



**COMMITTEE ON ACADEMIC PLANNING AND REVIEW
ANNUAL PROGRAM REPORT**

College	CLASS
Department	PUAD
Program Unit	MS-HCA
Reporting for Academic Year	2014-15
Department Chair	Professor O. Jay Umeh
Date Submitted	06/08/2015

1. SELF-STUDY (about 1 page)

A. Five-year Review Planning Goals

The last five-year review was completed in 2011-12, and PUAD met with CAPR in Spring 12 to discuss the review. In the review, the MS-HCA program proposed to focus on five broad areas – curriculum, networking, program assessment/improvement, grant writing, and faculty resources. These goals continue to be the program’s primary planning goals, and we have made progress in three of these goals in 2014-15.

B. Five-year Review Planning Goals Progress

CURRICULUM/PROGRAM ASSESSMENT: In our review we planned to have at least one department meeting or retreat each academic year devoted to discussing program assessment, the program assessment results from HCA 6899 (capstone course), and the curriculum. We had a department retreat in Summer 12 and Summer 13. We decided it was more effective to meet in the Spring quarters, and had a department meeting in Spring 14 and Spring 15. As part of our Spring 15 meeting, we discussed the upcoming Quarter to Semester Conversion, needed changes in the curriculum, and how the work would be accomplished. The MS-HCA curriculum will be transformed, which will require new PLOs, alignment of PLOs with ILOs, curriculum map, and degree completion roadmaps. The current courses will be deleted and replaced with nine four-unit courses.

NETWORKING: We planned to develop the program’s networking, strengthening our current relationships with health care employers and developing new relationships. This year, we have been able to add Kaiser Permanente Santa Clara to our list of partners through our relationship with Nicole Faria, Student Placement Coordinator. We also continue to place a number of students at Kaiser Permanente, Greater Southern Alameda Area, via the relationship with Christy Larton, Program Coordinator of Student Placement Externship. We also have a strong relationship with Sherry Higgs, who is the Executive Director of the nonprofit Drivers for Survivors and have placed several interns with her. We have had several Affiliation MOUs approved this year: Vitas Hospice, Alta Bates Summit Medical Center, John Muir Health, and UCSF Benioff Children’s Hospital Oakland. In addition, we are working with Grace Henderson, AIT Coordinator for the Nursing Home Administrator Program within the CA Department of Public Health to develop internship placements for students that will allow them to

train for and sit for the Nursing Home Administrator exam. Tamina Vahidy, one of the part-time MS-HCA lectures, served Community Engagement Coordinator for Summer 14. She was the organizing force for two very successful community events: the MS-HCA Affordable Health Care Forum held in Fall 14 and Tomorrow's Healthcare Pioneer Today held in Winter 15.

FACULTY RESOURCES: In spite of being granted two faculty lines and having strong candidates recommended for hire, we have been unable to fill those positions in part due to the high demand for individuals with health care administration/management doctoral degrees in both industry and academia, the relatively low salary that can be offered in CLASS, and the perceived excessive workload. We requested approval to hire two 1.0 lecturers who could assist with some of the administrative program work (admissions, advising, etc.), but that request was denied by CLASS. We have now turned our efforts to strengthening the lecturer pool. We have recruited four lecturers who began teaching this year and three lecturers who will begin teaching in AY 15-16.

GRANTWRITING: Due to our limited tenure-track faculty capacity, we have not made progress in our grant writing efforts. In view of the amount of work that will be required for the Quarter to Semester Conversion, we have decided not to pursue this goal 2015-16.

C. Program Changes and Needs

PUAD runs two full-time graduate programs with roughly 400 students, but we continue to have inadequate administrative support. The one 75%, 10/12 ASC I position was changed last year to a 12/12 position, but a 75% position is not sufficient. We have repeatedly requested that the 75% position be converted to a 100% position, but this request has been denied by CLASS. In part to our inability to convert the 75% position to a 100% position, our long-time ASC I, Kathleen King, resigned and we currently have an Interim 75% 12/12 ASC I position. We extended an offer of employment to Veronica Segovia and she is in the new employee on-boarding process. We expect that her start date will be the last week in June or the first week in July. The lack of adequate admin support is particularly challenging due to the expected administrative demands of the Quarter to Semester conversion.

Due to lack of tenure-track faculty and inadequate admin support, we have limited admission to the state-side MS-HCA program to 60 students per admission quarter. We admit in the Fall and Spring quarters, and received 102 applications for Spring 15 and 154 applications for Fall 14. We have limited admission to the self-support online MS-HCA program to 35 students and we only admit in the Fall quarters. We received 78 applications for Fall 14

In spite of inadequate admin support and the reliance on part-time faculty, the MS-HCA program continues to gain in reputation as a quality program. This year, the online MS-HCA program was ranked #43 in the Top Management Degrees' list of the Top 50 Schools for Online Master's in Healthcare Management Degrees. The fully online MS-HCA program was ranked #14 of the 25 best online Master of Healthcare Administration degree programs in the 2014 ranking by TheBestSchools.org

2. SUMMARY OF ASSESSMENT (about 1 page)

A. Program Student Learning Outcomes

We have adopted the five competences identified by the Health Care Leadership Alliance (HLA) as the MS-HCA program learning outcomes (PLOs). Students who graduate with a MS-HCA should be able to:

1. Communicate clearly and concisely with internal and external customers, to establish and maintain relationships, and to facilitate constructive interactions with individuals and groups.
2. Inspire individual and organizational excellence, to create and attain a shared vision, and to successfully manage change to attain the organization's strategic ends and successful performance.
3. Align personal and organizational conduct with ethical and professional standards that include a responsibility to the patient and community, a service orientation, and a commitment to lifelong

learning and improvement.

4. Demonstrate an understanding of the health care system and the environment in which health care managers and providers function.

5. Apply business principles to the health care environment; basic business principles include financial management, human resource management, organizational dynamics and governance, strategic planning and marketing, information management, risk management, and quality improvement.

See attached curriculum matrix and ILO alignment matrix

B. Program Student Learning Outcome(s) Assessed

We evaluate all 5 of the PLOs each academic year as part of HCA 6899, the capstone course.

C. Summary of Assessment Process

We directly and indirectly assess PLOs in four ways:

1. As part of the requirements for HCA 6899, the students wrote a 25-page PLO Essay discussing their level of achievement with each of the five PLOs.

2. As part of the requirements for HCA 6899, students completed a PLO self-assessment where they rate their level of achievement for each of the five PLOs. Each PLO is written as an “I can” statement and students rate their level of agreement with the statement, from strongly agree to strongly disagree. As part of the self-assessment, students write a five-sentence justification of their self-ranking.

3. As part of the requirements for HCA 6899, students participate in either a 200-hour internship or a work-based experience and write a 25-page report. As part of the report, students discuss the skill sets and knowledge base that the student acquired from the program that helped them be successful in either the internship or the work-based experience.

4. As part of the requirements for HCA 6899, each student has an external supervisor for the internship or the work-based experience. The external supervisor submits an evaluation of the student’s work with the organization.

The themes and concerns that emerged from the project reports, the external supervisor’s evaluation of the work completed in HCA 6899, and the PLO essays and self-assessments were discussed by faculty at our annual retreat, which was completed in Spring 15 this year.

D. Summary of Assessment Results

Originally, we had an exit survey as part of assessment. However, the students did not think that the survey had any value for them so it was replaced with the PLO essay and self-assessment in Winter 15.

The external supervisors’ evaluations of students were generally highly satisfactory. For Summer 14, Fall 14, and Winter 15, the average evaluation scores respectively were 36.7, 37.2, and 38.3 on a 40-point scale. The majority of the supervisors’ comments were positive, such as “self-starter, professional, and will be successful;” “personable and dependable;” “committed, courteous and knowledgeable;” and “passionate, excellent, and strong work ethic.”

Based on feedback from the students in the HCA 6899 reports, we added completion of the Institute on Healthcare Improvement (IHI) Quality Improvement Certificate as part of HCA 6290 (Health Care Quality Assessment and Improvement) in 2013-2014. In 2014-15, all of the students enrolled in HCA 6290 successfully completed the IHI Quality Improvement Certificate. Students report that having the certificate, along with the MS-HCA degree, on their resumes has been beneficial during job searches.

The PLO essays and self-assessments were generally satisfactory. In Winter 15 (when we instituted the PLO essays and self-assessment), “strongly agree” or “agree” was the answer in 94% of the assessments.

3. STATISTICAL DATA (about 1 page)

a. Student Demographics - Headcount Enrollment by Major Profile: Fall 09-2013 - CAPR

Health Care Administration		Fall 2009		Fall 2010		Fall 2011		Fall 2012		Fall 2013	
		Degree Level	TOTAL	Degree Level	TOTAL	Degree Level	TOTAL	Degree Level	TOTAL	Degree Level	TOTAL
		Master		Master		Master		Master		Master	
Female	Black, non-Hispanic	7	7	9	9	11	11	16	16	19	19
	American Indian or Alaska Native	1	1	1	1						
	Asian	14	14	13	13	31	34	39	39	43	43
	Pacific Islander			1	1	2	2	3	3	2	2
	Hispanic	3	3	3	3	5	5	11	11	5	5
	White	8	8	9	9	14	15	24	24	23	23
	Multiple ethnicity	1	1	1	1	1	1	12	12	12	12
	Race/ethnicity unknown	7	7	10	10	7	7	8	8	7	7
	Nonresident aliens	18	18	15	15	16	17	19	19	12	12
Male	Black, non-Hispanic	3	3	3	3	4	4	6	6	5	5
	American Indian or Alaska Native										
	Asian	6	6	3	3	9	9	16	16	12	12
	Pacific Islander									2	2
	Hispanic	6	6	5	5	1	1	2	2	2	2
	White	5	5	5	5	13	14	10	10	5	5

	Multiple ethnicity	1	1	2	2					1	1
	Race/ethnicity unknown	4	4	1	1	1	1	3	3	2	2
	Nonresident aliens	7	7	4	4	5	5	5	5	4	4
Total	Black, non-Hispanic	10	10	12	12	15	5	22	22	24	24
	American Indian or Alaska Native	1	1	1	1						
	Asian	20	20	16	16	40	4	55	55	55	55
	Pacific Islander			1	1	2	2	3	3	4	4
	Hispanic	9	9	8	8	6	6	13	13	7	7
	White	13	13	14	14	27	2	34	34	28	28
	Multiple ethnicity	2	2	3	3	1	1	12	12	13	13
	Race/ethnicity unknown	11	11	11	11	8	8	11	11	9	9
	Nonresident aliens	25	25	19	19	21	2	24	24	16	16

b. Degrees Conferred - CAPR

CY 11-12	Black	American Indian or Alaskan	Asian	Pacific Islander	Hispanic	White	Multiple	Unknown	Non-resident	All
Female	4	0	8	1	2	3	0	6	10	34
Male	1	0	1	0	2	4	0	2	1	11
Total	5	0	9	1	4	7	0	8	11	45
CY 12-13	Black	American Indian or Alaskan	Asian	Pacific Islander	Hispanic	White	Multiple	Unknown	Non-resident	All
Female	8	0	16	1	4	9	0	2	6	46
Male	2	0	8	0	0	5	0	0	2	17
Total	10	0	24	1	4	14	0	2	8	63

c. SFR's by Discipline (Source: SFRs By Course Level)

	09	10	11	12	13
Tenure-track	20.59	8.31	40.20	17.10	6.51
Lecturer	0	40.6	23.64	30.06	31.59
Lower Division	0	0	0	0	0
Upper Division	35.93	44.11	0	0	0
Graduate	15.47	15.27	27.50	24.73	22.95

Total	20.59	20.89	27.50	24.73	22.95
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d. Course History Data (Source: Course History Table 10.1b)

	Fall 13	Winter 13	Spring 13
#	11	13	10
Enrollment	317	400	285
Average Size	31.6	29.9	31.6