

**CAPR Documents for Five-Year Review 2006\*  
AY 00-01 through AY 04-05**

**Self-Study  
Five-Year Plan  
Outside Reviewer Report  
Program Response**

**Department of Public Affairs and Administration  
Master of Science in Health Care Administration**

**\*The documentation included for the Five-Year Review adheres to the guidelines set out in 00-01 CAPR 7, Policies and Procedures for Five-Year Reviews and Plans.**

## SELF-STUDY

### Introduction to the Program

The Master of Science in Health Care Administration (MS-HCA) Program is one of two graduate degree programs currently housed in the Department of Public Affairs and Administration (PUAD), which was formally the Department of Public Administration. It is a young program, with the first students entering the program in Fall 2000. At that time, the interdisciplinary MS-HCA degree was offered by the Department of Public Administration, in cooperation with the Department of Nursing and Health Sciences in the School of Science and the School of Business and Economics. Dr. Ann L. Abbott was the Graduate Coordinator and program faculty included:

- Full Professors
  - Brenda J. Bailey (Nursing)
  - Bette Felton (Nursing)
  - Lynn C. Paringer (Economics)
  - Pamela K. Parlocha (Nursing)
- Assistant Professors
  - Ann L. Abbott (Public Administration)
  - Linda F. Dennard (Public Administration)
  - Chris M. Wood (Nursing)

Students were required to take core courses in leadership and change in health care organizations, health care financing and budgeting, health care policy, research, information technology in health care, and legal and ethical issues in health care. The program offered three option areas:

- Nursing Administration
- Management and Change in Health Care
- Administration of Healthy Communities

The MS-HCA program required completion of 48 quarter units consisting of required core courses (24 units), option area courses (20 units), and the capstone experience (4 units), which was a choice among a comprehensive exam, a project, or a departmental or university thesis.

In Fall 2000, the program admitted 16 students and the Fall admission has increased substantially of the last five years: 21 in 2001, 33 in 2002, 44 in 2003, and 54 in 2004. In AY 02-03, 9 students graduated followed by 15 in AY 03-04, and 16 in AY 04-05.

Dr. Ann Cunliffe joined PUAD in Fall 2001, and became the Graduate Coordinator in Fall 2002. By Fall 2002 the Nursing Administration and Administration of Health Communities options had been temporarily suspended, in part due to faculty attrition. Dr. Cunliffe remained as the Graduate Coordinator until Fall 2004 when Dr. Toni E. Fogarty became the Graduate Coordinator.

## I. Summary of Previous Five-Year Review

This is the first five-year review conducted by the MS-HCA program, so there is no previous review to summarize.

## II. Tenure-Track Requests and Appointments

PUAD offers two graduate degree programs, the MS-HCA and the Master of Public Administration (MPA). Regular faculty members in PUAD are primarily aligned with only one of the degree programs, although occasionally faculty members will "crossover" to teach a course in the other degree program. During the first four years under review, no faculty member in the department was primarily aligned with the MS-HCA program. Currently (AY 04-05), of the five faculty members in the department, only one (Fogarty) primarily teaches in the MS-HCA program. Of the four faculty members who primarily teach in the MPA program, one is an Assistant Professor, one is an Associate Professor, and two are Full Professors. Dr. Fogarty, the one MS-HCA program faculty member, is an Assistant Professor.

As mentioned previously, Dr. Ann Cunliffe was appointed to the department in Fall 2001 and became the MS-HCA Graduate Coordinator in Fall 2002. Her tenure-track request and appointment thus occurred during the five years under review in this report. However, even though she was the MS-HCA Graduate Coordinator from Fall 2002 to Fall 2004, the tenure-track request and the appointment for Dr. Cunliffe were for the MPA program, not the MS-HCA program. Dr. Cunliffe is an internationally recognized scholar in the fields of public administration, organizational change, and leadership, but she has very limited experience in the field of health care administration.

In AY 02-03, the department requested and received approval for a tenure-track appointment in the MS-HCA program. Dr. Toni E. Fogarty was appointed in Fall 2003 and was selected primarily because of her academic and professional background in health care administration and her experience as Program Director for two Graduate Health Care Administration Programs (University of San Francisco and Golden Gate University). The department planned for Dr. Fogarty to assume the Graduate Coordinator position after her first year, and she did so in Fall 2004. Dr. Cunliffe resigned her faculty position in Summer 2004, which resulted in Dr. Fogarty being the only member in the department with any academic background in health care administration.

In AY 04-05, the department requested and received approval for a tenure-track appointment in the MS-HCA program. Dr. Lisa Faulkner, who has an excellent academic and professional background in health care administration, will begin her appointment in Fall 2005.

The tenure-track position announcements for the two positions and the CVs of the faculty members are included in the Appendix.

### III. Assessment for MS-HCA Program

With the input of alumni and current students, the MS-HCA has developed draft mission, vision, and value statements, and these items are included in the Appendix, along with the Outcomes Assessment Document.

To summarize the Outcomes Assessment Document, the MS-HCA program currently uses six assessment measures: HCA 6893 (Internship), HCA 6899 (Graduate Project), student opinion and learning satisfaction surveys, advising sessions between individual students and the Graduate Coordinator, tracking of employment placement and/or promotion after degree completion, and external indicators such as acceptance into doctoral programs or into prestigious internship or training programs.

#### *HCA 6893 (Internship)*

The MS-HCA Graduate Coordinator serves as the internship supervisor for all of the MS-HCA internships and reviews all of the student reports and the preceptor evaluations. As part of the review, she makes note of any perceived program deficiency and evaluates whether or not the program effectively addresses the knowledge or skill set. If it does not, and if the knowledge areas or skill set is one that the accreditation body for graduate health care administration programs identifies in its accreditation criteria, she recommends program changes to the department in order to eliminate the deficiency. The entire curriculum of the MS-HCA program was recently redesigned and the changes approved by the department. The proposed redesigned curriculum is included in the Appendix. Many of the program changes were the result of the outcome information in the student reports and preceptor evaluations.

For example, one student indicated in her internship report that she did not believe that health care quality assessment and improvement was sufficiently covered in the program and suggested that a specific quality assessment and improvement methodology, such as Six Sigma, Lean Manufacturing or Continuous Quality Improvement (CQI), be incorporated into the program. As a result, quality assessment and improvement using Six Sigma was the topic in the next HCA 6999 (Topics in Health Care) course. In addition, HCA 6231 (Quality Assessment and Improvement) was added as an elective in the proposed program redesign.

#### *HCA 6899 (Graduate Project)*

In order to successfully complete HCA 6899, the student must demonstrate an understanding of theory and practical knowledge in health care applications, must articulate a clear sense of professional purpose, and must effectively utilize research and analytical skills, which are the program's student learning outcomes. The Graduate Coordinator evaluates all project proposals and supervises the completion of the project product and the project report. In reviewing the project proposals, she tracks which program courses are identified as beneficial and which are not. In addition, supervising

the project and reviewing the project reports provide her with an evaluation of the four student learning outcomes for each student and she uses this information to recommend course and program changes to the department.

### *Student Opinion and Learning Satisfaction Surveys*

In AY 2004-2005, MS-HCA students were surveyed on two topics, on-line courses and the MS-HCA major curriculum design. Their opinions were reviewed by the Graduate Coordinator and the department and became the basis of the MS-HCA program strategy regarding the use of on-line courses. The results of the on-line opinion survey indicated that the students would like to have a mixture of fully on-line, hybrid, and fully in-person classes. The department is moving in the direction suggested by the students and has offered three of the MS-HCA courses in a hybrid format (half of the sessions on-line and half in-person). We are expecting to administer the on-line opinion survey on a yearly basis to track student satisfaction with their on-line experience.

### *Employment Placement and/or Promotion*

The MS-HCA program maintains contacts with many of its alums via e-mail and in-person meetings. For the majority of the alums, the program informally tracks employment information. Having the MS-HCA alums meet their professional goals is a measure of the effectiveness of the program and an indication of positive SLOs.

### *Advising Sessions*

The Graduate Coordinator serves as the program advisor for all of the MS-HCA students and meets with the students quarterly. During these meetings, the Graduate Coordinator evaluates the student's experience in the program and helps the student resolve any issues that are affecting the student's progression through the program. These advising sessions are an effective way for the Graduate Coordinator to measure individual student's learning outcomes. As a result of student input in these advising sessions, the Graduate Coordinator developed an annual course schedule and a degree-completion worksheet, both of which have been helpful to the students.

### *Acceptance into Doctoral Programs or into Prestigious Internship or Training Programs*

Since AY 03-04, we have tracked MS-HCA students' acceptance into doctoral programs and into the Minority Training Program in Cancer Control Research (MTPCC), sponsored by the University of California, San Francisco and the University of California, Los Angeles. To date, we have had four students accepted into doctoral programs, including programs at University of Washington, Northeastern University, and Loma Linda University. Having MS-HCA graduate successfully compete for acceptance into a doctoral program is an indication that the program is meeting the program's SLOs.

Although it is not one of the primary six assessment measures, another indicator of the MS-HCA's success is its steady increase in admissions, enrollment and average section size. In Fall 2000, the program admitted 16 students and the Fall admission has increased substantially: 21 in 2001, 33 in 2002, 44 in 2003, and 54 in 2004. In AY 02-03, 9 students graduated followed by 15 in AY 03-04, and 16 in AY 04-05. Currently, 57 students are in the MS-HCA program. Many of the courses, especially those in AY 04-05 exceeded the course caps, with the percentage of the caps ranging from 100 to 128 percent.

#### IV. Program Data, AY 00-04

The quantitative data for the MS-HCA program's performance can be seen in the Table of Academic Performance Review Statistics in the Appendix.

As can be seen in the Table, the number of majors admitted in the Fall has steadily increased from Fall 2000, from 16 admissions in 2000 to 54 in 2004. The FTES has also significantly increased over the last five years, from 7.2 FTES in AY 00-01 to 74.2 FTES in AY 04-05.

The data regarding the average section size is somewhat misleading. The average section size includes courses that typically have a low number of enrollments, i.e., Graduate Project and Independent Study. These outliers pull down the average section size. The majority of the MS-HCA courses meets the course cap or exceeds the course cap, excluding the graduate project and independent study.

A number of students are selecting the Graduate Project as their capstone experience instead of the HCA 6901 Synthesis course. Having the Graduate Project instead of the Synthesis gives a student a "hands-on" piece of work to show to prospective employers and gives the student an opportunity to work with a health care organization sponsoring the project. The types of projects completed for this range vary widely, and examples of projects include:

- Designing and conducting a diabetes workshop in a medical clinic for parents of children with diabetes and for whom English is not the first language
- Drafting the quality standards report for a health care plan as part of its accreditation review by the National Committee for Quality Assurance (NCQA)
- Creating an outreach plan for a breast cancer resource center that targets underserved populations in the Oakland area
- Performing a statistical analysis of service usage data for a VA hospital in terms of gender, medical condition, severity of condition, and service outcome

The project has two components: the "product" and the project report. The product is what the student actually creates for the health care organization that is sponsoring the project. For example, the workshop and the outreach plan are both project products. The project report is a 30 to 50-page paper that explores in depth the theoretical and research underpinnings of the product. For example, in the case of the diabetes

workshop for parents for whom English is a second language, why the student designed the workshop in the manner that s/he did is based on community health outreach theory, health education theory, cultural competency theory, adult learner theory, and research into the causes, prevention and control of diabetes.

While moving into offering more Graduate Projects is beneficial for the students and the health care community, supervising each project is labor-intensive.

The impact of the changes in the capstone experience, number of majors, average section size, FTES, FTEF, and SFR has placed pressures on the program, especially given the lack of faculty resources. Having only one faculty member with health care administration expertise during the majority of the five years under review has had a serious impact on the MS-HCA program and on the one faculty member. The burden of advising, curriculum revision, teaching, committee work, project supervision, university service, and program assessment has been substantial. Program work that is critical for the program's continued growth and success is not being done as quickly as it should, although a substantial amount of work is being accomplished. There are a number of activities that are "in process" that would be further along if there were additional program faculty. These activities include:

- Developing an advisory board
- Building a student association
- Designing and pushing through revisions in the program requirements and curriculum
- Creating partnerships with community health care facilities and employers
- Networking with health care administration professional and academic organizations
- Establishing an alumni association
- Increasing internship opportunities
- Moving the program towards accreditation
- Implementing student recruitment and retention plans

#### V. Comparison to Other C.S.U. and U.C. Health Care Administration Programs

In the U.S. and Canada, there are fewer than 100 graduate programs accredited by the Commission on Accreditation of Healthcare Management Education (CAHME). Of those programs, two are located in the C.S.U. system and four in the U.C. system. In the C.S.U system, Long Beach has a MS-HCA program and San Diego has a Master of Public Health (MPH) program. In the U.C. system, Berkley and Los Angeles both have a MPH program and a joint MBA/MPH program. Of these programs, the educational goals of the C.S.U Long Beach MS-HCA program are most comparable. The degree requires 45 semester units (67.5 quarter units), including the following:

- 11 core courses
  - Health Care Economics
  - Health Care System

- Health Care Organization
- Health Care Human Resources
- Health Care Finance
- Health Care Legal Aspects
- Health Care Strategic Planning and Marketing
- Health Care Quantitative Methods
- Health Care Quality Assurance
- Health Care Integrative Seminar (counts as two courses)
- 1 specialization course
  - Choice of:
    - Hospital Management
    - Managed Care
    - Long-Term Care
    - Medical Group Practice
- 1 elective
- 1 project
- 1 internship

The C.S.U. Long Beach MS-HCA program meets all of the curriculum content requirements of CAHME. CAHME requires the following content areas:

- Structuring, marketing, positioning, and governing health organizations to achieve optimum performance
- Financial management of health organizations
- Leadership, interpersonal relations, conflict and change management, and written and oral communications skills
- Managing human resources and health professionals in diverse organizational environments (e.g., hospitals, clinics, home health agencies, insurers, pharmaceutical firms)
- Managing information including the collection, the statistical and non-statistical analysis, and summarizing management and health data for decision-making
- Economic analysis to support decision-making
- Legal and ethical analysis applied to business and clinical decision-making
- Government health policy formulation, implementation, and evaluation
- Assessment and understanding of the health status of populations, determinants of health and illness, and health risks and behaviors in diverse populations
- The management of change in health care organizations in diverse communities drawing broadly on the social and behavioral sciences
- Quality assessment of both business practices and health care delivery focusing on outcomes measurements, process/outcome relationships, and methods for process improvement

As can be seen in the proposed MS-HCA program redesign in the Appendix, all of the CAHME curriculum content is present. However, the Long Beach MS-HCA program has a significantly higher number of required units than our MS-HCA program (45 semester units compared to 48 quarter units). With the current level of program faculty,

it is virtually impossible for the program to offer the needed number of units required for accreditation.

## VI. Achievements Since AY 00-01

Although the MS-HCA program has had little faculty resources since its inception, a number of achievements have been accomplished. A partial list of these achievements includes:

- Hired two tenure-track faculty members (Fogarty, began Fall 2003 and Faulkner, begins Fall 2005)
- Designed several pieces of marketing/recruitment materials
  - MS-HCA Fact Sheet
  - Career and Opportunities in Health Care Administration and Management
  - Making the Choice Between the MS-HCA and the MPA with Health Care Option
  - MS-HCA Frequently Asked Questions
- Expanded project and independent study opportunities
- Established the MS-HCA Student Association
- Created relationships with some of the primary health care employers, including Kaiser Health Plan, Sutter Health Care, John Muir Hospital, Alameda Department of Public Health, San Francisco Department of Public Health, Telecare Corporation, and Clinical Research Office at the University of California, San Francisco
- Increased the number of internship sites and preceptors
- Established a contact person at CAHME to discuss the CAHME accreditation process and criteria
- Participated in five Graduate Open Houses
- Developed an annual course offering schedule
- Increased admissions and enrollments
- Published two MS-HCA Newsletters
- Designed a degree-completion worksheet that is used in advising sessions
- Completed a complete curricular review
- Participated in five University-hosted Career Fairs
- Developed draft mission, vision, and values statements
- Established a relationship with the Minority Training Program in Cancer Control Research (MTPCCR)
- Administered a survey to MS-HCA students regarding the use of on-line course delivery
- Expanded the use of technology in teaching, including the use of Blackboard and hybrid course development
- Created a mentoring/mentoree relationship with the Program Director of the Master of Healthcare Administration (MHA) program at Saint Louis University, a CAHME-accredited program
- Co-hosted five Annual PUAD Honors Banquets with the MPA program

- Increased student participation in health care professional organizations, including the Society of Professionals in Healthcare (SPH), American College of Healthcare Executives (ACHE), and the American Society on Aging (ASA)
- Solicited and utilized input from alums and current students regarding the MS-HCA program redesign
- Redesigned the program to better meet industry needs and CAHME standards

The MS-HCA program faculty member has also achieved several professional accomplishments during the review period, including:

- Co-authored the textbook, *Sarbanes-Oxley Nonprofit Management: Skills, Techniques & Methods*, published by John Wiley & Sons, Inc.
- Co-authored the textbook, *Sarbanes-Oxley for Nonprofits: A Guide to Building Competitive Advantage*, published by John Wiley & Sons, Inc.
- Co-authored the textbook, *Managing Risk in Nonprofit Organizations: A Comprehensive Guide*, published by John Wiley & Sons, Inc.
- Gave several presentations:
  - “Understanding Medicare: Eligibility, Benefits, and Costs”, Health and Information Counseling Center
  - “The U.S. Public Health System: Organization and Financing”, Certificate Program in Public Management Training
  - “The Choices and Costs for Long Term Care”, Osher Lifelong Learning Institute
  - “Overview of the Healthcare System in America”, Community Connections Program
  - “Funding and Financing for Healthcare Programs in America”, Community Connections Program

The MS-HCA students have also had significant achievements, both professionally and academically. A sample of the student achievements includes academic awards, fellowships, internship placement, and career advancement (the students have given permission for their names to be used):

- Padmaja Magadala – Selected to participate in the 7<sup>th</sup> annual Minority Training Program in Cancer Control Research “Career in Cancer Control Research” Summer Institute
- Bernadette Landeros – Awarded an Executive Fellowship by Sutter Health System
- Jenny Zhang – Promoted to Director of the Clinical Research Office, Hematology/Oncology, Adult Bone Marrow Transplant Program, University of California, San Francisco
- Annmarie Engelhardt – Co-founded the nonprofit Harvest Home Animal Sanctuary and serves as the CEO and Board Chair
- Amy Yu – Selected to participate in the Administrator-in-Training Program at Telecare Corporation
- Nataliya Lishchenko – First Place Winner for the 2004 Science 3010 Essay Contest, CSUEB – “Antibiotic Use in Relation to the Risk of Breast Cancer”

- Ramya Shetty – Awarded an internship position with the Office of AIDS Research in the Alameda Department of Public Health

### Conclusion

The MS-HCA program has worked and is continuing to work very hard to build the quality of its course offerings, create internship and employment opportunities for its students, move itself toward accreditation, and help the university meet its educational mission. Unfortunately, it is doing so against a number of obstacles – lack of faculty resources, heavy teaching load, lack of general resources, and rising demands for department and university service.

## Five-Year Plan

### Areas of Focus

During the next five years, the MS-HCA program plans to focus on four broad areas – curriculum development, student recruitment, networking, and program assessment.

#### *Curriculum*

During the next five years, two primary factors will drive changes in the program's curriculum – changes in the theoretical and/or practical knowledge needed by effective health care administrators and managers and the curriculum criteria of the accreditation agency, CAHME. The knowledge and skill sets needed by health care professionals should be reflected in the CAHME curriculum criteria, but that criteria may not satisfy the specific needs of the East Bay health care community. Keeping current with those local needs will require the program to engage in substantially more networking.

The plans for the curriculum are to more tightly align the curriculum and the number of program quarter units with the CAHME criteria and to meet the local community's needs. Creating additional options in the program, such as Community Health and Long-term Care Management is one of the goals. The goal of expanding the depth of the program will be meant by creating additional options and increasing the number of required units.

Within the next five years, the MS-HCA program plans to be accredited by CAHME. The accreditation process is a long and difficult one, but the program has already established a working relationship with CAHME consultants and has established a mentoring/mentoree relationship with the Program Director of the CAHME-accredited health care administration program at Saint Louis University.

#### *Student Recruitment*

The structure and financing of health care is changing rapidly. Future medical and health care managers must be prepared to deal with evolving integrated health care delivery systems, technological innovations, an increasingly complex regulatory environment, restructuring of work, and an increased focus on preventive care. They will be called upon to improve efficiency in health care facilities and the quality of the health care provided. Increasingly, medical and health care managers will work in organizations in which they must optimize efficiency of a variety of interrelated service - for example, those ranging from inpatient care to outpatient follow-up care.

To meet these responsibilities, medical and health care managers must be familiar with management principles and practices. A master's degree in health care administration is one of the standard credentials for most generalist positions in the health care field. For clinical department heads, a degree in the appropriate field and work experience may be sufficient for entry. However, a master's degree in health care administration or

a related field may be required to advance. For example, nursing service administrators usually are chosen from among supervisory registered nurses with administrative abilities and a graduate degree in nursing or health care administration.

Employment of medical and health care managers is expected to grow faster than the average for all occupations through 2012, as the health care industry continues to expand and diversify. The U.S. Department of Labor defines growth "faster than average for all occupations" as being increases in employment from 21 to 35%.

Given the high demand for health care managers and the need for graduate education to succeed as a manager, it is not surprising that the number of majors in the MS-HCA has grown steadily, in spite of a lack of marketing.

Over the next five years, the program will work closely with the CLASS publicist to engage in marketing activities, such as designing program brochures, website development, and community events. "Word of mouth" is an effective recruitment strategy but only if the program maintains an on-going relationship with its alumni. Creating an alumni association is one of the goals for the next five years.

### *Networking*

In order to know and meet the needs of the health care employers, the MS-HCA program must establish closer relationships with more of the employers in the general Bay Area. Having these connections will also provide the students will more internship and employment opportunities, and may increase applications for the program. The program plans to write a grant for the Robert Wood Johnson Foundation to fund a collaborative effort between the MS-HCA program and a number of the nonprofit health care employers in the area. The grant would fund the expenses involved in establishing a network among the participating employers. The MS-HCA program would provide "free" labor in terms of student interns and the employers would provide hands-on learning experiences for the students, which might lead to employment at the organization. This would be a good way to meet the needs of the Bay Area community and provide a service for the students.

### *Assessment*

In terms of assessment, over the next five years, the MS-HCA programs plans to do the following:

- Create and administer a Student Satisfaction Survey for each hybrid and fully on-line course
- Create and administer a Student Opinion Survey for each advising session
- Create a formal tracking mechanism of employment placement and/or promotion
- Create a formal tracking mechanism of internship evaluations

## Resources Needed

In order to meet the goals for the five-year plan, the MS-HCA program requests the following resources, in order of preference:

- Three tenure-track faculty positions
- Additional release time for the Graduate Coordinator in order to focus on accreditation
- A part-time assistant in program management, to work for the Graduate Coordinator
- A marketing budget, coordinated with the MPA program
- An events budget, coordinated with the MPA program

Women's  
Cancer  
Resource  
Center

February 15, 2006

Toni E. Fogarty, Ph.D., MPH  
Graduate Coordinator, MS-HCA Program  
Department of Public Affairs and Administration  
California State University, East Bay  
25800 Carlos Bee Boulevard  
Hayward, CA 94542

Based upon the extensive set of program materials you sent to me, the five-year review document, meetings with you and current students, a review of your program's website, and the Committee on Academic Review's outside reviewer rubric, enclosed please find my evaluation of the MS-HCA program's activities over the past five years, its plan for the next five years, and your overall review. Considering your program is a relatively new program with very little faculty support, I am overall impressed with what the program has accomplished and, with proper resources, believe the program could be a successful entity. Given the high demand and need for competent health care managers, there is a community need for your program. Without increased resources, however, there is little likelihood of the program achieving accreditation.

Regarding requests for new faculty, the program is moving in the right direction. The CVs and professional accomplishments of the two recent appointments are consistent with the current direction of the health care administration field and between the two faculty members, the program covers the full range of the curriculum content required for accreditation. Having both faculty members with doctoral degrees from the same university (UC, Berkeley), however, may limit the theoretical perspectives to which your students are exposed.

Regarding curricular changes, the proposed program redesign will better place your program to meet the requirements of the health care administration field and moves the program towards the *breadth* of curriculum content available at similar programs in the CSU and UC systems, as well as moving the program closer to the accreditation requirements. You clearly identified the curriculum in content-centered terms, and tied the content to student knowledge and skills. However, as you pointed out in the self-study, the program is unable to offer the *depth* of content that can generally be achieved by offering more specialized courses and increasing the required program units. This will require additional faculty support.

Regarding the student and program statistics provided, I am amazed that the teaching load, increases in student admission, curriculum development, and advising load have been managed by one faculty member, especially considering the expansion of the number and types of internship sites, the increased use of graduate projects as the capstone experience, and the

amount of industry and professional networking. It is highly unlikely that this work burden can be sustained.

Regarding the achievements of the faculty, the publication of three textbooks and the number of university and community presentation clearly exceed expectations, especially in a teaching-oriented university and for a faculty member who has substantial administrative duties and responsibilities.

Regarding the achievements of the students, the number of awards, fellowships, and placements in competitive internships is noteworthy. Given that the majority of the MS-HCA students are ethnic minorities, the program's participation in the Minority Training Program in Cancer Control and Research (MTPCCR) is very appropriate. Not having an alumni association, however, misses the opportunity to provide mentoring and networking activities for the current students and the alumni.

Regarding growth in the health care administration field, you point out that the health care field is one of the fastest growing sectors in the U.S. economy. I agree with that assessment and see the demand for well-trained health care managers to continue to grow. Considering the growth in your program with only very little marketing efforts, once you implement an effective marketing plan your number of students should increase dramatically. The program's movement towards on-line course offerings also increases the likelihood of increased admissions. Having a variety of course delivery modalities will make the program more attractive to potential students, assuming that the quality of the courses remains high. Offering a variety of modalities, however, is labor-intensive.

Regarding the amount of resources that you requested in your plan, you have requested what I would view as the minimum additional resource requirements. However, given the financial constraints in today's California, it may have been realistic for you to do limit your request. With careful resource management and strategic marketing, the program should be able to reach its proposed plan.

Regarding the program facilities (space, equipment, and technology), the program is again facing limitations. Meiklejohn Hall, the primary building housing MH-HCA faculty and classrooms, needs updating. There appears to be a shortage of faculty offices, based on the number of shared offices, and the department conference room is quite small. If additional faculty members are recruited, the program may exceed the office space available. In regards to technology, the program is making good use of Blackboard, which is a fairly reliable and well-supported on-line course delivery medium. The amount of technical support on campus seems sufficient, especially with the faculty development workshops offered by the Office of Faculty Development. Meiklejohn Hall has several "smart" classrooms, but these rooms do not appear to be well-maintained.

Regarding the students, I met and discussed career goals and educational needs with three of your current students, and one alumni. They all seemed genuinely appreciative of the program and department's efforts on their behalf. The program should capitalize on this appreciation by building a supportive alumni association that could conduct fund-raising, mentoring, and

networking opportunities. While all were generally enthusiastic about the program, the current students indicated that more internship and networking opportunities were needed. They were also somewhat concerned about the scheduling of courses and the number of sections available. On several occasions, the demand for enrollment in core classes exceeded the number of open slots, and additional sections were not opened. The number of students is large enough to warrant multiple sections of courses, especially the core classes. Additional faculty support will be required to do this.

In conclusion, the program has a well-developed and coherent plan and has conducted a thorough review of its activities of the last five years. The program is utilizing good assessment mechanisms, and has plans to engage in additional assessment activities.

Please let me know if you have any questions about this report or if you need additional information. I can be reached by telephone at 510-420-7900 or via e-mail at [peggy@wcr.org](mailto:peggy@wcr.org).

Sincerely,

A handwritten signature in cursive script that reads "Peggy McGuire".

Peggy McGuire, MHROD  
Executive Director, Women's Cancer Resource Center

## Program Response

The MS-HCA program appreciates Ms. Peggy McGuire's willingness to serve as the outside reviewer for its five-year review and is grateful to her for her detailed evaluation of the program. The MS-HCA program recruited Ms. McGuire to be the outside reviewer for its five-year review for a number of reasons. Ms. McGuire is a well-respected health care administrator in the Bay Area who is currently serving as the Executive Director of the Women's Resource Cancer Center and who formerly served as the Executive Director of the San Francisco Ronald McDonald's House. She thus has a practical understanding of the knowledge and skill sets a health care manager needs to be successful in the profession.

Ms. McGuire has extensive experience in academia, having served as the Executive Director of the Office of the President at Golden Gate University and as the President of the Board of Directors the Leadership Charter High School. While at Golden Gate University, Ms. McGuire also served as the Director of the HIP Program, and was instrumental in developing workshops for faculty development in the use of technology, particularly on-line course delivery.

Ms. McGuire is an expert in the field of organizational development, and earned her Master of Human Resources and Organization Development (MHROD) from the University of San Francisco. Finally, Ms. McGuire has worked closely with WASC as the WASC Site Visit Coordinator and Accreditation Liaison while at Golden Gate University, and presented a paper, "Implementing the WASC New Guidelines for Outcomes Assessment," at the 2002 WASC Annual Conference.

Ms. McGuire based her report on an extensive set of program materials provided by the program, the Self-Study and Plan, the Academic Performance Review Statistics, meetings with the MS-HCA Graduate Coordinator, meetings with current students and alumni, a review of the CSUH website, and a campus visit.

In general, the program agrees with Ms. McGuire's assessment, with one exception. In the report, Ms. McGuire stated that "having both faculty members with doctoral degrees from the same university (UC, Berkeley), however, may limit the theoretical perspective to which your students are exposed." Although both faculty members did earn their doctoral degrees from U.C. Berkeley, and in the same doctoral program, the option areas are significantly different. Dr. Fogarty's option area is the field of organizational theory and development, while Dr. Faulkner's option area was in the field of health care economics.

The program appreciates Ms. McGuire's acknowledgement of the many accomplishments of the program, in spite of its limited faculty resources. In essence, Ms. McGuire's comments all revolve around the need for the program to continue its work in curriculum development, student recruitment, networking with health care employers and professional associations, and assessment. She agrees that it will very difficult for the program to continue its work without additional resources, and believes

– that the program will be unable to achieve accreditation without those resources. In addition, Ms. McGuire's supports the program's move toward experimentation with on-line course delivery, and acknowledges that building the program's on-line capabilities will be labor-intensive.

# APPENDIX

CALIFORNIA STATE UNIVERSITY, HAYWARD

## FACULTY EMPLOYMENT OPPORTUNITY

DEPARTMENT OF PUBLIC ADMINISTRATION  
Master's Program in Health Care Administration

Position No. 03-4 PUAD-HEALTHCARE-TT

The Department of Public Administration is searching for a tenure track faculty member to teach primarily in its Master of Science degree program in Health Care Administration.

**THE UNIVERSITY:** California State University, Hayward occupies 342 acres in the Hayward hills, affording a panoramic view of nearly the entire San Francisco Bay Area. Cal State Hayward's proximity to the major Bay area cities provides unique cultural opportunities including museums, art galleries, aquariums, planetariums, plays, musicals, sport events, and concerts. Its nearness to the Pacific Ocean and Sierra Nevada Mountains offers recreational diversion as well as excellent laboratories for educational studies. The nine major buildings contain 150 classrooms and teaching laboratories, 177 specialized instructional rooms, numerous student oriented computer labs and a Library that contains a collection of over one million items accessible through HAYSTAC, its on-line catalog. The University has an enrollment of approximately 13,000 students with 600 faculty. CSUH is organized into four schools: Arts, Letters, and Social Sciences; Business and Economics; Education and Allied Studies; and Science. The University offers bachelor's degrees in 40 fields and master's degrees in 28 (in addition to Special Majors). Other programs lead to teaching, specialist, pupil personnel services, and administrative services credentials. CSUH also operates the Contra Costa Campus, a branch center in Concord, which provides full instructional support for over 1,600 upper division and graduate students.

**THE DEPARTMENT:** The Department of Public Administration has 5 full-time, tenured or tenure track faculty and several part-time practitioner-lecturers. It offers three degree programs: a NASPAA-accredited Master of Public Administration degree, an M.S. in Health Care Administration, and a B.A. in Arts Administration. The MS-HCA degree admitted its first students in the Fall, 2000 and just graduated its first student in June (2002). We are working toward accreditation in five years' time. At the moment, students may choose between two option areas: Management and Change in Health Care (drawing on supplemental courses from the Department of Management in the School of Business and Economics), and Administration of Healthy Communities. The degree with both options is currently offered on the Hayward campus alone (although the Department offers the MPA degree at the University's Contra Costa Campus, its Oakland Center, and in San Mateo county). The Department also

houses the Institute for Governmental Research and Training, which provides research and training activities for US and international practitioners and governmental agencies.

The Department believes that the challenge of the changing post-industrial era is best met by humanizing governments, health care agencies, and nonprofit organizations. We seek to provide students with a grounding in major philosophical and social scientific thinking about the nature of administrative practice and service, and we emphasize interpretive (i.e., phenomenological and hermeneutic) and critical theoretical perspectives in administrative theory, including social constructionist approaches to health and wellness. To learn more about the department and the University, visit our website at [www.csu Hayward.edu](http://www.csu Hayward.edu).

**DUTIES OF THE POSITION:** The successful candidate for this position will be expected to teach foundation and graduate courses in the MS in Health Care Administration degree program in a number of areas, including the social construction of health care; organizational and management issues, such as leadership, change, and legal and ethical issues; health care policy; research methods; and a graduate synthesis course leading to comprehensive exams. Depending on individual strengths and Departmental need, the person may also teach courses in the MPA program, which maintains an Option area focus in Health Care Administration. We are particularly interested in candidates who are committed to teaching from an interpretive (phenomenological, hermeneutic, constructionist) and/or critical theoretical perspective on health care organizations. In the future, this position may also entail serving as Graduate Coordinator for the MS-HCA degree. Please note that teaching assignments at California State University, Hayward include courses at both the Hayward and Contra Costa campuses, as well as in off-campus programs, which presently are based in Oakland and San Mateo County. In addition, all full-time faculty have advising responsibilities and assist the department with administrative and/or committee work, and are expected to assume School and/or University committee responsibilities.

**RANK AND SALARY:** Assistant Professor. Salary is dependent upon educational preparation and experience and is subject to budgetary authorization.

**DATE OF APPOINTMENT:** September 2003.

**QUALIFICATIONS:** Candidates should have a Ph.D. in Health Care Administration or a closely allied field, or a DPA or DPH, no later than the starting date. Experience that has fostered development of an effective teaching style is highly desirable, as is demonstrated ability to create research and community involvement opportunities for a diverse student population. To be recommended for tenure the candidate must demonstrate satisfactory performance in the areas

of teaching; research, scholarship, and/or creative activities; and service to the university, the department, the profession, and the community.

**APPLICATION DEADLINE:** Review of applications will begin December 10, 2002. Please submit a letter of application; a current vita; a list of teaching areas and courses taught; copies of 2-3 major publications; and three letters of recommendation to:

Prof. Ann Cunliffe, Chair, Search Committee  
Department of Public Administration  
California State University, Hayward  
Hayward CA 94542 US  
Phone: 510-885-3282  
Fax: 510-885-3726  
email: [acunliff@csu Hayward.edu](mailto:acunliff@csu Hayward.edu)

*Note: California State University, Hayward hires only individuals lawfully authorized to work in the United States. All offers of employment are contingent upon presentation of documents demonstrating the appointee's identity and eligibility to work, in accordance with the provisions of the Immigration Reform and Control Act.*

*CSUH is an Equal Opportunity Employer and does not discriminate on the basis of age, race, color, national origin, sex, sexual orientation or disability. The University is committed to the principles of diversity in employment and to creating a stimulating learning environment for its diverse student body.*

CALIFORNIA STATE UNIVERSITY, HAYWARD

## FACULTY EMPLOYMENT OPPORTUNITY

DEPARTMENT OF PUBLIC AFFAIRS AND ADMINISTRATION  
Masters Program in Health Care Administration

FULL-TIME TENURE-TRACK Position No. 05-06 PUAD-HEALTHCARE-TT

**THE UNIVERSITY:** California State University, Hayward occupies 342 acres in the Hayward hills, affording a panoramic view of nearly the entire San Francisco Bay Area. Cal State Hayward's proximity to the major Bay area cities provides unique cultural opportunities including museums, art galleries, aquariums, planetariums, plays, musicals, sport events, and concerts. Its nearness to the Pacific Ocean and Sierra Nevada Mountains offers recreational diversion as well as excellent laboratories for educational studies. The nine major buildings contain 150 classrooms and teaching laboratories, 177 specialized instructional rooms, numerous student oriented computer labs and a Library that contains a collection of over one million items accessible through HAYSTAC, its on-line catalog. CSUH is organized into four colleges: Arts, Letters, and Social Sciences; Business and Economics; Education and Allied Studies; and Science. The University offers bachelor's degrees in 41 fields and master's degrees in 28 (in addition to Special Majors). Other programs lead to teaching, specialist, pupil personnel services, and administrative services credentials. CSUH also operates the Contra Costa Campus, a branch center in Concord, which provides full instructional support for over 1,600 upper division and graduate students.

**THE DEPARTMENT:** The Department of Public Affairs and Administration has 5 full-time faculty and offers two degree programs: a NASPAA-accredited Master of Public Administration (MPA) degree, and an M.S. in Health Care Administration (new as of the Fall 2000). The MPA degree has more than 265 MPA students, who focus on one of seven option areas after completing foundation and core courses: Public Management, Public Human Resources Management, Public Budgeting and Finance, Administration of the Metropolitan Region, Public Policy Development, Organizational Change, and Health Care Administration. The MPA degree is offered at the main campus and that Contra Costa Campus, as well as at the University's education center in the City of Oakland. The M.S. in Health Care Administration degree is currently offered on the Hayward campus alone. The Department also houses the Institute for Governmental Research and Training, which provides research and training activities for US and international practitioners and governmental agencies.

The Department believes that the challenge of the changing post-industrial era is best met by humanizing governments, health care agencies, and nonprofit organizations. We seek to provide students with a grounding in major philosophical and social science thinking about the nature of administrative practice and service, and we emphasize interpretive (i.e., phenomenological and hermeneutic) and critical theory perspectives in administrative theory, including social constructionist approaches to health and wellness. To learn more about the position, the department, and the University, visit our website at

**DUTIES OF THE POSITION:** The successful candidate will be expected to teach both foundation and graduate courses in the MSHCA degree program. The successful candidate should be able to teach courses in both health care management, as well as courses in one or more of the following areas: health care information technology, health care finance, and health care

marketing and strategic planning. All faculty have advising responsibilities, assist the department with administrative and/or committee work, and are expected to assume campus-wide committee responsibility. Please note that teaching assignments at California State University, Hayward include courses at both the Hayward and Contra Costa campuses, and at the Oakland center and other off-campus sites.

**RANK AND SALARY:** Assistant Professor. Salary is dependent upon educational preparation and experience and is subject to budgetary authorization.

**DATE OF APPOINTMENT:** September 2005.

**QUALIFICATION:** Candidates should have a Ph.D. in Health Care Administration or a Doctorate of Public Health (DrPH) no later than the starting date. Candidates must have the potential to engage in scholarly research. Experience that has fostered development of an effective teaching style is highly desirable, as is demonstrated ability to create research and community involvement opportunities for a diverse student population. To be recommended for tenure, the candidate must demonstrate satisfactory performance in the areas of teaching; research, scholarship, and/or creative activities; service to the university, the profession, and the community.

**APPLICATION REVIEW:** Review of applications will begin on January 20, 2005. The position is open until filled.

Please submit a letter of application, a current and complete vita; a list of teaching areas and courses taught; copies of 2-3 major publications; and three letters of recommendation to:

Prof. O. Jay Umeh, Chair  
Department of Public Affairs and Administration  
California State University, Hayward  
Hayward, CA 94542 US  
Phone: 510-885-3282  
Fax: 510-885-3726  
email:

Note: California State University, Hayward hires only individuals lawfully authorized to work in the United States. All offers of employment are contingent upon presentation of documents demonstrating the appointee's identity and eligibility to work, in accordance with the provisions of the Immigration Reform and Control Act.

CSUH is an Equal Opportunity Employer and does not discriminate on the basis of age, race, color, national origin, sex, sexual orientation or disability. The University is committed to the principles of diversity in employment and to creating a stimulating learning environment for its diverse student body.

## MISSION, VISION, AND VALUES STATEMENTS

As part of creating its overall strategic plan, the MS-HCA program has worked on developing a mission statement, a vision statement, and a statement of the values that drive the program. In doing so, it has tried to tightly align itself with the University's mission and to support that mission fully. The University's mission statement is:

To provide an academically rich, multicultural learning experience that prepares all its students to realize their goals, pursue meaningful lifework, and to be socially responsible contributors to their communities, locally and globally.

### MS-HCA Program Mission Statement Under Consideration

The MS-HCA program is in the process of finalizing its mission statement. The program is working with current students, alums, and industry leaders to create a mission statement that is timely and supports the University's mission. The mission statement under consideration is:

The mission of the MS-HCA program is to be a vibrant community of in-person and virtual learning that provides an academically challenging experience that equips its students with the knowledge and skill set necessary to be successful and socially responsible administrators, managers, and leaders in their local and global health care communities.

### Vision Statement Under Consideration

As part of its overall strategic planning, the program has developed a draft vision statement. The vision statement under consideration is:

The MS-HCA program aspires to be:

- A learner-centered program with a strong reputation as a model for academic innovation and excellence, especially in integrating technology, pedagogy, learning, and community service.
- A program that is responsive to the needs of its students, its local community, and the field of health care
- A program whose graduate are innovative and effective health care administrators and managers, skilled in developing, organizing, and expressing creative solutions
- A program tightly connected to the civic, cultural, and economic well-being of its region and communities

## Values Under Consideration

The values statement currently under consideration is:

The MS-HCA program, as a member of the California State University, East Bay community and as reflected in the efforts of its program faculty, holds highest these principles:

- Mutual respect for diversity of people and opinions
- Ethical decision making
- Teamwork and cooperation in ventures
- Honesty in all communications
- Critical and creative thinking
- Applied learning in all endeavors

## OUTCOMES ASSESSMENT DOCUMENT

The MS-HCA program has identified four Student Learning Outcomes that it is tracking:

- Demonstrate the ability to understand theoretical and practical knowledge needed to successfully pursue health care career goals
- Demonstrate an understanding of the role of theory in health care administration
- Demonstrate the ability to articulate a clear sense of purpose as professionals in the health care field
- Demonstrate an understanding of research and analytical skills needed to explore new models of health care delivery and organizational design

The SLOs, their assessment, and their effect on course and program design are intertwined and cannot easily be unbundled. For this reason, this outcomes assessment document discusses the SLOs in terms of their shared assessment measures: HCA 6893 (Internship), HCA 6899 (Graduate Project), student opinion and learning satisfaction surveys, advising sessions between individual students and the Graduate Coordinator, tracking of employment placement and/or promotion after degree completion, and external indicators such as acceptance into doctoral programs or into prestigious internship or training programs.

### *HCA 6893 (Internship)*

In the MS-HCA program, the majority of the students select the internship as one of their three program electives. As part of the internship experience, students are required to write a 15 to 20-page internship report describing their internship duties and responsibilities, accomplishments in terms of organizational improvement or change, new skills developed, and how the MS-HCA program succeeded or failed in preparing the student for working in the health care field. In the evaluation of the program's preparation success or failure, the students identify courses that helped them be successful in the internship and what practical and theoretical knowledge and skill sets from those courses were beneficial. In identifying any program failure, students discuss skill sets that should have been developed in the program and areas of knowledge or expertise should have been covered.

In addition to the student internship report, the internship preceptor completes an evaluation of the student intern's performance. As part of this evaluation, the preceptor indicates any "holes" in the knowledge or skill set that the preceptor expected the student intern to have.

The MS-HCA Graduate Coordinator serves as the internship supervisor for all of the MS-HCA internships and reviews all of the student reports and the preceptor evaluations. As part of the review, she makes note of any perceived program deficiency and evaluates whether or not the program effectively addresses the knowledge or skill set. If it does not, and if the knowledge areas or skill set is one that the accreditation body for graduate health care administration programs identifies in its accreditation

criteria, she recommends program changes to the department in order to eliminate the deficiency. The entire curriculum of the MS-HCA program was recently redesigned and the changes approved by the department. The proposed redesigned curriculum is included in the Appendix. Many of the program changes were the result of the outcome information in the student reports and preceptor evaluations.

For example, one student indicated in her internship report that she did not believe that health care quality assessment and improvement was sufficiently covered in the program and suggested that a specific quality assessment and improvement methodology, such as Six Sigma, Lean Manufacturing or Continuous Quality Improvement (CQI), be incorporated into the program. Since the Commission on Accreditation of Healthcare Management Education (CAHME), the organization that accredits graduate health care administration programs, identifies quality assessment and improvement as one of their curriculum criterion, it was apparent that the perceived program deficiency should be addressed. As a result, quality assessment and improvement using Six Sigma was the topic in the next HCA 6999 (Topics in Health Care) course. In addition, HCA 6231 (Quality Assessment and Improvement) was added as an elective in the proposed program redesign.

#### *HCA 6899 (Graduate Project)*

The majority of students in the program use HCA 6899 (Graduate Project) as their capstone experience. In order to participate in the course, each student must prepare a project proposal, describing the overall project, the activities needed to complete the project, a project timeline, and which courses in the program prepared him or her to attempt the project. The types of projects completed for this range vary widely.

Examples of projects include:

- Designing and conducting a diabetes workshop in a medical clinic for parents of children with diabetes and for whom English is not the first language
- Drafting the quality standards report for a health care plan as part of its accreditation review by the National Committee for Quality Assurance (NCQA)
- Creating an outreach plan for a breast cancer resource center that targets underserved populations in the Oakland area
- Performing a statistical analysis of service usage data for a VA hospital in terms of gender, medical condition, severity of condition, and service outcome

The project has two components: the "product" and the project report. The product is what the student actually creates for the health care organization that is involved in the project. For example, the workshop and the outreach plan are both project products. The project report is a 30 to 50-page paper that explores the theoretical and research underpinnings of the product in depth. For example, in the case of the diabetes workshop for parents for whom English is a second language, why the student designed the workshop in the manner that she did is based on community health outreach theory, health education theory, cultural competency theory, adult learner theory, and research into the causes, prevention and control of diabetes.

In order to successfully complete HCA 6899, the student must demonstrate an understanding of theory and practical knowledge in health care applications, must articulate a clear sense of professional purpose, and must effectively utilize research and analytical skills, which are the program SLOs. The Graduate Coordinator evaluates all project proposals and supervises the completion of the project product and the project report. In reviewing the project proposals, she tracks which program courses are identified as beneficial and which are not. In addition, supervising the project and reviewing the project reports provide her with an evaluation of the four student learning outcomes for each student and she uses this information to recommend course and program changes to the department.

### *Student Opinion and Learning Satisfaction Surveys*

Soliciting the opinion of current and previous MS-HCA students, especially in terms of satisfaction, and using student opinion as a guide for program changes and development is one way of increasing the likelihood that the student's learning experience and learning outcome are positive. In AY 2004-2005, MS-HCA students were surveyed on two topics, on-line courses and the MS-HCA major curriculum design. Their opinions were reviewed by the Graduate Coordinator and the department and became the basis of the MS-HCA program strategy regarding the use of on-line courses. The results of the on-line opinion survey indicated that the students would like to have a mixture of fully on-line, hybrid, and fully in-person classes. The department is moving in the direction suggested by the students and has offered three of the MS-HCA courses in a hybrid format (half of the sessions on-line and half in-person).

We are expecting to administer the on-line opinion survey on a yearly basis to track student satisfaction with their on-line experience. Examples of the questions regarding on-line courses included the following:

Yes     No    *Have you ever taken any kind of on-line course?*

Yes     No    *Have you had any experience using Blackboard?*

Yes     No    *Do you think having some type of on-line courses would make the program more convenient?*

Yes     No    *Do you think having some type of on-line courses would decrease the program's quality?*

Yes     No    *Do you think having some type of on-line courses would make the courses more difficult?*

Yes     No    *Do you think having some type of on-line courses would decrease class discussion?*

Yes  No Do you support offering some type of on-line courses?

*What is your opinion about offering some-type of on-line courses? What should we avoid doing and what should we be sure to do? Give us any input that you think would help us make the right decisions about on-line courses.*

Examples of the questions asked regarding the MS-HCA program redesign included:

- *Are there courses that you think should have been included? If yes, which ones?*
- *What do you think about the required core courses? Are there any courses that shouldn't be core courses? Are there any courses that should be core courses?*
- *Do you think the courses for each of the options make sense? If no, what would you change?*
- *Do you think that long-term care management and community/public health should be the next option areas? If no, which options would you like to see?*
- *Do you like the proposed program? If yes, why? If no, why not?*
- *Do you have constructive comments about the proposed program? Any information you want us to consider? Please give us any constructive comments you can.*

#### *Employment Placement and/or Promotion*

Students in the MS-HCA program have generally fallen into one of two groups: those with no or limited U.S. health care system experience and those who have extensive experience. For those with no or limited health care experience, the general professional goal is to find employment in a health care organization at the mid-level managerial/administrative rank. For those with experience, the typical professional goal is to gain promotion and/or salary increases. The MS-HCA program maintains contacts with its alums via e-mail and in-person meetings. For the majority of the alums, the program informally tracks employment information. Having the MS-HCA alums meet their professional goals is a measure of the effectiveness of the program and an indication of positive SLOs. The MS-HCA program is moving to create a MS-HCA Alumni Association and will continue to track the alums through the association.

#### *Advising Sessions*

The Graduate Coordinator serves as the program advisor for all of the MS-HCA students. Students are encouraged to meet with the Graduate Coordinator before or during their first quarter in the program to develop a degree completion plan. Students then generally meet quarterly with the Graduate Coordinator to discuss their progress through the program, develop career plans, and select courses for the next quarter. During these meetings, the Graduate Coordinator evaluates the student's experience in the program and helps the student resolve any issues that are affecting the student's progression through the program. These advising sessions are an effective way for the Graduate Coordinator to measure individual student's learning outcomes. Although the

number of students in the MS-HCA program is increasing, the Graduate Coordinator plans to continue to be the primary advisor for the MS-HCA students.

*Acceptance into Doctoral Programs or into Prestigious Internship or Training Programs*

Over the past two years, a number of MS-HCA students have been accepted in doctoral programs or into prestigious internship or training programs. In AYs 02-03, 03-04, and 04-05, two students per year were selected to participate in the Minority Training Program in Cancer Control Research (MTPCC), sponsored by the University of California, San Francisco and the University of California, Los Angeles. Each year, only 25-30 students are selected from universities across the U.S., including institutions such as Harvard University, Cornell University, and the University of California, Berkeley. The competition for placement with the MTPCC is very strong; being a participant in the program connects the participant with a number of experts and researchers in the field of cancer control, and increases the participant's likelihood of acceptance into a doctoral program. We have several students who will apply for the MTPCC in AY 05-06, and, there is a good likelihood that two or more students will be selected to join the program. Our students' success in the MTPCC indicates that the program is achieving success with SLOs.

Since AY 04-05, we have tracked MS-HCA students' acceptance into doctoral programs. To date, we have had four students accepted into doctoral programs, including programs at University of Washington, Northeastern University, and Loma Linda University. Having MS-HCA graduate successfully compete for acceptance into a doctoral program is an indication that the program is meeting the program's SLOs.

Academic Review Outcome Team Recommends Assessment Plan Rubric  
December, 2003

**STUDENT LEARNING OUTCOMES  
ASSESSMENT PLAN RUBRIC**

1. Mission, Goals, and Objectives	The plan should...	<u>Definitions of terms</u>	<b>Rubric:</b>	<b>Score</b>	<b>Page number</b>
	A. state the department or program mission in terms of educational purpose or goals	These are broad statements of purpose in philosophical terms often describing values and aspirations.	4 = very clearly stated 3 = stated with some clarity 2 = stated, but generally lacking clarity 1 = not stated	4	4 & Appendix
	B. relate the department or program's mission/goals to the University mission.	These statements explain how the program's goals support the University's mission.	4 = relationship(s) very clearly stated 3 = relationship(s) stated with some clarity 2 = relationship(s) stated, but generally lacking clarity 1 = relationship(s) not stated	4	4 & Appendix
	C. describe program in content-centered terms.	These statements describe essential educational content covered in order to achieve the program mission/goals. They identify in content-centered terms (e.g., concepts, theories, paradigms, etc.) the knowledge and skills the program aims to convey.	4 = content very clearly stated 3 = content described stated with some clarity 2 = content described, but generally lacking clarity 1 = content not described	3	5 & 7
	D. state intended student-centered objectives <b>at the program level</b> in measurable or observable terms.	Student-centered objectives describe <u>intended</u> student learning outcomes in terms of what students will be able to do and/or what changes in knowledge, attitudes or behavior will occur as a result of the program.	4 = has student-centered objectives consistently stated in measurable or observable terms 3 = has student-centered objectives but only some are stated in measurable or observable terms 2 = has student-centered objectives but none are stated in measurable or observable terms 1 = offers no student-centered objectives	3	4, 5, 6, & Appendix
	E. link program level student-centered objectives to specific course level student-centered objectives in measurable or observable terms.	These are lists, tables, or other schema showing intended student learning outcomes within courses or sequences of courses as they relate to overall program student learning objectives (e.g., showing hierarchical programmatic connections and/or explaining how courses fit together within degree programs and other course sequences such as options, minors, credentials, or concentrations, etc.).	4 = linkage(s) very clearly described 3 = linkage(s) described with some clarity 2 = linkage(s) described, but lacking clarity 1 = linkage(s) are not described	3	7, 8, 9, & Appendix

Academic Review Outcome Team Recommends Assessment Plan Rubric  
December, 2003

<b>2. Developing and Implementing Assessment Methods</b>	F. describe assessment methods for student-centered objectives (D) <b>at the program level.</b>	This section identifies and describes specific strategies and methods the faculty will use to determine whether students have achieved the program's intended student-learning outcomes (as listed in E).	5 = method (s) very clearly described, appear appropriate, and are consistently linked to specific objectives 4 = method (s) very clearly described, appear appropriate, but inconsistently linked to specific objectives 3 = method (s) as described are clearly inappropriate 2= method (s) named but are insufficiently described to ascertain appropriateness and/or linkage to objectives no methods are described	5	4, 5, & Appendix
	G. describe assessment methods for student-centered objectives <b>at the course level.</b>	This section uses course syllabi to illustrate specific strategies and methods the faculty use to determine whether students have achieved the intended student-learning outcomes <b>within</b> the courses that constitute the program.	5 = method (s) very clearly described, appear appropriate, and are consistently linked to specific objectives 4 = method (s) very clearly described, appear appropriate, but inconsistently linked to specific objectives 3 = method (s) as described are clearly inappropriate 2= methods(s) are named but are insufficiently described to ascertain appropriateness and/or linkage to objectives = no methods are described	4	4 & 5
	H. present results of assessment activities as summaries of actual student learning outcomes data that have been collected by the unit.	This section summarizes the results (using narrative, qualitative, quantitative, or mixed methods) from surveys, exams, or other direct measures of program or student learning outcomes.	Y = yes, actual results from assessment activities are presented in the documentation N = none are presented	Y	4 & 5
	I. describe and present results of other measures relating to program quality or effectiveness.	These typically include surveys, exit interviews, focus groups and other non-instructional assessment measures.	4 = such description is explicitly offered 3 = such description is at least implied 2 = description not apparent, but it is possible that the document intended to do this 1 = no such description offered	4	4, 5, 6, & 10

Academic Review Outcome Team Recommends Assessment Plan Rubric  
December, 2003

<b>3. Using Assessment Results</b>	J. offer well-reasoned conclusions concerning what action should be taken given the results of H and I above.	This section should present a logical analysis of the results (H and I) as they relate to intended and unintended program outcomes.	4 = conclusions are clearly supported by the data 3 = conclusions are only partially supported by the data 2 = conclusions are not supported by the data 1 = no conclusions are offered	3	4 & 5
	K. describe how conclusions drawn from assessment data are or will be used in academic planning processes for the program.	This section should describe how the results of assessment activities will be or have been used to inform its curricular, instructional, and/or strategic planning and implementation activities (g., program or course modifications, faculty development, advisement, or need for additional assessment data.)	4 = such description is explicitly offered 3 = such description is at least implied 2 = description not apparent, but it is possible that the document intended to do this 1 = no such description offered	4	4 & 5
	L. describe an overall plan or process for program evaluation.	This goes beyond F and G above to describe an overall plan for action in terms of how the unit will determine whether the program is meeting its goals and objectives (e.g. process, personnel, methods, timelines, etc.).	4 = such description is explicitly offered 3 = such description is at least implied 2 = description not apparent, but it is possible that the document intended to do this 1 = no such description offered	4	4, 5, & Appendix
	M. discuss student learning outcomes in the context of other planning or operational goals (e.g. resource, staffing, logistical, etc.).	These descriptions relate to additional activities or resources needed in order for programs or courses to achieve stated goals.	4 = such description is explicitly offered 3 = such description is at least implied 2 = description not apparent, but it is possible that the document intended to do this 1 = no such description offered	3	3, 4, 5, & 6
	N. show credible results of assessment activities in terms of their representation of student learning outcomes?	This is a composite judgment based on whether the measures appear valid (measure what they purport to measure) and reliable (measure it consistently) and whether the analyses of the data were done correctly.	4= totally credible 3= mostly credible 2= somewhat credible 1= not very credible or none offered	3	4 & 5

Academic Review Outcome Team Recommends Assessment Plan Rubric  
December, 2003

<b>4. Synthesis</b>	<b>Synthesis: Overall quality of plan</b>			
	O. show how the unit's use of student learning outcomes data is an <b>effective</b> part of that program's curriculum and course development and revision activities	This section should present a well-developed and coherent assessment plan that includes continuous and well-integrated linkage among assessment, planning, and implementation activities.	4 = definitely 3 = probably 2 = possibly, but uncertain 1 = definitely not	3
<b>5. Total</b>	<b>Total</b>			
	P. Sum of scores out of possible 66			
	Q. Average			

## **PROPOSED MS-HCA PROGRAM REDESIGN**

### **FOUNDATION COURSES**

HCA 4200 – Social Construction of Health Care

PUAD 4830 – Organization Theory and Human Behavior

STAT 1000 (or equivalent)

HCA 4200, PUAD 4830, and STAT 1000 (or equivalent) must be taken before taking any of the core courses or electives. The Writing Skills Test (WST) must be successfully completed before taking any of the core courses or electives.

### **CORE COURSES (28 Units)**

HCA 6200 – Organization and Management of Health Care (New course)

HCA 6210 – Leadership, Communication and Interpersonal Skills (New name)

HCA 6220 – Community and Public Health Management (New name)

HCA 6240 – Financial Management of Health Care Organizations (New name and changes  
PUAD 6876)

HCA 6260 – Health Care Policy Analysis (Existing course)

HCA 6270 – Health Care Economics and Decision-Making (New course)

HCA 6280 – Legal and Ethical Issues in Health Care (Existing course)

### **ELECTIVES (16 Units)**

There are three tracks, or options, in the program: Management, Organizational Development, and General. In the Management and Organizational Development tracks, the students must select courses from their specified track. In the General track, students may select courses from both the Management and Organizational Development tracks. Two future options are already under consideration and planning: Long-Term Care Administration and Public and Community Health.

Management	Organizational Development
HCA 6230 – Information Technology in Health Care (Existing course)	HCA 6250 – Group Procedures and Facilitation (Crosslisted w/PUAD 6762)
HCA 6231 – Quality Assessment and Improvement (New course and changes PUAD 6878)	HCA 6251 – Advanced Group Process for Organizational Change (Crosslisted w/PUAD 6763)
HCA 6232 – Social Policy and Long-Term Care Management (New course)	HCA 6252 – Intervention Strategies for Changing Organizations (Crosslisted w/PUAD 6764)
HCA 6233 – Managed Health Care and Market Reforms (New course and changes PUAD 6879)	HCA 6253 – Human Organizations and Social Realities (Crosslisted w/PUAD 6811)
HCA 6234 – Health Care Strategic Management and Marketing (New course)	HCA 6255 – Changing Human Organizations (Crosslisted w/PUAD 6812)
HCA 6235 – Human Resources Management in Health Care (New course)	HCA 6256 – Organizational Diagnosis (Crosslisted w/PUAD 6765)
Either:	Either:
HCA 6236 – Qualitative Research Methods (Crosslisted w/PUAD 6831) OR HCA 6237 – Quantitative Research Methods (Crosslisted w/PUAD 6832)	HCA 6236 – Qualitative Research Methods (Crosslisted w/PUAD 6831) OR HCA 6237 – Quantitative Research Methods (Crosslisted w/PUAD 6832)
HCA 6893 – Health Care Administration Internship (Existing course)	
HCA 6900 – Independent Study (Existing course)	
HCA 6999 – Issues in Health Care Administration (Existing course)	

### **CAPSTONE EXPERIENCE (4 Units)**

One of the following:

- HCA 6899 – Graduate Project (Existing course)
- HCA 6909 – Department Thesis (Existing course)

#### HCA 6233 – Managed Health Care and Market Reform (4)

Cross listed w/PUAD 6879

Examines managed care and integrated health systems, including health maintenance organizations, preferred provider organizations, and other types of managed care plans and related organizations. Formation, organization, contractual arrangements, and medical management of managed care regarding costs, utilization, quality, and access are analyzed from the perspectives of managed care organizations, employers, providers, and public policy. We will also consider potential alternative market structures for the US system by examining the healthcare systems in selected developed, developing, and undeveloped countries to see how they are meeting the challenge of managing multiple demands and pressures in their healthcare systems. Prerequisites: HCA 4200, PUAD 4830, STAT 1000, HCA 6200, HCA 6270, and WST.

#### HCA 6234 – Health Care Strategic Management and Marketing (4)

Explores the application of strategic planning concepts to health care organizations including discussion of health care marketing. Presents the strategic planning process as a series of interrelated analyses, management decisions, and management actions. Emphasizes analyzing the environment, responding to change, developing mission and goal statements, strategy formulation, and implementing strategy through the use of case studies. Prerequisites: HCA 4200, PUAD 4830, STAT 1000, HCA 6200, and WST

#### HCA 6235 – Human Resources Management in Health Care (4)

Application of the theories and concepts of human resources management to health care organizations. Human resources management topics include: legal and regulatory influences, job design and analysis, recruitment, selection, placement, compensation, performance appraisal and improvement, human resource planning and staffing, and training and development. Prerequisites: HCA 4200, PUAD 4830, STAT 1000, HCA 6200, and WST.

#### HCA 6236 – Qualitative Research Methods (4)

Crosslisted w/PUAD 6831

Theory and methods of interpretive research. Emphasis on meaning-centered and inductive modes of data-gathering and analysis, including interviews, participant observation, ethnographic methods and the development of grounded theory. Issues in case study presentation and field research narratives. Prerequisites: HCA 4200, PUAD 4830, STAT 1000, and WST.

#### HCA 6237 – Quantitative Research Methods (4)

Crosslisted w/PUAD 6832

Positivist research methods; uses of quantitative and computer analysis; application of quantitative approaches to organizational improvement, policy research, and decision making; implementation of research design; examination of the logic underlying application of quantitative methods and statistical techniques. Prerequisites: HCA 4200, PUAD 4830, STAT 1000, and WST.

#### HCA 6240 - Financial Management of Health Care Organizations (4)

Crosslisted w/PUAD 6876

Financial management concepts, techniques, and tools applied in health care organizations. Emphasis on financial statement analysis, management of working capital, budgeting, present value, financial markets, investment decisions, variance and cost analysis, internal controls, performance evaluation and pricing. Prerequisites: HCA 4200, PUAD 4830, STAT 1000, and WST.

#### HCA 6270 – Health Care Economics and Decision-Making (4)

Principles and tools of microeconomics and their application to the health care market. Applications particularly pertinent in today's political and economic climates include the demand and supply of health care, physician productivity and incentives, managed care, medical decision-making, medical malpractice and pharmaceutical economics. Prerequisites: HCA 4200, PUAD 4830, STAT 1000, and WST.

#### HCA 6280 – Legal and Ethical Issues in Health Care (4)

Review of legal processes and application of law and ethics to health care organizations. Topics include moral basis of ethics, sources of law, fiduciary duty, conflict of interest, tort and criminal law, confidentiality, resource allocation, consent, death and related administrative and biomedical issues. Methods to analyze and resolve ethical questions will be explored. Prerequisites: HCA 4200, PUAD 4830, STAT 1000, and WST.

#### HCA 6893 – Health Care Administration Internship (4)

Academically challenging field placement in a half-time or full-time position with a health care organization under the supervision of department faculty. Examination of the relationship of theory to practice in the delivery of health care services. CR/NC grading only; may not be repeated for credit. Prerequisites: HCA 4200, PUAD 4830, STAT 1000, WST, all core courses, and approval of the Graduate Coordinator.

#### HCA 6899 – Graduate Project (4)

Development of an original health care administration-related product that is described in a formal project report. Both the product and the project report are submitted to the department, which specifies their formats. An acceptable project covers some new ground, e.g. by developing a work procedure, process, or policy that does not already exist, or by enhancing some existing program to improve its functionality or performance. Requires supervision by a departmental faculty member and submission of a project proposal. Oral defense may be required. Prerequisites: Advancement to Candidacy, HCA 4200, PUAD 4830, STAT 1000, WST, all core courses, three electives, and approval of the Graduate Coordinator.

#### HCA 6900 – Independent Study (4)

Independent study under direction of faculty. May not be repeated for credit. Requires the permission of the Graduate Coordinator. Prerequisites: HCA 4200, PUAD 4830, STAT 1000, WST, all core courses, and approval of the Graduate Coordinator.

#### HCA 6909 – Department Thesis (4)

Development and writing of a research paper for submission to the department, which specifies its format. Supervision by a departmental faculty member. Oral defense normally required. (See also "Departmental Thesis Guidelines," available in the department office). Prerequisites: Advancement to Candidacy, all core courses, all electives, and approval of the Graduate Coordinator

#### HCA 6999 – Issues in Health Care Administration (4)

Reading, discussion, and research on contemporary and/or significant issues in health care administration. May be repeated for credit when content varies. Prerequisites: HCA 4200, PUAD 4830, STAT 1000, HCA 6200, and WST.

<b>FALL</b>	<b>WINTER</b>	<b>SPRING</b>	<b>SUMMER</b>
HCA 4200 – Social Construct	HCA 6210 – Leadership	HCA 4200 – Social Construct	HCA 6230 – Technology
HCA 6200 – Management	HCA 6232 – Long-Term Care	HCA 6200 – Management	HCA 6999 – Issues
HCA 6270 – Economics Crosslist w/PUAD 6878	HCA 6234 – Strategic Planning	HCA 6220 – Community and Public Health	HCA 6235 – Human Resources
HCA 6280 – Legal & Ethics	HCA 6233 – Managed Care Crosslist w/PUAD 6879	HCA 6231 – Quality	
HCA 6899 – Project	HCA 6240 – Finance Crosslist w/PUAD 6876	HCA 6260 – Policy	

✓ Move toward Accreditation



- Outside Review Recommendation  
- Growth

{ 3 - Strengths  
3 - Challenges }

Health Care Administration



✓ Needs - Competitors in area

**Subject:** Nov 2

**From:** Janet Patterson <janet.patterson@csueastbay.edu>

**Date:** Mon, 30 Oct 2006 22:56:13 -0800

**To:** "kim.geron" <kim.geron@csueastbay.edu>, "vish.hegde" <vish.hegde@csueastbay.edu>, "linda.smetana" <linda.smetana@csueastbay.edu>, Janet Patterson <janet.patterson@csueastbay.edu>, Aline Soules <aline.soules@csueastbay.edu>, "J. Guo" <jsh.guo@csueastbay.edu>, Evelyn Andrews <evelyn.andrews@csueastbay.edu>, jason.singley@csueastbay.edu, jay.tontz@csueastbay.edu, Julie Norton <julia.norton@csueastbay.edu>, rwhite22@horizon.csueastbay.edu, dlovitt58@aol.com, saeid.motavalli@csueastbay.edu, Susan Correia <susan.correia@csueastbay.edu>

Dear colleagues,

On Thursday we have several items for CAPR. One item to add to the agenda is approval of the CAPR report for the MS in Health Care Administration. Attached please find the report. Would you read it and comment, please. I realize that several of you were not on CAPR last year when this [program appeared at the meeting. Would you please review the report for typos, connectedness, and other editorial items? I will ask for approval on Thursday. The rubric is one of the new CAPR forms this year and you can see how it is to be completed. We will talk about the format of the review on Thursday as well.

Also, we will be voting on the CAPR policies document you received in advance of the last meeting. I saw just a few changes to the CAPR appendix that CAPR uses to evaluate. I attach the suggested changes here for our review.

Tanks

Janet

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Janet Patterson

Department of  
California State  
25800 Carlos Bee  
Hayward CA 94542

Telephone 510.885.2186

Fax 510.885.2186

ASHA Division 2 Coordinator

*emailed to  
CAPR  
Health Care  
Admin  
Dec CAPR*

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**CALIFORNIA STATE UNIVERSITY EAST BAY**

**DESIGNATION CODE: 06-07 CAPR**  
**DATE SUBMITTED:**

**TO:** The Academic Senate

**FROM:** The Committee on Academic Planning and Resources (CAPR)

**SUBJECT:** Five-Year Program Review for MS in Health Care Administration

**PURPOSE:** For Action by the Academic Senate

**ACTION REQUESTED:** Acceptance of the Five-Year Program Review of the MS in Health Care Administration Program and approval of the continuation of the Program without modification

**BACKGROUND INFORMATION/ Executive Summary:**

The Master of Science in Health Care Administration (MS-HCA) Program is one of two graduate degree programs currently housed in the Department of Public Affairs and Administration (PUAD), which was formally the Department of Public Administration. It is a young program, with the first students entering the program in Fall 2000. At that time, the interdisciplinary MS-HCA degree was offered by the Department of Public Administration, in cooperation with the Department of Nursing and Health Sciences in the School of Science and the School of Business and Economics. The program currently consists of two full time faculty members.

This is the first five year review for the program and it is to be commended for the thoroughness of the review and plan for the coming five years. The program has ambitious goals for the next review period, which include achieving professional accreditation from the Commission on Accreditation of Healthcare Management Education (CAHME), and completing a major curriculum revision.

In its Self Study the department painted a picture of itself as a vibrant and growing program. It has increased the number of majors threefold in recent years and anticipates further enrollment increase as the program broadens its interactions within the community. The program is aware of the importance of networking and marketing to attract students and has worked diligently with CLASS personnel to create recruitment materials. The program anticipates engaging in curriculum review in the next five years, driven primarily by two factors: changes in the profession and curriculum criteria for CAHME accreditation. It has requested additional tenure track positions in order to achieve these goals.

The program has initiated assessment activities and plans to create tracking mechanisms for its internship experiences and graduate employment. It is encouraged to develop regular and direct assessment embedded within the program courses.

CAPR recommends the continuation of the M.A. in Health Care Administration without modification.

**CAPR RECOMMENDATION FOR CONTINUATION OF THE PROGRAM**

CAPR recommends the continuation of the M.A. in Health Care Administration without modification. The next review will be in 2010-2011.

## **I. Background**

- **Overview description of the program**

The Master of Science in Health Care Administration (MS-HCA) Program is one of two graduate degree programs currently housed in the Department of Public Affairs and Administration (PUAD), which was formally the Department of Public Administration. It is a young program, with the first students entering the program in Fall 2000. At that time, the interdisciplinary MS-HCA degree was offered by the Department of Public Administration, in cooperation with the Department of Nursing and Health Sciences in the School of Science and the School of Business and Economics. The program currently consists of two full time faculty members.

This is the first five year review for the program and it is to be commended for the thoroughness of the review and plan for the coming five years. The program has ambitious goals for the next review period, which include achieving professional accreditation from the Commission on Accreditation of Healthcare Management Education (CAHME), and completing a major curriculum revision.

The MS-HCA scored 81% (47/58) on the *Student Learning Outcomes Assessment Plan Rubric* from the WASC Campus Outcome Team. All items except one were rated either the top rating on a 4 or 5 point scale, or second from the top. This suggests that the program is more than adequately meeting Student Learning Outcome expectations. All items rated less than the highest rating have been acknowledged by the program and will be addressed in future assessment activities.

In its Self Study the department painted a picture of itself as a vibrant and growing program. It has increased the number of majors threefold in recent years and anticipates further enrollment increase as the program broadens its interactions within the community. The program is aware of the importance of networking and marketing to attract students and has worked diligently with CLASS personnel to create recruitment materials. The program anticipates engaging in curriculum review in the next five years, driven primarily by two factors: changes in the profession and curriculum criteria for CAHME accreditation. It has requested additional tenure track positions in order to achieve these goals.

In Fall 2006 the program had XX majors and offered XX course sections. The program has identified four student learning outcomes and collected data to address them. These data will inform the department in future curricular planning.

- **Overview of the documents submitted to CAPR**

The following documents were submitted to CAPR for this five year review: Self-Study; Five Year Plan; Outside Reviewer's Report; Program Response; and Appendix, including Tenure track announcements, Mission, Vision and Values statements, Outcomes assessment document, Student Learning Outcome completed by the program, the proposed MS-HCA program redesign, course descriptions and annual schedule.

## **II. Five-Year Program Review/Self-Study (2000 - 2005)**

- **Summary of specific areas of the Self-Study**

The MS-HCA is to be commended for the thoroughness of the material presented to the Committee on Academic Program Review for the five-year review. The program clearly characterized its recent and current status with respect to faculty tenure track positions, student enrollment, and course of study. The department Self-Study document contains six sections that will be summarized below.

### Section I - Introduction

The MS-HCA was originally offered as an interdisciplinary program by the Department of Public Administration in cooperation with the Departments of Nursing and Health Sciences, and Economics. Students were required to take core courses in leadership and change in health care organizations, health care financing and budgeting, health care policy, research, information technology in health care, and legal and ethical issues in health care. The program offered three option areas:

- ❖ Nursing Administration
- ❖ Management and Change in Health Care
- ❖ Administration of Healthy Communities

The MS-HCA program required completion of 48 quarter units consisting of required core courses (24 units), option area courses (20 units), and the capstone experience (4 units), which was a choice among a comprehensive exam, a project, or a departmental or university thesis.

Dr. Ann Cunliffe joined PUAD in Fall 2001, and became the Graduate Coordinator in Fall 2002, remaining so until Fall 2004 when Dr. Toni E. Fogarty became the Graduate Coordinator. By Fall 2002 the Nursing Administration and Administration of Health Communities options had been temporarily suspended, in part due to faculty attrition.

### Section II - Summary of previous five year review

This is the first five year review for the program therefore no summary is required.

### Section III – Tenure track requests and appointments

PUAD offers two graduate degree programs, the MS-HCA and the Master of Public Administration (MPA). Regular faculty members in PUAD are primarily aligned with only one of the degree programs, although occasionally faculty members will “crossover” to teach a course in the other degree program. During the first four years under review, no faculty member in the department was primarily aligned with the MS-HCA program

As noted, Dr. Ann Cunliffe was appointed to the department in Fall 2001 and became the MS-HCA Graduate Coordinator in Fall 2002. While her tenure-track request and appointment occurred during the five years under review in this report, and even though she was the MS-HCA Graduate Coordinator from Fall 2002 to Fall 2004, the tenure-track request and the appointment for Dr. Cunliffe were for the MPA program, not the MS-HCA program. Dr. Cunliffe is an internationally recognized scholar the fields of public administration, organizational change, and leadership, but she has very limited experience in the field of health care administration. In AY 02-03, the department requested and received approval for a tenure-track appointment in the MS-HCA program. Dr. Toni E. Fogarty was appointed in Fall 2003 and was selected primarily because of her academic and professional background in health care administration and her experience as Program Director for two Graduate Health Care Administration Programs (University of San Francisco and Golden Gate University). The department planned for Dr. Fogarty to assume the Graduate Coordinator position after her first year, and she did so in Fall 2004. Dr. Cunliffe resigned her faculty position in Summer 2004, which resulted in Dr. Fogarty being the only member in the department with any academic background in health care administration.

In AY 04-05, of the five faculty members in the department, only one (Fogarty) primarily taught in the MS-HCA program In AY 04-05, the department requested and received approval for a tenure-track appointment in the MS-HCA program. Dr. Lisa Faulkner began her appointment in Fall 2005.

#### Section IV – Assessment for the MS-HCAC program.

The MS-HCA program currently uses six assessment measures: HCA 6893 (Internship), HCA 6899 (Graduate Project), Student opinion and learning satisfaction surveys, Advising sessions between individual students and the Graduate Coordinator, Tracking of employment placement and/or promotion after degree completion, and External indicators such as acceptance into doctoral programs or into prestigious internship or training programs. These measures are used to assess four Student Learning Outcomes:

- (1) demonstrate the ability to understand theoretical and practical knowledge needed to successfully pursue health care career goals,
- (2) demonstrate an understanding of the role of theory in health care administration
- (3) demonstrate the ability to articulate a clear sense of purpose as professionals in the health care field, and
- (4) demonstrate an understanding of research and analytical skills needed to explore new models of health care delivery and design.

The program presented numerical and anecdotal data from each of the six assessment measures. Taken together the data support student satisfaction with the program and indicate that students are successfully moving through the program and into doctoral education programs or prestigious professional positions. The program is encouraged to operationalize its Student Learning Outcomes and formalize data collection activities throughout the graduate program. In the five year plan, the program included four goals in the area for assessment which will address these recommendations. Those goals are:

- (1) create and administer a Student Satisfaction Survey for each hybrid and fully on-line course,
- (2) create and administer a Student Opinion Survey for each advising session,
- (3) create a formal tracking mechanism of employment placement and/or promotion, and
- (4) create a formal tracking mechanism of internship evaluations.

The Graduate Coordinator works closely with each student, meeting individually student at least once a quarter. As such, the Graduate Coordinator has a rich source of program evaluation data. In AY 2004-2005 the program administered a Student Opinion Survey to all graduate students. Students also submit reports regarding their internship experiences. Data from these three sources have been used to make curricular adjustments. For example, one student indicated in her internship report that she did not believe that health care quality assessment and improvement was sufficiently covered in the program and suggested that a specific quality assessment and improvement methodology, such as Six Sigma, Lean Manufacturing or Continuous Quality Improvement (CQI), be incorporated into the program. As a result, quality assessment and improvement using Six Sigma was the topic in the next HCA 6999 (Topics in Health Care) course. In addition, HCA 6231 (Quality Assessment and Improvement) was added as an elective in the proposed program redesign. These data are valuable and the program is to be commended for the student-centered manner in which it uses the data it gathers. The program plans to continue these data collection activities and is encouraged to add formalized program evaluation data to its assessment repertoire.

#### Section V – Program Data AY 2004-2005

The program submitted data for AY 2004-2005 in its five year review. Additional data from 2005-2006 were added for the CAPR review.

The number of MS-HCA majors admitted in the Fall has steadily increased from 16 admissions in Fall 2000 to 54 in 2004 (refer to the table below). The FTES has also significantly increased over the last five years, from 7.2 FTES in AY 00-01 to 74.2 FTES in AY 04-05. The number of degrees awarded has also increased from 0 in 2000-2001 to 16 in 2004-2005. These data demonstrate the increasing academic value of the program within the college as well as the program recruitment efforts.

	2000-2001	2001-2002	2002-2003	2003-2004	2004-2005
# Degrees Awarded	0	0	9	15	16
# of Majors Admitted in Fall	16	21	33	44	54
# of Courses / Sections	5	6	13	12	19
Average Section Size	13.6	12	11.2	18.3	14.6
FTES	7.2	18.6	38.9	58.5	74.2
FTEF	0	0	0	1	1
SFR	13:0	12:0	11:0	18:1	15:1
Total students	16	21	33	44	54

While the number of course sections has more than tripled during the period of the five year review, data from average section size is somewhat misleading. The number for average section size includes courses that typically have a low number of enrollments, i.e., Graduate Project and Independent Study, which pull down the average section size. The majority of the MS-HCA courses meet or exceed course caps.

#### Section VI – Comparison to CSU and UC Health Care Administration programs

In the U.S. and Canada, there are fewer than 100 graduate programs accredited by the Commission on Accreditation of Healthcare Management Education (CAHME). Of those programs, two are located in the CSU system and four in the UC system. In the CSU system, Long Beach has a MS-HCA program and San Diego has a Master of Public Health (MPH) program. In the UC system, Berkeley and Los Angeles both have a MPH program and a joint MBA/MPH program. Of these programs, the educational goals of the CSU Long Beach MS-HCA program are most comparable with CSUEB and will be used as a guide to curriculum development for the CSUEB MS-HCA program as it prepares for application for CAMHE accreditation. The CSULB program has significantly greater number of units required in its program. While CSUEB desires to offer that number of units in its program, at current levels of faculty staffing it is unable to do so.

#### Section VII – Achievements since AY 2000 – 2001

Considering the small number of faculty and students in the MS-HCA program as well as its youth, it has achieved an admirable list of accomplishments. Several activities that offer opportunity for faculty and students to interact were created, such as the MS-HCA Student Association, and a mentorship program. Technology has been infused into the program through Blackboard. Most importantly, the program has established numerous relationships with area agencies, such as local medical facilities and the Minority training Program in Cancer Control Research. MS-HCA faculty have authored three textbooks and given numerous professional presentations. MS-HCA students have received several academic honors and prestigious professional positions.

- **Summary of supporting data**

In summary, The MS-HCA program has worked hard to build the quality of its course offerings, create internship and employment opportunities for its students, move itself toward accreditation, and help the university meet its educational mission. All performance indicators and student opinion survey data suggest that this program is of value to the department, college and university.

### **III. Outside Reviewer's Comments & The Department's Response**

#### Summary of Outside Reviewer's Report

Ms. Peggy McGuire, MHROD, Executive Director of the Women's Cancer Resource Center in Oakland, CA was the Outside Reviewer for the MS-HCA and submitted her report on February 15, 2006. Ms. McGuire wrote. "Considering that your program is a relatively new program with very little faculty support, I am impressed with what the program has accomplished and, with need for competent health care managers, there is a community need for your program. Without increased resources, however, there is little likelihood of the program achieving accreditation.". In her report, Ms. McGuire addressed proposed curricular changes, faculty workload, faculty and student accomplishments and achievements, the program's plan to offer online courses, the need for health care administrators, program resources and facilities needs, and student satisfaction with the program.

Ms. McGuire suggested that the program's current resources and facilities are insufficient to sustain the growth evinced over the past five years. She noted that the program request for additional resources is minimal although in the current budget, likely realistic. Ms. McGuire also reported that student comments mirrored data from Student Opinion Surveys suggesting that students are generally please with the program and the manner in which it prepares them for a career in health care administration.

In summary, the report of the Outside Reviewer was favorably disposed to the progress, achievements and plans of the MS-HCA. It noted that the current levels of activity and plans for accreditation will likely not be maintained or achieved without additional personnel and physical resources.

#### Program's Response to the Outside Reviewer's Report

The MS-HCA program recruited Ms. McGuire to be the outside reviewer for its five-year review for a number of reasons. Ms. McGuire is a well-respected health care administrator in the Bay Area who is currently serving as the Executive Director of the Women's Resource Cancer Center and who formerly served as the Executive Director of the San Francisco Ronald McDonald's House. She thus has a practical understanding of the knowledge and skill sets a health care manager needs to be successful in the profession.

Ms. McGuire has experience in academia, having served as the Executive Director of the Office of the President at Golden Gate University and as the President of the Board of Directors the Leadership Charter High School. While at Golden Gate University, Ms. McGuire also served as the Director of the HIP Program, and was instrumental in developing workshops for faculty development in the use of technology, particularly on-line course delivery.

Ms. McGuire is an expert in the field of organizational development, and earned her Master of Human Resources and Organization Development (MHROD) from the University of San Francisco. Finally, Ms. McGuire has worked closely with WASC as the WASC Site Visit Coordinator and Accreditation Liaison while at Golden Gate University, and presented a paper, "Implementing the WASC New Guidelines for Outcomes Assessment," at the 2002 WASC Annual Conference.

The program appreciates Ms. McGuire's acknowledgement of the many accomplishments of the program, in spite of its limited faculty resources. In general, the program agrees with Ms. McGuire's assessment, with one exception. In the report, Ms. McGuire stated that "having both faculty members with doctoral degrees from the same university (UC, Berkeley), however, may limit the theoretical perspective to which your students are exposed." Although both faculty members did earn their doctoral degrees from U.C. Berkeley, and in the same doctoral program, the

option areas are significantly different. Dr. Fogarty's option area is the field of organizational theory and development, while Dr. Faulkner's option area was in the field of health care economics.

#### **IV. Program's Five-Year Strategic Plan (2005 - 2010)**

During the next five years, the MS-HCA program plans to focus on four broad areas – curriculum development, student recruitment, networking, and program assessment.

##### *Curriculum*

Two primary factors will drive changes in the program's curriculum – changes in the theoretical and/or practical knowledge needed by effective health care administrators and managers and the curriculum criteria of the accreditation agency, CAHME. The program has designed a curriculum that will more tightly align courses and program quarter units with the CAHME criteria and will meet health care professional needs in the local community. One example is creation of program options such as Community Health and Long-term Care Management.

Within the next five years, the MS-HCA program plans to apply for accreditation by CAHME. The accreditation process is long and difficult, but the program has already established a working relationship with CAHME consultants and a mentoring/mentee relationship with the Program Director of the CAHME-accredited health care administration program at Saint Louis University.

##### *Student Recruitment*

A master's degree in health care administration is one of the standard credentials for most generalist positions in the health care field. For clinical department heads, a degree in the appropriate field and work experience may be sufficient for entry. However, a master's degree in health care administration or a related field may be required to advance. According to the U.S. Department of Labor, employment of medical and health care managers is expected to grow faster than the average for all occupations through 2012, as the health care industry continues to expand and diversify. Given the high demand for health care managers and the need for graduate education to succeed as a manager, it is not surprising that the number of majors in the MS-HCA has grown steadily, in spite of a lack of marketing.

Over the next five years, the program plans to expand efforts to increase student enrollment. It will work closely with the CLASS publicist to engage in marketing activities, such as designing program brochures, website development, and community events. It plans to create an alumni association. These activities coupled with the general increase in health care personnel needs predict strong enrollment growth.

##### *Networking*

In order to know and meet the needs of the health care employers, the MS-HCA program must establish closer relationships with more of the employers in the general Bay Area. The program plans to aggressively pursue opportunities for networking. For example, it would like to write a grant for the Robert Wood Johnson Foundation to fund a collaborative effort between the MS-HCA program and nonprofit health care employers in the area

##### *Assessment*

The MS-HCA plans to operationalize and expand its assessment efforts in the next five years. Specifically, the assessment goals are:

- (1) create and administer a Student Satisfaction Survey for each hybrid and fully on-line course,
- (2) create and administer a Student Opinion Survey for each advising session,
- (3) create a formal tracking mechanism of employment placement and/or promotion, and
- (4) create a formal tracking mechanism of internship evaluations.

##### *Resources Needed*

In order to meet the goals for the five-year plan, the MS-HCA program requests the following resources, in order of preference:

- Three tenure-track faculty positions,
- Additional release time for the Graduate Coordinator in order to focus on accreditation,
- A part-time assistant in program management, to work for the Graduate Coordinator,
- A marketing budget, coordinated with the MPA program,
- An events budget, coordinated with the MPA program.

## **V. - CAPR Analysis Of The Program's Five-Year Review**

### **a. Program**

The MS-HCA conducted a thorough and balanced self-review. The data and documentation included in the review package clearly supported the claims and conclusions of the department and outside reviewer. The curriculum appears to be sound, with a clear direction for future growth. Student enrollment is growing and predicted to continue throughout the next review period. The program has revised its mission statement, and identified student-learning outcomes and plans for a detailed assessment process.

The program has ambitious plans for curricular changes, program expansion, and application for accreditation by its professional organization. The program is to be commended on its achievements to date and encouraged to continue on its current path.

CAPR as several recommendations for the MS-HCA:

- 1) Revise the Student Learning Outcomes to be stated in measurable terms,
- 2) Develop a rubric for each Outcome to evaluate the associated portfolio projects and demonstrate student learning for the respective outcome. Creation of a portfolio is the evidence of a student's learning; the rubric is an evaluation of the quality of that evidence.
- 2) Primary and direct outcome data to show the distribution of student performance on the Outcome rubrics should be included in the net review.
- 3) Formative assessment activities used as Outcome Indicators are not supported by data from clearly identified direct measurements of student learning outcomes. The program should review its Outcome Indicators and determine a method of direct measurement for each indicator. Data from these measurements should be collected over the coming years.
- 4) The program identified some trends in its limited assessment data. It is encouraged to examine future data for trends to support potential instructional changes.
- 5) The program indicated that it has current collaborations with other departments on campus and with community organizations, and has plans for future collaboration. CAPR recommends that the department continue to forge alliances with other departments to increase enrollment.
- 6) In its five year plan the program identified assessment goals of creating tracking mechanisms for internship evaluation and for employment placement. The program is encouraged to give these goals high priority.
- 7) The program is encouraged to create a schedule of annual assessment activities according to course schedule.

### **b. Resources**

The MS-HCA has established appropriate, admirable and ambitious goals for itself for the coming five year period. It identified five areas of resources that would assist it in meeting these goals. According to the report of the Outside Reviewer, the resources requested by the program are minimal. The reviewed also acknowledged that in the current budget climate, and with careful management, the program may be able to attain its goals.

**VI. CAPR Recommendation For Continuation Of The Program**

CAPR recommends the continuation of the M.A. in Health Care Administration without modification.

**VII. Date of the Program's next Academic Review**

AY 2010-2011

Academic Review Outcome Team Recommends Assessment Plan Rubric  
December, 2003

STUDENT LEARNING OUTCOMES  
ASSESSMENT PLAN RUBRIC

1. Mission, Goals, and Objectives	The plan should...	<u>Definitions of terms</u>	Rubric:	Score	Page number
	A. state the department or program mission in terms of educational purpose or goals	These are broad statements of purpose in philosophical terms often describing values and aspirations.	4 = very clearly stated 3 = stated with some clarity 2 = stated, but generally lacking clarity 1 = not stated	4	Appendix Mission, Vision and Values Statements are under consideration; advise CAPR when adoption occurs
	B. relate the department or program's mission/goals to the University mission.	These statements explain how the program's goals support the University's mission.	4 = relationship(s) very clearly stated 3 = relationship(s) stated with some clarity 2 = relationship(s) stated, but generally lacking clarity 1 = relationship(s) not stated	4	Appendix
	C. describe program in content-centered terms.	These statements describe essential educational content covered in order to achieve the program mission/goals. They identify in content-centered terms (e.g., concepts, theories, paradigms, etc.) the knowledge and skills the program aims to convey.	4 = content very clearly stated 3 = content described stated with some clarity 2 = content described, but generally lacking clarity 1 = content not described	3	Pages 2, 4, 5, Appendix
	D. state intended student-centered objectives <b>at the program level</b> in measurable or observable terms.	Student-centered objectives describe <u>intended</u> student learning outcomes in terms of what students will be able to do and/or what changes in knowledge, attitudes or behavior will occur as a result of the program.	4 = has student-centered objectives consistently stated in measurable or observable terms 3 = has student-centered objectives but only some are stated in measurable or observable terms 2 = has student-centered objectives but none are stated in measurable or observable terms 1 = offers no student-centered objectives	3	Appendix 3 of 4SLOs are not written in measurable terms; Program Director indicated they would be revised
	E. link program level student-centered objectives to specific course level student-centered objectives in measurable or observable terms.	These are lists, tables, or other schema showing intended student learning outcomes within courses or sequences of courses as they relate to overall program student learning objectives (e.g., showing hierarchical programmatic connections and/or explaining how courses fit together within degree programs and other course sequences such as options, minors, credentials, or concentrations, etc.).	4 = linkage(s) very clearly described 3 = linkage(s) described with some clarity 2 = linkage(s) described, but lacking clarity 1 = linkage(s) are not described	3	Pages 4, 7 and Appendix Linkages are described and planned for the next 5 year period

Academic Review Outcome Team Recommends Assessment Plan Rubric  
December, 2003

2. Developing and Implementing Assessment Methods	F. describe assessment methods for student-centered objectives (D) <b>at the program level.</b>	This section identifies and describes specific strategies and methods the faculty will use to determine whether students have achieved the program's intended student-learning outcomes (as listed in E).	5 = method (s) very clearly described, appear appropriate, and are consistently linked to specific objectives 4 = method (s) very clearly described, appear appropriate, but inconsistently linked to specific objectives 3 = method (s) as described are clearly inappropriate 2= method (s) named but are insufficiently described to ascertain appropriateness and/or linkage to objectives no methods are described	4	Pages 4, 5 & Appendix
	G. describe assessment methods for student-centered objectives <b>at the course level.</b>	This section uses course syllabi to illustrate specific strategies and methods the faculty use to determine whether students have achieved the intended student-learning outcomes <b>within</b> the courses that constitute the program.	5 = method (s) very clearly described, appear appropriate, and are consistently linked to specific objectives 4 = method (s) very clearly described, appear appropriate, but inconsistently linked to specific objectives 3 = method (s) as described are clearly inappropriate 2= methods(s) are named but are insufficiently described to ascertain appropriateness and/or linkage to objectives = no methods are described	4	Pages 4 & 5
	H. present results of assessment activities as summaries of actual student learning outcomes data that have been collected by the unit.	This section summarizes the results (using narrative, qualitative, quantitative, or mixed methods) from surveys, exams, or other direct measures of program or student learning outcomes.	Y = yes, actual results from assessment activities are presented in the documentation N = none are presented	N	Pages 4, 5 & Appendix Anecdotal evidence
	I. describe and present results of other measures relating to program quality or effectiveness.	These typically include surveys, exit interviews, focus groups and other non-instructional assessment measures.	4 = such description is explicitly offered 3 = such description is at least implied 2 = description not apparent, but it is possible that the document intended to do this 1 = no such description offered	4	Pages 4, 5, 6 & 10

Academic Review Outcome Team Recommends Assessment Plan Rubric  
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<b>3. Using Assessment Results</b>	J. offer well-reasoned conclusions concerning what action should be taken given the results of H and I above.	This section should present a logical analysis of the results (H and I) as they relate to intended and unintended program outcomes.	4 = conclusions are clearly supported by the data 3 = conclusions are only partially supported by the data 2 = conclusions are not supported by the data 1 = no conclusions are offered	3	Pages 7, 12 – 14
	K. describe how conclusions drawn from assessment data are or will be used in academic planning processes for the program.	This section should describe how the results of assessment activities will be or have been used to inform its curricular, instructional, and/or strategic planning and implementation activities (.g., program or course modifications, faculty development, advisement, or need for additional assessment data.)	4 = such description is explicitly offered 3 = such description is at least implied 2 = description not apparent, but it is possible that the document intended to do this 1 = no such description offered	4	Pages 4, 5 12 – 14
	L. describe an overall plan or process for program evaluation.	This goes beyond F and G above to describe an overall plan for action in terms of how the unit will determine whether the program is meeting its goals and objectives (e.g. process, personnel, methods, timelines, etc.).	4 = such description is explicitly offered 3 = such description is at least implied 2 = description not apparent, but it is possible that the document intended to do this 1 = no such description offered	4	Pages 4, 5 & Appendix
	M. discuss student learning outcomes in the context of other planning or operational goals (e.g. resource, staffing, logistical, etc.).	These descriptions relate to additional activities or resources needed in order for programs or courses to achieve stated goals.	4 = such description is explicitly offered 3 = such description is at least implied 2 = description not apparent, but it is possible that the document intended to do this 1 = no such description offered	3	Pages 3, 11, 14
	N. show credible results of assessment activities in terms of their representation of student learning outcomes?	This is a composite judgment based on whether the measures appear valid (measure what they purport to measure) and reliable (measure it consistently) and whether the analyses of the data were done correctly.	4= totally credible 3= mostly credible 2= somewhat credible 1= not very credible or none offered	1	Pages 4, 5 & Appendix Assessment activities underway and data will be forthcoming

Academic Review Outcome ~~Tea~~ Recommends Assessment Plan Rubric  
December, 2003

<b>Synthesis: Overall quality of plan</b>					
<b>4. Synthesis</b>	O. show how the unit's use of student learning outcomes data is an <b>effective</b> part of that program's curriculum and course development and revision activities	This section should present a well-developed and coherent assessment plan that includes continuous and well-integrated linkage among assessment, planning, and implementation activities.	4 = definitely 3 = probably 2 = possibly, but uncertain 1 = definitely not	3	Pages 4 – 7, 12 – 14 & Appendix
	<b>Total</b>				
<b>5. Total</b>	<b>P. Sum of scores out of possible 58</b>	47 (81%)			
	<b>Q. Average</b>	Items with 4 alternatives = $35/12 = 2.917$ Items with 5 alternatives = $8/2 = 4$			