

External Program Review- Weber State University
Health Information Management
March 2012

Review Team:

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STANDARD A - MISSION STATEMENT

Evaluate how effectively the mission statement articulates the following elements.

	Element	Rating	Comments and/or Recommendations for Change
a.	The expected outcomes of the program need to be clearly defined.	S	The program outcomes are comprehensively documented in the Program Review document. Goals are defined in many categories including curriculum, student learning, professional development for the faculty and graduates, serving the needs of the community and assistance from the advisory committee.
b.	A process by which these accomplishments are determined and periodically assessed based upon the constituencies served by the program.	S	At a minimum, the program's assessment process is formally completed on a yearly basis. Every spring, the program evaluates and reports to the accrediting body (CAHIIM). Assessments included a series of metrics, narrative descriptions, on how the program goals are being met.
c.	A clearly defined educational program, including a curriculum that enables graduates to achieve the mission.	S	The curriculum includes required knowledge and skills that enable the graduates to meet the entry-level competencies in the field. These competencies are mapped to the courses in the curriculum.
d.	The program mission statement must be appropriate to and support the mission statements of both the college housing the program and the university.	S	The mission statement supports the college and university by providing opportunities for health practitioners and students in the health disciplines. The health information management (HIM) program evaluation plan is consistent with its mission and structured to build upon a two-year professional degree; providing clearly defined exit and entry points for the two programs.

Rating: S = Strength, C = Concern, W = Weakness, X = did not evaluate (please indicate why) **STANDARD B – CURRICULUM**

Evaluate the effectiveness of the curriculum based on the following elements.

	Element	Rating	Comments and/or Recommendations for Change
a.	The program should demonstrate that the curriculum for each degree and for any general education/service courses offered by the program is the result of thoughtful curriculum planning and review processes.	S	The curriculum planning process is structured to map to the profession's knowledge clusters for both course content and professional experiences. The mappings of the courses include educational planning of the introduction (concept), detailed understanding, skilled-use and practical experience. This mapping is reviewed yearly and updated as needed.
b.	The curriculum should be consistent with the program's mission.	S	The curriculum supports the mission of preparing confident, innovative and contributing professionals who can identify and use a variety of information resources and technologies to accomplish the objectives of diverse practice environments.
c.	The program should be able to demonstrate that there is an appropriate allocation of resources for curriculum delivery that is consistent with the mission of the program, the number of graduates, and the number of major/minor and general education SCHs produced.	S	Support of the program is demonstrated by the allocation of three full-time HIM professionals and a satisfactory ratio of faculty to students.
d.	Courses to support the major/minor/general education/service programs are offered on a regular basis to ensure students are able to complete graduation requirements in a timely manner.	S	To meet the students' needs, the courses are offered in a variety of educational methods that include face-to-face, distance learning and a hybrid approach. Students are able to complete the program in a timely manner.

Rating: S = Strength, C = Concern, W = Weakness, X = did not evaluate (please indicate why)

STANDARD C - STUDENT LEARNING OUTCOMES AND ASSESSMENT

Evaluate the extent to which the program has clearly defined outcomes.

	Element	Rating	Comments and/or Recommendations for Change
a.	Learning outcomes should describe the expected knowledge, skills, and behaviors that students will have achieved at the time of graduation (overarching program goals).	S	The comprehensive goals include student outcomes, faculty expectations, curriculum standards and responsiveness to the community of interest.
b.	Learning outcomes must support the goals of the program and the constituencies served.	S	Learning outcomes support the goals of the program.
c.	Learning outcomes should be directly linked to the program's curriculum. An explicit curriculum grid illustrating this alignment, as well as the depth to which each course addresses each outcome, is publicly available.	S	The learning outcomes are effectively mapped in a grid as mentioned in B-a of this document. The knowledge clusters are provided to the students in the course syllabi.

Rating: S = Strength, C = Concern, W = Weakness, X = did not evaluate (please indicate why)

Evaluate the effectiveness of the assessment process based on the following elements.

	Element	Rating	Comments and/or Recommendations for Change
a.	The program has a developed set of measures for assessment that are clearly defined and appropriately applied.	S	A comprehensive set of measures includes certification examination results, graduate surveys, employer surveys and ongoing evaluation of faculty.
b.	Each learning outcome is assessed with <i>at least one direct measure</i> of learning; thresholds for acceptable performance are defined (for each measure) and published.	S	Outcomes are directly measured in several areas, including student evaluations, certification results, and graduate and employer surveys. Employee surveys are shared with the program advisory committee.
c.	Demonstrate that evidence of learning is being gathered on a regular basis across the program, that the evidence is aggregated, and reported at the aggregate.	S	Aggregate data is regularly calculated for metrics, including the number of graduates, attrition, placement rates and certification outcomes. It is important to note that a yearly calculation is provided that compares WSU students' scores on the certification exam (by individual domains/subdomains) with national scores.
d.	Demonstrate that these measures are being used in a systematic manner on a regular basis and are reviewed against department-established thresholds, i.e., are the program faculty meeting regularly to discuss the evidence?	S	The department meets regularly, and a yearly comprehensive report is documents department-established thresholds. The formal report is called APAR (Annual Program Assessment Report) and is submitted electronically to the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM). Reports dating back to 2008-2009 were submitted for this review.
e.	Demonstrate that the assessment of the program mission and student outcomes is being used to improve and further develop the program. Is the evidence acted upon? Is it clear what drives program change?	S	<p>The program demonstrated ongoing assessment by making changes that resulted in a significant increase in the passing rates on the national certification examination. The program concentrated on student testing skills to achieve a 100% pass rate in 2010 and 2011.</p> <p>The program's Advisory Committee recommended a continuing education course (Anatomy and Physiology) for the coding professionals in the community.</p>

Rating: *S* = Strength, *C* = Concern, *W* = Weakness, *X* = did not evaluate (please indicate why)

STANDARD D - ACADEMIC ADVISING

Evaluate the following related to the advising process.

	Element	Rating	Comments and/or Recommendations for Change
a.	The program has a clearly defined strategy for advising their major/minor, or BIS students that is continually assessed for its effectiveness.	S	Responsibility for student advising is coordinated by three faculty. An academic contract is completed for each student. The Office of Admissions and Advisement, Dumke College of Health Professions also provides admission information. Effectiveness is evaluated by program exit surveys, student counseling/career guidance and faculty availability.
b.	Students receive appropriate assistance in planning their individual programs of study.	S	Each main area of the program (BS, AAS and Certificate students) is advised by a designated faculty member.
c.	Students receive needed assistance in making career decisions and in seeking placement, whether in employment or graduate school.	S	The student advisement plan is documented, evaluated and reviewed.

Rating: *S* = Strength, *C* = Concern, *W* = Weakness, *X* = did not evaluate (please indicate why)

STANDARD E – FACULTY

Evaluate the extent to which the faculty demonstrates the following characteristics.

	Element	Rating	Comments and/or Recommendations for Change
a.	Faculty size, composition, qualifications, and professional development activities must result from a planning process which is consistent with the program's mission.	S	In addition to the Program Chair, the HIM program has 2 full-time dedicated faculty and a full-time professional staff position. In addition, 4 adjunct faculty teach occasionally. A recent assessment resulted in the full-time professional staff position moving to full-time faculty position.
b.	The program maintains a core of full-time faculty sufficient to provide stability and ongoing quality improvement for the degree programs offered.	S	The faculty is highly qualified to provide quality and stability. All the full-time faculty hold advanced degrees and are involved in professional and educational activities.
c.	Contract/adjunct faculty who provide instruction to students (day/evening, off/on campus) are academically and professionally qualified.	X	Evaluation of adjunct faculty was not performed due to limited use in the program.
d.	The program should demonstrate efforts to achieve demographic diversity in its faculty.	S	The faculty in the Health Administrative Services department includes three females and four males, all Caucasians.

Rating: S = Strength, C = Concern, W = Weakness, X = did not evaluate (please indicate why)

	Element	Rating	Comments and/or Recommendations for Change
e.	The program should have appropriate procedures for the orientation of new contract/adjunct faculty.	X	Although not reviewed due to limited use of adjunct faculty, it should be noted that the College employs a mentoring program.
f.	Processes are in place to determine appropriate teaching assignments and service workloads, to guide and mentor contract/adjunct faculty, and to provide adequate support for activities which implement the program's mission.	S	The faculty workload seems appropriate based on the number of students. As evidence by recent changes with the HIT Clinical Coordinator position, the assignments are monitored.
g.	<p>Teaching is systematically monitored to assess its effectiveness, and revised periodically to reflect new objectives and to incorporate improvements based on appropriate assessment methods. For both contract and adjunct faculty, there is evidence of:</p> <ul style="list-style-type: none"> • Effective creation and delivery of instruction. • Ongoing evaluation and improvement of instruction. • Innovation in instructional processes. 	S	The program systematically evaluates the effectiveness of instruction with formal evaluations by the students, graduates, and employers. Metrics are in place for all evaluations. In addition to classroom instruction, students evaluate the professional practice experiences. A concentrated effort has been made to include guest speakers or onsite visits for many of the HIM courses.
h.	A formal, periodic review process exists for all faculty, and the results of the reviews are available.	S	<p>In accordance with WSU Policies and Procedures, faculty peer evaluations are completed on all HIM faculty.</p> <p>In addition, the department chair or Dean conducts an annual review.</p>

Rating: S = Strength, C = Concern, W = Weakness, X = did not evaluate (please indicate why)

STANDARD F - PROGRAM SUPPORT

Evaluate the nature and adequacy of the program support based on the following elements.

	Element	Rating	Comments and/or Recommendations for Change
a.	The number and capabilities of the support staff are adequate to meet the mission and objectives of the program.	C	There is evidence of strong support from the Dean of the College for all aspects of the program. Recent changes include the addition of an administrative support position.
b.	Administrative support is present in assisting in the selection and development of support staff.	X	Administrative support staff was present; however, the review team did not interview the administrative support staff.
c.	The facilities, equipment, and library support needs are adequate to meet the mission and goals of the program.	S	The program has more than adequate support in the area of classroom facilities, computer laboratory area, practice medical records, IT equipment and resources.

Rating: S = Strength, C = Concern, W = Weakness, X = did not evaluate (please indicate why)

STANDARD G - RELATIONSHIPS WITH EXTERNAL COMMUNITIES

Evaluate the relationships according to the following elements.

	Element	Rating	Comments and/or Recommendations for Change
a.	If there are formal relationships between the program and external communities of interest they should be clearly defined.	S	There is evidence of a strong community support for the program. The program's advisory committee meets yearly. In addition, the faculty communicates regularly with professional practice supervisors who provide the experiential education to the students.
b.	Such relationships should have a clearly defined role and evidence of their contribution to the program (curriculum, equipment, faculty, budget, etc.) should be demonstrated.	S	The community partners are regular guest speakers in the student classrooms. During the past year, the advisory committee suggested that the program develop a continuing education course focusing on anatomy and physiology for coders. This course has approximately 100 students enrolled.
c.	If the program has an external advisory committee, it should meet regularly and minutes of the meetings be made available.	S	The advisory committee meets regularly and is supportive of the program. During the site visit, there was an excellent representation of advisory committee members from various types of health care facilities as well as categories of health information practitioners. The majority of the members of the advisory committee are leaders in the HIM community and are former WSU graduates. The positive collaboration was evident during the on-campus meeting.

Rating: S = Strength, C = Concern, W = Weakness, X = did not evaluate (please indicate why)

STANDARD H - PROGRAM SUMMARY

Evaluate the effectiveness of the program to implement recommendations and make changes based on previous reviews.

	Element	Rating	Comments and/or Recommendations for Change
a.	The program must show how it has implemented any recommendations from the previous review and what effect these changes had on the program. If any recommendations were not implemented the program should explain why they were not put into place.	X	<p>The bachelor's degree program has not had a formal on-site external review since launching the program in the early 1990's. A report of current status was written in 2001-2002. The associate degree program had a site survey in 2003.</p> <p>Due to the age of these previous reviews, the team did not evaluate the outdated recommendations (if any).</p>

Rating: S = Strength, C = Concern, W = Weakness, X = did not evaluate (please indicate why)

Please include any other notes you feel are relevant to your review of the program:

Program Narrative Summary

The program review team reviewed the self-study document before the site visit on March 5, 2012. During the on-campus review, the team interviewed the program director, program faculty, advisory committee members and students. From the pre-review, questions were drafted for discussion. The answers to these questions helped to formulate recommendations. It is important to note that the CAHIIM standards were also examined for compliance.

Overview/introductory Statement

1) Program strengths (please reference Standard where appropriate)

The HIM program has many strengths, including the strong support from the Dean and the general HIM community. The program director is a nationally recognized HIM professional and provides expert leadership to the program. She is an extremely dedicated and enthusiastic director who is well respected by the students, administration, and the Advisory Committee.

The faculty is committed to providing an excellent education that exceeds national standards. Faculty members are life-long learners actively continuing their education, participating in professional development, focusing on remaining current in the field and volunteering at the national and state levels of the HIM profession.

The students are passing the certification examination, obtaining jobs and the graduates are mentoring future HIM professionals. During the interview process, students reported that they were pleased with the curriculum and felt that they are well prepared for professional practice experiences and the workforce. The students praised the faculty for their willingness to answer questions and offered a program that provided no gaps between education and expectations of the workforce.

The advisory committee voiced strong support for the program, its program director and faculty. The committee actively supports the program on several levels including professional practice experiences, recommendations for improvement and they provide a vital link to employer expectations.

The academic curriculum and course syllabi are well organized and thorough. Courses are taken in a logical sequence to provide optimal flow of health information content courses and general education. The program is well-supported by resources dedicated to the program as illustrated by the computer lab and use of technology to support student learning experiences.

2) Program challenges (please reference Standard where appropriate)

The review team concluded that the program faces the following challenges:

- Constant changes in the field and the need to prepare graduates for future positions and new credentials (e.g. Certified in Clinical Document Specialist)(CCDS)
- Focusing on technology in the industry (e.g. Computer-Assisted Coding)
- Encouraging the students to take the national certification examination
- Evaluating the course delivery methods (on-campus, distance, hybrid) to determine best practices

3) **Areas where the program did not meet the Standards and why**

The review revealed no areas that did not meet the Standards

4) **Recommendations for change – suggested changes for meeting Standards**

There are no recommendations for change.

5) **Additional recommendations and comments from the review team**

The review team wishes to make the following recommendations/comments:

- Evaluate the possibility of incorporating CDI (Clinical Documentation Improvement) content linked to ICD-10 education to strengthen the job opportunities for graduates.
- Continue to offer courses to meet the needs of the community, as needed.
- Explore the possibility of faculty attending distance learning conferences to enhance their knowledge/skill of teaching and learning in an online delivery model. If the program continues to expand the course offerings in the distance-learning model, the faculty would benefit from best practices from experts in the field.
- Monitor the number of students not taking the national certification examination. If there is an upward trend, investigate reasons and develop an action plan (e.g. module on test-taking skills, practice mock exams).

Advisory Committee Members- Attended Meeting (March 5, 2012)

1. Larry Dean, University of Utah
2. Vickie Griffin, Lakeview Hospital
3. Huy Le, University of Utah
4. Amber Lamb, Ogden Regional
5. Tifini Corbin, Ogden Regional
6. Nicole Price, Davis Hospital
7. Shantel Peterson, McKay Dee Hospital
8. Yasmien Simonian, Dean
9. Carolyn Russell, McKay Dee Hospital
10. Marcus Trinite, Davis Hospital
11. Julie Watkins, recent graduate