancement Polices and Procedures and Performance Review of Tenured Faculty (ECU Faculty Manual, Part IX): http://www.ecu.edu/cs-acad/fsonline/customcf/currentfacultymanual/part9.pdf

9. PROGRAM STRUCTURE, FACULTY, AND RESOURCES (Criterion 6)

Criterion 6. Full-time faculty must have primary roles in the governance and organization of the program including academic planning, curriculum development and review, advising, and program improvement.

6a. Describe the role of the faculty in the organization and governance of the program.

Faculty meet monthly except for July and August to discuss program and curriculum topics. The department's annual retreat is an all-day session occurring right after the spring semester to review program mission, vision, and goals. Faculty attend the program's advisory board meetings to solicit input from the advisory board members on matters of student achievement, internship placement, and a review of the program's mission, vision, and goals.

6b. Describe the role of the faculty in recruitment, evaluation and promotion decisions.

Search committees for faculty positions are chaired by one of the full-time faculty in the department. All full-time faculty members are offered the opportunity to serve on each search committee. Search committee members rate applicants on their applicable fit to the position description. Finalists are recommended to the department chair and dean of the college. The offer of employment is made by the department chair.

Candidates for promotion and tenure are evaluated by the department's promotion and tenure committees consisting of at least three tenured faculty members from the department. Recommendations from these promotion and tenure committee are sent to the department char and reviewed by the college dean for final recommendation to the Vice Chancellor for the Health Sciences Division of the university. During the self-study year the department had sufficient number of tenured faculty to staff tenure and promotion committees.

6c. Describe how the full-time faculty meets as a group to discuss program governance, organization and other administrative issues.

Administrative issues of governance and organization are discussed as needed at the monthly department meetings and more in-depth at the department's annual retreat where the mission, vision, goals, objectives, and competencies of the program are evaluated.

Complete the College/University Committee worksheet and then upload below.

College_Univeristy_Committee_Worksheet-ECU.xlsx

10. PROGRAM STRUCTURE, FACULTY, AND RESOURCES (Criterion 7)

Criterion 7. Full-time employed faculty must have demonstrated scholarly and/or professional activity in healthcare management / administration consistent with the mission of the program and scholarship expectations of the University.

7a. Describe program or university policies regarding full-time faculty performance requirements with respect to teaching

performance, scholarly activities and service to the university, profession and community.

Department of Health Services and Information Management

Promotion Guidelines for Tenure and Tenure Track Faculty

The guidelines for tenure and promotion of the Department of Health Services and Information Management (HSIM) are based on Part IX of the ECU Faculty Manual. Part IX of the ECU Faculty Manual supersedes the HSIM tenure and promotion guidelines.

In the review process, attention is paid to productivity over the entire academic career with emphasis given to accomplishments since the date of hire, tenure or last promotion (whichever is more recent).

Criteria stated for all three categories (teaching, research, and service) are entry requirements for each rank.

The criteria reflect the concept that the Assistant Professor is the entry level position during which time the faculty member is gaining experience and mastery in teaching, building service experience, and developing a research scholarship agenda. Promotion to Associate Professor is essentially what is required for tenure, although the promotion is not necessarily granted with tenure. Competence in all three areas is required, although there may be one area that is stronger than another. For teaching the faculty member must demonstrate competence in the courses he or she is assigned to develop and teach. Research focuses on establishing an area of expertise, and has resulted in a publication record. Service should be varied and across several areas.

Promotion to Professor is recommended when the individual has demonstrated significant contributions to the Department, College, University, and profession - in all three areas as described in the guidelines.

In accordance with ECU Faculty Manual, Part IX, all faculty members must abide by revised criteria once approved by the Department's Personnel Committee.

Teaching Guidelines

Assistant Professor is the entry-level position with the expectation of having completed doctoral courses (would only qualify to be hired with the expectation the terminal degree would be completed within one year of hire). The criteria listed under Assistant Professor are the minimum criteria to be used when hiring. Additional experience will be an advantage for the candidate.

Documentation of Teaching Effectiveness:

Documentation of teaching effectiveness and of meeting the criteria specified may include any of the following : student assessment results, peer reviews (e.g. both internal and external), annual teaching evaluation, student comments from student assessment forms, curriculum development, participant evaluations from conference/workshop presentations and/or evidence demonstrated through student work.

Research Guidelines

Scholarship is identified as research projects that produce and advance health informatics, health information management, and/or health services management in relation to teaching, learning, discipline, and/or professional knowledge.

Scholarship products may include:

• peer-reviewed professional publications
• grant applications and awards
• peer-reviewed professional presentations
• community presentations
• pedagogical materials
• policy development
• action research conducted in a course which may include any of the following:
• record of instructional scholarship
• instrument development (e.g. software, evaluation instrument, etc.)
• solving program problems
• software development

These products may be disseminated by means of reports, curriculum materials, and/or faculty development workshops.

Faculty members who received startup funding during their probationary period need to submit external grant proposal(s) as evidence of research activity. Refereed journals are those scholarly publications that critically review submitted manuscripts and have an editorial board that oversees the quality of the printed material and may include:

• original research including qualitative and quantitative studies and mixed designs
• critical reviews of the literature
• articles of a theoretical or philosophical orientation

• on-line publications

When manuscript authorship is in alphabetical order without indicating equality of authorship, first authorship will be determined by evidence of who was the corresponding author. When published with a student as first author and faculty member as second author, the manuscript will be considered first authorship for the faculty member.

Documentation of Research Effectiveness:

Documentation for publication and presentation may include any of the following:

• letter or electronic correspondence of acceptance (publications and/or presentation at a conference)

• copy of conference program or proceedings

• copy of article

Service Guidelines

Service to the Department, College of Allied Health Sciences, East Carolina University, the professional community and the local community are all valued.

Documentation of Service Effectiveness:

Documentation of the effectiveness of service activities may include any of the following: letters or other forms of written communication from committee chairs, professional peers, and supervisors or project leaders.

Department of Health Services and Information Management

Advancement Guidelines for Fixed Term Faculty

Clinical faculty members, at any rank, are fixed-term faculty members and must adhere to the requirements of this type of appointment. Required criteria for all three categories (teaching, research, and service) have identified entry requirements for each level of rank. Criteria are sequential in that all requisites in prior ranks must be met along with the requirements for entry at the desired rank. Fixed-term appointments are without permanent tenure and do not entitle the faculty member to consideration for reappointment or conferral of permanent tenure. Please see ECU Faculty Manual, Part IX, regarding contract terms for fixed-term positions. Fixed-term faculty seeking a new appointment must provide the unit administrator a written request "no earlier than 180 calendar days nor later than 90 calendar days before the current term expires." All fixed-term faculty members are evaluated annually and are required to submit a portfolio to the Personnel Committee prior to Personnel Committee making a recommendation on a new appointment. Productivity of fixed-term faculty members will be evaluated based on years in the current position.

Fixed-term clinical faculty members participate as voting members in department matters related to the academic program except in matters relative to reappointment, tenure, or promotion of tenured and tenure-track faculty. Therefore, they cannot serve on Promotion and Tenure Committees. They may also serve on college and university committees in accordance with membership policies established by those entities. Requirements for clinical faculty positions are described in the text below. Clinical Assistant Professor is the anticipated entry-level non-tenure track position with the expectation of having completed a master's level degree. This individual must have training and experience in an area of specialization and have demonstrated expertise in clinical practice and/or teaching in the field.

Clinical Associate Professor must hold the qualifications of the previous title. In addition, this individual must have extensive successful experience in clinical or professional practice in health services management, health information management, or health informatics, as well as directing others in clinical activities in the field. This individual must also demonstrate superior teaching ability. A faculty member cannot advance beyond Clinical Assistant Professor without having a doctoral degree.

Clinical Professor must hold the qualifications of the previous title and demonstrate a degree of sustained excellence in clinical practice and an outstanding teaching reputation among colleagues.

Clinical Assistant Professor

Clinical Assistant Professor is often the initial rank of fixed-term faculty hired into the department. The faculty person in this rank should provide evidence of:

Teaching

• Master's degree and experience in health services or health information management

• Evidence of significant experience related to the clinical work of the position.

Research/Scholarship

• Research/scholarship contributions are not required for this appointment

• Desire and ability to supervise student in clinical or practice projects or other student scholarship.

Service

• Evidence of participation in state and/or national professional organizations.

• Additionally, an individual may choose to participate in one or more of the following:

o Professional committees/task group/ad hoc committee at community, work, or professional groups

o Participation in in-service training and/or community education

Advancement from Clinical Assistant Professor to Clinical Associate Professor

Clinical faculty members applying for advancement from assistant to associate professor are expected to demonstrate a consistent record of the following teaching, scholarship and service.

Teaching

• Earned doctoral degree

• Evidence of contributing effectively and significantly to the department's educational mission through excellence in teaching, curriculum development, support of students' capstone projects and/or other assigned teaching-related responsibilities. This may be documented through teaching evaluations; peer observations; contributions to curriculum development and enhancement; contributions to students' success through advising; teaching awards, and/or other forms of recognition.

Research/Scholarship

• Evidence of involvement in scholarship by collaboration with others in research and scholarly efforts, most commonly as part of a team with tenured/tenure track faculty, graduate students, clinical faculty and/or clinicians. The evidence may be presented as documents that include: practice guidelines, brief articles targeting clinicians and practice related-publications, chapters, and/or practice reports as well as presentations at State/national conferences on their scholarship and/or teaching-related topic(s).

Service

• Provide service to the profession at the local, state, and/or national level, which includes serving on committees, initiatives, practice groups, or other forms of service that support the service mission of the department and advancement of the disciplines of health services and information management.

• Demonstrate good university citizenship through participation and leadership in departmental and college committees and initiatives.

• Administrative roles to help fulfill the mission of the department, if appropriate. If administrative roles are assigned, faculty members are expected to effectively perform assigned administrative/leadership responsibilities.

Because each clinical faculty member's responsibilities are unique, there are no specified accomplishments or specific numeric values expected in each area. Rather, we expect clinical faculty to achieve a balance between these areas of major responsibility. It is critical to the mission of the department that clinical faculty members widely apply their talents and efforts to a range of departmental activities. Advancement to Clinical Associate Professor recognizes that the faculty member has achieved excellence in each area of contribution to the department.

Advancement from Clinical Associate Professor to Clinical Full Professor

Clinical faculty members applying for advancement from associate to full professor are expected to demonstrate a consistent record of the following:

Teaching

• Effective and significant contributions to the department's educational mission through excellence in teaching, curriculum development, support students' capstone projects and/or other assigned teaching-related responsibilities.

• Excellence in teaching as documented through teaching evaluations; peer observations; contributions to curriculum development and enhancement; contributions to students' success through advising; teaching awards, and/or other forms of recognition.

• Fulfill departmental leadership roles (e.g., Chair of Curriculum Development, Program Director) and/or a Teaching Scholarship activity or grant.

• Assume leadership responsibilities in curriculum development, course design, and particularly mentoring junior faculty in the area of teaching.

Research/Scholarship

• Documented evidence of involvement in scholarship by collaboration with others in research and scholarly efforts with other tenured/tenure track faculty, doctoral students, clinical faculty and/or clinicians. At this level, the faculty member should be an important collaborator in clinical or scholarly research.

• Evidence of consistent presentations at state/national conferences on their scholarship and/or teaching-related topic(s).

• Demonstrate an area of focus in teaching or practice that shows significant effort in publication and presentations.
Service
• Provide service to the profession at the local, state, and/or national level, which include serving on committees, initiatives, practice groups, or other forms of service that support the service mission of the department and advancement of the disciplines of health services and information management.
• Demonstrate good university citizenship through participation and leadership in departmental and college committees and initiatives.
• Administrative roles to help fulfill the mission of the department, if appropriate. If administrative roles are assigned, faculty members are expected to effectively perform assigned administrative/leadership responsibilities.
• Demonstrate an area of significant contribution at the departmental level, professional level, or college/university level. Because each clinical faculty member's responsibilities are unique, there are no specified accomplishments or specific numeric values expected in each area. Rather, we expect clinical faculty to achieve a balance among these areas of major responsibility. It is critical to the mission of the department that clinical faculty widely apply their talents and efforts to a range of departmental activities. Advancement to Clinical Full Professor recognizes that the faculty member has achieved excellence in each area of contribution to the department and has made contributions that impact the profession.

7b. Describe the procedures by which faculty are relieved from duties to pursue research, consultation and attendance at professional meetings and conferences

Release time for research and consultation activities is mutually determined and agreed upon among department chair and faculty. Release time can be obtained by receiving funding through college, university or outside sources. Attendance at professional meetings and conferences such as AUPHA, ACHE, and AOE is encouraged and financially supported by the department, especially if the faculty have a paper or poster to present, hold office in the meeting's association, or serve on a panel for certification. All faculty members have the opportunity to attend at least one professional association meeting annually with support from state funds.

Complete the Faculty Scholarship & Faculty Service worksheets and upload below.

Faculty_Scholarship_Worksheet-ECU.xlsx
Faculty_Service_Worksheet-ECU.xlsx

7c. If there is additional narrative that you would like to provide for greater detail to this information, please provide that below.

N/A

11. PROGRAM STRUCTURE, FACULTY, AND RESOURCES (Criterion 8)

Criterion 8. If the program uses adjunct faculty, the program must have established procedures for selection, orientation, and evaluation of practitioners and must demonstrate how it involves adjunct faculty in the academic program.

Adjunct faculty are those faculty that are hired ad hoc per semester. Part-time faculty are those faculty that have Full-time appointments elsewhere in the University.

8a. Describe the procedures for selecting adjunct faculty for inclusion in the program

Limited number of adjunct faculty members are employed to teach certain courses in the curriculum. During the self-study year 3 courses in the core HSM curriculum were taught by adjunct faculty members:
• HSMA 3030 (two online sections only) Written Communication and Documentation in Health Care
• HSMA 3020 (one campus and one online sections) Health Care Payment System
• HSMA 4065 (one online section) Management of Health Care Operations and Patient Flow

In selecting adjunct faculty members for the health services management program, the Department of Health Services and Information Management has two primary considerations: academic credentials and professional experience, including specialty licensure or certification.

First, adjunct faculty members' academic credentials must meet the standards of the Southern Association of Colleges and Schools Commission (SACSCOC). Their academic degrees and their work experiences must be in or related to the teaching field. Faculty may also receive alternative certification based upon on their working experiences, licenses or certifications, honors and awards, publications and other related evidences. ECU has developed a set of standards, Faculty Credentials Guidelines, to certify adjunct faculty members under this equivalent alternative credentialing.

Second, the Department seeks faculty members who are experienced professionals in health care organizations. For example, the adjunct faculty member who taught HSMA 4065 Management of Healthcare Operations and Patient Flow has a PhD degree in industrial engineering and currently is a project manager in Vidant Health System. The Department considers specialty licensures or certifications. For example, the two adjunct faculty members who taught HSMA 3020 Health Care Payment System, both have the RHIA credential that qualifies them to teach the course.

To apply for the adjunct position, each adjunct faculty must submit their current Curriculum Vitae, two letters of reference and official transcripts. The Department Chair and Personnel Committee will review the application materials and determine whether to offer the position. A Certification of Credentials and Qualifications for a Faculty Appointment form must be filled out and signed by the Chair. The Dean of the College of Allied Health Sciences and the Director of Human Resources at the Division of Health Sciences must review and approve the form before a contract is prepared for the appointment.

8b. Describe the procedures for evaluating the performance of adjunct faculty

Adjunct faculty members usually only teach one course per academic year. Surveys of Student Opinion of Instruction (SSOI) are the primary metrics used to evaluate adjunct faculty members. The department chair reviews the SSOI scores of each adjunct faculty member at the end of academic year. Unsolicited student feedback about teaching performance may be received during the academic year as well. Both types of information will be used to evaluate the teaching performance of an adjunct faculty member. The SSOI scores of the Department's adjunct faculty members met or exceeded university means, and were not significantly different from the SOIS scores of the full time faculty in the department during the self-study year. Please note that adjunct faculty members are not required to conduct research or service in the department, so no full evaluations are conducted on them.

8c. Describe mechanisms for orienting or preparing adjunct faculty to teach in the program.

A checklist is used to orient faculty members to the resources in the department for teaching. Information provided to the adjunct faculty during the on-boarding process include contact information for College Instructional Technologist, telephone numbers and web access to computer support, templates for syllabi and academic calendars, instructions on accessing ECU information portal, information on student opinion of instruction and course texts, information to Banner (ECU's Enterprise Resource Management program), and severe weather policies. Department procedures such as proctoring are also shared with the adjunct faculty members.

In addition, full-time faculty members meet with adjuncts when the adjuncts teach their course for the first time. They will go over the syllabus and answer questions that the adjunct faculty members may have. They will also provide mentoring support to the adjunct faculty throughout the semester. Please note all adjuncts in 2017-2018 have already taught the same class at least once. Department chair serves as the liaison between the department and the adjunct faculty if any questions arise during their teaching.

8d. Describe how adjunct faculty are integrated into program activities

All adjunct faculty members receive ECU e-mail accounts. University alerts and information are distributed via e-mail to all e-mail accounts. Department chair notifies adjunct faculty of important policies and announcements from the University, College, and Department. The Department also invites adjunct faculty members to advisory board meetings and student orientation. All adjunct faculty members are invited to holiday celebrations. Finally, adjunct status is associated with access to library services and eligibility to purchase tickets to inter-collegiate athletic, cultural, and entertainment events.

12. PROGRAM STRUCTURE, FACULTY, AND RESOURCES (Criterion 9)

Criterion 9. Given the mission & goals of the program, the program must demonstrate the adequacy of the financial base.

9a. Describe the financial support base for the program, including the procedures for determining budgetary allocation to the program. If the program coexists with a graduate program or other degree programs within the same academic budgetary unit, how are resources allocated across the programs and managed?

Both the department and the HSM program are well-supported. As part of the UNC System, ECU receives funds from state appropriations. The funds ECU received from the state are primarily based on enrollment growth. The budgeting process is primarily managed by the Dean of the College of Allied Health Sciences (CAHS) and his staff in conjunction with the Department Chairs.

Funds are allocated during the summer with the CAHS budget typically finalized during August of each fiscal year. The bases for the allocation from the College are (a) historical allocation and (b) number of full-time faculty members. Departments can submit additional one time and recurring budget items to the Health Sciences Division during summer through the Dean's office. For example, during summer 2018, a request for additional funds to support faculty travel to AUPHA was submitted and approved by the Health Sciences Division.

The personnel budget for the entire department of 13 faculty members and two office support associates (1.5 FTE) in 2017-2018 was $xx. The budget cycle for CAHS follows:

• Summer: Budget preparation
• August: CAHS budget finalized
• March: Budget reallocation to ensure fiscal year spend down
• Mid-June Fiscal year closeout

The HSM Program coexists with other programs and certificates -- BS in Health Information Management, MS in Health Informatics and Information Management program, and post-baccalaureate certificates in Health Care Administration, Health Informatics and Health Information Management.

The program budget is integrated into the department budget. The Department Chair informs the HSM Program Director whether budget requests submitted to CAHS during the summer planning cycle have been approved. All the budget funds are allocated from university sources to the colleges. The total departmental budget for academic year 2017-2018 was $xx. Salaries dominate the budget, accounting for 94.8% of the total budget. Because faculty may teach across the discipline, Department Chair allocates funds equally to all faculty members for professional development. Each faculty member has an average pool of $xxx from which to fund travel, specialized subscriptions, professional memberships, research materials, etc. The rest of the operating funds are used for centralized services and resources (paper, supplies, networked printer supplies etc.). The professional organization annual membership fees and reaccreditation/recertification fees are priority and paid from the department fund.

Specific HSM Program budgeted items in 2017-2018 include the following:
• AUPHA Annual Membership Fee:$xx
• Fee for Recertification: $xx
• HSM Program Director Stipend $xx
• Stipends for the HSM Internship Director: $xx

9b. If available, upload the program or department budget for the self-study year.

13. PROGRAM STRUCTURE, FACULTY, AND RESOURCES (Criterion 10)

Criterion 10. Given the mission & goals of the program, the program must demonstrate the adequacy of the facilities and equipment.

10. Describe physical facilities available to the program, including, such things as office space, dedicated classrooms, the availability of information technology in offices and classrooms, and computing facilities

The department has 3645 square feet of dedicated building space that includes an office suite of 2875 square feet and a dedicated computer lab/teaching space of 770 square feet, containing 26 workstations equipped with HSIM specific software (see table below) and other standard computer lab software. A computer teaching lab management system called LANSchool was also installed on all workstations so instructors could monitor students' activities on their workstations during class with an option to block activities irrelevant to class content if needed. A networked printer is also installed in the teaching computer lab. The following applications are installed on each of the 26 computers in the teaching computer lab:

• ArcGIS 10.4.1
• Citrix Receiver 4.4 (for running Virtual Computing Lab applications)
• IBM SPSS Statistics 22
• LabStats and LabStatsGo 5.2
• Microsoft Office Professional Plus 2013
• Microsoft SQL Server 2008 R2
• NVivo 11
• Read and Write 11
• Respondus LockDown Browser 2
• SAS 9.4
• Simio 9

Distance education students will access the same technologies using ECU Virtual Computing Lab (VCL), a virtual Windows environment with all aforementioned software packages installed.
• Duplicated tools: Citrix, LabStatsGo
• DecisionTools Suite 7.5 – Excel analysis tool extensions (by Palisade Corporation)
o Included tools:
¬ BigPicture
¬ Evolver
¬ NeuralTools
¬ PrecisionTree
¬ @RISK
¬ StatTools
¬ TopRank
• MedModel 2016
• MedModel Professional 2014
• Simio 9
• Wireshark 2.4.3 – this is for network traffic analysis

Faculty computers are loaded with MS office applications and provide internet access. Information and Technology Services (ITCS) provides access to online environments (Blackboard, Centra, Second Life) and facilitates the download of software, including software that supports the provision of distance education (Camtasia, Snagit, Mediasite desktop recording). Most of the faculty workstations are equipped with web cameras for quick webinars. ECU has adopted WebEx for web conferences. Most of the workstations have dual monitors supporting viewing multiple windows simultaneously. Endnotes and Refworks are web-based bibliography and database managers that allows faculty to create their own personal database of citations and notes.

The department has two 55-inch high definition monitors installed in its library and research room for small group meetings of faculty and students. Document scanners are available for converting documents into digital files.

Classrooms have electrical outlets for students' laptop use. Classrooms are equipped with a variety of technology including large-scale display devices such as an LCD projector or Plasma monitor. Additionally, some classrooms may have additional

or peripheral devices such as document cameras, DVD players, and audio control systems. Many classrooms have audio/video recording capability; Mediasite records classroom lectures for later viewing by distance education students. Additionally, the entire Health Sciences Building has wireless internet access.

14. PROGRAM STRUCTURE, FACULTY, AND RESOURCES (Criterion 11)

Criterion 11. Given the mission & goals of the program, the program must demonstrate the adequacy of the both traditional and non-traditional academic and teaching resources.

11a. Describe the library facilities available to students and faculty of the program. Describe the holdings (books/periodicals) available in the library that address health administration.

The HSM Program and the HSIM Department are primarily served by the William E. Laupus Health Sciences Library at East Carolina University (ECU), and secondarily by the Joyner Academic Library located on ECU's East Campus. The William E. Laupus Health Sciences Library has assigned a librarian liaison to the department to serve our unique needs. Most of the services provided by the library are available to students, faculty and staff within the HSIM Department. Other services are restricted to faculty to ensure that students are taught information literacy skills.

Services for Students, Faculty, and Staff

Interlibrary Loan/Document Delivery: This service includes the retrieval of books and articles that are not available at ECU from other libraries. Document delivery provides the added service of delivering information materials to faculty, staff, and students who are unable to come to the library in person.
Assistance with Library Resources: The library liaison assigned to the department is available for one-on-one appointments via in-person, phone, email, or instant message. During these appointments, the librarian will assist with searching literature databases, utilizing bibliographic management software, citing references, and other information related questions.

Formal Classes: The library offers different classes to assist East Carolina University students, faculty and staff with databases, keeping up with literature, using bibliographic managers, getting started with research, etc. These classes take place in person and virtually, depending on the needs of faculty, students, or staff. Classes are available by request or library users can attend scheduled "drop in" classes.

Equipment Loan Program: Laupus Library loans out digital cameras (with video capability), laptops, iPads, web cameras, go pro cameras, projectors with stands, poster tubes, and tripods as part of their Equipment Loan Program. The loan program is available to the ECU Division of Health Sciences faculty, staff, and students.

Anatomical Models: Laupus Library has 175 anatomical models available for use in the library by students and use for lectures by faculty. This is the largest collection of anatomical models of any health sciences library in the state of North Carolina.

Grant Support: The library provides literature searches, reference citation software, as well as referrals to the Office of Sponsored Programs. The Office of Sponsored Programs provides searchable grant databases, alert services, links to agencies to find funding sources, and assistance with preparing proposals.
Physical Library: The four-story, 72,000 square foot library provides plenty of open study space. The main floor of the library contains 16 computers for student, faculty, and staff use, 31 group study rooms with flat screen monitors and whiteboards, a computer lab with over 40 computers, and historical collections. In addition, two Collaborative Resource Centers are available in the computer lab permitting students to work without disturbing others in the computer lab. These two rooms are set aside for groups to work together on projects, assignments, study sessions, etc. Each are equipped with a computer, large flat screen monitor, and a SMART board with audio.

Print Books: 36,720 unique titles
EBooks: 17,015 unique titles
Combined ebook resources with Joyner Library: 891,755 unique titles

Multimedia Services (https://itcs.ecu.edu/departments/academic-technologies/multimedia-technology-services/)
• Media production/consultation services
• VHS/DVD to digital conversion
• Video editing
• Portable Mediasite - lecture recording
• Video conferencing
• 2D/3D Interactive Animation

Electronic Access to Materials: Due to the large number of distance education classes offered at ECU, students can access electronic resources from the Laupus Library homepage. Some of the resources and services available include:
• Frequently Asked Questions
• Databases: 91 total health sciences databases including:
o ABI/Inform
o CINAHL
o Healthstar
o Medline via Ovid
o National Center for Health Statistics
o TRIP Database
• Online Help Service
o "Ask a librarian" is a service where library users have the opportunity to submit a question through email.
o "Chat with a librarian" uses instant messaging software to chat live with one of our staff.

Services Restricted to Faculty and Staff
• Perform expert/exhaustive literature searches and create auto-alerts for searches by an assigned librarian liaison
• Collection Development--Looks into purchasing materials for the library's collection
• Electronic Reserves--The library places materials online for distance education classes and assists with ensuring that materials follow copyright laws.

11b. Describe the university/college computing facilities available to students and faculty of the program.

There are 20 general purpose computer labs located throughout the ECU campus for students. Students and faculty of the HSM Program have access to the computer lab located in the health sciences division library and is open until midnight Monday through Thursday with extended hours during end of semester examination periods. Faculty and students have full access to university library resources 24 hours a day and have use of dedicated data storage on the university compute system that can be accessed remotely.

11c. Describe other academic resources available to students and faculty.

East Carolina is a constituent institution of the16 public institutions of higher education that comprises the University of North Carolina. As such the HSM program has access to all resources of these 16 institutions.

11d. Describe major linkages between the program and other academic units on campus (ie. Business, Allied Health, Public Administration, Research Centers, and Extended Learning Centers, etc.).

HSM Program faculty in the HSIM Department teach graduate courses for
• the MBA with Health Management Graduate Certificate
• the DrPH Health Policy Administration and Leadership

Graduate students from other departments may take these graduate courses as part of a concentration or as electives. The MBA is offered by the College of Business, the DrPH is offered by the Department of Public Health in the Brody School of Medicine, and students from the College of Nursing and the College of Health and Human Performance take these courses as electives or for satisfying requirements for health related concentrations. Courses taught by HSM Program faculty in these

graduate certificate programs under the COHE (Community Health prefix) accrue workload credit for the HSIM Department.

11e. If the program offers courses on-line or in a distance education format, describe the technologies involved in delivering these courses. Are additional resources provided for the creation and regular revision of online courses?

The HSM Program uses Blackboard as the primary medium for delivering courses online. Most classrooms are equipped with Mediasite software that allows distance education students to watch recordings of on-campus lectures and meetings. VoiceThread is another technology that can be used for delivering recorded lectures. Students are also able to create/upload video content via My Mediasite or Voice Thread. The College of Allied Health Sciences has one full-time Instructional Technology consultant available to help faculty develop courses for online delivery. ITCS also holds workshops about how to use the latest software applications for creating online content. Learning technologies supported by the University are listed at https://itcs.ecu.edu/services/?audience=faculty-and-staff . Adobe Captivate and Techsmith' s Camtasia are available for departments to purchase to create asynchronous tutorials that can be uploaded to the Mediasite Server https://itcs.ecu.edu/camtasia/ . Web conferencing software is available to support presentations within a virtual classroom space which allows students located in different parts of the country to communicate in real time. Currently two conferencing systems are available SABA and WebEx. Faculty using web conferencing systems can show videos and share applications from office computer desktops, and use real time text messaging and video. Web conferencing allows the faculty to hold class when it is convenient for students.
Students also have access to two virtual laboratories. The Virtual Computing Lab (VCL) maintained by ITCS provides faculty and students with portal access to software programs such as Microsoft Office Visio, statistical software and Palisades Decision Tools Suite.

Students also have access to the AHIMA Virtual Lab which provides access to an Electronic Health Record, an Encoder software program, and a Master Patient Index Program. An educational Electronic Health Record system - NeehrPerfect - was purchased by the college to support training in using Electronic Health Records.

An open source EHR system (openEMR) is also available on a central server maintained by ITCS as a platform for students to practice health information management skills. HSM students in HSMA 4010, Health Information Management, get hands on experience with an electronic medical record, through use of the OpenEMR application. OpenEMR is an ONC-ATB Ambulatory EHR 2011-2012 certified electronic health record and medical practice management application. This program features fully integrated electronic health, records, practice management, scheduling, and electronic billing. Students in the course learn how to create a patient record, develop a patient history, document an examination, schedule appointments, and order medications and laboratory tests.

ITCS typically hosts a summer orientation to Blackboard and sponsors "Quick Start to Online Teaching". ITSC training opportunities are available both face-to-face and online. All faculty members attend an annual workshop provided by the college instructional technology specialist to receive continuing education on teaching Distance Education.

11f. Describe any on-line or internet-based teaching tools that are used to complement traditional classroom-based instruction. How are faculty trained and supported in the use of these tools?

Blackboard is almost universally used as course management software by HSM faculty regardless of whether the course is taught face-to-face or via distance education. Most HSM Program instructors teach both a face-to-face and distance education section of the same class which typically results in the use of some online software to complement distance education. In addition to the software discussed in the previous section, the following technology has been used:

WebEx: an application used for web conferences. Faculty use this tool to hold virtual office hour, software demo, and one-on-one meetings with the students. Screens can be shared using WebEx.

The college instructional technology specialist introduces the tools at the annual workshop. She provides additional training when needed and helps faculty members to integrate and manage the technologies in their courses.

11g. Describe how students attending your program primarily or exclusively in an online format can access program and university resoures.

Students have full access to university library resources 24 hours a day and have use of dedicated data storage on the university compute system that can be accessed remotely. Course material is available 24 hours a day on line. Computer and other technical support is available until 8 pm weekdays and until 5 pm weekends. Program faculty monitor their email accounts on evening and weekends for student questions and reporting operational problems with web-based course content.

15. Supplemental Information for Program Structure, Faculty, and Resources

This is your chance to upload any supplemental information for those criteria under Program Structure, Faculty, and Resources.
The upload below will accept up to 10 files. Please label each file with the number of the criterion that the file pertains to (e.g. 2bProgramObjectives.pdf)

Upload supplemental information here:

16. STUDENT SUPPORT SYSTEMS (Criterion 12)

Criterion 12. In programs where admission is selective, the program must demonstrate that the procedures for admitting students to the program are compatible with the mission, goals and objectives of the program.

12a. Describe the program's admission policies, their relationship to those of the university or college and any special requirements for admission to the program. Who has the authority to admit students? What percent of applicants are admitted to the program? At what point in the overall program is the student recognized as a health management / administration major?

Students enter the College of Allied Health Sciences as Health Services Management majors following two years of general education preparation and upon completion of designated courses with a 2.5 minimum grade point average on all prior academic work.
Academic advising is provided to the students by the university's academic advising center under the College of Allied Health. Students applying for admission must first be fully admitted to the university.

Application to the university is a separate process; students contact the ECU Office of Admissions for their application materials and procedures. Admission to the university, however, does not guarantee admission to the Health Services Management Program. Students must also complete a separate Health Services Management application.

The HSM Admissions Committee is made up of the program director, the university academic advisor for HSM and two other faculty members. Students must meet eligibility standards: minimum 2.5 GPA and completion of prerequisite courses with a grade of C or higher (College Algebra, Statistics, Human Anatomy and Physiology with lab, Medical Terminology, Professional Roles and Environments in Health Care). These courses must be completed prior to starting the HSM program.

The admission process is competitive; it is to the candidate's advantage to have a higher grade point average. The grade point average is based on all university and transfer course work, averaged to determine overall GPA. In 2017, there were 125 applicants of whom 60 were admitted (48%). The average GPA of those admitted was 3.54. An admission point system gives preference to applicants with high grade point averages (GPAs), veterans, Honors College students, and applicants with an earned associate of applied science (AAS) degree with active licensure, certification, or registry in a clinical healthcare discipline. The admission requirements are posted on line at http://www.ecu.edu/cs-dhs/hsim/bs_hsm/admissions.cfm.

12b. Describe the students enrolled in the program during the self study year, including the number of full-time students, the number of part-time students and the total number of students graduated within the self study year. If the program has more than one degree option, specify the number of students enrolled in each option, including any minors.

For the 2017-2018 academic year, there were 142 total students, 105 full time and 37 part time. There were 51 HSM program graduates in 2017-2018; since the program's inception in 2003 there have been 757 graduates.

12c. Describe how potential majors get information about the program and how the program informs potential students about degree offerings. Describe any events such as Open Houses or Career Fairs in which the program participates. Below you may attach examples of program brochures, promotional materials, posters, websites, etc.

The College of Allied Health Sciences Public Communication Specialist is responsible for promoting and marketing the college. This is achieved through the use of various printed, audiovisual, and web-based marketing and recruitment materials. Accomplishments of the College, including student/faculty/graduate recognition, grants, projects, and publications are publicized internally and externally.

CAHS also actively engages in student recruitment at open house events and career fairs at campus and organizational events across North Carolina, with an emphasis on diversity.

Selected events follow:
• Health Sciences Academy Reception for High School Seniors - with the College of Nursing, College of Allied Health Sciences, School of Dental Medicine, and the Brody School of Medicine.

• ECU Open House – Health Services Management students, Program Director and Advisor participate in the university's annual Fall Open House. The event is open to prospective freshman, transfers, and adult students. Prospective students have the opportunity to learn and talk one-on-one about the Health Services Management program.

• ECU Pirate Aboard – This event is to welcome admitted students to the University. The annual spring event holds sessions for newly admitted students to meet with Health Services Management students, Program Director and/or advisor to connect and learn about the Health Services Management program.

• ECU Freshman Orientation – The Advisor holds two information sessions during each of the 10 freshman orientation sessions. In the information session titled "Getting to Know Your Major" the Advisor discusses major requirements, career opportunities, internship, and major application process.

• COAD Presentations – The Advisor visits freshmen seminar classes during the Fall semester to discuss the Health Services Management major to undecided students.

• Health Career Education Events - Presented to high school groups and University Career/Graduate & Professional School Fairs.

• East Carolina Open House

Prospective students access program information on the HSM Program's web page (http://www.ecu.edu/cs-dhs/hsim/bs_hsm/). Promotional materials are distributed to perspective students at recruitment fairs both on campus and across the state including a HSM Program Brochure and courses of study for traditional and nontraditional students. Additionally, students contact us through published material such as the AUPHA Directory (https://network.aupha.org/members/findaprogram), the Association of Schools of Allied Health, and through the University of North Carolina's Systems web site of academic programs.

12d. Upload any marketing material relevant to student recruitment and information-sharing.

12e. Provide links to any sites you would like the review team to reference as it relates to student recruitment and program marketing.

URL1 : http://www.ecu.edu/cs-dhs/hsim/bs_hsm/
URL2 : https://network.aupha.org/members/findaprogram
URL3 : http://www.ecu.edu/cs-dhs/hsim/bs_hsm/admissions.cfm

17. STUDENT SUPPORT SYSTEMS (Criterion 13)

Criterion 13. Students must have access to adequate academic advising and career placement support.

13. Describe the program and university procedures for student advisement and career placement. Describe any resources available to students to assist them with career planning.

Academic advising begins when students enter the university and are asked to select an intended major. If Health Services Management is indicated, then they are assigned to an advisor whose area of specialization is allied health sciences. The Center of Pre-Professional Advising (http://www.ecu.edu/ppac/alliedhealthadvising.cfm) includes information about advising for the College of Allied Health Sciences. Students are provided with major and career exploration, academic resources and strategies for achieving academic goals. Special programs and events, workshops, and individual appointments facilitate this development. Ms. Elizabeth Locklear is the HSM Program student advisor.

Career advising is supported by Career Services (http://www.ecu.edu/cs-studentaffairs/career/) whose liaison to the HSM Program gives a lecture in HSMA 3050 Leadership in Health Care during the first semester of the program. In addition, faculty and internship preceptors provide career guidance to students.

18. STUDENT SUPPORT SYSTEMS (Criterion 14)

Criterion 14. Students must have access to peer networks and means to communicate.

14. Describe the peer networks and methods used by the program to facilitate communication among peers. [Examples of peer networks include social media networks (Facebook, LinkedIn, etc.), student organization/club activities and/or other opportunities.] List and describe any student professional organizations or clubs. Include a student participation rate in these activities

The HSM student organization, Future Healthcare Executives (FHE) of ECU, is student-run with Dr. Molly Jacobs as faculty advisor. In collaboration with the local chapter of the American College of Healthcare Executives (ACHE), FHE cosponsored a CEU granting event involving guest speakers from Vidant Health, the regional hospital and health system in eastern North Carolina, and the Veteran Administration Health System.

Students and graduates make use of the department's Facebook page and interact with each other on LinkedIn.

The HSM Advisory Board is comprised of 17 healthcare managers and executives of which 8 are alumni of the HSM program. Student achievement is showcased at Advisory Board meetings by inviting to meetings the student leadership of FHE, seniors to report on their internship experiences, and students inducted into Upsilon Phi Delta honor society. Additionally, HSM alumni serve as preceptors for internships and as guest lecturers in several classes.

19. STUDENT SUPPORT SYSTEMS (Criterion 15)

Criterion 15. Programs must provide students with an appropriate process to address concerns or complaints regarding academic or other issues.

15. Describe any program or university policies to enable students to voice concerns or complaints. Describe how students' concerns or complaints are addressed.

A grievance arises when a student believes, based on established administrative policies and procedures, that he or she has been treated in an arbitrary or capricious manner by a University department or a representative of the University.
Prior to bringing a grievance forward against a University office or representative acting within their role or duty, students are encouraged to attempt a good-faith resolution of the grievance. This attempt may be made with the party directly involved with the disputed matter, or with the head of the department or unit in which the grievance arises. Please note that there are cases

when it is appropriate to go directly to the formal grievance resolution process. Attempts at information resolution should be initiated within 30 days of the incident in dispute.

Should a situation arise in which a student is unable to resolve his or her grievance informally, the University's formal grievance process may be employed. This process should also be initiated within 30 days of the failed informal resolution if applicable. The formal grievance process is outlined in the Student Grievances and Inquiries section of the Dean of Students web site: http://www.ecu.edu/cs-studentaffairs/dos/student-grievances-inquiries.cfm.

20. PROFESSIONAL AND ALUMNI LINKAGES (Criterion 16)

Criterion 16. The program must have a committed community advisory board that meets at least once per year. Considerations:

Advisory boards may consist of part-time faculty, adjunct faculty, community practitioners, alumni, current students, healthcare professionals, etc.

16. Describe the organization and functions of any advisory committees, boards or groups. How do advisory committees or boards facilitate communication between practitioners and faculty, or provide input to program activities? How do students interact with advisory committees or boards?

The HSM program has an advisory board that includes health administrators, internship preceptors, and alumni. The board has representation from academic health centers, community hospitals, nursing home operators, medical practices, retirement communities, Blue Cross Blue Shield, Veterans Administration, and community colleges with health services education programs. The board meets at least once each academic year to review the mission, goals, objectives, and outcomes of the program. Faculty attend these meetings and participate in discussions with board members. The officers of the program's student organization, Future Healthcare Executives (FHE) of ECU, also attend the meetings. Additionally, the spring board meeting includes the induction ceremony for students inducted into Upsilon Phi Delta Honor Society. The advisory board membership is included in the file, 'HSM Advisory Board Meeting Minutes 2016-2018,' and is found in Supplemental Information for Electronic Self-Study located at the end of this self-study.

21. PROFESSIONAL AND ALUMNI LINKAGES (Criterion 17)

Criterion 17. The program must have established relationships with appropriate professional communities in order to provide students with opportunities for professional socialization and leadership development. Considerations:

Professional communities might consist of local chapters of professional organizations (ACHE, MGMA, HFMA, etc.), other local healthcare-focused organziations, etc.

17a. Describe the program's major linkages with professional communities, associations and practitioners.

The Program has an established network with the professional communities, associations, and individuals throughout North Carolina and the U.S. Three faculty are members in AUPHA, two faculty members are affiliates of ACHE, two are members of HFMA, and two are members of AHIMA. All of the aforementioned faculty participate in the local chapters of these professional organizations. There is also faculty representation in the National Association for Healthcare Quality, Academy of Management, Healthcare Information and Management Systems Society, and Assembly of Education

17b. Describe any student associations or clubs not addressed in Criterion 14. Describe how practitioners interact with students through all student club activities.

The HSM student organization is the Future Healthcare Executives of ECU (FHE) and is described in Criterion 14. The annual report of the student organization is located on pages 5 and 6 of the HSM Program Assessment Table and is found in Supplemental Information for Electronic Self-Study located at the end of this self-study.

17c. Describe any other opportunities afforded to students to interact with healthcare practitioners such as healthcare symposia, community leader presentations or other supplemental educational programs.

Students are invited and have attended panel discussions presented by the local chapter of ACHE. The student organization, FHE, invites health care executives to speak at their meetings. Further, students are invited and have attended panel discussions presented by the local chapter of ACHE.

22. PROFESSIONAL AND ALUMNI LINKAGES (Criterion 18)

Criterion 18. The program must show good faith efforts/have a plan in place to have established linkages to alumni. This includes but is not limited to, alumni involvement in an alumni association, mentoring, internships, educational activities and program support.

18. Describe how program alumni are linked to current students, faculty and programmatic efforts and what efforts are underway to expand this involvement and connection.

Program alumni serve as preceptors and mentors for students. Alumni are connected to faculty and programmatic efforts through their participation in the Advisory Board and as guest lecturers during the didactic part of the curriculum. The program sponsors pages in Facebook (https://www.facebook.com/ecuhsimalum/) and LinkedIn (https://www.linkedin.com/groups/5189653). Both are open to friends of the program: alumni, students, and faculty.

23. CURRICULUM AND TEACHING (Criterion 19)

Criterion 19. The program must utilize teaching methodologies and modalities appropriate to the curriculum of the program and needs of the student and must demonstrate that various teaching modalities utilized achieve learning objectives of the student and are appropriate for the educational content being delivered.

19a. Describe the extent to which various traditional teaching methodologies or formats are utilized for courses offered by the program, including but not limited to traditional lecture or classroom-based education; team teaching; guest lectures; team projects and presentations; the case study method; and the use of service learning.

Faculty use a variety of teaching techniques including case studies, team teaching, guest lectures, group project work, student presentations, and service learning

19b. Describe the program's involvement in distance education, explaining the teaching format used for distance education (such as synchronous or asynchronous on-line teaching, teleconference, or other modalities).

All program courses are offered both face-to-face and on-line (distance education). Faculty choose to record their face-to-face classes and make them available to distance education students. Faculty, if needed, also use My Mediasite to produce additional videos for students to view. The education content platform Blackboard is used both in face-to-face and on-line courses. The recording of class sessions is through Mediasite programing which can be viewed synchronous or asynchronous. Additionally, faculty use virtual meeting modalities such as SABA meeting, WebEX, and Blackboard Collaborate Ultra to conduct live discussions and questions and answer periods.

19c. How many courses are available on-line or in a distance education format? What percent of the program can be accessed on-line? For distance education students, what, if any, time is required on campus or in a traditional classroom setting?

All courses (100%) in the HSM curriculum are offered both on-campus and on-line. Distance education students are not required to come to campus. They are allowed to come to campus and attend the classes with permission from the instructor.

19d. Describe how on-line or distance education courses are integrated with traditional classroom-based courses. How many students take courses in each of these formats? Do the same faculty members teach both classroom-based and distance education courses? Do any courses combine on-line and classroom teaching in the same section?

The distance education courses are integrated with the traditional classroom-based courses as most faculty record their classroom-based class sessions for use by distance education students. For the self-study year there were 108 (54%) students in traditional classroom-based courses and 93 (46%) students in distance education courses. For most courses, the same faculty member teaches both the traditional and distanced education sections of the same course. Course sections are either coded on-campus or distance education but not both.

19e. Describe how the program assesses if students have the skills and competencies to succeed in a distance learning environment.

Students admitted to the HSM program begin in their junior year. MIS 2223 Introduction to Computers is a prerequisite for admission. Distance education students have the same requirement and will have taken at least two courses on-line prior to being admitted to the program. The university provides self-paced tutorials on how to navigate Blackboard, the libraries, and other on-line services. From admission to graduation, a system of student support services is available to assist all distance education students. The online support systems give DE students access to resources without having to come to campus. A dedicated e-mail address and a toll free number staffed by student service specialists help students navigate the online resources available to them. They provide a single point of contact for distance-education students.

19f. Describe how parity of education and learning outcomes is documented for traditional classroom-based and distance education courses.

In 78% of the required courses both the on-campus and distance education sections are taught by the same instructor. As such there is high correlation of instructional parity and student assessment. The syllabi and Blackboard content are equivalent. Student grades and performance have been consistent between the two sections of the same course.

19g. Describe how the program assures that students in distance learning programs have access to all necessary resources, including libraries and computer networks and other retrieval capabilities and that they have the capability to use them effectively.

All university students have access to libraries, computer networks, and other online resources regardless of whether they are on campus or distance education students. In addition, each college has an assigned librarian who assists its students with research and use both physical and online library resources. As described in 19e, HSM students have the capacity to access all necessary resources to be successful.

19h. Describe how the program provides support for faculty and students to use effectively existing learning technologies and adapt to new ones, e.g., service technicians, site administrators, library resource personnel, and instructional technologists.

As a leader in distance education, ECU provides both on-line support and telephone assistance to students requiring assistance with accessing university resources including, virtual computing laboratory, library materials, and IT help desk.

19i. Describe how faculty are trained and equipped to use distance learning technologies in the teaching program. Describe also how faculty performance in distance education is evaluated.

The university provides workshops for training faculty to use technology for on-line course delivery. Through the Office for Faculty Excellence, all faculty who teach in Distance Education are required to complete 6 DE Modules approved by the University for eligibility to teach in DE. To remain eligible to teach in distance education, instructors must complete at least one Distance Education Faculty Development activity annually under Faculty Development Distance Education. In addition, the College of Allied Health Sciences, in which the HSM program is located, provides an educational technology specialist who assists faculty in the design and delivery of their on-line distance education courses.

24. CURRICULUM AND TEACHING (Criterion 20)

Criterion 20. The program will develop or adopt a set of competencies to serve as the foundation of its curriculum that will relate to the program's mission and the market that it serves.

20a. 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.

- Business Skills and Knowledge
- Communication and Relationship Management
- Professionalism
- Knowledge of the Healthcare Environment
- Leadership and Teamwork

20b. Describe how program's competencies were developed and how they are reviewed and revised.

The above-mentioned competencies were constructed through discussion with members of the HSM Advisory Board and department faculty in 2014. At the May 25, 2015 department annual retreat, the program faculty developed a list of competencies along with a list of 'entrustable professional activities' to support each of the five competencies. These were then submitted to the HSM Advisory Board who approved them at the April 27, 2016 meeting of the Advisory Board approved. The revised list of competencies and supporting entrustable professional activities was reviewed and approved by department faculty at their annual retreat on May 26, 2016. Program competencies are reviewed annually by the HSM Advisory Board and the department's faculty.

Complete the Course Competencies worksheet to demonstrate how your program's competencies map to the curriculum and then upload below.

Course_Competencies_Worksheet-ECU.xlsx

25. CURRICULUM AND TEACHING (Criterion 21)

Criterion 21. The program will ensure that course syllabi are uniform and include course content, assignments, readings, teaching and assessment methods, and learning objectives.

21. Upload individual syllabi for each course offered in the program as a core requirement or elective. Files should be named by the course number. You may upload up to 10 files in each of the following 3 questions.

HIMA_3000_Spring_2018.docx
HIMA_3115-002_Fall_2017.docx
HIMA_3120-002_Fall_2017.docx
HIMA_4075_-001_&_601_Fall_2018.docx
HSMA_2000-001_Fall_2017.docx
HSMA_3020-601_Spring_2018.docx
HSMA_3030-004_Fall_2017.docx
HSMA_3040-001_&_601_Spring_2018.docx
HSMA_3050-001-Fall_2017.docx
HSMA_4010-003_Fall_2017.doc

If more space is needed, upload individual syllabi for each course offered in the program as a core requirement or elective. Files should be named by the course number.

HSMA_4050-001_Syllabus_Spring_2018.docx
HSMA_4057-001_Intro_Long_Term_Care-Syllabus-_(Spring_2018).docx
HSMA_4060-001_Fall_2017.docx
HSMA_4065-001_Syllabus_Spring_2018.docx
HSMA_4080_Fall_2018.docx
HSMA_4904-001_&_601_Spring_2018.docx

If more space is needed, upload individual syllabi for each course offered in the program as a core requirement or elective. Files should be named by the course number.

26. CURRICULUM AND TEACHING (Criterion 22)

Criterion 22. The program will have adequate coverage of the following content areas in its curriculum:
The US Healthcare System
Population/community health
Cultural Competence/Diversity
Organizational development/organizational behavior theory
Management of healthcare organizations
Operations assessment and improvement
Management of human resources and health professionals
Information systems management and assessment
Healthcare Law
Governance
Health policy
Leadership
Statistical analysis and application to decision making
Healthcare Economics
Post-acute Care
Healthcare Marketing
Financial analysis and management
Ethics in business and clinical decision-making
Strategy formulation and implementation
Quality assessment for patient care improvement
Considerations:

More than one content area may be covered in a single course or a single content area may be covered in multiple courses. Adequate coverage means that students should correlate to the competencies listed in Criterion 20.

22a. Complete the Course Content worksheet to demonstrate how your curriculum covers the required content areas and then upload below.

Content_Area_Coverage-ECU.xlsx

22b. Please provide any additional narrative you feel would inform the review team about how the required content is covered in the curriculum.

Healthcare economics is covered in HSMA 4055 Health Care Finance and Accounting during the self-study year. Beginning with the fall 2018 semester HSMA 4080 Economics for health Care Managers was offered as a new course and required for new program entrants entering the major in fall 2018. Healthcare marketing was included in 6 courses (see line 20 in HSM Content Area Coverage-ECU worksheet in 22a) during the self-study year. Beginning spring 2019, HSMA 4056 Marketing for Health Care Organizations will be offered as a required course for new program entrants entering the major in fall 2018.

27. EXPERIENTIAL AND APPLIED LEARNING (Criterion 23)

Criterion 23. The program must ensure that an internship experience of at least 120 hours meets the stated goals and objectives of the program.

23a. Describe how the program uses the internship to meet the goals and objectives of the program.

The program uses the internship to demonstrate and enhance student competencies. Design of the internship provides students with application of the concepts learned from the curriculum. Interns work with their preceptor and course instructor to establish outcome goals and design projects for the internship. These goals and experiences are designed to give each intern the opportunity to apply pedagogy and didactic concepts to demonstrate the level of competency they have developed.

23b. Describe how the internship is sequenced in the curriculum and the rationale for that sequencing.

The internship is offered in the spring semester of the senior year and usually is the last semester for the student. This sequence allows students to complete the majority of their classes prior to commencing a concentrated experimental learning experience.

23c. If the internship requirement is ever waived for a student, please describe the criteria for which that waiver might be granted, and how that is applied consistently to all students.

The internship requirement is not waived.

28. EXPERIENTIAL AND APPLIED LEARNING (Criterion 24)

Criterion 24. The program must have established procedures for selection, orientation, and evaluation of practicum/internship sites and preceptors.

24a. Describe how internship sites are identified and selected.

The HSM program is fortunate to have numerous agencies that are willing to work with students and provide them with competent internship experiences. Preceptors are individuals have a thorough knowledge of management, health care and/or technology practices used in a health care setting, an interest in internship instruction, and are dedicated to high standards in their profession.
By working together, the student, preceptor, and course instructor combine to make the internship a worthwhile experience for the student's resume. Students are responsible for locating and selecting their internship site during the fall semester of the senior year. A list of potential sites is available from the internship coordinator.

24b. Describe how internship preceptors are oriented to the expectations of the internship experience.

Internship preceptors are given a copy of the Internship Manual for the Health Services management Program which describes the requirements for the internship. These expectations are then discussed with the preceptor by the faculty internship coordinator. Emphasis is placed on the establishing of outcome goals for the intern, the design of one or more projects that will give broad exposure and significant responsibility to the intern, and on the evaluation that assess the student's competencies including management skills, leadership, decision making, critical thinking, academic preparation, quantity and quality of work, and level of proficiency to perform in an entry-level health services management position.

24c. Describe how internship sites and preceptors are evaluated.

Preceptors complete a three questions qualitative survey that asks, "What suggestions do you have for better preparing the student for the internship?" The faculty internship coordinator will call or visit internship sites during to assess the quality of the experience. Students evaluate the internship by answering a series of questions on whether objectives were met (8 questions), skills (19 questions), preceptor responsibility (7 Questions), faculty coordination (3 questions) quality of experience (8 questions), and three open ended questions on what was learned, how might the internship be improved, and advice for future students.

24d. Describe how student performance in the internship is evaluated.

Preceptors evaluate student performance by completing an evaluation of 17 skills and work traits in a structured survey and by completing an eight question survey on the student's professional traits, attributes, and ability to be successful in the workplace. Preceptors also rate the student's performance on projects and assignments. Finally, the preceptors give a rating of overall performance which is considered in rendering a final grade for the internship course by the faculty internship coordinator.

24e. Describe the faculty role in internship supervision.

The internship coordinator is a full-time faculty member assigned as instructor of the internship course, HSMA 4904 Allied Health Management Experience, and is the prime contact between the program and the internship site. The internship coordinator discusses internship objectives and preferences with the students, advises the student on the best sites for their situation, facilitates contact between the student and potential preceptor, and approves the goals and projects designed by

the preceptor and student at the start of the internship. During the internship, the internship coordinator provides feedback in student submitted progress reports and responds to questions or comments from either the student or the preceptor. The internship coordinator also visits preceptors at the internship sites to discuss expectations of the preceptors and the students' progress in their internships At the end of the internship the internship coordinator solicits evaluations from the preceptors and reviews it with the student and preceptor. The internship coordinator provides feedback to the student on the final report and the preceptor's evaluation and assigns a final grade based on the grading scale established in the syllabus.

24f. What are the policies regarding the awarding of credit and student remuneration for the internship experience?

Four credit hours are awarded for successful completion of a 160 hour internship.
Remuneration is strictly at the discretion of the internship site. The majority of internships are uncompensated.

1. 24g. Describe the evaluation process used to make determination of waiver or reduction of this requirement if a student presents a compelling case for not completely participating in the internship.

The internship requirement is never waived. Students are advised of this requirement upon acceptance into the program.

29. EXPERIENTIAL AND APPLIED LEARNING (Criterion 25)

Criterion 25. The program must demonstrate how it provides integrative experiences that allow students to apply the skills and knowledge obtained in the liberal arts foundation, conceptual and technical competencies in healthcare management. Considerations:

This can include, but is not limited to, case studies, strategic planning courses, summative papers, capstone courses, consulting projects, etc.

25a. Describe the activities provided by the program, other than the field experience, that are primarily integrative in nature. Describe how each activity provides students with opportunities to draw upon and apply material covered throughout the program of study.

In HSMA 2000 Professional Roles and Environments and Health Care, students are provided with an orientation to the health care delivery system through participation in service work in the community and surveying healthcare delivery agencies. As a 'service learning' course students spend a minimum of 20 hours of education in the community. Students work collaboratively with their mentor and members assigned to their team on a community project that benefits the agency and presents a learning opportunity for the student. Examples of projects include blood drives, staff in-service, health fairs, creating brochures, volunteer handbooks, and nursing home resident activity books. Students complete a case study using their community experience as background information to depict a situation that they encountered.

In HSMA 3030 Written Communication and Documentation in Health Care, students submit assignments that assimilate professionally crafted interoffice memorandums requesting additional personnel and equipment supported by justifications. Case study assignments give students practice in problem solving, critical thinking, and crafting recommendations. A major research paper supported by peer-reviewed journal articles and other sources allows students to conduct research, develop a thesis statement, literature review, and syntheses of the research in a professionally prepare paper.

In HSMA 3050 Leadership in Health Care, students work in teams to assimilate healthcare workplace management situations such as ethical dilemmas, cultural diversity, strategy planning, and employee termination. Students read case studies and then role play the management strategy in class.

25b. If a major paper, thesis or research project is required, describe the nature of the requirement and the relationship to program objectives.

HSMA 4904 Allied Health Management Experience. Students present an end of internship notebook containing:
• List of projects
• Copies of completed projects
• List of activities

• Site Evaluation of student
• Student Evaluation of internship experience
• "Other" material(s) obtained you feel may be useful in the future
• Reflection Paper on the Internship Experience

HSMA 3030 Written Communication and Documentation in Health Care. Students prepare a 12 to 15 page research paper presenting a thesis, literature review, and synthesis of the literature support by peer-reviewed journal articles and other sources. Emphasis is on critical thinking and written presentation skills and is 30% of the course grade.

HIMA 4075 Applied Health Services Research. Students construct a final paper that requires them to plan, perform and interpret their original empirical work.

30. PROGRAM EVALUATION AND IMPROVEMENT (Criterion 26)

Criterion 26. The program must have a process and method to assess, and be able to demonstrate the accomplishment of, student learning outcomes and conduct that assessment at least annually.

Considerations

Examples of student learning outcomes assessments include but are not limited to:
Student self-assessments
Instructor assessments
Preceptor assessments
Standardized cumulative (exit) examinations
Course grades
Student pre-post exams

26a. Describe how the program measures student progress towards mastery of student learning objectives. Include a description of the types of evaluation tools (preceptor assessments, student evaluations, course deliverables, etc.) used in these processes.

Student learning objectives are presented in the didactic portion of the curriculum and address the competencies of the HSM program: effective communication, knowledge of the health services management, leadership, relationship management, business skills, teamwork, and professionalism. Student progress toward mastery of student learning objectives is measured in each course in relation to the learning objectives for that course as related to the competencies developed during that course. Progress is measured in a variety of ways through assignments and activities in each course as delineated in each syllabus.

Student progress toward learning objectives and competencies is measured by the following means of assessment:

• Demonstration of mastery of Entrustable Professional Activities (EPAs) are observable and measurable work that are mapped to domains and competencies critical to student mastery. Tasks in specific domains in course work are measured on a rotating basis.

• Overall mastery of course material--At least 80 percent of students will achieve a passing grade on capstone examination, a 100-question assessment of the didactic teaching and learning of the HSM curriculum.

• Internship Preceptor Evaluation

• Graduating Senior Survey conducted by ECU

• Alumni survey conducted by the Department

• Professionalism and the HSM Student Document

Student progress toward learning objectives and competencies is measured by the program in relation to the following outcomes Note: file names in parenthesis at the end of each of the 19 paragraphs in this section can be found in Supplemental Information for Electronic Self-Study located at the end of this document:

• Effective communication
Students demonstrate competency for the EPAs in written communication by writing an executive summary of a case study in Professional Ethical Codes & Law in Health Care (HSMA 3025). The criterion for success is that 80% of the students will score 85 or above on a 100 point scale. (HSM Program Assessment)

Also, Internship preceptors assess students' communication skills. The preceptors complete an evaluation in which two questions are about oral and written communication skills. The criterion for evaluation is that 90% or more of the students will meet or exceed the preceptor's expectations. (Preceptors Evaluation of Students 2016-2018)

Further, the ECU Graduating Senior survey includes five questions that pertain to communication The criterion for evaluation is that the average rating on a 4.0 scale is 3.0 or above and, on a 5.0 scale, an average rating received is a 4.0 or above. (ECU Graduating Senior Survey 2016-2018)

• Leadership
Students demonstrate their knowledge about leadership via two EPAs. First, they create their personal mission statement. To this end, students prepare a personal mission statement (demonstrating self-knowledge) for a class assignment in Leadership in Health Care (HSMA 3050). The criterion for success regarding this leadership EPA is that 90% of the students will earn an 8.5 or above on a ten point scale. The second means of assessment is that the student will demonstrate another entrustable profession activity of managing conflict via their responses to case study questions. This section is worth 0-9 points on the final exam, 70% of the students will earn a 9 on a 9 point scale. (HSM Program Assessment)

Internship preceptors also assess students' leadership skills. The preceptors complete an evaluation in which five questions are about leadership. The criterion for evaluation is that 90% or more of the students will meet or exceed the preceptor's expectations. (Preceptors Evaluation of Students 2016-2018)

Further, the ECU Graduating Senior survey included two questions regarding leadership. The criterion for evaluation is that the average rating on a 4.0 scale is 3.0 or above (ECU Graduating Senior Survey 2016-2018)

• Knowledge of Health Services Management
Students demonstrate knowledge of health services management via their exhibiting an EPA regarding the analysis of incidence vs prevalence statistics. To this end, students complete the "Introduction to Population Health" lesson module with blog and questions in IHI triple aim for population curriculum in Human Diseases (HIMA 3115). Students will demonstrate understanding and analyze incidence vs prevalence statistics included in their "Fact sheet" population health profile of a health disorder. 80% will score 85 or above on the IHI module. (HSM Program Assessment)

Also, the HSM program's alumni survey included one question regarding overall knowledge. While students were not asked directly about their knowledge of health services management, they were asked one question about how well prepared they were from coursework to enter the workforce. The criterion for evaluation is that over 70% would state that they were well prepared. (HSM 2017 Program Alumni Survey

• Relationship Management
Students demonstrate the EPA of active listening and proficiency to call, set up and run a meeting. In Leadership in Health Care (HSMA 3050), students complete a peer evaluation form regarding team members in an assignment to "call, set up and run the meeting.. A peer evaluation form is used for grading. Four measures are in the evaluation form. Each student could

receive up to 25 "monopoly dollars" from his/her peers regarding their performance. The criterion for success is that 90% of the students will receive 20 'monopoly' dollars or above. (HSM Program Assessment)

Also, the ECU Graduating Senior survey includes a question regarding relationship management. The criterion for evaluation is that the average rating on a 4.0 scale is 3.0 or above. (ECU Graduating Senior Survey 2016-2018)

• Business Skills
Students will exhibit the EPA of their proficiency in using computer tools to support data driven decision making. In Applied Health Services Research (HIMA 4075), students apply multiple regression on a secondary data set using Microsoft Excel. The criterion for success is that 90% of the students will be able to use Excel to run multiple regression on a secondary data set and explain the results and achieve a passing score of at least 78 out of 100 points (78%). (HSM Program Assessment)

Also, the ECU Graduating Senior survey included four questions regarding business skills. The criterion for evaluation is that the average rating on a 4.0 scale is 3.0 or above. (ECU Graduating Senior Survey 2016-2018)

• Teamwork
Students in HSM demonstrate the EPA of their ability lead and be part of a team regarding change management. In Health Information Management (HSMA 4010), students implement a change management project, using Kotter's Change Management Model, and the Toyota Problem Solving Model, known as PDCA. This project requires students to work both individually and inter-professionally to apply the scientific method to solve an identified problem. The criterion for success is that 80% of the students will score 85 out of 100 on the project. (HSM Program Assessment)

Also, Internship preceptors assess students' ability to work on teams in the Preceptor Survey. The criterion for evaluation is that 90% or more of the students will meet or exceed the preceptor's expectations. (Preceptors Evaluation of Students 2016-2018)

Further, the ECU Graduating Senior survey included three questions regarding teamwork. The criterion for evaluation is that the average rating on a 4.0 scale is 3.0 or above. (ECU Graduating Senior Survey 2016-2018)

• Professionalism
Students show the EPA of their capability to make a professional self-introduction. In Leadership in Health Care (HSMA 3050), students present their elevator speech, which is about themselves and their career goals. The criterion for success is that students will earn 85 or above on their elevator speech. (HSM Program Assessment)

Also, Internship preceptors assess students' professionalism. The preceptors complete an evaluation in which three questions are about professionalism. The criterion for evaluation is that 90% or more of the students will meet or exceed the preceptor's expectations. (Preceptors Evaluation of Students 2016-2018)

• Further, at orientation during their entry into the program, we present and discuss professionalism and the HSM student. The incoming students are asked to read and sign the document entitled, "Professionalism and the HSM Student." The criterion for evaluation is that 90% or more of the students will sign the document. (Professionalism and the HSM Student)

Additionally, the ECU Graduating Senior survey included two questions regarding professionalism. The criterion for evaluation is that the average rating on a 4.0 scale is 3.0 or above. (ECU Graduating Senior Survey 2016-2018)

• At least 90% of the students will be able to successfully use Excel to run multiple regression on a secondary data set and explain the results and achieve a passing score of at least 78 out of 100 points (78%).

• At least 80% of the students will implement a change management project, using Kotter's Change Management Model, and the Toyota Problem Solving Model, known as PDCA, and score at or above a passing score on the project.

26b. Provide a brief description of student outcomes for the last 3 years. Where possible, show trends of outcomes over time.

Effective communication-
Students will write an executive summary of a case study in health care management and will receive a score between 0 and 100 on the assignment in the Professional Ethical Codes & Law in Health Care (HSMA 3025). The criterion for success requires that 80% of the students will score 85 or above.

Also, Internship preceptors assess students' communication skills. The preceptors complete an evaluation in which two questions are about the oral and written communication skills. The criterion for evaluation is that 90% or more of the students will meet or exceed the preceptor's expectations.

26c. Describe how the program reviews student achievement and outcomes and uses that information to drive program improvement.

Outcomes related to student achievement are reviewed at least annually by the department faculty and the program advisory board. Data related to preceptor evaluations and capstone examinations are reviewed at the department summer retreat.

Actions based on these reviews are summarized in outcome area 6 of the HAS Program Assessment table uploaded in 27d.

31. PROGRAM EVALUATION AND IMPROVEMENT (Criterion 27)

Criterion 27. The program must demonstrate an annual assessment process of programmatic outcomes.

Considerations

Examples of program level assessment methods include but are not limited to:
Exit interviews
Student program survey
Alumni surveys
Student evaluations of teaching
Advisory board assessments/reviews
College University assessment/reviews

27a. Describe the body or person(s) primarily responsible for ongoing evaluation and assessment of the program's attainment of goals, objectives and outcomes.

The department chair and program director are primarily responsible for ongoing evaluation and assessment of the program. Department faculty and the program advisory board are involved as described in 27b.

27b. Describe the process used to assess the program's progress towards stated goals, objectives and outcomes.

Goals and objectives are developed by the department faculty and revised at least annually based on input from all assessment activities and discussion with the program advisory board, internship preceptors, and faculty. Outcomes are reviewed each semester by the program director and department faculty and are discussed at the HSM Advisory Board meeting at least once a year. Curriculum changes are based on results of the outcome data and implemented by the department faculty. Any modifications in the strategic plan would be initiated and discussed at said meetings. The current strategic plan is viewed as a living document that will be modified as appropriate to meet our mission. The current HSM Strategic Plan 2017-2022 is uploaded in 28c. The program's progress is elaborated in the HSM Program Assessment uploaded in 27d. The previous HSM Strategic Plan 2011-2016 uploaded in Supplemental Information for Electronic Self-Study located at the end of this document.

27c. Describe how program evaluation tools have been used with students, faculty, alumni, and practitioners to identify strengths and weaknesses in the program structure and educational processes.

The department chair, program director and faculty discuss assessment findings and the tools and processes to procure the data, primarily at the annual retreat. The faculty presents the information to the advisory board during the fall meeting and ask for input, which influences the content and begins a review of the current HSM strategic plan located in 28c.

27d. Upload the report from your most recent program assessment process. This report should list program goals, objectives and outcomes, how they were measured, and progress against those goals.

HSM_Program_Assessment_Table.docx

32. PROGRAM EVALUATION AND IMPROVEMENT (Criterion 28)

Criterion 28. The program must demonstrate how the annual assessment of student learning and programmatic outcomes is used in program revision and improvement.

28a. Describe how the data gathered from the process described above is used to inform and drive program improvement.

The department chair, program director and faculty discuss assessment findings primarily at the annual retreat. The faculty present the information to the advisory board during the fall meeting and ask for input. The assessment tools and findings/outcomes are elaborated in the HSM Student Progress Assessment uploaded in Supplemental Information for Electronic Self-Study located at the end of this document.

28b. Describe programmatic changes made since the last certification and the impetus for these changes. (For initial certification list changes in the past three years.)

Criteria-Related recommendations from the May 31, 2012 Undergraduate Program Panel Review Report:

II.A.5. In order to meet the criterion, the Program must review and further activate the HSM Advisory Committee so that its multiple advisory roles can be met. Input from industry practitioners, program alumni, and other persons outside the ECU academic community is an important resource for the program. However there needs to be further work on activating the expertise of these separate groups to more directly benefit the HSM program.

The HSM Advisory Board has evolved through changes in membership to include 17 healthcare managers and executives of which 8 are alumni of the HSM program. Student achievement is presented at Advisory Board meetings by inviting the student leadership of FHE, seniors to report on their internship experiences, and students inducted into Upsilon Phi Delta honor society. Additionally, HSM alumni serve as preceptors for internships and as guest lecturers in several classes.

II.C.2. In order to meet the criterion, the Program must document when and how evaluation and survey information was collected from students, graduate, and alumni. This information should inform and influence HSM program improvement.

A member of the faculty has been charged with maintaining survey data on alumni to include data on career development and value of the curriculum.

Consultative recommendations from the May 31, 2012 Undergraduate Program Panel Review Report:

II.A.5. Additional mechanisms to activate alumni should also be considered. These might include a separate alumni advisory group (or committee), utilizing alumni in regular course offerings, annual or regional HSM alumni dinners, or other activities to build on-going connections with program graduates and current program students.

Through interaction with the HSM student organization, HSM alumni have presented at student meetings, served as guest lecturers in the classroom, and have encouraged student participation in local meetings and events sponsored by ACHE and HFMA.

II.B.1. The program should continue its statistical comparisons of distance education versus on-campus performance, including analysis of the reasons for observed practical differences, and development of curricular improvements.

II.B.b.ii. Expand the coverage of health economics and quality improvement across the curriculum. Consider including

elements of health economics and quality improvement in more than one course.

The course content grid demonstrates that most content areas are addressed across the curriculum. Beginning in the fall 2018 HSMA 4080 Economics for Health Care Managers was added to the curriculum. Beginning spring 2019 HSMA 4056 Marketing for Health Care Organizations will be added to the curriculum.

II.B.2.b.iii. The program should demonstrate in its written reports how the internship experiences are evaluated both in terms of student performance and enhancement of student competencies.

Survey data from both the student and preceptor are evaluated annually and presented to the HSM Advisory Board for discussion leading to curriculum adjustments, content changes, and program improvement.

II.C.1. As part of the program improvement process with faculty and the Advisory Board, develop and implement a method for including the information collected by the various evaluation measures.

Graduate survey results from the university and alumni survey results from the department are evaluated and presented to the HSM Advisory Board.

II.C.4. The Program should continue to review and update the Strategic Plan.

Please see attached HSM Strategic Plan 2011-2016 uploaded in Supplemental Information for Electronic Self-Study located at the end of this document, and HSM Strategic Plan 2017-2022 located in 28c of this document. The HSM Strategic Plan serves as a guide for moving the program into the future. We view the current strategic plan as a living document that will be modified as appropriate to meet our mission.

In addition to the responses made regarding the recommendations from the 2012 AUPHA review, we took the following actions:

We adapted our program mission to remain in alignment with the changed ECU mission. See HSM strategic plan uploaded in 28c.

We developed our HSM Strategic Plan for 2017-2022 based upon assessment findings and in consultation with our advisory board.

We introduced the concept of Entrustable Professional Activities (EPAs) as observable and measurable work that are mapped to competencies critical to student mastery of tasks in specific domains on course work. The EPAs are course specific and are evaluated on a rotating basis with at least three assessed annually over a five year assessment cycle. The established areas with delineated EPAs are modeled after the Association of American Medical Colleges (AAMC) for undergraduate medical education. The selection of the specific EPAs was accomplished by meetings with faculty and the advisory board, and subsequently approved by the program's advisory board and faculty. They then were adapted for inclusion in the HSM curriculum. (See HSM Student Progress Assessment uploaded in Supplemental Information for Electronic Self-Study located at the end of this document.)

We successfully completed the seamless transition of Internship Coordinators as Dr. Sasnett retired in summer 2018 and Ms. Rhodes worked with her throughout 2017-2018 academic year. Ms. Rhodes became the Internship Coordinator in 2018.

28c. Upload the most recent program improvement action plan.

HSM_Program_Strategic_Plan_2017-2022.doc

33. Supplemental Information for Electronic Self-Study

This is your chance to upload any supplemental information that you may wish to include for any of the criteria contained within the Self-Study. The upload below will accept up to 10 files. Please label each file with the number of the criterion that the file pertains to (e.g. 27bOutcomeTrends.pdf).

Upload supplemental information here:

Capstone_Examination.docx
ECU_Graduating_Senior_Survey_2016-2018.docx
HSM_Advisory_Board_Meeting_Minutes_2016-2018.docx
HSM_Course_of_Study_2019.docx
HSM_Program_Alumni_Survey_2017.docx
HSM_Program_Assessment.pdf
HSM_Program_Strategic_Plan_2011-2016.pdf
HSM_Student_Progress_Assessment.docx
Preceptor_Evaluation_of_Students_2018.docx

35. Congratulations

Thank you for submitting your 2019 Self-Study

Nov 26, 2018 18:46:27 Success: Email Sent to: kulesherr@ecu.edu

Thank you for your self-study submission. You will receive a copy of your submission soon. If you have any further questions about your completed self-study, please do not hesitate to contact Carly Evans.