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Overview of the Program

SECTION I: Program Overview

The Health Care Systems Administration (HCSA) program is a 4-year degree which culminates in a BS degree. Students have several options for enrollment in the health care systems administration program; they can enter as college freshmen or transfer into the program at any point during their enrollment, or they can be enrolled concurrently in one of the associate degrees within the College of Allied Health Sciences so that they are working concurrently on their associate and baccalaureate degrees. This is particularly advantageous for students who are waiting to get into a quota program and have completed their entrance requirements. During the time that they are waiting to get into the associate degree clinical program, they can be working on completing their requirements for the bachelor's degree. Additionally, we have seen exponential growth in the offering of this program in Grand Rapids. The Grand Rapids program is offered in conjunction with Grand Rapids Community College, and is primarily offered in the evenings. This allows the working adult the opportunity to complete a baccalaureate degree without abruption to their current job.

Graduates of the HCSA program are eligible to take the nursing home administrators licensure examination to practice as a nursing home administrator in Michigan. There are no other specific certification or licensure examinations for which they are eligible. The program is not externally accredited. However, our current faculty and advisory board are considering certification from Association of University Programs in Health Administration "AUPHA". Program graduates enter the work force in a variety of positions-Manager/Supervisors of Clinical Areas, Human Resource Management, Quality, Compliance, and Risk Management, Analyst for the State of Michigan, and Coordinator of Coding Departments to name a few.

A. PROGRAM GOALS

1.) The objective of the HCSA to prepare students through classroom instruction, laboratory application, and professional practice experience to assume an entry-level position in a health care field in a technical, supervisory, or management position.

At the conclusion of the student's program, they will be able to:

Demonstrate interpersonal skills necessary to:

- a. Work with others in a group.
- b. Ask questions to gain information necessary to perform assigned tasks.
- c. Deal with conflict.
- d. Show respect for diverse opinions and ideas.

Demonstrate oral communication skills necessary to:

a. Make professional presentations.

b. Support a conclusion.

Demonstrate the ability to use the computer to:

- a. Construct a basic spread sheet.
- b. Manipulate data.
- c. Access information.
- d. Use word processing skills

Demonstrate critical thinking skills to apply previously learned knowledge to solving a new problem.

Demonstrate analytical skills necessary to interpret data.

Demonstrate written communication skills to:

- a. Support proposals.
- b. Report the results of investigations.
- c. Convey ideas to appropriate audiences.

Demonstrate professional conduct.

a. Speak the language of the health care profession(s).

Demonstrate understanding of the laws that pertain to health care.

Demonstrate understanding of the structure of health care in the United States.

Demonstrate appropriate work ethics:

- a. Responsibility for individual's actions
- b. Punctuality
- c. Honesty
- d. Integrity
- e. Understanding of personal value systems
- f. Understanding of expectations of health care work place
- g. Demonstrate an understanding of the pervasive nature of quality assurance throughout the health care professions.

Demonstrate specific knowledge and skills defined by their curriculum.

In addition to the above, HCSA graduates are skilled in the collection, interpretation, and analysis of patient and financial data. They receive the necessary training to assume managerial positions related to health administration.

- 2.) These goals were developed by the faculty of the HCSA program and approved by the program's advisory committee. They are currently being reviewed to assure they remain appropriate for the program.
- 3.) The goals reflect program graduate needs for technical, professional and general education. Graduates of these programs are employed in various health care administration settings including hospitals, nursing homes, physician offices, long term care facilities, ambulatory care clinics, hospices, and insurance companies.
- 4.) The program's goals have not changed since the last APR. They continue to reflect the goals of the program. However, as mentioned above, the faculty is

currently reassessing the program to assure the goals of the programs match the current and future needs of health care employers.

5.) The HCSA program fits well into the overall mission of Ferris State University, the College of Allied Health Sciences, and the Department of Clinical Laboratory, Respiratory Care and Health Administration programs. The department goals have been incorporated into the CAHS 5-year Strategic Plan.

The HCSA program aligns with the Academic Affairs 2006-2007 Plan, CAHS 5-year Strategic Plan and the department goals in many areas. The Academic Affairs plan includes insuring a current and relevant curriculum. The HCSA program will be undergoing an extensive review and curriculum revision beginning in September 2007. This review is consistent with the College of Allied Health 5 year strategic plan, which has a 2007 goal to assure relevancy for curriculum, with the revised curriculum to CAHS curriculum committee by May 2008.

The CAHS strategic plan for 2008-2009 will be to expand the program offering by converting 12 credits to on-line, and enrolling students in on-line sections by 2009-2010. This goal aligns with the 2006-2007 Academic Affairs plan in pillar one; Learning Centered Campus by concentrating on on-line development.

The CAHS strategic plan for 2010-2011 is to develop a Master's degree for HCSA. Our advisory board and faculty within the curriculum will consider the possibility of a HCSA concentration within the on-line MBA program at Ferris. This aligns with Pillar II: Working Together through the cross-college initiatives as defined in the 2006-2007 Academic affairs plan.

<u>Mission of Ferris State University</u>: Ferris State University will be a national leader in providing opportunities for innovative teaching and learning in career-oriented, technological and professional education.

<u>Mission of CAHS</u>: The College of Allied Health Sciences is a leader in educating career oriented allied health professionals.

<u>Vision of the CAHS</u>: The College of Allied Health Sciences will be recognized as a leader in the provision of career oriented education for health professions.

Mission of the HCSA program: The mission of the HCSA program at Ferris State University is to prepare students through classroom instruction, laboratory application, and professional practice experience to assume an entry-level position in a health care field in a technical, supervisory, or management position.

The program is consistent with the university's mission statement. While the program is not prominent nationally, it does provide opportunities for innovative teaching and learning in career-oriented, technological and professional education. Graduates of the programs are employed in numerous states of the United States. Most of the courses within the curricula require computer skills and many are web-enhanced to provide students with the most current information in the field. Weekdays courses, both during the day and evening, are offered on the Big Rapids campus while evening only classes are offered in Grand Rapids.

B. PROGRAM VISIBILITY AND DISTINCTIVENESS

1. The HCSA program at Ferris State University is unique in that our students are required to enroll in two internships prior to completing their HCSA degree. Other colleges that offer bachelor degrees in Health Administration suggest internships, but do not require the students participate in such a learning environment. Our students are often offered employment at the end of the final internship as well as establishing mentorships valuable for many years. For summer 2007 while the HCSA internship students accounted for 63 interns, the program has not had difficulty in securing internship sites. Available sites for interns include a sundry of health care venues including acute care hospitals, long term care facilities and private physician practices. Locations for internships include such areas as West Virginia, Florida and Colorado. Interns are not prevented from considering internships outside of the United States.

The HCSA program is unique to Ferris because of its cross fertilization with various clinical programs offered in the Allied Health College. Due to clinical internship site restrictions, many of our clinical programs have waiting lists or the supply of students interested in such program exceeds the number of students they can enroll. The HCSA program dovetails with the clinical programs in many course offerings, such as required scientific understanding classes and core requirements. Additionally, if the clinical students participate in an internship in an acute care facility, the HCSA program substitute's one 6 week internship class for their clinical internship. All HCSA students, regardless of whether they are enrolled in HCSA exclusively, or they are dual enrolled with a clinical program will be required to participate in a 12-week internship course which is designed to allow them to implement the knowledge they have accumulated during their course offerings to the 'real world'.

The HCSA program has faculty with several years of working experience within various health care occupations prior to taking a teaching role. The faculty, both tenure track and full-time temporary, is comprised primarily of Doctorate prepared individuals.

- 2. We attract quality students by:
 - a. Participating in the Allied Health Dawg Days to explain the advantages and uniqueness of our program; such as the 'inverted baccalaureate' which allows students to work on a BS degree while awaiting placement in a clinical AA degree program.
 - b. For the past 3 years, HCSA faculty participated in the offering of summer camps to capture high school freshman and sophomores interest in Allied Health careers
 - c. Offering the HCSA program in off campus locations, such as Grand Rapids to attract individuals who may not be able to attend the Big Rapids campus to take classes.
- 3. Within the state of Michigan, the following institutions provide a similar program to our HCSA program. They include;
 - a. Davenport University
 - b. Baker College
 - c. Madonna University
 - d. University of Detroit Mercy
 - e. Eastern Michigan University
 - f. Central Michigan
 - g. University of Michigan-Flint
 - h. Grand Valley State University
 - i. Spring Arbor College

The major competitors for the program are Davenport University, Baker College and Central Michigan University.

a.) All of the programs listed above (3.a-i) are similar, however the program at Ferris is only one of two in Michigan that requires an internship experience to graduate. The program at Ferris is also designed to accommodate graduates of associate degree programs without significant loss of credit. The program is competitive because of the ability to offer coursework to students who are concurrently enrolled in an associate degree. Increased competitiveness could be achieved through the creation of an on-line presence.

C. PROGRAM RELEVANCE

1) Graduates of the Health Care Systems Administration program are primarily securing jobs that the U.S. Department of Labor categorizes as medical and health services managers. Information gleaned from the Bureau of Labor Statistics'

Occupational Outlook Handbook indicates that there is a positive employment outlook for individuals seeking employment as medical and health services managers, with jobs in this area expected to grow "faster than average." Salaries of individuals working as medical and health services managers are noted to vary according to the employment facility or setting, so median incomes will be focused on when discussing earnings.

In addition to securing employment directly in their field of training, health care systems administration graduates have also reported taking non-medical/non-health managerial positions and human resources management positions. Occupational outlook for these areas was also positive, based on data from the Bureau of Labor Statistics that was found summarized by Career InfoNet. As was found with medical and health services managers, earnings varied according to factors such as employment setting for human resources managers and those in unspecified managerial positions.

The following tables present summary data found on the Career InfoNet website that aggregates information from national and state government agencies.

National Employment Trends

reational Employment Trends					
Medical/Health Services Managers		Managerial positions not listed separately	Human Resources Management		
Employment 2004	248,200	968,600	61,900		
Employment 2014	304,700	1,044,600	71,800		
Percent Change	+ 23%	+ 8 %	+ 16 %		
*Average annual job openings	10,490	26,470	2,030		

^{*}Average annual job openings is based on growth and net replacement

Michigan Employment Trends

	Medical/Health Services Managers	Managerial positions not listed separately	Human Resources Management
Employment 2004	7,950	27,190	2,010

Employment 2014	9,070	29,220	2,160
Percent Change	+ 14%	+ 8 %	+ 7 %
*Average annual job openings	270	730	50

^{*}Average annual job openings is based on growth and net replacement

2005 National Median Wages

Pay Period	Medical/Health Services Managers	Managerial positions not listed separately	Human Resources Management
Hourly	\$33.51	\$38.06	\$40.47
Yearly	\$69,700	\$79,200	\$84,200

2005 Michigan Median Wages

Pay Period	Medical/Health Services Managers	Managerial positions not listed separately	Human Resources Management
Hourly	\$33.29	\$42.15	\$41.64
Yearly	\$69,200	\$87,700	\$86,600

2.) Faculties within HCSA are aware of emerging issues in the discipline by attending national conferences and seminars and maintaining membership in a variety of healthcare management associations. Some of the seminars attended include; American College of Health Care Executives, American Health Lawyers Association Annual Meeting, and Political Engagement Project (PEP) conferences. Additionally, HCSA faculty has attended Ferris sponsored as well as national critical thinking conferences. Faculty read publications that are purchased through the department and rotated to all faculty. Information on current issues is also shared at monthly faculty meetings.

The program becomes aware of changes in the labor force by networking with professionals in the field at conferences and via various on-line employment companies. The HCSA advisory board provides input as to the changes in the labor force at the annual meetings. The employer survey as discussed in Section 2 indicates most employers are very satisfied with the level of knowledge that the FSU HCSA graduate/employee's have within 12 different areas. Additionally at the end of each internship, the site coordinator is asked to complete a survey which addresses employer needs (survey results of 2006 data provided in Section 2); and the overwhelming majority of respondents indicate our students are addressing the current needs of future employers. Review of the graduate surveys

and student program evaluations allow us to make appropriate changes to individual courses in the programs.

Many of our HCSA students are non-traditional students at the Ferris Grand Rapids campus. They need to have classes offered in the evening so they can continue in their current employment. We offer classes near their home or work at times that are convenient to them. Additionally, many of our students request courses be offered on-line. On-line courses meet the needs of place-bound students. The following table provides the number of HCSA students who took required classes for the HCSA curriculum on-line.

Classes offered online for HCSA.

		HCSA
		Students
		Enrolled
CCHS 101	Orientation to Health Care	15
CCHS 102	Safety Isues in Health Care	14
EHSM 315	Epidemiology and Statistics	30
MRIS 103	Medical Terminology	8
ENGL 321	Advanced Composition	0
ENGL 325	Advanced Business Writing	12

The number of health care administration degrees being offered online is constantly growing. Increasing online and mixed delivery course offerings is a future direction to be considered by the Health Care Systems Administration faculty. Before pursuing this path, the benefits and pitfalls of online courses and web-enhanced courses must be taken into account. Weighing the expressed and perceived benefits and disadvantages of online courses and mixed delivery courses, it appears that these modes of instruction are viable options to traditional classroom instruction. In the future, more online instruction is planned to be incorporated into the Health Care Systems Administration program.

- 3.) According to our student survey, students come to FSU for HCSA for a variety of reasons. When 54 students were asked, if you were beginning your career again, would you still choose to attend FSU? The strong majority indicated definitely or probably yes. A minority indicated probably not. Some of the positive reasons provided included comments about class size, professors, and resources. (Student Surveys, Section 2 D.).
 - a.) Respondents to our graduate survey were requested to rate there selfperception of their preparedness in key knowledge areas consistent with the goals and outcomes of the HCSA program. The respondents were offered the choices of a scale from Inadequately Prepared through Fully Prepared to their level of preparedness for individual knowledge, skills, or abilities based on their completion of the HCSA program. A review

of the data indicate that most graduates were moderately to fully prepared to function within the health care environment based upon the knowledge and skills in the 16 areas identified.

Respondents to our graduate survey were asked whether they would recommend FSU's HCSA program for other students interested in the profession. 82.6 % of the respondents indicated that they would recommend the HCSA program to those considering the profession, while 17.4% indicated that they would not recommend FSU's HCSA program.

b.) Student sentiment is measured after each internship is completed, which allows the students to express their preparedness with the outcomes of the program and to comment on any other issues they have experienced while at Ferris or out on their internships. Additionally, graduate surveys have been done in the past, but not with a significant return to gather a statistical survey as to this question.

D. PROGRAM VALUE

1.) To the university:

The program provides a retention tool for clinical Associate of Applied Science degrees through dual degree program as discussed above. With the 'inverted baccalaureate degree', the students have an opportunity to pursue educational opportunities while awaiting assignment within the quota programs.

The program fulfills the mission of the university by being a leader by providing opportunities for innovative teaching and learning in career-oriented, technological and professional education.

2) To students:

Students have the opportunity to learn from experts in the field via professors who have extensive work experience, as well as the extensive 12 week internship. Students have the opportunity for 2-year students to earn Bachelor of Science degree. Students have access to state of the art laboratory with software available in the healthcare setting.

The HCSA program has flexibility in course offerings; day/evening and on-line

- 3) To employers: The programs prepare a large number of HCSA practitioners to work within the State of Michigan.
- 4) To entities external to the university: The faculty participates in local, state, and national continuing education activities. Locally, faculty has presented to Mecosta County Medical Center; "Medical Malpractice in Michigan", within the FSU sponsored Lifelong Learning; "Patient Rights, It's not just confidentiality".
- 5) To entities external to the university: The faculty and students have provided services to groups outside the University. The registered student organization, Health Care Management Association (HCMA), performs several service projects each year including Toys for Tots, Adopt a Family at Thanksgiving and Christmas, Halloween party for community children, and participating in walks for charitable organizations. They also host social events for members and/or the community.

Collection of Perceptions

SECTION 2: Collection of Perceptions

A. Graduate follow-up survey:

Participation in the graduate follow-up survey sought feedback from alumni of the Health Care Systems Administration (HCSA) program. In coordination with Institutional Research and Testing, graduates were sent a cover letter (Appendix D) and Graduate Survey Questionnaire (Appendix D) and a postage-paid self addressed envelope. A letter and survey were sent to each graduate (n=117) of the HCSA program from the year 2000 through 2005. Of the 117 surveys mailed to the graduates, eight surveys (6.8%) were returned as undeliverable or address unknown. The table below provides a frequency of participation of graduates by year of graduation. Of the 109 surveys that were not returned and presumed delivered, 23 (21%), valid instruments were returned for evaluation.

Year graduated

		Frequency	Percent	Valid Percent	Cumulative Percent
	2000	6	26.1	26.1	26.1
	2001	4	17.4	17.4	43.5
	2002	1	4.3	4.3	47.8
Valid	2003	2	8.7	8.7	56.5
	2004	3	13.0	13.0	69.6
	2005	7	30.4	30.4	100.0
	Total	23	100.0	100.0	

The methodology utilized a single attempt to contact graduates from the year 2000 through 2005. No additional contacts were attempted other than this initial contact. The methodology limited participation of graduates and could include a non-response bias by only utilizing a single distribution without any type of follow-up.

The following tables provide details of the responses of the returned questionnaires.

Professional Membership

Graduates from the FSU HCSA program have become active in a variety of professional memberships within the health care industry. Professional memberships included in the response were: American College of Healthcare Executives (n=1), Healthcare Financial Management (n=2), and AHCA (n=1). Additional organizations identified by the graduates included: AARC, MSRC (n=1), AHIMA(n=2), MI Society of Infection

Control (n=1), PAC, HIMSS, or AHIMA (n=1), Society of Nuclear Medicine (n=2), Society of Nuclear Medicine, NMTCB, or ARRT (n=1)

Professional Memberships: ACHE

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	1	4.3	100.0	100.0
Missing	System	22	95.7		
Tot	tal	23	100.0		

Professional Memberships: HFMA

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Yes	2	8.7	100.0	100.0
Missing	System	21	91.3		
Tota	al	23	100.0		

Professional Memberships: HCCA

		Frequency	Percent
Missing	System	23	100.0

Professional Memberships: ACHA

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	1	4.3	100.0	100.0
Missing	System	22	95.7		
Tota	al	23	100.0		

Professional Memberships: Other specified

			Valid	Cumulative
	Frequency	Percent	Percent	Percent
Valid	10	43.5	43.5	43.5
AARC, MSRC	1	4.3	4.3	47.8
AHIMA	2	8.7	8.7	56.5
MI Society of Infection Control	1	4.3	4.3	60.9
Neither	1	4.3	4.3	65.2

Medicine, NMTCB, ARRT	1	4.3	4.3	100.0
Medicine Society of Nuclear	2	8.7	8.7	95.7
PAC, HIMSS, AHIMA Society of Nuclear	1	4.3	4.3	87.0
None	4	17.4	17.4	82.6

Job Classification

Graduates were asked to list the types of job classification that they have held since graduating from the FSU HCSA program. Individuals were able to respond to as many classifications that apply to their particular situation. Four of the 23 respondents identified that they have worked as a supervisor in a clinical area. Three of the 23 have worked in Human Resource Management; none of the graduates has worked in the job classification of Quality/Compliance/Risk Management. Three respondents have experience in non-hospital management. Respondents identified their experiences in the following classification not specifically addressed within the questionnaire. Analyst for the State of MI (n=1), Coding Revenue Analyst (n=1), Coord-Coding Dept. Coding Specialist (n=1), Customer Svc. (n=1), Educator of a Resp. Dept. (n=1), Financial Analyst-Hosp, (n=1), Healthcare Consultant-Acct'g firm (n=1), Gov't Relations (n=1), Grass Roots (n=1), Mktg, Real Estate (n=1), HRIS (n=1), Nuc Med Technologist (n=1) Ofc. Mgr./Secretary (n=1),Proj. Admin.-Priority Health (n=1), Sales-could find no one in med field to hire me (n=1), Technologist (n=1)

Jobs: Mgr/Supervisor Clinical Area

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Yes	4	17.4	100.0	100.0
Missing	System	19	82.6		
Tot	al	23	100.0		

Jobs: Human Resource Mgmt

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	3	13.0	100.0	100.0
Missing	System	20	87.0		
Tot	tal	23	100.0		

Jobs: Quality/Compliance/Risk Mgmt

		Frequency	Percent
Missing	System	23	100.0

Jobs: Non-hospital Mgmt

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	3	13.0	100.0	100.0
Missing	System	20	87.0		
Tot	tal	23	100.0		

Jobs: Other specified

	Frequency	Percent	Valid Percent	Cumulative Percent
Analyst for the State of MI	1	4.3	4.3	39.1
Coding Revenue Analyst	1	4.3	4.3	43.5
Coord-Coding Dept. Coding Specialist	1	4.3	4.3	47.8
Customer Svc.	1	4.3	4.3	52.2
Educator of a Resp. Dept.	1	4.3	4.3	56.5
Financial Analyst- Hosp; Healthcare Consultant- Accounting firm	1	4.3	4.3	60.9
Gov't Relations, Grass Roots, Mktg, Real Estate	1	4.3	4.3	65.2
HRIS	1	4.3	4.3	69.6
Neither	1	4.3	4.3	73.9
None	1	4.3	4.3	78.3
Nuc Med Technologist	1	4.3	4.3	82.6
Ofc.	1	4.3	4.3	87.0

Mgr./Secretary Proj. Admin Priority Health	1	4.3	4.3	91.3
Sales-could find no one in med field to hire me	1	4.3	4.3	95.7
Technologist Total	1 23	4.3 100.0	4.3 100.0	100.0

Employment in current position:

Of the 21 graduates that responded to this question, a vast majority (76.2%) have been employed in their current position three years or less. The remaining (23.8%) have been employed longer than three years. Two respondents did not indicate the length of current employment

TT	1	1 .	1		
How	long	emni	ovea	present	position
***	*~~		0,00	present	PODICIOII

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than 1 yr	7	30.4	33.3	33.3
	1-3 yrs	9	39.1	42.9	76.2
	3-4 yrs	3	13.0	14.3	90.5
	More than 4 yrs	2	8.7	9.5	100.0
	Total	21	91.3	100.0	
Missing	System	2	8.7		
	Total	23	100.0		

Current employment status:

Of those graduates responding, 87% (n=20) are currently working full-time. The remaining respondents (n=2) are either currently not employed/seeking employment or are not employed seeking employment. One respondent did not indicate current employment status.

Current employment status

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Not employed, not seeking	1	4.3	4.5	4.5
	Not employed, seeking	1	4.3	4.5	9.1
	Full-time	20	87.0	90.9	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
	Total	23	100.0		

Current Salary:

Twenty-one respondents indicated their current salary range based on their current employment. 8.7% of the respondents indicated a current annual salary of less than \$25,000, 21.7 reported an annual salary between \$25,001 and \$40,000, 34.8 % indicated a salary between \$40,001 and \$55,000 and 26.1% indicated an annual salary great than \$55,000.

Current salary range

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Less than \$25,000	2	8.7	9.5	9.5
	\$25,001-40,000	5	21.7	23.8	33.3
	\$40,001-55,000	8	34.8	38.1	71.4
	\$55,001-75,000	6	26.1	28.6	100.0
	Total	21	91.3	100.0	
Missing	System	2	8.7		
Total		23	100.0		

Secure desired position:

A large majority of HCSA graduates respondents (60%, n=14) indicated that it took less than 6 months to secure a position that they sought. While 8.7% (n=2) indicated that it took longer than 1 year to secure the desired position. There was a non-response rate to this question of 30% (n=7).

How long to secure desired position

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Less than 6 mos	14	60.9	87.5	87.5
	More than 12 mos	2	8.7	12.5	100.0
	Total	16	69.6	100.0	
Missing	System	7	30.4		
	Total	23	100.0		

Self-perceptions of preparedness:

Respondents were requested to rate there self-perception of their preparedness to use software packages and their ability to prepare reports. In addition to these skills, respondents also rated their self-perception in key knowledge areas consistent with the goals and outcomes of the HCSA program. The following tables present the responses the based on a scale from Inadequately Prepared through Fully prepared to their level of preparedness for individual knowledge, skills, or abilities based on their completion of the HCSA program. A review of the data indicate that most graduates were moderately to fully prepared to function within the health care environment based upon the knowledge and skills in the 16 areas identified.

In response to the question, prepared to use common software packages, 73.9 percent of the students indicated they felt adequately or fully prepared to use common software packages, while six percent felt moderately prepared. No respondents indicated that they felt unprepared in this area.

Prepared: Common Software Pkgs

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Moderately Prepared	6	26.1	26.1	26.1
	Adequately Prepared	11 .	47.8	47.8	73.9
	Fully Prepared	6	26.1	26.1	100.0
	Total	23	100.0	100.0	

In response to the question, Query/generate reports, 78.2 percent of the students indicated they felt moderately to fully prepared to generate reports, while 13 percent felt minimally prepared. Almost nine percent of the respondents indicated that they felt inadequately prepared in this area.

Prepared: Query/Generate Reports

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Inadequately Prepared	2	8.7	8.7	8.7
	Minimally Prepared	3	13.0	13.0	21.7
	Moderately Prepared	9	39.1	39.1	60.9
	Adequately Prepared	7	30.4	30.4	91.3
	Fully Prepared	2	8.7	8.7	100.0
	Total	23	100.0	100.0	

In response to the question, knowledge of regulatory agencies, 86.9 percent of the students indicated they felt moderately to fully-prepared in their knowledge of regulatory agencies, while 8.6 percent felt minimally prepared. No respondents indicated that they felt unprepared in this area.

Prepared: Knowledge Regulatory Agencies

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Minimally	2	8.7	9.1	9.1
	Prepared	2	8.7	9.1	9.1
	Moderately	7	30.4	31.8	40.9
	Prepared	/	30.4	31.6	40.9
	Adequately	8	34.8	36.4	77.3
	Prepared	8	34.0	30.4	11.5
	Fully Prepared	5	21.7	22.7	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
	Total	23	100.0		

In response to the question: payment and reimbursement, 73.9 percent of the students indicated they felt moderately to fully prepared in their knowledge of payment and reimbursement, while 21.7 percent felt minimally prepared. Four percent of the respondents indicated that they felt inadequately prepared in this area.

Prepared: Payment & Reimbursement

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Inadequately Prepared	1	4.3	4.3	4.3
	Minimally Prepared	5	21.7	21.7	26.1
	Moderately Prepared	8	34.8	34.8	60.9
	Adequately Prepared	5	21.7	21.7	82.6
	Fully Prepared	4	17.4	17.4	100.0
	Total	23	100.0	100.0	

In response to the question, Basic management/supervisory skills, 73.9 percent of the students indicated they felt moderately to fully-prepared in their knowledge of basic management/supervisory skills, while 17.4 percent felt minimally prepared. Four percent of the respondents indicated that they felt inadequately prepared in this area.

Prepared: Basic Mgmt/Supervision Principles

		Eventuari	Danasat	Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Inadequately Prepared	1	4.3	4.5	4.5
	Minimally Prepared	4	17.4	18.2	22.7
	Moderately Prepared	2	8.7	9.1	31.8
	Adequately Prepared	9	39.1	40.9	72.7
	Fully Prepared	6	26.1	27.3	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
	Total	23	100.0		

In response to the question, HRM-Staff orientation, 78.2 percent of the students indicated they felt moderately to fully-prepared in their knowledge of HRM staff orientation, while 17.4 percent felt minimally or inadequately prepared.

Prepared: HRM-Staff Orientation

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Inadequately Prepared	2	8.7	9.1	9.1
	Minimally Prepared	2	8.7	9.1	18.2
	Moderately Prepared	3	13.0	13.6	31.8
	Adequately Prepared	10	43.5	45.5	77.3
	Fully Prepared	5	21.7	22.7	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
	Total	23	100.0		

In response to the question, Plan & conduct meetings, 73.9 percent of the students indicated they felt moderately to fully-prepared in their knowledge to plan and conduct meetings, while 17.4 percent felt minimally to moderately prepared. Four percent of the respondents indicated that they felt inadequately prepared in this area.

Prepared: Plan & Conduct Meetings

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Inadequately Prepared	1	4.3	4.5	4.5
	Minimally Prepared	2	8.7	9.1	13.6
	Moderately Prepared	2	8.7	9.1	22.7
	Adequately Prepared	10	43.5	45.5	68.2
	Fully Prepared	7	30.4	31.8	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
	Total	23	100.0		

In response to the question, develop policies and procedures, 82.6 percent of the students indicated they felt moderately to fully-prepared in their knowledge to develop policies and procedures, while 4.3 percent felt minimally prepared. Respondents, 8.7 percent, indicated that they felt inadequately prepared in this area.

Prepared: Develop Policies & Procedures

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Inadequately Prepared	2	8.7	9.1	9.1
	Minimally Prepared	1	4.3	4.5	13.6
	Moderately Prepared	4	17.4	18.2	31.8
	Adequately Prepared	10	43.5	45.5	77.3
	Fully Prepared	5	21.7	22.7	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
	Total	23	100.0		

In response to the question, knowledge to determine productivity/performance standards, 82.6 percent of the students indicated they felt moderately to fully-prepared in their knowledge of basic management/supervisory skills, while 17.4 percent felt minimally prepared. Four percent of the respondents indicated that they felt inadequately prepared in this area.

Prepared: Determine Productivity/Performance Stds

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Inadequately Prepared	1	4.3	4.5	4.5
	Minimally Prepared	2	8.7	9.1	13.6
	Moderately Prepared	8	34.8	36.4	50.0
	Adequately Prepared	8	34.8	36.4	86.4
	Fully Prepared	3	13.0	13.6	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
	Total	23	100.0		

In response to the question, knowledge of risk management/regulator compliance, 78.2 percent of the students indicated they felt moderately to fully-prepared in their knowledge of risk management/corporate compliance, while 17.4 percent felt minimally prepared to inadequately prepared in this area.

Prepared: Risk Mgt/Corporate Compliance

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Inadequately Prepared	2	8.7	9.1	9.1
	Minimally Prepared	2	8.7	9.1	18.2
	Moderately Prepared	9	39.1	40.9	59.1
	Adequately Prepared	7	30.4	31.8	90.9
	Fully Prepared	2	8.7	9.1	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
	Total	23	100.0		

In response to the question, knowledge of strategic plans, goals and objectives, 91.3 percent of the students indicated they felt moderately to fully-prepared in their knowledge of strategic plans, goals, and objectives, while 4.3 percent felt minimally prepared.

Prepared: Strategic Plans, Goals, Objectives

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Minimally Prepared	1	4.3	4.5	4.5
	Moderately Prepared	6	26.1	27.3	31.8
	Adequately Prepared	9	39.1	40.9	72.7
	Fully Prepared	6	26.1	27.3	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
	Total	23	100.0		

In response to the question, knowledge of confidentiality (HIPAA), 91.3 percent of the students indicated they felt moderately to fully-prepared in their knowledge of confidentiality, while 4.3 percent felt minimally prepared.

Prepared: Confidentiality (HIPAA)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Minimally Prepared	1	4.3	4.5	4.5
	Moderately Prepared	7	30.4	31.8	36.4
	Adequately Prepared	5	21.7	22.7	59.1
	Fully Prepared	9	39.1	40.9	100.0
ľ	Total	22	95.7	100.0	
Missing	System	1	4.3		
	Total	23	100.0		

In response to the question, knowledge of legislative process/court system, 73.9 percent of the students indicated they felt moderately to fully-prepared in their knowledge of legislative process/court system, while 13.0 percent felt minimally prepared. 8.4 percent of the respondents indicated that they felt inadequately prepared in this area.

Prepared: Legislative Process/Court System

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Inadequately Prepared	2	8.7	9.1	9.1
	Minimally Prepared	3	13.0	13.6	22.7
	Moderately Prepared	11	47.8	50.0	72.7
	Adequately Prepared	4	17.4	18.2	90.9
	Fully Prepared	2	8.7	9.1	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
	Total	23	100.0		

In response to the question, knowledge of inventory management tools, 73.9 percent of the students indicated they felt moderately to fully-prepared in their knowledge of inventory management tools, while 17.4 percent felt minimally to inadequately prepared in this area.

Prepared: Inventory Management Tools

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Inadequately Prepared	2	8.7	9.1	9.1
	Minimally Prepared	2	8.7	9.1	18.2
	Moderately Prepared	7	30.4	31.8	50.0
	Adequately Prepared	10	43.5	45.5	95.5
	Fully Prepared	1	4.3	4.5	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
	Total	23	100.0		

In response to the question, knowledge of time management, 73.9 percent of the students indicated they felt adequately to fully-prepared in their knowledge of basic management/supervisory skills, while 21.7 percent felt moderately prepared in this area.

Prepared: Time Mgt

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Moderately Prepared	5	21.7	22.7	22.7
	Adequately Prepared	9	39.1	40.9	63.6
	Fully Prepared	8	34.8	36.4	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
	Total	23	100.0		

In response to the question, knowledge and use of critical thinking skills, 87 percent of the students indicated they felt moderately to fully-prepared in their knowledge and use of critical thinking skills, while 4.3 percent felt inadequately prepared in this area.

Prepared: Critical Thinking Skills

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Inadequately Prepared	1	4.3	4.8	4.8
	Moderately Prepared	4	17.4	19.0	23.8
	Adequately Prepared	10	43.5	47.6	71.4
	Fully Prepared	6	26.1	28.6	100.0
	Total	21	91.3	100.0	
Missing	System	2	8.7		
	Total	23	100.0		

Adequately prepared:

69.9% of the respondents (n=16) positively rated that the HCSA curriculum at FSU adequately prepared them for an entry-level posting in an administrative/managerial role within a health care setting. While the remaining 30.4% indicated, the HCSA curriculum at FSU did not adequately prepare them for an entry-level posting in an administrative/managerial role within a health care setting.

			_	Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Yes	16	69.6	69.6	69.6
	No	7	30.4	30.4	100.0
	Total	23	100.0	100.0	

Recommend FSU's HCSA Program:

Respondents were also asked whether they would recommend FSU's HCSA program for other students interested in the profession. 82.6 % of the respondents indicated that they would recommend the HCSA program to those considering the profession. While 17.4% indicated that they would not recommend FSU's HCSA program

Recommend FSU's HCSA program

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Yes	19	82.6	82.6	82.6
	No	4	17.4	17.4	100.0
	Total	23	100.0	100.0	

Continued Education:

Respondents were asked about continuing their education since graduating from Ferris State University. 43.5% of the respondents (n=10) have continue their education to some level after graduation while the majority of graduates (n=56.5%) have not continued their education. The table below presents the range of degrees/majors that graduates that are continuing their education are entering to further their education.

Continued education

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Yes	10	43.5	43.5	43.5
	No	13	56.5	56.5	100.0
	Total	23	100.0	100.0	

Specify degree achieved/currently seeking

			Valid	Cumulative
	Frequency	Percent	Percent	Percent
Valid	13	56.5	56.5	56.5
BSN	1	4.3	4.3	60.9
Master's Degree	1	4.3	4.3	65.2
Master's of HCSA	1	4.3	4.3	69.6
Master's of Public Admin.	1	4.3	4.3	73.9
Masters in Health Systems Admin at U- M	1	4.3	4.3	78.3
MBA	2	8.7	8.7	87.0
MBA Health Mgmt.	1	4.3	4.3	91.3
MS in Health Admin.	1	4.3	4.3	95.7
Pre-req's for NURS prog	1	4.3	4.3	100.0
Total	23	100.0	100.0	

Five-year Plan:

Those respondents that have not yet started a post baccalaureate program, 34.8 % indicate they plan to begin a program within the next five years, 13% indicated that they have not plans to continue their education within the next 5 years and 13 % are currently undecided on their plans to further their education.

Not cont'd education, plan to do in next 5 yrs

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Yes	8	34.8	57.1	57.1
	No	3	13.0	21.4	78.6
	Undecided	3	13.0	21.4	100.0
	Total	14	60.9	100.0	
Missing	System	9	39.1		
	Total	23	100.0		

Below are verbatim comments submitted by the respondents which they believed would help FSU program evaluate and improve the Health Care Systems Administration Program;

Additional Comments

Additional submitted by respondents	Frequency
FSU needs to stress to students that the HIT & HCSA programs don't limit one to working directly in healthcare setting. One could work for vendors, do consulting, research, grass roots/lobbying & more w/ these degrees.	1

I can't gain employment; my current student loans are in default. I wouldn't recommend continuing this major-it's "useless." Since graduation, I can't get a job in this field b/c I didn't have work experience. No one is willing to give me a chance or job although I did complete 2 internships- 1 in a hosp. & 1 in corporate office of hospital HR. What I discovered is the health industry is very "racist."

1

I feel this was a great opportunity to grad from FSU & the HCSA program I learned so much from the program that I applied to my management career. Students really need to know Excel & how to give a good presentation. Team building is a great tool to have under your belt. Thank you for a great experience at FSU.

1

I really think my 2+2 program was excellent. I would recommend it to anyone. I know more about mgmt fxns than my team leader!!

1

I was adequately prepared for an entry level position. The problem is that my "entry-level" is a promotion for someone w/ a technical deg. Since most companies would rather promote, I could find nothing in the med field.

1

I was an unconventional student when I entered the program I thought it was very good, but all the classes should have been offered in GR more frequently.	1
Make sure students have a clinical background-otherwise, HCSA degree is useless!	1
More training on processing strategies, change masters, reimbursement & compliance would be helpful.	1
Please see enclosed sheet.	1

The HCSA program shouldn't be offered alone-should be w/ clinical program The faculty at FSU needs to teach of more realistic goals & opportunities. No one ever preached of how new grads w/ only this deg don't obtain managerial roles. Deg is too broad. Love to actually talk to faculty about improving program b/c there is so much room for improvement; my contact info at top of 2nd pg of survey. Internship is complete inconvenience & waste of time & money. Dept should help students obtain internship. Working 40 hrs/ wk for free is downright wrong. We are adults w/ bills. I struggled to complete 40 hr/wk internship & work another job to pay bills. FSU faculty didn't help or offer advice/assistance financially. It's really crazy to mandate such labor. At my site no one knew what the deg was so it was hard to place interns in good positions. The faculty, especially Marie S., was horrible at responding to questions/comments during internship. FSU department should try (really try) to offer students help in finding good jobs for that is what a good school of excellence would do. Hav'g to do the internship was one of the worst times of my life, there was much pain & suffering as a result of it & has yet to pay off. (Survey # 14)

1

The payor systems need to be more in depth. Expert areas would be a plus like Area Wage Index, Medicare backdebts, DSH payments, & of course access. These are the areas that "excellent" employers are looking for. If a person wants to succeed & make a decent salary, "We' "FSU" needs to prep the students for the "real" world of health care admin. by being more specific. We aren't competitive enough in our classroom applications as well as our externships.	
The program really needs to involve more about the insurance industry as a whole. In 1 way or another, we are all affected by it. In addition, I think additional emphasis must be placed on our pc skills-which are more & more necessary. Some items are hard to answer as it's been almost 5 yrs since grad & some things I haven't used are forgotten.	
While at FSU, I also completed an Assoc. deg in Nuclear Medicine. I've been a Technologist since graduation.	. 1

Total

B. Employer follow-up survey

Participation in the employer follow-up survey sought feedback from employers of the Health Care Systems Administration (HCSA) program graduates. In coordination with Institutional Research and Testing, employers were sent a cover letter (Appendix D) and Employer Survey Questionnaire (Appendix D) and a postage-paid self addressed envelope. A letter and survey were sent to each employer (n=87) of the HCSA program. Of the 87 surveys mailed to the employers, two surveys (2.2%) were returned as undeliverable or address unknown. Of the 85 surveys that were not returned and presumed delivered, 29 (34.1%), valid instruments were returned for evaluation.

Job classifications:

Employers were asked to list the types of job classification that FSU HCSA Graduates have held while employed. Employers were able to respond to as many classifications that apply to their particular situation. Nine of the 29 employers identified that they have hired as a supervisor in a clinical area. Four of 29 have hired in Human Resource Management; Four of the graduates employers have hired in the iob classification Quality/Compliance/Risk Management. Seven of the 29 employers have hired graduates in non-hospital management positions. Additional classifications were identified by the employers where they have hired an HCSA graduate into a specific position. All write in job classification were non-duplicative responses.

Job: Mgr/Supervisor Clinical Area

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Checked	9	31.0	100.0	100.0
Missing	System	20	69.0		
Γ	Total	29	100.0		

Job: Human Resources Mgmt

		_		Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Checked	4	13.8	100.0	100.0
Missing	System	25	86.2		
T	otal	29	100.0		

Job: Quality/Compliance/Risk Management

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Checked	4	13.8	100.0	100.0
Missing	System	25	86.2		
T	otal	29	100.0		

Job: Non-hospital Management

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Checked	7	24.1	100.0	100.0
Missing	System	22	75.9		
Total		29	100.0		

Job: Other Specified

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	16	55.2	55.2	55.2
Asst.	1	3.4	3.4	58.6
Coder Data Specialist	1	3.4	3.4	62.1
Coder, Medical	1			
Records	1	3.4	3.4	65.5
Coding, Medical	1	2.4	2.4	60.0
Staff Secretary	1	3.4	3.4	69.0
Departmental	,	2.4	2.4	70.4
Analyst	1	3.4	3.4	72.4
Fiscal Svcs. Intern	1	3.4	3.4	75.9
HIM Technicians in	1	2.4	2.4	70.2
non-leadership roles	1	3.4	3.4	79.3
HIM; Hlth Info	1	2.4	2.4	92.0
Coord's	1	3.4	3.4	82.8
Medical Records	1	3.4	2.4	963
Technician	1	3.4	3.4	86.2
Nuc Med	1	3.4	3.4	89.7
Ofc mgr., Therapy	1	2.4	3.4	93.1
Dept.	1	3.4	3.4	93.1
Summer intern in	1	2.4	2.4	06.6
medical education	1	3.4	3.4	96.6

We don't keep track of type of education-just BS or BA unless the employee has a clinical deg. We employ many FSU grads, but I'm not aware of any HCSA grads who holds a mgmt pos'n at MCMC.	1	3.4	3.4	100.0
Total	29	100.0	100.0	

Graduate knowledge:

Employers were requested to rate the HCSA graduate/employee's knowledge in the areas of: a) medical terminology; b) managed care; c) long-term care; d) budget process; e) computer applications; f) finance; g) oral communication; h) written communication; i) problem solving/critical thinking skills; j) professionalism; k) other. The following tables present the responses the based on a scale from very dissatisfied to very satisfied. An additional selection of not applicable was available for those areas not assessed or applicable to the HCSA graduate/employee. Reviews of the data indicate that most employers are very satisfied with the level of knowledge that the FSU HCSA graduate/employee's knowledge within these 12 areas identified.

Satisfaction: Med Terminology

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Dissatisfied	1	3.4	4.0	4.0
	Somewhat Satisfied	2	6.9	8.0	12.0
	Very Satisfied	22	75.9	88.0	100.0
	Total	25	86.2	100.0	
Missing	Not Applicable	2	6.9		
_	System	2	6.9		
	Total	4	13.8		
	Total	29	100.0		

Satisfaction: Managed Care

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Very Dissatisfied	1	3.4	7.1	7.1
	Somewhat Dissatisfied	1	3.4	7.1	14.3
	Somewhat Satisfied	8	27.6	57.1	71.4
	Very Satisfied	4	13.8	28.6	100.0
1	Total	14	48.3	100.0	
Missing	Not Applicable	13	44.8		
	System	2	6.9		
	Total	15	51.7		
	Total	29	100.0		

Satisfaction: Long Term Care

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Somewhat Dissatisfied	1	3.4	7.1	7.1
	Somewhat Satisfied	5	17.2	35.7	42.9
	Very Satisfied	8	27.6	57.1	100.0
	Total	14	48.3	100.0	
Missing	Not Applicable	13	44.8		
	System	2	6.9		
	Total	15	51.7		
	Total	29	100.0		

Satisfaction: Budgeting Process

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Very Dissatisfied	1	3.4	4.8	4.8
	Somewhat Dissatisfied	1	3.4	4.8	9.5
	Somewhat Satisfied	10	34.5	47.6	57.1
	Very Satisfied	9	31.0	42.9	100.0
	Total	21	72.4	100.0	
Missing	Not Applicable	6	20.7		
	System	2	6.9		
1	Total	8	27.6		
	Total	29	100.0		

Satisfaction: Computer Applications

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Very Dissatisfied	1	3.4	3.8	3.8
	Somewhat Satisfied	5	17.2	19.2	23.1
	Very Satisfied	20	69.0	76.9	100.0
	Total	26	89.7	100.0	
Missing	Not Applicable	1	3.4		
	System	2	6.9		
	Total	3	10.3		
	Total	29	100.0		

Satisfaction: Finance

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Dissatisfied	1	3.4	4.8	4.8
	Somewhat Dissatisfied	1	3.4	4.8	9.5
	Somewhat Satisfied	9	31.0	42.9	52.4
	Very Satisfied	10	34.5	47.6	100.0
	Total	21	72.4	100.0	
Missing	Not Applicable	6	20.7		

System	2	6.9	
Total	. 8	27.6	
Total	29	100.0	

Satisfaction: Oral Communication

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Very Dissatisfied	1	3.4	3.7	3.7
	Somewhat Dissatisfied	2	6.9	7.4	11.1
	Somewhat Satisfied	4	13.8	14.8	25.9
	Very Satisfied	20	69.0	74.1	100.0
	Total	27	93.1	100.0	
Missing	System	2	6.9		
	Total	29	100.0		

Satisfaction: Written Communication

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Very Dissatisfied	1	3.4	3.7	3.7
	Somewhat Dissatisfied	1	3.4	3.7	7.4
	Somewhat Satisfied	5	17.2	18.5	25.9
	Very Satisfied	20	69.0	74.1	100.0
	Total	27	93.1	100.0	
Missing	System	2	6.9		
	Total	29	100.0		

Satisfaction: Problem Solving/Critical Thinking

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Dissatisfied	1	3.4	3.7	3.7
	Somewhat Dissatisfied	1	3.4	3.7	7.4
	Somewhat Satisfied	6	20.7	22.2	29.6
	Very Satisfied	19	65.5	70.4	100.0
	Total	27	93.1	100.0	
Missing	System	2	6.9		
	Total	29	100.0		

Satisfaction: Teamwork

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Very Dissatisfied	1	3.4	3.7	3.7
	Somewhat Satisfied	5	17.2	18.5	22.2
	Very Satisfied	21	72.4	77.8	100.0
	Total	27	93.1	100.0	
Missing	System	2	6.9		
	Total	29	100.0		

Satisfaction: Professionalism

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Dissatisfied	1	3.4	3.7	3.7
	Somewhat Satisfied	2	6.9	7.4	11.1
	Very Satisfied	24	82.8	88.9	100.0
	Total	27	93.1	100.0	
Missing	System	2	6.9		
	Total	29	100.0		

Employer overall satisfaction:

Employers were ask to rate their overall satisfaction with the knowledge and skills of the Ferris State University graduate's job performance. Employers rated that they were very satisfied with the overall knowledge and skills of the FSU graduate performance. 6.9% (n=2) were very dissatisfied and another 13.8% were somewhat satisfied with the overall knowledge and skills of the FSU graduate performance.

Overall satisfaction

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Very Dissatisfied	2	6.9	7.7	7.7
	Somewhat Satisfied	4	13.8	15.4	23.1
	Very Satisfied	20	69.0	76.9	100.0
	Total	26	89.7	100.0	
Missing	System	3	10.3		
	Total	29	100.0		

Hire another FSU HCSA Graduate:

Of the 29 responses from the employers, 89.7 % (n=26) would rehire another graduate from FSU HCSA program. Of the employers responding, 10.3% (n=3) indicated that they would not hire another FSU HCSA graduate.

Hire another FSU grad

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Yes	26	89.7	100.0	100.0
Missing	System	3	10.3		
Total		29	100.0		

Facilities employed:

The following five tables provide a breakdown of the types of facilities that FSU HCSA graduates are currently employed. FSU HCSA graduates are employed in Acute care (n=18), ambulatory care (n=3), physician practices (n=5), long-tem care/home health/hospice (n=5). No graduates were employed in an HMO/PPO/Insurance organization.

Facility: Acute Care

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Checked	18	62.1	100.0	100.0
Missing	System	11	37.9		
Γ	otal	29	100.0		

Facility: Ambulatory Care

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Checked	3	10.3	100.0	100.0
Missing	System	26	89.7		
]	Total	29	100.0		

Facility: HMO/PPO/Insurance

		Frequency	Percent
Missing	System	29	100.0

Facility: Physician Practices

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Checked	5	17.2	100.0	100.0
Missing	System	24	82.8		
	Total	29	100.0		

Facility: LTC/Home Health/Hospice

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Checked	5	17.2	100.0	100.0
Missing	System	24	82.8		
Total		29	100.0		

Additional comments/suggestions:

Employers were able to provide comments on areas where they foresaw the greatest employment opportunities for the FSU students/graduates in the future as well as any suggestion for program improvement. Below are the verbatim comments with any specific identified characteristics removed to protect the anonymity of the employer.

Additional Comments

Frequency	Percent
1	3.4
1 1 1 1	3.4 3.4 3.4 3.4
1	3.4
1	3.4
	1 1 1 1 1 1

Additionally, all Clinical Site Coordinators who oversee our 12-week interns are surveyed to see how well prepared our students are to enter the workforce. The following synopsis of data indicates their assessment our HCSA students. This survey is conducted immediately prior to graduation from the program. As you can see the ratings are very supportive the program is meeting the identified goals of the program and the needs of potential employers.

Site Coordinator's Evaluation of Student Intern Summer 2006

Scale values of behavior demonstrated

- 4 ABOVE AVERAGE
- 3 AVERAGE
- 2 BELOW AVERAGE
- 1 POOR

Data is received as responses from Site Coordinators of 48 students.

Interpersonal Skills: The intern:

1) Demonstrated appropriate interpersonal skills when working with others.

4	3	2	1
44	4	0	0

2) Asked questions to gain information necessary to perform assigned tasks.

4	3	2	1
41	7	0	0

3) Dealt appropriately with conflict.

4	3	2	1
38	6	0	0

4) Showed respect for diverse opinions and ideas.

4	3	2	1
45	3	0	0

5) Showed respect for site coordinator and allowed appropriate time when submitting projects for review.

4	3	2	1
45	2	1	0

Oral Communication Skills: The student intern:

1) Was able to make professional presentation.

4	3	2	1
43	5	0	0

2) Could explain his/her point of view.

4	3	2	1
42	6	0	0

Computer Skills: The intern demonstrated the ability to:

1) Construct a basic spreadsheet.

4	3	2	1
42	6	0	0

2) Manipulate data.

4	3	2	1
44	4	0	0

3) Access information within the facility's system.

4	3	2	1
47	1	0	0

4) Use word processing skills to complete assigned projects.

4	3	2	1
45	3	0	0

Quality of Work: The intern:

1) Was able to apply knowledge learned on-campus to the healthcare setting.

4	3	2	1
38	10	0	0

2) Was able to accurately interpret information.

4	3	2	1
36	12	0	0

3) Used acceptable grammar and punctuation when completing tasks.

4	3	2	1
35	13	1	1

4) Completed all work assigned.

4	3	2	1
46	2	0	0

5) Presented work that was neatly done and had a professional appearance.

4	3	2	1
45	3	0	0

Professional Conduct: The intern:

1) Arrived on time for scheduled days.

4	3	2	1
46	2	0	0

2) Arrived on time for scheduled meetings and appointments.

4	3	2	1
46	2	0	0

3) Was in attendance for the number of hours scheduled each day.

4	3	2	1
45	3	0	0

4) Was neat and clean.

4	3	2	1
45	3	0	0

5) Was appropriately attired for the work situation (followed the facility's dress code).

4	3	2	1
45	3	0	0

Demonstration of knowledge: The intern:

1) Could speak the language of healthcare.

4	3	2	1
33	12	0	0

2) Demonstrated understanding of the laws that pertain to healthcare.

4	3	2	1
29	15	0	0

3) Demonstrated understanding of the structure of healthcare in the US.

4	3	2	1
32	14	0	0

4) Demonstrated an understanding of the pervasive nature of quality improvement

throughout healthcare.

4	3	2	1
32	13	0	0

Additionally, the site coordinators provided several comments, which have been summarized into the following areas;

Potential for Employment in Healthcare

- Very good/ Great potential
- Excellent/ Very Strong
- Intern represents Ferris well.
- Strong asset to any organization.
- Broad base of healthcare information will open doors for intern.
- Likely candidate for an assistant administrator position.
- Knowledge, personality and motivation We hired her.
- No problem finding employment.
- We are trying to rearrange budget to hire her/ would love to hire her.
- If intern continues her education, I might be working for her.

Areas for Improvement

- More healthcare experience especially with budgeting/ finance
- Confidence during presentations/ verbal skills
- Communications need to ask more questions
- Writing skills need development spelling errors
- Tolerance for ambiguity
- Excel and Word processing
- Conflict and resolution skills

Strong Attributes

- Team player/ great sense of humor
- Respect for others
- Displays confidence
- Independent worker/ thinker
- Comprehend complex concepts and issues
- Anticipates needs of individuals
- Pays attention to detail
- Strong initiative and follow through
- Willingness to learn
- Excellent Attendance
- Energetic Enthusiasm
- Organization and time management
- Willingness to take on all tasks as a challenge

C. Graduating student exit survey

The graduating student exit survey was not completed prior to the end of the semester due to the mixed delivery and various locations of our interns due to clinical and HCSA internships. Previous years graduating student exit survey were very scattered and non-conclusive. However, several of our graduating seniors participated in the student program evaluation survey (Section 2. D.) which sought information regarding quality of instruction, relevance of courses and satisfaction with program outcomes based on their own expectations. At the end of the HCSA student's last internship, the interns rate their internship experience on such issues as orientation to the department and comfortableness in asking for assistance from their supervisor and other employees. Additionally, the students were asked to comment on what they believed were the strongest aspects of the internship experience, its weakest points, and what recommendations they would make for the next intern. The following is a compilation of such comments.

Consolidated Comments of Interns HCSA 493 Summer 2006

Strongest Aspects

- Able to understand various areas of healthcare/ Exposure to other areas
- Seeing how the systems flow together/ Seeing how integrated healthcare is
- Opened areas I never realized my degree could take me
- Meeting and Networking with different healthcare professionals
- Confidence to know I can perform the job
- Found a fantastic mentor
- Learning in depth about quality improvement and risk management
- Attending management meetings
- Now that I have experience- the HCSA classes I took made more sense
- Taste of real life
- Confidence in myself/ treated as an adult

Weakest Points

- Not enough computer facilities
- Repetitive projects
- Not enough attendance at meetings
- Wish we could get paid should not work us for free
- Lack of HR exposure
- Supervisor was busy hard to meet with her
- Filing when not busy/ boring work assigned
- Not enough time to accomplish everything
- None- Would not have traded this internship for anything
- Too structured at times

Recommendations for next intern

- Attend as many meetings as possible and LISTEN
- Be organized and don't waste your time
- Do not procrastinate, deadlines arrive sooner than anticipated/ Establish timelines for projects
- Be positive and outgoing/ flexible and ready to work laziness won't be tolerated
- Have fun!
- Take on additional projects if asked to do so/ Be proactive- Don't sit back waiting to be asked

- Pay attention in HCSA 320 and know your medical terminology
- Be careful with your words and actions, you may not know who you are talking to.
- Always ask questions if the directions are unclear.
- Recommendations for the 'next intern' are gathered, printed and shared with interns during the class HCSA 345; Orientation to Internship

D. Student program evaluation

Current students were surveyed to obtain information regarding quality of instruction, relevance of courses, and satisfaction with program outcomes. It additionally sought information on adequacy of advisory services from the program's faculty. (Appendix D) The results from this survey indicate the current students believe the program will adequately prepare them to meet the program objectives.

Student Perceptions Spring 2007

Data is received as responses from 54 students.

Do you meet with your HCSA advisor or attend group advising at least once a semester?

a. Yes	49
b. No	6

Has your HCSA advisor or group advising been helpful?

a. Yes	46
b. No	9

Please utilize this space for any comments you wish to make regarding your advisor or the group advising session.

See Attached

Have your HCSA instructors been generally available outside of class?

a. Yes	52
b. No	3

Have your HCSA instructors been generally helpful?

a. Yes	53
b. No	1

Please utilize this space for any comments you wish to make regarding your instructors. See responses at end of survey

If you were beginning your college career again, would you still choose to attend FSU?

a:	Definitely Yes	12
b.	Probably Yes	30
C.	Probably Not	13
d.	Definitely Not	0

Please utilize this space for any comments you wish regarding you answer to question 7. See responses at end of survey

If you were choosing your major again, would you still choose HCSA?

a. Definitely Yes	15
b. Probably Yes	25
c. Probably Not	13
d. Definitely Not	0

Please utilize this space for any comments you with to make regarding your answer to question 9.

See responses at end of survey

How would you rank the overall quality of instruction in the program?

a.	Excellent	8
b.	Above Average	28
c.	Average	18
d.	Poor	0

How would you rank the overall relevance of the courses?

a.	Excellent	10
b.	Above Average	23
C.	Average	21
d.	Poor	0

Please indicate how well the HCSA program has prepared you within the following categories.

4 – Very Prepared

3 – Adequately Prepared

2 – Somewhat Prepared

1 – Not At All Prepared

Demonstrate interpersonal skills necessary to succeed in the work force.

4	3	2	1
8	39	9	0

Demonstrate oral communication skills necessary to succeed in the work force.

4	3	2	1
8	35	10	2

Demonstrate computer skills necessary to succeed in the work force.

4	3	2	1
18	29	7	1

Demonstrate critical thinking skills to apply previously learned knowledge to solving a new problem.

4	3	2	1
14	31	9	0

Demonstrate analytical skills necessary to interpret data.

4	3	2	1
7	33	12	1

Demonstrate written communication skills necessary to succeed in the work force.

4	•	3	2	1
14	4	30	10	0

Demonstrate professional conduct.

4	3	2	1	
25	26	4	0	

Speak the language of the health care profession(s).

 are member emic procession(s).								
4	3	2	1					
26	22	6	1					

Demonstrate understanding of the laws that pertain to health care.

4	3	2	1
22	24	7	1

Demonstrate understanding of the structure of health care in the United States.

4	3	2	1
20	31	4	0

Demonstrate appropriate work ethics.

	4 3		2	1	
I	20	31	4	0	

Demonstrate an understanding of the pervasive nature of quality assurance throughout the health care professions.

4	3	2	1
14	32	9	0

Demonstrate specific knowledge and skills defined by their curriculum.

4	3	2	1
.21	26	7	1

Comments from Question #3.

- While I usually miss the group meetings, the one-on-one meetings are the most helpful to me. If you want group meetings, you should set it up with class announcements and/or class meetings.
- My advisor is wonderful! When she meets with me, she always knows my name and history regarding academics. She's quick to reply to my phone calls and is always willing to work with me.
- I think it would be a lot easier to do one-on-one sessions when the students are almost done with the program. Make it mandatory or something to see how the credits are for graduation and finished classes.
- It is difficult to get a hold of an HCSA advisor, especially one that knows what they are talking about.
- The group advising doesn't always help everyone, especially if they have more than one degree.
- My advisor is not a friendly person at all. She is not helpful. The only thing she is good for is releasing holds.
- I have two advisors, so it's difficult to meet with both, since I am in two programs, I get confused what classes I am supposed to be taking.
- My advisor is never available and during group advising the teachers who are there just seem to hurry you up even if you have questions about classes.
- Advisors that actually help you with the process instead of just saying "ok" would be helpful. Also, when you come to them about transfer credits to dual enroll in the summer they should know how to actually help you so you can do that.
- Always friendly and helpful

- At first my advisor seemed useless but as I got closer to completing the program, I then saw her importance.
- My advisor is great. She is very enthusiastic about what she does.
- My advisor is great. I never have a problem finding an appropriate time for an appointment and I always leave happy with all my questions answered.
- Ferris is the kind of school it seems like you advise yourself. My advisor is worthless. She takes holds off of my account, but doesn't have much to offer other than that.
- Advisor is usually available when needed and is very helpful when assistance is given.
- Group advising is good, but I don't feel that my personal advisor has helped me get to where I want to be.
- Overworked, too busy
- It works much easier than setting up an appointment.
- I enjoy one-on-one consultations and it has been extremely helpful for me.
- I feel better when I can meet one-on-one with my advisor rather than group advising.
- Great listener and helpful regarding questions about the degree.
- I wish my advisor acted as if she WANTED to help me as opposed to the burden I felt like I was to her.
- Every advisor gives you different information regarding internships and transfer classes. I believe everyone needs to provide the same information so it doesn't confuse students.
- Group advising was beneficial, and probably helpful on the advisors workload.
- Very helpful in getting everything organized and make sure all classes apply to your degree.
- I would have liked to see when I asked for a little bit of advice about a minor that would go well with this major not just tell me what other students have taken, but to maybe find out what meshes well with the major.
- Very helpful.
- I wish my advisor would fill out a class form when I go in to talk about next semester classes.
- Helpful in what classes to take.
- The advisor helped me sign up for correct classes, and got me on the right path.
- My advisor is very knowledgeable but I don't know about the other advisors.
- Always since I have been in college, my advisors have been extremely helpful. I haven't yet attended a group advising.
- The group advising is generally helpful, but I prefer a one-on-one advising session.
- Great sessions, advisors were really helpful!
- Never went to the group advising session because all of the times were overlapping with classes, but saw my advisor regularly.

- Not always easy to get a hold of.
- Good with making time for you.
- There has been some confusion as to advising questions.
- Helped me balance out my schedule and figure out when I will be able to graduate.

Comments from Question #6.

- I love the HCSA program all my instructors have been available outside of class, whether by email or office visits. The instructors are also great because they are genuinely interested in knowing the students and helping them accomplish their goals.
- I wish they could help with the process of finding an internship.
- Some instructors are great with helping out of class. Some instructors aren't always fair or changes things because students want it easier and they favor some people.
- The instructors are very professional and are always there to help whether it is in or out of class.
- They are all pretty decent in teaching. I like most or all of them, they all seem very knowledgeable in their teaching.
- I have a hard time contacting most the HCSA teachers outside of class, however, if I have questions in class, MOST of them are helpful.
- The instructors need to be a little more willing to understand. Not everyone will get things in class. Some students will come visit them and they need not to act like it's a huge burden.
- They have been great.
- I find the instructors in this program very willing to help you succeed.
- My HCSA instructors are very interested in what they do. They seem to put a lot of time into their daily plans.
- I sometimes feel that some of the classes are a waste of time. A lot of the information is common sense and could be put into an online class. The classes would be better if some were offered online so if we are dual enrolled we can work on them during internship.
- The HCSA instructors teach with such great passion that it makes it easier to get to class knowing that you're wanted there.
- The instructors are generally ok. It is the classes that are so repetitive and dull. I know we need to know a lot of information, but ten times repeated?
- Most instructors do a good job, a few don't know really how to teach or don't do so in an effective manner to make material understandable.
- Overall, they have helped me excel in this program.
- Everyone is generally concerned about the success of the students.

- I can always find time to meet them in their offices, and they all seem to be ready and willing to help, or talk.
- Generally good teachers, make sure to get people who know how to teach instead of boring health care workers.
- They are friendly and concerned about me as an individual as well.
- Very concerned with my overall success which was a nice change of pace.
- Most are not very understanding when grading assignments.
- Instructors are very knowledgeable and very helpful.
- Very nice and helpful always!
- I wish my advisor would go over classes more.
- Instructors so far have been very good.
- All instructors bend backwards to students
- All my professors have worked really well with my needs.

E. Faculty perceptions survey

A 17-item instrument was utilized to secure faculty perceptions of the program. (Appendix F) Handwritten comments were optional. Question 5 was inappropriate for the program; as such, all responses were N/A. Full-time on campus faculty who are assigned to the HCSA program plus faculty in a sister program, Health Information, were surveyed for an n=7. The composition of faculty included:

HCSA	1 tenured faculty
	2 tenure-track (in 2 nd year) faculty
	1 full-time temporary faculty (new in F 2006)
MRIS	3 tenured faculty
	7 total
Combined	4 tenured faculty
	2 tenure-track (in 2 nd year) faculty
	1 full-time temporary faculty (new in F 2006)
	7 total

Evaluations encompassed perceptions from the entire range: very inexperienced to very experienced in the program's purpose and role in producing graduates to meet the needs of the State of Michigan. Interpretation of results should consider the degree of knowledge that supports the perceptions. All tenured faculty have been vested in the growth and direction of the program for a number of years. They have each followed interns through their internships and talked with site coordinators as well as employers. They garnered information about the ability of HCSA students to perform in the workplace. Additionally, one tenure-track faculty has worked with interns and had the

role of program coordinator for over three (3) semesters. These experiences intensified the interest and knowledge base regarding the HCSA program. Thus, five (5) faculty provided input based on significant background and understanding of the program while the remaining two (2) faculty, one tenure-track and one new full-time temporary faculty, have less background and understanding. It is expected that there would be a wide range of responses and comments. That was the case.

Instructions for answering questions were provided:

"Please rate each of the following statements using the following scale. If you are unable to answer the statement, please just skip it rather than answering:

- A (5) Excellent (top 5-10%)
- B (4) Good (top 1/3)
- C (3) Acceptable (middle third)
- D (2) Below Expectations (bottom 1/3)
- E (1) Poor (seriously inadequate)

Please note any comments on the reverse side."

Detail (frequency, mean and standard deviation) by question will be followed by a combined summary. For computational purposes, values were assigned to A, B, C, D and E as noted above, e.g., A (5) designates that a value of 5 was assigned to an A response. These values are noted here for explanatory reasons. They were not included in the actual instructions.

1. Administrators involved in developing and revising the plan for this program seek and respond to faculty input

Frequency	A	В	С	D	Е	Mean	Standard
							Deviation
n = 7	4		2	1		4.0	1.3

2. Written goals for this program state realistic outcomes

Frequency	A	В	С	D	Е	Mean	Standard
							Deviation
n = 6	1	4	•	1		3.8	1.0

3. The curriculum is designed to meet the needs of graduates

Frequency	A	В	С	D	Е	Mean	Standard
							Deviation
n = 7	2	4		1		4.0	1.0

4. The curriculum is designed to meet the needs of employers

Frequency	A	В	С	D	Е	Mean	Standard Deviation
n = 7	2	4		1		4.0	1.0

5. The curriculum is designed to meet the requirements of the accrediting body

This was an inappropriate question for the program. It was left blank by all survey respondents.

6. I am involved in program evaluation

Frequency	A	В	С	D	Е	Mean	Standard
							Deviation
n = 7	3	3	1			4.3	.8

7. Administrative support for the program is

Frequ	ency	A	В	С	D	Е	Mean	Standard Deviation
n = 7		3	1	2	1		3.9	1.2

8. Laboratory space for the program is

Frequency	A	В	С	D	Е	Mean	Standard Deviation
n = 7	2	3		2		3.7	1.3

9. Laboratory equipment for the program is

Frequency	A	В	С	D	Е	Mean	Standard
							Deviation
n = 5	1	4				4.2	.4

10. Library support for the program is

Frequency	A	В	С	D	Е	Mean	Standard
							Deviation
n = 7	3	3	1			4.3	.8

11. I receive adequate support for professional development

Frequency	A	В	С	D	Е	Mean	Standard Deviation
n = 7	2	2	3			3.9	.9

12. The advisory committee for the program is

Frequency	A	В	C	D	Е	Mean	Standard
							Deviation
n = 6	1	3	2			3.8	.8

13. Provision for students with disabilities is

Frequency	A	В	C	D	E	Mean	Standard
							Deviation
n = 6	2	1	2	1		3.7	1.2

14. Secretarial support for the program is

Frequency	A	В	С	D	Е	Mean	Standard
							Deviation
n = 7	5		1	1		4.3	1.3

15. Instructional support staff is

Frequency	A	В	С	D	Е	Mean	Standard Deviation
n = 6	1	4	1			4.0	.6

16. The number of faculty assigned to the program is

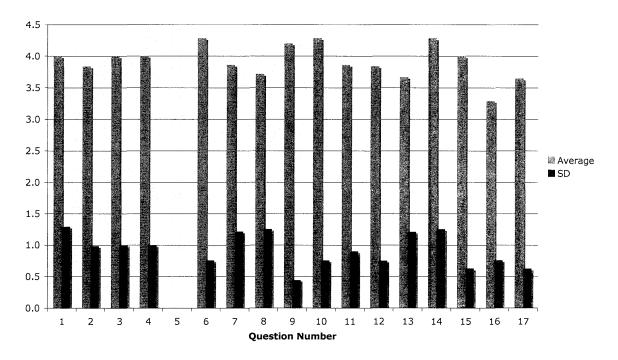
Frequency	A	В	С	D	Е	Mean	Standard Deviation
n = 7		3	3	1		3.3	.6

17. The quality of the faculty assigned to the program is

Frequency	A	В	С	D	Е	Mean	Standard Deviation
n = 7		5	1	1		3.6	.6

The following chart reflects the averaged responses with related standard deviations for the instrument questions.

HCSA Faculty Perceptions
Survey Results as Averages with Related Standard Deviation
February 2007



Over half of the questions resulted in good or excellent ratings, as an average of all respondents. Average ratings of 4.2 or higher, on a scale of 1-5, were related to involvement in program evaluation, secretarial support, library support and lab equipment for the program. Handwritten comments stated that the quality of secretarial support was excellent yet inadequate. The recent addition of a part-time assistant may partially mitigate the perception that inadequate secretarial support exists. The secretarial support question had one of the largest dispersions in responses with a standard deviation of 1.3. Clearly, many responses were at the high end to result in an average rating of 4.3.

Average ratings of 4.0, related to administrators seeking and responding to faculty input in developing and revising programmatic plans, curriculum meeting graduates' needs curriculum meeting employers' needs and the level of instructional support staff for the program. Handwritten comments indicate that instructional support staff exists outside the college rather than inside. The administrator question had one of the largest dispersions in responses with a standard deviation of 1.3. Comments were not provided to explain this; the responses were simply widely spread.

All remaining responses were within the "acceptable range", i.e., 3.3 to 3.9, as averages. Of greatest concern are the two lowest averaged results noted below. While respondents did not wish to name names in writing, three respondents informed the surveyor that they had written comments related to a full-time temporary and/or a tenure-track faculty:

3.6 averaged result for question 17: the quality of the faculty assigned to the program. Handwritten comments by 3 respondents were:

- Some newer faculty are not appropriately qualified and do not recognize their limitations. While some new faculty are excellent, some are below expectations.
- Some new faculty are not prepared or experienced to teach in the program.
- A lot of student complaints regarding quality of an instructor. Felt class is easy "A" but students complaining of not learning.
- Instructor not knowledgeable in course content.

3.3 averaged result for question 16: the number of faculty assigned to the program. Handwritten comments by 2 respondents were:

- Too dependent on adjunct faculty
- Quality of program is jeopardized by excessive use of temporary and adjunct faculty
- Consistent overtime usage of full-time faculty contributes to burnout and a lessening of quality.

Summary

Overall, faculty perceptions of the program range from 3.3 to 4.3, on a 1 to 5 scale. Strengths appear to be involvement in program evaluation, secretarial and library support and the available lab equipment. The areas that need the greatest improvement rest in the quality and number of faculty in the program. While the result is in the 'acceptable' range, the results for these areas are the lowest of all areas. 'Acceptable' is not acceptable when it relates to the faculty that drive the program's success. Attention to these two areas is warranted.

F. Advisory Perceptions

Surveys were sent to the four members of the Health Care Systems Advisory Committee members. Two members completed and returned the survey. A copy of the survey and results can be found in Appendix F.

The committee had been composed of seven members. However, due to change of employment, three of the committee members resigned within the last year. After the survey was sent, a fourth member resigned and relocated to another state. The department is in the process of filling these positions.

A brief summary of the survey results is included in the following table.

- A Excellent (top 5-10%)
- B Good (top 1/3)
- C Acceptable (middle 1/3)
- D Below expectations (bottom 1/3)
- E Poor (seriously inadequate)

HCSA Advisory Board Perceptions of Program	A	В	С	D	Е	No
						Response
1. Courses available at times convenient for students.	0	1	0	0	0	1
2. Program meets needs of health care administration	2	0	0	0	0	0
community.						
3. Faculty in the program are qualified.	0	1	0	0	0	1
4. Lab facilities for the program are adequate.	0	1	0	0	0	1
5. Graduates are in high demand.	1	1	0	0	0	0
6. Curriculum is reflective of current health practice.	2	0	0	0	0	0

Total: 2 surveys

Program Profile

SECTION 3: Program Profile

Yearly Administrative Review

Program_Health Care Systems
Administration

December 2006

Purpose of Yearly Administrative Review: to facilitate a process led by the deans and department heads/chairs to assess and evaluate programs under their supervision to facilitate long term planning and recommendations to the VPAA to collect and analyze information that will be useful in the University's accreditation efforts; Academic Program Review deliberation; and assessment.

Instructions: Please prepare a report following the outline below.

Summary of Modifications since last report:

Please provide a brief summary of the changes that have taken place in the program since the last report:

There have been no major changes in the program since the last report. Faculty are in the process of reviewing the curriculum for needed changes.

Program Assessment/Assessment of Student Learning

What are the program's learning outcomes?

What assessment measures are used, both direct and indirect?

What is the assessment cycle for the program?

What assessment data were collected in the past year?

Goal	Evaluation Mechanism	Results
100% of the graduates will be able to work as members of the health care	Evaluation by internship supervisor	99%
team	Employer survey one year post graduation	100%
	Capstone presentation to program faculty	98%
100% of the graduates will be able to use applicable software in the	Evaluation by internship supervisor	100%
performance of their assigned responsibilities	Employer survey one year post graduation	100%
	Capstone presentation to	100%

	program faculty	
100% of the graduates will be able to read and interpret statistical reports	1. Comprehensive final examination for EHSM 315	92%
100% of the graduates will demonstrate the ability to formulate a budget for their area of responsibility	Comprehensive examination for HCSA 401 Capstone presentation to program faculty	90%
100% of the graduates will be able to	Comprehensive project	87%
perform a quality assurance study, interpret data and make	for HCSA 433 Evaluation by internship	100%
recommendations for improvement	supervisor Employer survey one year post graduation	100%
100% of the graduates will be able to demonstrate understanding of the	Evaluation by internship supervisor	95%
principles of employee supervision	Employer survey one year post graduation	100%
100% of the graduates will be able to participate in the planning process in	Capstone presentation to faculty	100%
a health care facility	Evaluation by internship supervisor	100%
	Employer survey one year post graduation	100%
100% of the graduates will be able to apply critical thinking skills within	Evaluation by internship supervisor	90%
their area of responsibility	Employer survey one year post graduation	90%
100% of the graduates will demonstrate sensitivity to the needs	Evaluation by Internship Supervisor	100%
of a diverse work force	Employer survey one year post graduation	100%

How have assessment data been used for programmatic or curricular change? Comments from the advisory committee regarding course content were reviewed prior to the last curriculum change.

Course Outcomes Assessment

Do all multi-sectioned courses have common outcomes? Yes

If not, how do you plan to address discrepancies?

How do individual course outcomes meet programmatic goals? The outcomes in the individual courses are designed to prepare the students to meet program goals. For example, one of the program's goals is to have students to be able to function as a team member. Beginning in the first course, students are taught about teams and functioning as a member of a team and allowed to practice serving on a team. Subsequent courses reinforce these skills.

Program Features

Advisory Board

Does the program have a board/committee? Yes When did it last meet? October 2005 When were new members last appointed? September, 2004 What is the composition of the committee (how many alumni, workplace representatives, academic representatives, etc.) 3 alumni, 4 workplace representatives

If no advisory board exists, please explain by what means faculty receive advice from employers and outside professionals to inform decisions within the program.

Has feedback from the Advisory Board affected programmatic or curricular change? The advisory board has recommended that the program be offered totally on-line and that a master's degree in health care systems administration be explored.

Internships/Cooperative or Experiential Learning Is an internship required or recommended? **required**

A. PROFILE OF STUDENTS

1.) Student Demographic Profile

	American							
	Indian/	Asian or						
	Native	Pacific					Not	
	Alaskan	Islander	Black	Foreign	Hispanic	White	Reported	Total
Female	17)	34	79	3	21	1,213	100	1,467
Male	2	.6	18	1	6	245	19	297
Total	19	40	97	4	27	1,458	119	1,764
				Table 1.1				

Student Enrollment

		Se	x		Enrollment							
Term	Enrolled	Male	Female	Blank	Black	Hispanic	Indian/ Alaskan	Asian/Pac Islander	White	Foreign	Full-Time	Part-Time
2002F	1	0	1	0	1	0	0	0	0	0	1	0
2003F	2	0	2	0	1	0	0	0	. 1	0	2	0
2004F	8	1	7	0	2	0	٥	0	6	0	6	2
2005F	9	1	8	0	5	. 0	0	0	4	0	8	1
2006F	18	3	15	.0	5	0	0	0	13	0	15	3

Table 1.2

b.) Gender, race/ethnicity, age (Table 1.1) provided by institutional research indicates female to male ratio is approximately 5:1, this approximate ratio has remained essentially unchanged for data provided from 2002-2006. White students compile the largest sect of our program population with black the predominant non-white ethnicity, and Hispanic and Asian/Pacific Islander compiling a small minority of students. Foreign students have numbered one or zero for the past five years. Students who have not yet obtained a 2.5 GPA are allowed to declare a major of Pre-HCSA. As of April 2006, enrollment by Sex and Ethnicity for Pre-HCSA students maintained similar statistics. (Table 1.2) The 2006F median age for HCSA student is 24.3, which has declined since 2002F at which time the median age was 26. (Table 1.3) The median age for Pre-HCSA students fluctuated slightly around 22 from 2002 though 2006. (Table 1.4)

Student Enrollment

		FSU GPA	ACT						
Term	Avg. GPA	Min. GPA	Max. GPA	Avg. ACT	Min. ACT	Max. ACT			
2002F	2,897	1,839	4	18.8	13	27			
2003F	2.963	1.748	3.972	18.9	12	27			
2004F	3.011	2,005	3.982	18.7	11	27			
2005F	3.043	2,047	4	19.7	12	30			
2006F	3,169	0.68	4	20.4	12	29			

Student Enrollment

	Residency									
Term	Blank	Blank Midwest Compact Non-Re		Resident	Avg. Age					
2002F	0	1	1	84	26					
2003F	0	1	0	85	25.1					
2004F	0	1	0	135	24.7					
2005F	0	2	1	209	24.7					
2006F	0	4	1	250	24.3					

Student Enrollment

		Residency									
Term	Blank	Midwest Compact	Non-Resident	Resident	Avg. Age						
2002F	0	0	0	1	22						
2003F	0	0	0	2	22						
2004F	0	1	0	7	21.8						
2005F	0	0	0	9	23.1						
2006F	0	. 0	0	18	22.2						

Student Enrollment

		FSU GP	ACT						
Term	Avg. GPA	Min. GPA	Max. GPA	Avg. ACT	Min. ACT	Max. ACT			
2002F	2.123	2,123	2.123	20	20	20			
2003F	2.658	2.423	2.893	20.5	20	21			
2004F	2.409	2.007	3.107	18.1	15	22			
2005F	2.36	2,13	2.633	16,3	13	21			
2006F	2.36	2.02	2.98	17.7	13	21			

Table 1.4

b.) Enrollment by Residency, Age, FUS GPA, and ACT for HCSA (Table 1.3) indicates the overwhelming majority of HCSA students have resident status, with only 1% of the students maintaining Midwest Compact or Non-Resident status. This remained consistent from 2002-2006. With the exception of one student in 2004, all Pre-HCSA students maintain resident status. (Table 1.4)

Ferris State University Administrative Program Review 2006 College of Allied Health Sciences Health Care Systems Administration BS

Student Enrollment

:	F	Fall 2002			Fall 2003			Fail 2004			Fall 2005			Fall 2006		
	On	Off	Total													
Freshman Headcount	3		3	2	2	4	2		2	6	-	6	6		6	
Freshman SCH's	36		36	29	8	37	26		26	77		77	82		82	
Sophomore Headcount	12	1	13	5		5	16	2	18	31	3	34	36	6	42	
Sophomore SCH's	169	4	173	. 70		70	217	9	226	433	18	451	487	38	525	
Junior Headcount	24	3	27	25	. 3	28	35	2	37	44	9	53	64	10	74	
Junior SCH's	341	12	353	339	18	357	474	8	482	577	58	635	833	80	913	
Senior Headcount	35	8	43	45	4	49	71	8	79	101	18	119	108	25	133	
Senior SCH's	466	47	513	611	17	628	945	42	987	1322	100	1422	1431	195	1626	
TOTAL HEADCOUNT	74	12	86	77	9	86	124	12	136	182	30	212	214	41	255	
TOTAL SCH's	1012	63	1075	1049	43	1092	1662	59	1721	2409	176	2585	2833	313	3146	

Graduates

	Academic Yr 01/02			Academic Yr 02/03			Academic Yr 03/04			Acade	mic Yr 0	4/05	Academic Yr 05/06		
,	On	Off	Total	On	Off	Total	On	Off	Total	On	Off	Total	On	Off	Total
Number of Graduates	19	4	23	11	2	13	19	2	21	16	- 1	17	20	1	21

Source: 7th/4th Day Counts Institutional Research and Testing

12/1/2006

Ferris State University Administrative Program Review 2006 College of Allied Health Sciences Pre-Health Care Systems Administration BS

Student Enrollment

		all 2002			Fall 2003			Fall 2004			Fall 2005			Fall 2006)
	On	Off	Total	On	Off	Total	On	Off	Total	On	Off	Total	On	Off	Total
Freshman Headcount			0			0			0	1	_	1	2		2
Freshman SCH's			0			0 .			0	14		14	29		29
Sophomore Headcount	1		1			0	2		2			0	. 2		2
Sophomore SCH's	14		14			0	30		30			0	29		29
Junior Headcount			0			0	4		4	3		3	9		9
Junior SCH's			0			0	50		50	34		34	109		109
Senior Headcount			0	2		2	2		2	5		5	5		5
Senior SCH's			0	36		36	18		18	66		66	48		48
TOTAL HEADCOUNT	1		1	2		2	8		8	9		9	18		18
TOTAL SCH's	14		14	36		36	98		98	114		114	215	-	215

Graduates

·	Academic Yr 01/02		Acadeı	mic Yr 02	2/03	Aca	demic Yr	03/04	Acade	mic Yr 0	4/05	Acade	mic Yr 05	5/06	
	On	Off	Total	On	Off	Total	On	Off	Total	On	Off	Total	On	Off	Total
Number of Graduates			0			0			0			0			0

STUDENTS/ENROLLMENT

ENROLLMENT BY PROGRAM FALL SEMESTER

COLLEGE	2002/03	2003/04	2004/05	2005/06	2006/07
ALLIED HEALTH SCIENCES					
CLINICAL LAB, RESP CARE, & HLTH ADMIN Environmental Health & Safety Management Environmental Health & Safety Technology Health Care Systems Administration Medical Laboratory Technology Medical Record Administration Medical Record Technology Medical Technology Medical Technology Nuclear Medicine Technology AAS Nuclear Medicine Technology BS Phlebotomy Pre-Environmental Health & Safety Management Pre-Health Care Systems Administration Pre-Medical Laboratory Technology Pre-Medical Record Administration Pre-Medical Record Technology Pre-Nuclear Medicine 2-Yr Pre-Nuclear Medicine 4-Yr Pre-Respiratory Care Respiratory Care On-Campus Total	26 0 74 7 19 25 32 43 13 0 1 1 12 1 1 32 1 13 12 31	25 2 77 10 28 24 33 57 11 0 2 4 2 3 46 0 18 15 359	20 2 124 8 33 37 29 56 7 0 0 8 2 1 6 51 2 12 33 431	13 1 182 12 27 36 47 49 0 5 0 9 4 11 67 0 21 34 527	6 0 214 8 24 33 63 43 0 5 0 18 4 3 8 59 0 17 32 537
OFF-CAMPUS Coding/Reimbursement Specialist Cert Environmental Health & Safety Management Environmental Health & Safety Technology AAS Environmental Health & Safety Technology Cert Health Care Systems Administration Medical Record Administration Medical Record Technology Phlebotomy Pre-Respiratory Care Respiratory Care Off-Campus Total DEPARTMENT TOTAL	56 1 15 1 12 3 37 0 0 125	57 18 0 2 9 10 68 0 0 21 185	32 21 0 0 12 15 66 8 0 18 172	12 13 0 0 30 16 85 18 0 68 242	14 1 0 0 41 16 76 6 4 103 261
DEPARIMENT TOTAL	438	544	603	769	798

Table 1.7

- c.) The ratio of full time students (from 2002F until F2006) to part-time students is approximately 5:1. (Table 1.0) HCSA students who attend the Big Rapids campus are considered full-time and those who attend off-campus, such as at our Grand Rapids campus constitute our part-time students. Student enrollment data from University Research (Table 1.5) indicates a statistical increase occurred in fall 2005 with our off-campus (part-time) students. This correlates with our program collaboration with Grand Rapids Community College. There are no Pre-HCSA students who are part-time. (Table 1.6)
- d.) Although we provide on-campus HCSA classes some evenings, our off-campus students are those who attend classes in the evening. With the growth of our program in Grand Rapids, our evening classes have increased to meet demand of the off-campus students. (Table 1.5) We currently do not offer HCSA classes on weekends.
- e.) See A.1.c. response, below Ferris State University Fact Book 2006-2007 and Tables 1.5, 1.6 and 1.7. University Research

HCSA On-Campus Enrollment

2002/03 2003/04 2004/05 2005/06 2006/07 HCSA On-Campus 74 77 124 182 214

HCSA Off-Campus Enrollment

2002/03 2003/04 2004/05 2005/06 2006/07 HCSA Off-Campus 12 9 12 30 4

Pre-HCSA On-Campus Enrollment

2002/03 2003/04 2004/05 2005/06 2006/07 Pre-HCSA 1 2 8 9

f.) Within the HCSA curriculum there are 47 Professional credit requirements, 26 Core credit requirements, and 15 Communication Competence credits. The classes offered on-line and/ or mixed delivery include the following Core courses; CCHS 101; Orientation to Health Care, CCHS 102, Safety Issues in

Health Care, EHSM 315 Epidemiology and Statistics, MRIS 103 Medical Terminology and the following Communication Competence courses; ENG 321 and ENG 325. The following table provides the number of HCSA students who enrolled in the on-line courses for Fall 2006. When reviewing the number of students, Banner only lists the primary program on the detailed class rosters, and many of our dual degree students with a secondary program are listed with their clinical program on the class lists, not as a HCSA student, therefore the number of students taking on-line classes is probably larger than it appears.

	HCSA
	Students
	Enrolled
Orientation to Health Care	15
Safety Isues in Health Care	14
Epidemiology and Statistics	30
Medical Terminology	8
Advanced Composition	0
Advanced Business Writing	12
	Safety Isues in Health Care Epidemiology and Statistics Medical Terminology Advanced Composition

2. Quality of Students

a.) The range and average GPA of students as documented in 2006F is 3.169. The average FSU GPA of HCSA students has increased since 2002F, which at that time the average GPA was 2.897. (Table 1.3) The average GPA of Pre-HCSA in 2006F was 2.36, which has increased since 2002F at which time it was 2.123. (Table 1.4) The GPA is expected to be lower for students in Pre-HCSA than HCSA as Pre-HCSA status is designed to allow students to raise their GPA to 2.5 in order to enroll in the HCSA program.

The median ACT score for HCSA students as of 2006F is 20.4, which has increased from 18.8 from 2002F. (Table 1.3) However, the ACT score for Pre-HCSA students (Table 1.4) has a reverse trend; 2006F the Avg. ACT was 17.7 while in 2002F was 20. The increase in ACT scores aligns with the increase Ferris State University has seen over the past few years.

Graduated Students

		FSU GP	4	ACT			
Year	Avg. GPA	Min. GPA	Max. GPA	Avg. ACT	Min. ACT	Max. ACT	
2001-2002	3.207	2.402	3.959	20	13	30	
2002-2003	3.149	2.296	3.925	18.3	10	29	
2003-2004	3.151	2.368	3.86	18.4	12	27	
2004-2005	2.897	2.604	3.191	. 18	18	18	
2005-2006	3.109	2.324	3.95	19.2	13	24	

Table 1.8

- b.) The average GPA for 2005-2006 graduates ranges from 2.32 to 3.95 and averages 3.109. The average ACT score for 2005-2006 graduates ranges from 13 to 24 and averages 19.2. Neither the GPA median nor ACT median scores have fluctuated significantly from 2001-2002, (Table 1.8)
- c.) Measures that are used to assess the quality of students entering the program are those limited to incoming freshman and transfer students where GPA is required to be at 2.5 or greater.
- d.) Although the program review committee believes many HCSA students have been awarded awards and/or scholarships, the identification of specific awards and scholarships is not known.
- e.) None.
- f.) None.

3) Employability of students

2004/2005 Graduate Follow-Up Survey Summary

College: Allied Health Sciences

		Degree	S	Pla	cement Informa	ation	1
ALLIED HEALTH SCIENCES	CERT	AS	BS	% Response	Placement Rate	A	ve Salary
HEALTH MANAGEMENT							
Coding/Reimbursement Specialist	33			18%	100%	\$	39,211
Environmental Health & Safety		1	10		96%	\$	37,250
Health Care Systems Administration			17	48%	100%	\$	39,480
Medical Record Administration			9	60%	100%	\$	41,360
Medical Record Technology		25		64%	100%	\$	29,872
Occupational Health and Safety				NA	NA		NA
Phelbotomy	3			33%	100%		NA
HEALTH RELATED PROGRAMS							
Diagnostic Medical Sonography		12		67%	100%	\$	39,846
Medical Laboratory Technology		2		50%	100%		NA
Medical Technology			11	64%	100%	\$	37,469
Nuclear Medicine Technology		34	2	78%	97%	\$	33,144
Radiography		47		80%	98%	\$	33,103
Respiratory Care		14		71%	100%	\$	34,760
NURSING & DENTAL HYGIENE							
Dental Hygiene ·		61		55%	100%	\$	38,468
Master of Science in Nursing				NA	NA		NA
Nursing		55	48	55%	99%	\$	40,755
Nursing Education	5						
Allied Health TOTAL	41	251	97	57%	99%	Not	calculated

Table 1.9

- a. According to University Research's 2004/2005 Graduate Follow-Up Survey Summary, a 48% response rate of 17 graduates indicated a 100% placement rate. (Table 1.9) This information does not indicate the length of time it took the graduates to secure full-time employment. The graduate survey comprised by the program review committee indicated, for a large majority of respondents, it took less than 6 months to secure a position that they sought. (Graduate follow-up survey Section 2.A.)
- b. According to University Research's 2004/2005 Graduate Follow-Up Survey Summary, a 48% response rate of 17 graduates indicated a starting average salary of \$39,480. (Table 1.9) The graduate survey comprised by the program review committee indicated 8.7% of respondents received a current annual salary of less than \$25,000, 21.7% reported an annual salary between \$25,001 and \$40,000, 34.8% indicated a salary between \$40,001 and

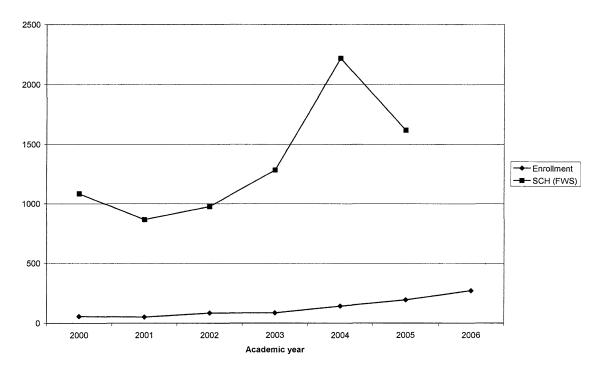
\$55,000 and 26.1% indicated an annual salary greater than \$55,000. (Graduate follow-up survey Section 2.A) The survey data indicates the majority of respondents earned less than the Michigan or National median wages as referenced in Section 1; C.1. The resources utilized for the labor analysis review did not allow a differentiation between entry level managers with a Bachelor degree vs. those employed with a Master's degree or with several years experience.

- d. Information as to how many graduates have become employed as part-time or temporary workers is the field within one year of receiving their degree is not known. Survey failed to request this specific information.
- e. Although many of our students obtain employment immediately after their HCSA internship, additional career assistance is available through Allied Health Job Fairs and guest speakers from career services that discuss and evaluate resumes and cover letters during an HCSA 335 Supervisory Practices class. Faculty members often receive notices of job openings and communicate this to students in advising sessions and via a memo board near the department head's office.
- f. 100% of the graduates who responded to the 2004/2005 Graduate Follow-Up Survey continue to be employed in the field. (Table 1.9)
- g. It is unknown as to the geographic distribution of employed graduates as it was not a question asked on the survey. However, faculty within the program often keep in contact with graduates and are aware of alumni employed in Colorado, Texas and Florida.
- h. According to the graduate survey, 43.5% of the respondents have continued their education to some level after graduation while the majority of 56.5% have not. Those that did responded yes to continuing pursued Master degrees in Business, Health Systems, and Public Health.
- i. Although the graduate survey did not specifically ask where the graduates obtain their additional educational training, comments from the respondents indicated University of Michigan. Faculty is aware of some HCSA alumni who are pursuing Ferris' MBA on-line program

B. ENROLLMENT

1.) It is expected that the enrollment in the fall, 2007 semester will be between 250 and 275 students. Exact enrollment numbers will be dependent upon the number of students who enroll in both an Associates degree program and the bachelor's degree program in Health Care Systems administration. That number varies by year and is impacted upon by the length of the wait lists for the associate degree program.

Enrollment/SCH



- 2.) Both enrollment and student credit hour production have increased since the time of the last academic program review. Student credit hour production for 2005 is not accurate because the credit hours produced for the Winter semester, 2006 were not included in the Productivity Report. Based upon the enrollment in the program during that semester (278) and the average number of credit hours of HCSA courses completed per student per student (4), the estimated number of student credit hours during 2005 would be 2731 showing the expected increase in student credit hours to accommodate enrolled students.
- 3.) Student application to the program is not tracked. Approximately 60% of the students are students enrolled in other associate degree programs within the college. The number varies according to the length of the wait list for the associate degree programs.
 - 4.) Of the number of students who apply to the program, 98% are admitted.
 - 5.) Of the number of students who are admitted to the program, 100% enroll.
- 6.) The program does not have currently have enrollment goals. It has a dual purpose...first to provide an avenue for students who wish to enter the university to pursue a career in health care systems administration and secondly to provide an

opportunity for individuals who are either enrolled in an associate degree program or who have graduated from an associate degree program to earn a bachelor's degree to provide them with an avenue for advancement.

To maintain and increase enrollment in the program, faculty within the program work very closely with the faculty in the associate degree programs within the college to keep them abreast of the offerings available in the HCSA program. The program does not have an active recruiting plan.

C. PROGRAM CAPACITY

1.) The HCSA program does not limit enrollment. The program is not accredited, so it is not bound by accreditation requirements, or state or federal regulations. The program does not utilize laboratories, so it is not bound by physical resources. Therefore, the program enrollment capacity is only limited by available, qualified faculty to teach the course requirements. Appropriate enrollment is approximately 300 with current staff and classrooms.

As the number of students increase, a concern is the number of available internship sites. However, students in HCSA are allowed to obtain internship sites in various types of health care settings and are not limited to an internship within the state of Michigan.

D. RETENTION AND GRADUATION

1.) Attrition rate is very low for the program. Retention and graduation rates of Full-Time FTIAC students are provided by Institutional Research and indicated as of 2005 F, the % still enrolled in HCSA as 100 and the % of Persisters at 100 and the % of Non-Persisters at 0. (Table 2.0)

Degrees Conferred By Program

	2003/04			20	04/05		20	2005/06			
	Cert AS	BS	MS	Cert AS	BS	MS	Cert AS	BS	MS		
HCSA		21			17	7		21	1		

Ferris State University Retention and Graduation Rates of Full-Time FTIAC Students - By Major

Four-Year Degree Programs

Fall Term

Entering Fall Term	Major	N							
Entering ran rem	mujo			Year 2	Year 3	Year 4	Year 5	Year 6	Year 7
1999F	HCSA	2							
			% Graduated By	0	0	0	50	50	50
			% Still Enrolled In	50	50	50	0	0	0
			% Persisters	50	50	50	50	50	50 .
			% Non-Persisters	50	50	50	50	50	50
2000F	HCSA	1							
20001	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·	% Graduated By	0	0	0	100	100	100
			% Still Enrolled In	100	100	100	0	0	0
			% Persisters	100	100	100	100	100	100
			% Non-Persisters	0	0	0	0	0	0
2001F	HCSA	1							
20011	1100/1	•	0/ Craduated Dv	0	0	0	100	100	
			% Graduated By % Still Enrolled In	100	100	100	0	0	
			% Persisters	100	100	100	100	100	
			% Non-Persisters	0	0	0	0	0	•
2002F	HCSA	3							
20021	1100/1	J	O/ Own decade at Dec	0	33	66	66		
			% Graduated By	0 66	33	34	0		
			% Still Enrolled In % Persisters	66	66	100	66		
			% Non-Persisters	34	34	0	34		4
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
2003F	HCSA	2							
20001	HOOK	2	Or One deceded Dec	0	0	0			
			% Graduated By % Still Enrolled In	0 50	100	50			
			% Persisters	50	100	50			
			% Non-Persisters	50	0	50			
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
2004F	HCSA	3							
20041	1,00/	J	OV Our deside d Des	22	22				
			% Graduated By	33 67	33 67				
			% Still Enrolled In % Persisters	67 100	100				
			% Persisters % Non-Persisters	0	0				
			70 140H-1 G13I3IG13	·	•				
2005F	HCSA	2							•
2005F	HUSA	4	0/ 0 1	0					
			% Graduated By	0					
			% Still Enrolled In	100					
			% Persisters % Non-Persisters	100 0					
			70 NOTE PERSISTERS	U					

- 2.) Our current goals and strategies to retain students include mandatory advising session-students are required to attend a group advising or individual advising session with their program advisor. Thus, students must meet with their advisor at least two times per year. Students meet more often with advisor if there are academic problems or other concerns.
- 3.) The trend in the number of degrees awarded is upward. This is good because it demonstrates the students who have successfully completed the program. In referencing the table provided in Section B.2., enrollment in HCSA continues to thrive. With the waiting list of various clinical programs, more students are interested in pursuing the HCSA degree and the number of degrees awarded in HCSA is consistent with its growth.
 - 4.) Students who enroll in the HCSA program graduate within 4-6 years.
- 5.) On average, it takes a student 5 years to graduate from the program. However, many of our HCSA students are dual degree and often do not complete a program change until many of the HCSA classes have been completed, so the graduation completion is dependent on how long they have waiting before declaring HCSA as a dual degree.

E. ACCESS

- 1.) The HCSA program is accessible to students by:
 - a. Offering the HCSA program in Big Rapids with both day and evening classes, and Grand Rapids in the evening. (See Section I. C. Program Relevance for table of classes offered on-line)
 - b. Offering entry point into our program fall, spring, or summer semester
 - c. Offering on-line courses within our core curriculum requirements
 - d. Allowing internships to be obtained at a sundry of health care facilities anywhere within the United States. Life Experience portfolio Internships are allowed for adults currently employed in health care administration
- 2.) The effects of the actions described in (1) above had had the following impact:
 - a. Increased enrollment in the HCSA program
 - b. Increased visibility in Grand Rapids
 - c. Increased advising load for faculty. Average advising load is 90 students.
 - d. Placed increased demand on Health Care facilities to accommodate interns
 - e. Challenged use of computer laboratories for classroom use.

3.) It is the belief of the program review committee the above actions do not necessarily advance or hinder the program goals and priorities, except to allow increased visibility of the program.

F. CURRICULUM

The curriculum for the Health Care Systems Administration program has been designed to provide the graduate with a broad background in administration and management. Its purpose is to prepare graduates to seek employment in an entry-level position in a variety of health care settings including long term care, acute care, managed care, other agencies and in within the federal and state governments. (Appendix B) The foundation and technical courses are located in the HCSA Program and consist of the following:

SUPPORT COL	JRSES	
CCHS 101	Orientation to Health Care	3 cr.
CCHS 102	Safety Issues in Health Care	1 cr.
COMM 365	Intercultural Communication	3 cr.
MRIS 103	Medical Terminology	4 cr.
ACCT 201	Principles of Accounting	3 cr.
EHSM 315	Epidemiology and Statistics	3 cr.
ISYS 105	Introduction to Microsystems and Software	3 cr.
ISYS 200	Database Applications	3 cr.
MGMT 301	Applied Management	3 cr.
MKTG 321	Principles of Marketing	3 cr.
	Electives	6 cr.
TECHNICAL C		
HCSA 202	Health Care Law	3 cr.
HCSA 205	Computers in Health Care	2 cr.
HCSA 220	Health Services Administration	3 cr.
HCSA 320	Principles of Managed Care	3 cr.
HCSA 335	Supervisory Practices in Health Care	4 cr.
HCSA 345	Internship Orientation	1 cr.
HCSA 401	Finance Concepts in Health Care	4 cr.
HCSA 474	Planning and Promotion in Health Care	4 cr.
HCSA 392	Internship 1	6 cr.
HCSA 493	Internship 2	12 cr.
	JCATION COURSES	
COMM 105	Interpersonal Communication or Small Group Decision	3 cr.
OR	Making	
COMM 221		
ENGL 150	English 1	3 cr.

ENGL 250	English 2	3 cr.
ENGL 321	Advanced Composition	3 cr.
BIOL 109	Basic Human Anatomy and Physiology	4 cr.
	Scientific Understanding elective	3-4 cr.
MATH 115	Intermediate Algebra or ACT Math subscore of 24	0 cr
	Social Awareness Foundations course	3 cr.
	Social Awareness elective	3 cr.
ECON 221	Principles of Economics 1	3 cr.
	Cultural enrichment elective	3 cr.
	Cultural enrichment elective	3 cr.
	Cultural enrichment elective (global awareness)	3 cr.

124 to 127 credit hours are required for graduation.

There are 3 areas where general education courses are directed in the 2-year curriculum: BIOL 109, the choice of either COMM 105 or COMM 221 and ECON 221. BIOL 109 is a directed general education course because knowledge of anatomy and physiology is a foundation for any health care worker. It is included in the curriculum because it provides graduates with an opportunity to be able to better relate to the individuals that they will supervise in the future. The choice of communications courses is directed because of the College of Allied Health Sciences Core requirements. When the Core requirements were implemented, the faculty within the college reviewed all of the communication courses that could be used to fulfill general education requirements and determined that either COMM 105 or COMM 221 best met the needs of allied health graduates. Graduates of allied health programs are required to be able to have strong interpersonal communications skills to interact with patients and other groups within the facility. The option of COMM 221 was given because of its intent to prepare students to work in groups, a skill which is also needed in the health care arena. ECON 221 is required because it serves as a pre-requisite to MKTG 321.

There are no hidden prerequisites in the program. ACCT 201, although it is a prerequisite for HCSA 401 is not considered to be a hidden prerequisite because a knowledge of accounting is vital to the practice of an administrator in health care.

The curriculum has been revised once since the time of the last review. In 2003, the curriculum was revised to reflect changes in the knowledge required of new health care administrators. Five courses, HCSA 205-Computers in Health Care; HCSA 202-Health Care Law; HCSA 220 Health Services Administration' HCSA 320 Principles of Managed Care; and HCSA 345 Internship Orientation were added to the curriculum. The addition of courses required that several courses be deleted HCSA 246 Regulatory Agencies in Health Care; ACCT 202- Principles of Accounting 2, EHSM 317-Public Health Administration; EHSM 330- OSHA Laws and Regulations; ISYS 305 software Systems; ISYS 303 Systems Analysis Methods; ISYS 311 Management Information

Systems; and BLAW 321 Contracts and Sales. There was no change in the number of hours required for graduation as a result of the curriculum change.

- 3.) No, there are no curricular or program changes current in process
- 4.) The curriculum will undergo review for curriculum revision during the 2007-2008 academic year. With changes in health care, it is necessary to review the curriculum every 3-4 years. The curriculum has been in place since Fall, 2003 and is due to review.

G. QUALITY OF INSTRUCTION

1.) The majority of student respondents, as referenced in the student survey, rank the overall quality of instruction of the program as excellent or above average. No student ranked the overall quality of instruction of the program as poor. (Student survey, Section 2.D.)

How would you rank the overall quality of instruction in the program?

a.	Excellent	8
b.	Above Average	28
C.	Average	18
d.	Poor	0

Each individual program objective was surveyed and for the majority of the goals they indicated the program adequately prepared or very prepared them to enter the workforce. (Student survey, Section 2.D.)

The graduate survey for HCSA alumni inquired whether overall, they felt that the HCSA curriculum at Ferris State University adequately prepared them for an entry level position in an administrative/managerial role within a health care profession. 69.9% of the respondents positively rated that the HCSA curriculum at FSU adequately prepared them for an entry-level position in an administrative/managerial role within a health care setting. Additionally, 82.6% of the respondents indicated that they would recommend the HCSA program to those considering the profession. (Graduate survey, Section 2.A)

Adequately prepared:

69.9% of the respondents (n=16) positively rated that the HCSA curriculum at FSU adequately prepared them for an entry-level posting in an administrative/managerial

role within a health care setting. While the remaining 30.4% indicated, the HCSA curriculum at FSU did not adequately prepare them for an entry-level posting in an administrative/managerial role within a health care setting.

				Valid	Cumulative
		Frequency	Percent	Percent	Percent
Valid	Yes	16	69.6	69.6	69.6
	No	7	30.4	30.4	100.0
	Total	23	100.0	100.0	

Recommend FSU's HCSA Program:

Respondents were also asked whether they would recommend FSU's HCSA program for other students interested in the profession. 82.6 % of the respondents indicated that they would recommend the HCSA program to those considering the profession. While 17.4% indicated that they would not recommend FSU's HCSA program

Recommend FSU's HCSA program

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	19	82.6	82.6	82.6
	No	4	17.4	17.4	100.0
	Total	23	100.0	100.0	

2.) The advisory committee was surveyed and 100% of respondents (2) indicated the program meets the needs of the health care administration community. And the curriculum is reflective of current health information practice. (Advisory committee perceptions, Section 2.F.)

HCSA Advisory Board Perceptions of Program	Α	В	C	D	Е	No
						Response
1. Courses available at times convenient for students.	0	1	0	0	0	1
2. Program meets needs of health care administration	2	0	0	0	0	0
community.						
3. Faculty in the program are qualified.	0	1	0	0	0	1
4. Lab facilities for the program are adequate.	0	1	0	0	0	1
5. Graduates are in high demand.	1	1	0	0	0	0
6. Curriculum is reflective of current health practice.	2	0	0	0	0	0

The employer perceptions of the quality of instruction were obtained via the employer survey which requested the respondents to rate the HCSA graduate/employee's knowledge in eleven areas, consistent to the program objectives. (Employer survey, Section 2.B.)

Employer overall satisfaction:

Employers were ask to rate their overall satisfaction with the knowledge and skills of the Ferris State University graduate's job performance. Employers rated that they were very satisfied with the overall knowledge and skills of the FSU graduate performance. 6.9% (n=2) were very dissatisfied and another 13.8% were somewhat satisfied with the overall knowledge and skills of the FSU graduate performance

Overall satisfaction

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Dissatisfied	2	6.9	7.7	7.7
	Somewhat Satisfied	4	13.8	15.4	23.1
	Very Satisfied	20	69.0	76.9	100.0
	Total	26	89.7	100.0	
Missing	System	3	10.3		
	Total	29	100.0		

Additionally, the Site Coordinators at the end of the HCSA student's final internship rated the interns on the many program objectives and professionalism. Each program objective was scored separately, however, 45 out of 48 site coordinators responded interns presented work that was neatly done and had a professional appearance which was above average. (Site Coordinator's Evaluation, Section 2.B)

Presented work that was neatly done and had a professional appearance.

4	3	2	1
45	3	0	0

- 3.) The HCSA programs continue to improve the learning environment. This is done by maintaining state of the art computers in the program laboratory. Many of the software applications are updated annually. Many have quarterly updates. Structured Learning Assistance (SLA) sections are offered for core classes such as medical terminology and anatomy and physiology. The computer laboratory; room 419 in Allied Health was recently renovated as well as a variety of other frequently utilized classrooms; VFS 325, 326A, 328.
- 4.) Professional development by faculty includes attendance at professional seminars/conferences such as the American College of Health Care Executives, American Health Lawyers Association Annual Meeting, and Political Engagement Project (PEP) conferences. Additionally, HCSA faculty has attended Ferris sponsored as well as national critical thinking conferences. Faculty has attended Faculty Center for Teaching and Learning (FCTL) courses including workshops on WebCT. Faculty read publications that are purchased through the department and rotated to all faculty. Information on current issues is also shared at monthly faculty meetings.

See Section 1.C.2. and faculty CVs in the appendix.

- 5.) Faculty have arranged and accompanied students at regional American College of Health Care Executives meeting around the state. Additionally, faculty has volunteered to be guest lecturers on Career Day for students and alumni. Faculty has attended the annual HCMA banquet with students as well as taking graduating students to the Professional Women's breakfast and awards.
- 6.) Learning Centered Teaching and Critical Thinking have been infused into teaching methods by most HCSA faculty. When curriculum review begins, such teaching methods will likely be infused into the revised curriculum and program objectives. Many HCSA courses require role-playing. Role playing enhances the teaching and learning in HCSA classes.
- 7.) Effects of actions identified in paragraph 6 include Socratic questioning and allowing the student to be involved in the formation of class attendance and late assignment policies. (Appendix C) This has enhanced the quality of teaching and learning in the program and has prepared the students for the workforce by preparing and supporting innovative thinkers.

H. COMPOSITION AND QUALITY OF FACULTY

1.) a. Marcy Parry-Associate Professor (tenured)
Marilyn Skrocki-Assistant Professor (tenure-track)

Harrison FT temporary faculty (search in progress) open position tenure track (search in progress) open position tenure track (Appendix A)

- b. One promotion award was received by program faculty since the previous program review-Marcy Parry from Assistant to Associate Professor
- c. See Section I. C.2. for list of professional activities of program faculty as well as faculty CV's in the appendix.
- 2.) a. Normal workload is 12 credits per semester, and 24 annualized for year. Overload is usually offered to all tenure track and full time temporary faculty. Typical overload is 2-4 credits per semester. Summer employment (full 12 credits) is often accepted by one tenured track and one tenure-track faculty member. Other faculty has accepted partial summer workload schedules.
 - b. The workload policy within the college allows a small amount of release time for faculty members to oversee courses with multiple sections. New tenure track, temporary and adjunct faculty are mentored by more experienced faculty who are available to answer questions about specific courses and to ensure course consistency. Release time is provided for program and internship coordination; 25% release time or 3 credits per semester.

3.) Recruitment

- a. Faculty are recruited through a combination of methods. When an opening occurs, an advertisement is placed in the *Chronicle of Higher Education*, on higheredjobs.com and in local newspapers. In addition, the faculty and program leadership contacts their professional network to make individuals aware of the position that has become available.
- b. Faculty are required to have earned a minimum of a master's degree in health care administration or a related field and have 3-5 years of recent work experience in an administrative capacity in a health care organization. The doctorally prepared faculty member is preferred as is past teaching experience. The program strongly encourages ethnic minorities to apply and does not discriminate on the basis of ethnicity or gender. The program's goal is to have faculty that proportionately represent the health care administrators in the country. The program has been successful in attracting a proportionate number of male and female

faculty members. However, it has not been successful in attracting ethnic minority faculty.

4.) Orientation: New tenure tract and temporary faculty members are required to attend the new faculty orientation sessions sponsored through the Faculty Center for Teaching and Learning during their first year of employment at the university. They are required to attend a 4 hour long orientation session specific to the College of Allied Health Sciences during the first week of the fall semester. In addition, they are assigned a faculty mentor for the duration of their pre-tenure period. Additional sessions that deal with issues such as advising, grading, curriculum change processes etc are sponsored by the dean's office in Allied Health. All faculty are strongly encouraged to attend.

Adjunct faculty are strongly encouraged to attend the orientation sessions sponsored by The Faculty Center for Teaching and Learning and are invited to attend the college sponsored faculty development activities.

5.) Reward structure:

- a.) Faculty in the Health Care Systems Administration program are eligible for all of the awards and recognitions as all other tenure-track faculty on campus. In addition to the campus-wide availability of funding to attend professional development activities, the faculty in the program is able to apply for and receive up to \$500 in funding from the college's faculty enrichment fund. Due to the program's offering of courses off-campus, occasionally, there is additional departmental funding available to support faculty's professional development. The college's Faculty Enrichment fund is administered by a faculty committee who awards funding.
- b.) Yes, the existing salary structure slightly impacts the program's ability to recruit and retain faculty. Nationally, salary range for an assistant professor ranges from a low of \$55,000 to a high of \$91,667 with an average salary of \$70,613. According to the Bureau of Labor Statistics Occupational Outlook Handbook (http://bls.gov/oco/ocoso14.htm#earnings) earnings for medical and health administrators range from \$65,864 to \$45,239 (when converted to 9 month salaries). The most recent program faculty member hired was granted a 9-month salary of \$56,000. Typically the program will seek, as a faculty member, an individual with experience in their field along with an advanced degree. Several individuals have rejected the offer of a position or an interview because of the salary offered.
- c.) Yes, the current reward structure is adequate to support faculty productivity in teaching, research and service. Faculty have availed themselves of the sessions offered through the Faculty Center for

Teaching and Learning, Timme Funding and they have utilized the college's faculty enrichment funding to pursue their continuing development. In addition, one faculty member earned a second master's degree utilizing benefit for tuition offered by the university. Currently, another faculty member is enrolled in a master's program utilizing the same benefit.

d.) Enhancing diversity and inclusion has not been a component of the reward structure. Faculty are not hired on the basis of race gender or ethnic diversity nor does the reward structure vary based on those criteria. Ongoing efforts are being made to recruit a diverse faculty, however, there has been no opportunity to expand the diversity in the faculty due to lack of applicants.

6.) Non-Tenure Track and Adjunct Faculty

The following table lists the full time non-tenure-track faculty and adjunct faculty members who taught courses in the program during the 2006-2007 academic year.

Faculty	Full	Adjunct	Length of	Years of	Courses Taught
	Time		Appointment	Service	
Michael	X		1 year	1 year	HCSA 335
Stowe					HCSA 205
					CCHS 101
					EHSM 315
Cynthia	X		1 year	1 year	HCSA 220
Harrison					HCSA 335
					CCHS 101
Mark		X	As needed	4 years	HCSA 205
Hutchinson					HCSA 474
Sharon		X	As needed	2 semesters	HCSA 401
McInnis					
Barb Cote		X	As needed	4 semesters	HCSA 433
Regina Scott		X	As needed	1 semester	HCSA 320

The program has been successful in recruiting non-tenure track faculty to teach in the program during the past 2-3 years.

Full-time non-tenure track and adjunct faculty teach 37% of the sections offered by the program. This is due, in part, to the specialization needed by some of the courses, for example HCSA 433 quality assessment is taught by an adjunct faculty member who holds the position of quality assessment manager in a local hospital.

Adjunct and full-time tenure-track faculty are required to have earned, as a minimum, a master's degree and have a minimum of three years working experience to teach in the

program. All of the faculty listed in 7.a meet or exceed the minimum required qualifications.

The use of non-tenure track faculty is appropriate for the off-campus site in Grand Rapids where there are 2-3 courses offered per semester. This allows the students to benefit from faculty members with extensive work experience. They are supervised by the on-campus program coordinator. One of the one-year temporary faculty members was hired to fill a position that was open due to a failed search during the 2006-2007 academic year. That position has been converted to a full-time tenure track position for the 2007-2008 academic year and as of this date a national search is in progress to fill the position. One ongoing temporary faculty member will remain in that position.

The Health Care Systems Administration Program is not accredited. At the present time, accreditation is not a viable option for the program due to the mix of faculty credentials and the curriculum. Because of the program's nature as a BS program, it could seek only certification from the major accrediting body.

I. SERVICE TO NON-MAJORS

- e.) There are no General Education service courses provided by the program faculty for other departments at FSU.
- f.) The following service courses are provided for other Allied Health curriculums; CCHS 101, HCSA 202 Health Care Law, HCSA 335 Supervisory Planning, HCSA 474 Planning and Promotion in Health Care, 401 Finance Concepts in Health Care. Faculty that teach courses are invited to curriculum reviews for the various programs (Health Information Management and Health Information Technology) to discuss course content and scheduling of the course. Teaching service courses requires the HCSA faculty to accept a greater teaching load and often a higher class size than optimal. Teaching service courses allows the faculty to have full loads/overloads and the number of tenure track faculty awarded.
- g.) Approximately 30% of teaching load is dedicated to teaching the service courses identified in I.b.
- h.) The program will likely decrease its level of service courses as the College has recently approved a Bachelor Degree program for Nuclear Medicine. The requirement for increased number of sections of HCSA 202, 401 and 474 will be reduced because the Nuclear Medicine program restructuring eliminated those courses. There will be a shift because enrollment in HCSA 335 will remain constant or increase due to the revised Nuclear Medicine curriculum. Otherwise dual enrollment has little impact on service courses. Service courses will still need to be taught for Health Information Management and Health Information Technology.

J. DEGREE PROGRAM COST AND PRODUCTIVITY DATA

The tables that are supplied from University Research are self explanatory. However, on Table 2.1, the costs associated with HCSA 320 are obviously incorrect, for example it indicates the instructor cost for the class is \$15,271,137. See highlighted area on table.

Degree Program Costing Summary 2003-2004

		Total		Total	Total
	Prog. Crs.	Instructor	Total Dept.	Dean's	Program
	Req	Cost*	Cost **	Cost***	Cost
HCSA	123	\$15,123.94	\$3,519.17	\$2,737.37	21,380.47
	Instructor		Dean's		
	Cost Per	Dept. Cost	Cost Per	Total Cost	
	SCH	Per SCH	SCH	Per SCH	
HCSA	\$122.96	\$28.61	\$22.26	\$173.82	

^{*}Instructor Cost – *Salary & Fringe*

^{**} Department Cost – Departmental Level Non Instructor Compensation, Supplies, and Equipment

^{***}Dean's Cost – Dean's Level Non Instructor Compensation, Supplies, and Equipment

Instructor Cost Per SCH for Courses 2003-2004

			Instructor
			Cost Per
Course	Level	Course Description	SCH*
HCSA 202	L	Health Care Systems Administration	\$54.98
HCSA 205	L	Health Care Systems Administration	\$45.41
HCSA 220	L	Health Care Systems Administration	\$239.17
HCSA 320	N	Health Care Systems Administration	\$150.11
HCSA 333	U	Health Care Systems Administration	\$126.84
HCSA 335	U	Health Care Systems Administration	\$91.19
HCSA 345	U	Health Care Systems Administration	\$116.20
HCSA 392	U	Health Care Systems Administration	\$320.59
HCSA 401	U	Health Care Systems Administration	\$141.65
HCSA 460	U	Health Care Systems Administration	\$45.10
HCSA 474	U	Health Care Systems Administration	\$99.19
HCSA 493	U	Health Care Systems Administration	\$216.71

^{*}Instructor Cost – *Salary & Fringe*

Institutional Research & Testing's Productivity Report; Fall 2001-Winter 2006 provides a departmental data on productivity, however, does not provide program specific data. (Table 2.2) FSU average total instructor cost is \$191.56. (Table 2.3) Average total instructor cost for faculty in Allied Health is \$183.21. (Table 2.4) Average total cost for Instructors in HCSA is \$171.22 (Table 2.5) This is below both the College and the University's total instructor costs. Due to the fact, the HCSA program relies on adjunct professors to teach approximately 30% of course load, and the program operates with 4 tenure track and 1 full-time temporary positions. The program is very productive.

K. ASSESSMENT AND EFFECTIVENESS

- 1.) HCSA tracks the effectiveness of the program by closely monitoring the Site Coordinator's Final assessment of the Intern at the completion of a 12 week internship. Students take this internship immediately preceding graduation. This tool assesses each student's ability to meet the program objectives. (See Summer 06 Site Coordinator Evaluation Section 2.B.) Additionally graduate surveys have been utilized to determine the program effectiveness.
 - 2.) Trend data is not available as this is a new process for the program.

^{***}All of this information is from Degree Program Costs 2003 – 2004***

- 3.) Site Coordinator Evaluations will be shared with the Advisory Council at our next meeting. Additionally, such information will be shared when program review begins Fall 07.
- 4.) Trend date is not available at this time to determine how the program goals are being met.

L. ADMINISTRATION EFFECTIVENESS

1.) Adequacy of administrative and clerical support

Until January, 2006, our department head was Ellen Haneline. She is very supportive of the programs. She has always had the foresight to determine the appropriate direction for the program. Roger Daugherty is the Interim Department Head and is also supportive of the HCSA program. We share a secretary with four other programs. She is very efficient and is always willing to provide clerical support to the department. The department recently hired a part-time secretary to help with department clerical tasks. The secretarial support in our Student Affairs office is able to meet the needs of the college. The tasks in this area were recently reviewed by an outside consultant. The suggestions were considered and many procedures revised to increase the efficiency in this area. The counselor provides academic and career counseling for CAHS students.

2.) Efficiency of the program/department

Marilyn Skrocki, the program coordinator, is efficient in her role. Regular program meetings are conducted. Recently, there has been some disruption to the program, as a recently hired tenure track faculty member resigned to take a position in Chicago. Marilyn Skrocki requested to be removed from her duties as of Fall 2007 and will be replaced by Paula Hagstrom. Paula Hagstrom, who is also the program coordinator for the HIM/HIT programs, knows the needs of the program as she has fulfilled this role in the past and will be a strong program coordinator for the program

- 3.) Class and teaching schedule preparation

 The department head prepares the class schedule with input from the faculty.

 This process works well for the program.
- 4.) Students' ability to take courses in a timely manner

 Normally students can complete the program in 4 years. However, some students have expressed concern about HCSA classes meeting their maximum student enrollment early in the registration process. Without more class sections offered, the result is to allow several students enroll via overload or to require some students with low credit hours to delay taking certain HCSA classes.

Facilities and Equipment

Section 4: Facilities and equipment

A. INSTRUCTIONAL ENVIROMENT

- 1.) The HCSA program shares a laboratory with Medical Records which is located in the Victor F. Spathelf building on the Big Rapids campus. The lab occupies 300 square feet of space. The lab was recently renovated with new tables to be used as student desks. The tables will accommodate 35 students. This lab has 23 computers, 22 for students and one for classroom instruction. Within the last five years, every computer in the laboratory has been replaced with a new computer. Three of the classrooms in CAHS have been renovated with new desks/tables and "smart classroom" equipment to improve the instructional facilities in our building. Two additional CAHS classrooms are currently being renovated and will be available for instructional use in Fall '07.
- 2.) The condition of the current facilities positively impacts the program. The Big Rapids survey of student perceptions (below) indicated greater than 69% of students are happy with the rooms, space, lighting, etc but about 45% feel the numbers of computers are acceptable, fair or poor. More than 25% did not know there is wireless capability in the building.
 - The survey of instructions resources in Grand Rapids seventy-two percent of students are happy with the rooms, space, lighting, etc but about 52% feel the numbers of computers are acceptable, fair or poor. Also, the majority of students indicated the computers are available are well maintained. More than 25% did not know there is wireless capability in the building.
- 3.) At the Grand Rapids campus, there is not a dedicated computer laboratory for the HCSA program. At times, it is difficult to schedule classrooms to accommodate the number of classes that we need to offer each semester. We schedule around other classes to accommodate our students for classroom and computer lab space. The number of computers and laboratory facilities are adequate for instruction in the HCSA program in Big Rapids. CAHS has a computer lab that is accessible to faculty and students.
- 4.) Current plans for facility improvement includes the two additional classroom renovations taking place summer '07.

A survey and evaluation of the facilities and computer access and availability for current students at both the Grand Rapids and Big Rapids campus' was gathered.

A synopsis of Big Rapids data:

Instructional support services

Seventy-one percent the students believe the resources available to them are good to excellent, but about 13% don't know what's available.

Fourteen percent think the staff is not very knowledgeable but the majority (60%) thinks they are interested.

Instructional lecture facilities

Instructional computer resources (e.g. hardware and software

More than 60% of student felt that the computer resources available to them are good to excellent, but again, more than 25% were unaware of wireless capability on campus. Instructional materials (e.g. software, textbooks, reference books, supplies. Etc It is no surprise that 70% of the students feel that books/supplies cost too much. The majority thinks they are available and conveniently located, are relevant.

Synopsis of Grand Rapids data:

Instructional support services

Fifty-five percent the students believe the resources available to them are good to excellent, but about 11% don't know what's available.

Seventy-two percent of those surveyed the staff is knowledgeable.

Instructional lecture facilities

Seventy-two percent of students are happy with the rooms, space, lighting, etc but about 52% feel the numbers of computers are acceptable, fair or poor. Also, the majority of students feel that what computers are available are well maintained.

More than 25% did not know there is wireless capability in the building.

Instructional computer resources (e.g. hardware and software)

More than 60% of student felt that the computer resources available to them are good to excellent, but again, 31% were unaware of wireless capability in the building.

Instructional materials(e.g. software, textbooks, reference books, supplies. Etc

Fewer students in GR feel that books/supplies cost too much, but 58% are concerned about the costs of the texts.

The majority think they are available and conveniently located, are relevant.

The survey results are provided in the following tables;

Student Perceptions of HSCA Instructional Resources (Big Rapids)

INSTRUCTIONS: Rate each item using the following guide.

5 to 10% 2 Below Expectations is only bottom one-third	Below Expectations is only fair, bottom one-third Acceptable is average, the middle-					 4 Good is a strong rating, top one-third 5 Excellent means nearly ideal, top 5 to 10% 6 Don't Know 				
	1	2	3	4	5	6	Comments			
1. Instructional support services (such as tutoring, FLITE, Writing Center, SAT, TAC, etc) are: Available to meet your needs and interests	1	2	11	46	18	12				
Provided by knowledgeable staff	13	0	40	29	0	7				
Interested staff	1	4	20	33	22	9				
2. Instructional lecture facilities: Provide adequate lighting, ventilation, heating, sound, etc.	0	3	17	43	26	1				
Provide appropriate working/learning environment, e.g. size of room, seating, desk space, etc	0	5	11	43	29	1				
Include enough computer work stations, specifically VFS419, for the number of students enrolled	6	16	20	25	17	6				
Are functional and well maintained.	0	5	13	48	22	1				
Are available on an equal basis for all students	0	3	22	36	28	1				
Include wireless capability to access the network/internet.	2	4	6	23	29	25				

3. Instructional computer resources (e.g. hardware and software) are Current and representative of industry	2	3	12	35	29	9	
In sufficient quantity to avoid long delays in use	0	3	16	40	22	9	
Safe and in good condition	1	2	11	42	27	8	
Include wireless capability to access the network/internet.	2	2	7	33	20	26	
4. Instructional materials(e.g. software, textbooks, reference books, supplies. etc) are: Available and conveniently located for use as needed	3	4	14	40	26	3	
Current and meaningful to the subject	3	4	20	40	21	2	
Available at reasonable cost	10	20	33	20	6	1	

Student Perceptions of HSCA Instructional Resources (Grand Rapids)

INSTRUCTIONS: Rate each item using the following guide.

bottom one-third	5 to 10%2 Below Expectations is only fair, bottom one-third3 Acceptable is average, the middle-			 4 Good is a strong rating, top one-third 5 Excellent means nearly ideal, top 5 to 10% 6 Don't Know 				
	1	2	3	4	5	6	Comments	
1. Instructional support services (such as tutoring, FLITE, Writing Center, SAT, TAC, etc) are: Available to meet your needs and interests	2	1	17	20	14	7		
Provided by knowledgeable staff	2	2	9	20	22	6		

Interested staff	2	3	6	22	17	10	
2. Instructional lecture facilities: Provide adequate lighting, ventilation, heating, sound, etc.	1	2	9	23	21	3	
Provide appropriate working/learning environment, e.g. size of room, seating, desk space, etc	0	4	16	25	13	2	
Include enough computer work stations, specifically for the number of students enrolled	9	8	15	11	6	12	
Are functional and well maintained.	1	2	16	25	13	5	
Are available on an equal basis for all students	1	3	10	21	17	10	
Include wireless capability to access the network/internet	4	3	9	14	15	17	
3. Instructional computer resources (e.g. hardware and software) are Current and representative of industry	2	3	12	16	12	16	
In sufficient quantity to avoid long delays in use	3	4	9	17	11	17	
Safe and in good condition	2	3	9	18	16	14	
Include wireless capability to access the network/internet.	3	4	8	11	14	19	
4. Instructional materials(e.g. software, textbooks, reference books, supplies. etc) are: Available and conveniently located for use as needed	4	7	11	17	16	5	
Current and meaningful to the subject	2	1	15	20	19	4	
Available at reasonable cost	4	11	20	15	7	5	

Remarks

- I've never really tried to get tutoring
- Not familiar with all of these support services only know about FLITE due to an in-service from an instructor
- FLITE training was not a good class
- FLITE not clear
- FLITE presentation was too fast
- FLITE librarians were terrible. Moved too fast. Didn't explain things well at all.
- Weren't enough computers
- Not in Grand Rapids
- I have not used the services
- Many services offered exclusively at Big Rapids
- Next to non-existent
- Support services for HCSA? Tutors? If so, need to advertise adequately
- Only use computer lab for computer lab
- I have not used the services
- FLITE librarian came down from Big Rapids last semester (Healthcare Law)
- The teacher that I have had have been great
- I have not used the services
- HCSA 202 & 320 Both instructors very knowledgeable
- Adjoining room is too loud
- Hear loud noise from classroom next door
- Overheads and projectors give teachers fits
- Professor had difficulty using equipment until Ferris staff provided professor with passwords
- Rooms too small without windows
- Chairs are uncomfortable
- Some rooms are rather small
- Chairs are nasty need to be cleaned
- Chairs are very uncomfortable
- Don't use computers in class yet
- Not enough computer/cramped space
- Ref Works training class
- FLITE Training
- Not an issue in this class
- No computers
- Not applicable
- HCSA 202 when FLITE librarian came not enough computers or seats
- Not applicable
- Told our personal laptops would not work

- ? Not sure I don't use
- I have not used the services
- Classroom computer has issues working
- I have not used the services
- I have not used the services
- 7
- I have not used the services
- Bookstore didn't have enough textbooks available
- Difficult to obtain book at beginning of course also paying for a supplemental book that was packaged with the main book which we have not
- Software not available
- Would be nice to get online
- Books were late coming in to bookstore
- Not in Grand Rapids
- Essentials of Managed Care text book out of date and very user unfriendly
- Books are expensive, not enough 2nd hand books available
- Textbooks are costly!!
- Grand Rapids had a hard time getting books in at the bookstore

B. COMPUTER ACCESS AND AVAILABILITY

- 1.) CAHS has a computer lab that can be used by faculty and students. All computers have the Microsoft Office package which allow them to do word processing, Excel, Visio, Access, and PowerPoint. The HCSA program shares a lab with Medical Records, which has 23 computers, 22 available for student use and one by faculty.
- 2.) The CAHS computer lab hours include both day and evening times. The computer lab can also be reserved for classes

The HCSA laboratory (which is shared with Medical Records) provides students access to projects and activities, but is also used to check email, or access other course materials via WebCT. Students can use the Internet to research their project activities.

3.) In Big Rapids, we believe the number of computers in the CAHS is adequate to meet the needs of our students.

Include enough computer work						
stations, specifically for the	9	8	15	11	6	12
number of students enrolled						

However, in Grand Rapids the students 31% responded the amount is poor or below expectations.

Include enough computer work		1.6	20	2.5	1.7	
stations, specifically VFS419, for	6	16	20	25	17	6
the number of students enrolled						

- 4.) An acquisition plan does not currently exist.
- 5.) WebCt is currently being utilized for enhanced courses. More on-line classes in HCSA will be needed. The number of health care administration degrees being offered online is constantly growing. Increasing online and mixed delivery course offerings is a future direction to be considered by the Health Care Systems Administration faculty. Before pursuing this path, the benefits and pitfalls of online courses and web-enhanced courses must be taken into account. Weighing the expressed and perceived benefits and disadvantages of online courses and mixed delivery courses, it appears that these modes of instruction are viable options to traditional classroom instruction. In the future, more online instruction is planned to be incorporated into the Health Care Systems Administration program.

6.) We are very fortunate to have had very supportive assistance through TAC. When there are computer problems, TAC responds in a timely manner, often within the hour. The computer technicians are very helpful. Support for WebCT is betting better. At the start of the semester, there are usually access problems, but they can often be resolved the same day.

C. OTHER INSTRUCTIONAL TECHNOLOGY

- 1-3.) The use of current DVD's is used to explain and role play various issues that affect administrators in health care. Other that instructional DVD's the HCSA program does not require other types of instructional technology resources.
- 4.) The HCSA program in conjunction with the Medical Record program has a computer replacement plan. Each computer in the HCSA/Medical Record laboratory is replace every five years using departmental and/or Perkins funds.
- 5.) This is not applicable to the HCSA program.

D. LIBRARY RESOURCES

1.) The Ferris Library for Information, Technology and Education (FLITE) provides a substantial number of resources to students in the health care systems administration program. Relevant books, journals, and databases are available, with many of the resources accessible online. Beyond the aforementioned information resources, the library also provides students with access to computers with high-speed Internet connections, wireless connectivity capabilities, private and group study rooms, and instructional studios that may be utilized for library instruction sessions or regular classroom sessions when a computer lab is desired. A discussion of some of the information resources made available by FLITE follows.

Books: An annual budget is allotted specifically towards the purchase of print books for health care systems administration. (Appendix E) Input from the faculty is taken into account when selecting books, as are core lists that include the now defunct **Brandon/Hill Selected List of Print Books and Journals in Allied Health** and the current **Doody's Core Titles** that has assumed the role of providing core lists of books and journals for health and medical libraries. In addition to the annual budget for print books, there are many relevant books available online through the library's subscriptions to **ebrary** and **NetLibrary**. **Ebrary** alone contains over 25,000 full-text books that enhances the library's collection and resources available to students and faculty. Also, an

online collection of health and medical reference books is available through *Stat!Ref*, as are medical encyclopedias through the *Gale Virtual Reference Library*.

Journals: The library provides access to nearly 10,000 journals, most of which are online. Because of the diverse subject areas encompassed in health care systems administration, the following list of journals relevant to the program is not considered to be exhaustive.

Journal Title	Publisher/Source	
AHRQ research activities	Free Online	
American Hospital Association guide to the health care		
field.	Print Standing Order	
American Hospital Association hospital statistics.	Print Standing Order	
American journal of managed care	Free Online	
American journal of medical quality	Sage	
Annals of health law	Lexis/Nexis	
Annals of long-term care	Open Access	
Approved drug products with therapeutic equivalence		
evaluations	Free Online	
Biomedical safety & standards	Gale Databases	
D. (1	Print Subscription; Online	
BMJ	free with 1 year embargo	
Clinical governance	Emerald, Proquest	
Contemporary longterm care	Gale Databases	
European journal of health economics	Springer	
European journal of health law	Springer	
Evaluation and program planning	Elsevier ScienceDirect	
Evaluation & the health professions	Sage	
Evaluation review	Sage	
	PsycArticles; Gale	
Families systems & health	Databases	
Frontiers of health services management	ABI/Inform	
Group practice journal.	Print Subscription	
Hastings Center report	Print Subscription	
Health affairs	ABI/Inform; Lexis/Nexis	
Health care analysis	Springer	
	Many sources; Print	
Health care financing review	subscription	

Health care management review	Gale Databases			
Health care management science	Springer			
Health care state rankings	Print (every other year)			
Health care strategic management	ABI/Inform; Gale Databases Print Subscription; Available online through			
Health data management	many sources			
Health economics	Wiley			
Health matrix: the journal of law-medicine	Lexis/Nexis			
Health policy	Elsevier ScienceDirect			
Health policy and Planning	Oxford			
Health services & outcomes research methodology	Springer			
Health services research	PubMed, Blackwell			
Health, United States	Free Online			
Healthcare benchmarks and quality improvement	Gale Databases			
Healthcare executive	ABI/Inform			
Healthcare financial management	ABI/Inform, Gale Databases			
health care manager	Gale Databases			
Healthcare risk management	Gale Databases			
Hospital access management	Gale Databases			
Hospital law's Regan report	Gale Databases			
Hospital material\$ management	ABI/Inform; Gale Databases; Print subscription			
Hospital peer review	Gale Databases			
Hospital purchasing news	Gale Databases			
Hospital topics	Lexis/Nexis; Gale Databases; Print subscription			
Hospitals & health networks	ABI/Inform			
Inquiry.	Print Subscription			
International journal for quality in health care	Oxford			
International journal of health care quality assurance	OAIOIU			
incorporating Leadership in health services	Emerald			
International journal of health planning and management	Wiley			
Issues in law & medicine	Lexis/Nexis; Gale Databases			

	Print subscription w/ free
Joint Commission journal on quality and patient safety	online
Joint Commission perspectives.	Print Subscription
JONA'S healthcare law, ethics, and regulation	Ovid
Journal of aging and health	Sage
Journal of clinical monitoring and computing	Springer
Journal of community health	Springer
Journal of correctional health care	Sage
Journal of emergency nursing	Elsevier ScienceDirect
Journal of health and hospital law	Lexis/Nexis
Journal of health and human services administration	ABI/Inform
Journal of health care compliance	ABI/Inform
Journal of health care finance	ABI/Inform; Gale Databases
Journal of health care for the poor and underserved	Project MUSE
Journal of health care law & policy	Wilson Select
Journal of health communication	CMMC w/ 1-year embargo
Journal of health economics	Elsevier ScienceDirect
Journal of health management	Sage
Journal of health organization and management	ABI/Inform w/ 1 year embargo
-	Duke University Press
	Print subscription w/ free
Journal of health politics, policy and law	online
T 1 C1 141	ABI/Inform; Gale
Journal of healthcare management	Databases Drint subscription xx/ free
Journal of infectious diseases	Print subscription w/ free online
	Lexis/Nexis; Gale
Journal of law, medicine & ethics	Databases
Journal of medical ethics	Print Subscription
Journal of medical systems	Springer
Journal of multicultural nursing & health	Print Subscription
Journal of the American Medical Directors Association	Elsevier ScienceDirect
	Print subscription w/ free
Journal of the American Medical Informatics Association	online
Marketing health services	Lexis/Nexis
Medical benefits	Gale Databases
Medical Care	Microform Subscription

Medical care research and review: MCRR	Sage
Medical economics	Print Subscription
Medicine, health care & philosophy	Springer
Michigan medicine	Print Subscription
Milbank quarterly	Blackwell
Modern healthcare	various databases
Nursing & health sciences	Blackwell
	ABI/Inform; Gale
Nursing homes: long term care management	Databases
Philosophy & Medicine	Print Standing Order
	Print Standing Order
Physician characteristics and distribution in the U.S	(every 3 years)
Policy, politics & nursing practice	Sage
Provider	Free Online
Quality & safety in health care	Free Online w/ 1 year embargo
Quality management in health care	Gale Databases
Safety & health	Print Subscription
State health watch	Gale Databases

Databases: Databases relevant to health care systems administration span the subject areas of:

- General and multidisciplinary resources
- Health and medical resources
- Newspaper and news service resources

The primary databases relevant to health care systems administration that are categorized as health and medical resources include:

Cumulative Index of Nursing and Allied Health
Health and Wellness Resource Center
Health Reference Center
PubMed/Medline
Searchable health sciences journal collections made
available through ScienceDirect and Sage.

- 2.) Formally trained librarians, including a health sciences librarian, are available to provide reference services through various routes, including in-person consultations, via phone, e-mail, or live chat. The health sciences librarian acts as a direct liaison to the program and communicates with the health care systems administration faculty to insure that proper library resources are being selected to support the curriculum, and also provides library instruction sessions to classes held at the main campus location in Big Rapids, as well as at other Ferris State University sites.
- 3.) The budget allocation provided by FLITE is adequate to meet our needs. A librarian regularly asks for input from faculty in regard to book purchases for the library.

Conclusions

Section 5: Conclusion

A. RELATIONSHIP TO FSU MISSION

The program is consistent with the University's mission because it provides opportunities for students to learn a career and enter a profession.

B. PROGRAM VISIBILITY AND DISTINCTIVENESS

The HCSA program is unique due to the requirement of an internship. We are one of only two such programs in the state. The program provides an opporuntity for students enrolled in clinical associate degree programs to earn a bachelor degree concurrently.

C. PROGRAM VALUE

The program has value on several levels. For the state, the program provides prepared graduates for entry level supervisory positions. For the University, the program provides a mechanism to retain students by allowing them to enroll in a Bachelor program concurrently with their associate degree clinical program. For the student, it provides the dual degree student with enhanced employment opportunities.

D. ENROLLMENT

Since the time of the last Academic Program Review, enrollment has increased from 74 students in Fall 02 to 214 students in Fall 06 (On-campus). Likewise, enrollment off-campus continues to grow in the same time period. Enrolment increased from 12 students to 41 students. Enrollment remains strong.

E. CHARACTERISTICS, QUALITY AND EMPLOYABILITY OF STUDENTS

The majority of the students are Michigan residents, Caucasian, and predominantly female. The quality of students in 2006, as represented by GPA scores shows that the average GPA is 3.16, which is an increase over 2002, when it was 2.85. Additionally, the ACT score in 2006 Fall is 20.4, which is an increase from 18.8 in 2002 Fall. Students are very employable, as indicated by the employer survey where the overwhelming majority stated they would hire another HCSA Ferris State University graduate.

F. QUALITY OF CURRRICULUM AND INSTRUCTION

The curriculum for the HCSA program has been designed to provide the graduate with a broad background in administration and management. The quality of the

curriculum is validated by employers and internship supervisors who indicate students are adequately prepared. The curriculum meets the program objectives. Instruction is of high quality, as indicated on student surveys.

G. COMPOSITION AND QUALITY OF THE FACULTY

Faculty members teaching within the program are highly qualified and have extensive work experience in healthcare. The program has experienced, in the past five years, turnover in faculty. At the present time, there is a search underway to fill a third tenure-track position. (Appendix A) The turnover in the program has resulted in the need for new faculty members to orient more recent hires.

In conclusion, the program review committee believes this is an excellent program that warrants continuation.

Tenure and Tenure-Track Faculty Curricula Vitae

Marcy Parry, MAcct., MS, CPA

<u>Parrym@ferris.edu</u> 20630 18 Mile Rd. Big Rapids, MI 49307 231-591-2273 Office 231-796-4534 Home

EXPERIENCE

Ferris State University (Big Rapids, MI) - College of Allied Health Sciences Associate Professor - Health Management Department 1991 - present

Courses taught

- Healthcare Finance
- Healthcare Strategy & Planning
- Computers in Health Care
- Orientation to Health Care
- Epidemiology & Statistics
- Introduction to Epidemiology
- Environmental Health Statistics
- Technical Internship
- Management Internship
- Ferris State University Seminar
- Non-Profit Accounting (College of Business)
- Teambuilding
- Introduction to Honors

Other

- Co-advisor for student organization (3 years)
- Student advisor (ongoing)
- Multiple college/university teams & committees (ongoing)

Expanded requirements to include team development, creativity, original writing & speaking. Finance course results in a fully supported budget sequence in Excel. Emphasis in all courses includes critical thinking, computing, quality, teaming, & awareness of current trends. Engaged in ongoing course design, online development & curriculum revision for program & department.

Private practice

1981 - 1990

• Consulting & tax planning/compliance for small businesses & partnerships in healthcare, real estate, sales, & service industries.

GTE (Westfield, IN & Durham, NC) National Database Administrator (7 companies, 38 states)

1987-1990

- Designed system specifications & data dictionary to combine several diverse companies into a single national hierarchal financial database, administered & maintained 20+ databases
- Trainer & end-user liaison for 200 local employees & thousands nationwide for micro/mainframe & downloading/RAMIS issues

Senior Reporting Analyst

- Coordinated internal & external audits, designed multi-party reporting systems via relational databases
- Re-tooled budget reporting to facilitate control of \$ 6 million budget

Ohio State University - College of Business Faculty - Accounting/finance

1986 - 1987

Courses taught (quarter system)

- Introductory & Intermediate Accounting (I & II for each)
- Cost Accounting
- Managerial Accounting
- Introductory & Intermediate Finance

Other

- Counseled students
- Initiated Accounting Club

University of North Carolina Hospitals (Chapel Hill, NC) 750 bed teaching hospital \$150 million operating budget \$40 million capital budget Assistant Controller

1982 - 1985

- Spearheaded successful general ledger conversion, initiated fixed asset conversion, converted trust funds (49) from manual to computerized system
- Negotiated RFPs & faculty physician group contracts
- Motivated & empowered staff resulting in increased productivity, significantly decreased turnover & expanded upward job mobility
- Acclaimed as leader of first 'clean' audit in hospital's history
- Commended by Board for outstanding cash management
- Converted hospital to accrual reporting & maintained both cash & accrual systems
- Directed activities of third party audits, general & trust fund accounting, payroll, payables, fixed assets & financial systems
- Established goals & objectives for team of 50 employees

Arthur Andersen & Co (Columbus, OH) Acting Manager/Tax Senior

1979 - 1981

- Engaged in tax planning, research, compliance & education for small to large businesses, both domestic & international
- Requested by international subsidiaries to be the liaison with the firm
- Youngest acting manager in the history of the Columbus firm
- Managing partner's personal friend (& general partner of several partnerships) requested permission to retain my services when I left the firm & paid thousands of dollars in fees to do so.

EDUCATION

Ferris State University

Masters of Science in Information Systems Management

Ohio State University

Master of Accounting

PROFESSIONAL

Memberships & licensing

Ferris Critical Thinking Institute (founding member)	2002 - present
Healthcare Financial Management Association	1996 to present
Certified Public Accountant (CPA)	1981 to present
American Institute of Certified Professional Accountants	1981 to present

Honors & awards

• Facilitator in all break-outs

Pilot member of initial Carnegie grant – Political Engagement Project

Nominated & awarded honorary International Golden Key membership

Summer 2006 - present

January 2006

Invited presenter	Critical Thinking Conference	June 8-9, 2006
 Small Groups: The Engine of Critical Thinking in the 	Northwestern Michigan	
Classroom	University, Traverse City, MI	
Designing Assignments for		
Critical Thinking Assessing Student		
Performances for Critical		
Thinking		
 Relating Critical Thinking to Learner-Centered 		
Teaching		
Invited presenter • Federal Taxes 101	Health Care Management	March 21, 2006
 Federal Taxes 101 aka 1040, 1040A or 1040EZ 	Association (Student organization)	
101022	Ferris State University	
Co. maranatan	Big Rapids, MI	Fahrus 10, 2006
Co-presenter • Teaching Students to	Western States Communication Association (WSCA) Convention	February 18, 2006
Think Critically and		
Communicate Reflectively	Palm Springs, CA	
Critical Thinking for Intercultural Competence	College of Arts & Science	February 8, 2006
·	Ferris State University	
Introduction to Intellectual	Big Rapids, MI Critical Thinking Workshop for	August 17-18, 2005
Standards	Educators	//ugust 1/ 10/ 2005
How to Improve Student	Cutting I Thing I have to all the territories at FCII	
LearningApplying the Elements	Critical Thinking Institute at FSU Andrews University	
 Overcoming Barriers 	Berrien Springs, MI	
 Facilitator in all break-outs 		
Invited presenter	25 th International Conference	July 13, 2005
 Developing a Grass Roots Approach to Critical Thinking 	Critical Thinking Foundation	
(panel)	Berkeley, CA	
(parier)		
Introduction to Intellectual	Critical Thinking Conference for	September 2004
 Introduction to Intellectual Standards (co-presenter) 	Critical Thinking Conference for Educators	September 2004
Introduction to Intellectual		September 2004

Grand Rapids, MI

PROFESSIONAL, cont.

Thesis:

M L Parry

May 2003

Invited presenter • From Trauma to Thinking	24 th International Conference	July 2004
 Information Revolution or Pandora's Box: Thinking Critically Online (co-presenter) 	Critical Thinking Foundation Palo Alto, CA	
Panel/presenter • Unique WebCT Applications	Faculty Week Ferris State University	August 2003
Invited presenter How to Improve Student	Critical Thinking Conference	June 2003
Learning (co-presenter)	Northwestern Michigan University, Traverse City, MI	
Presenter/facilitator	1 st Critical Thinking Conference (2 days)	May 2003
	Critical Thinking Institute at FSU Big Rapids, MI	
Reviewer Mayfield Publishing	Basic Statistics for the Health Sciences, 5 th edition, Kuzma & Bohnenblust	Spring 2003
Consultant to consultant	Essential Solutions Detroit Quality Improvement firm	Spring – Fall 2001
Reviewer • Blackwell Publishing	Financial Management of Health Care Organizations: An Introduction to Fundamental Tools, Concepts, and Applications, 2 nd ed., Zelman, McCue et al	April – September 2001
Panel • Teaching tips	New faculty orientation Ferris State University	August 2000
Co-presenter • How to Succeed on	HCSA students	Fall 1999
Internship	College of Allied Health Sciences Ferris State University	
Requested presenter Investing Basics	3 session series conducted for Health Management students	Fall 1998
Invited presenter • Empower Yourself	NAACP Empowerment Conference	Fall 1996
- Empower roursen	Ferris State University	
Publications		

Development of Web-based Core Resources for the College of Allied

Health Sciences, Ferris State University

Sabbatical

Granted to study critical thinking applications in health care finance Winter 2005 & information systems.

Writings to support teaching & internship endeavors (individually or as primary compiler)

HCSA 493 Internship Manual (Team member) Computers in Health Care, 2 nd ed.	HCSA 493, 'management' internship HCSA 205	2006
Thinking about Healthcare Finance, 1 st ed.	HCSA 401	
Computers in Health Care	HCSA 205	2004
Healthcare Finance: Fun Fundamentals, 2 nd ed.	HCSA 401	
Healthcare Finance: Fun Fundamentals	HCSA 401	2003
Planning Concepts in Healthcare, 2 nd ed.	HCSA 474	2001
Orientation to Health Care, 2 nd ed	CCHS 101	2000
Healthcare Finance: The Basic Concepts 3 rd ed	HCSA 401, post curriculum revision	
Orientation to Health Care	CCHS 101, new core curriculum course	1999
HCSA 392 Internship Manual	HCSA 392, 'technical' internship	1997

Seminars/continuing education

Progran	n name	Institution	CEU/ certificate	Year
• Grant	t Writing	Ferris State University	N/A	September – October 2006
	cal gement in lassroom	NY Times & Carnegie Foundation	N/A	June 14 -17, 2006
 Learn Center Teach 	ered	Snowbird, UT Center for Faculty Teaching & Learning	N/A	May 16-17, 2006
• Adjur	nct Faculty	Ferris State University Webcast	N/A	May 2006
		At Family Cl. 1		

At Ferris State University

PROFESSIONAL, cont. Seminars/continuing education

•	Scanning the Future –	Webcast	N/A	April 13, 2006
	Designing Curriculum for the Future	At Ferris State University		
•				
•	Six Sigma & Lean Thinking	IIES	N/A	February 10-12, 2006
•	Live IT Up In the Classroom: New	San Diego, CA Webcast	N/A	October 26, 2005
	Ways to Connect	John Wiley Publisher		
•	with Students Designing Assignments for Critical Thinking	Faculty Resource Network by Susan Wolcott, PhD	N/A	October 11, 2005
•	Engaging the Online Learner	Ferris State University Learning Community	N/A	Weekly during Fall 2005
•	Writing Better Assignments	Ferris State University, Faculty Week	N/A	August 2004
•	What Does the Future Hold?	Friday First Forum Grand Rapids, MI	N/A	Jan 2004
•	24 th International Conference	Critical Thinking Foundation Palo Alto, CA	3 days	July 2004
•	23 Rd International Conference	Critical Thinking Foundation Sonoma, CA	3 days	July 2003
•	HIPAA Privacy Policies & Procedures	Ferris State University	N/A	April 2003
•	Train the Trainers	Critical Thinking Foundation Sonoma, CA	4 days	July 2002
•	WebCT – content	Ferris State University	½ day	November 2001
•	WebCT – overview	Ferris State University	3 days	July 2001
•	Equity Conference	Hosted by Ferris State University	2 days	March 2001
•	Socratic Dialectic -Critical Thinking	Ferris State University	½ day session	Nov 10, 2000

PROFESSIONAL, cont. Seminars/continuing education, cont.

•	Are You History? Online World	Ferris State University	1/2 day session	Oct 12, 2000
•	Education Technology Conference	Syllabus 99, San Jose, CA	Certificate (3 days)	July 1999
•	Synergy from Others	Ferris State University	N/A	Jan 1999
•	Applying Continuing Quality Improvement to the Classroom	Ferris State University by Dr. Robert Cornesky	2 days	Jan 1999
•	Managed Care	HFMA (Healthcare Financial Management Association) Chicago, IL	Certificate (2 days)	Oct 1998
•	Introduction to Grant Searching & Proposal Writing	Ferris State University	N/A	April 1998
•	Advanced Microsoft Excel	Accountants Education Group	20 CPE*	Oct 1997
•	Faculty Summer Institute - Technologies in the Classroom	Ferris State University	Certificate (3 days)	July 1997
	Spring Conference on Managed Care: Minnesota Experience, Pricing & Capitation	Health Care Association of Michigan Lansing, MI	12 CEU	May 1997
•	Using the World Wide Web	Accountants Education Group	10 CPE	Fall 1996
•	Collaboration, Learning & Teaching	Ferris State University by Betsy Wilson U. of Washington Libraries	1 day	Fall 1996
•	Distance Learning Education	Northwestern Michigan College	Certificate (5 days)	August 1996

PROFESSIONAL, cont. Seminars/continuing education, cont.

M L Parry

•	Faculty Summer Institute - Problem Based Learning	Ferris State University	Certificate (5 days)	July 1996
•	Summer Institute: Technology, Human Rights & Development	MIDEON (Michigan International Development Education Outreach Network) By invitation only	Certificate (5 days)	June 1996
Co	urse developme	nt		

Teambuilding, 2 cr.	Sole developer	2005
Computers in Health Care, 2 cr.	Sole developer	2003
Online course development		
Introduction to Epidemiology, 1 cr.	Sole developer	2003

Grant writing (1996)

Orientation to Health Care, 3 cr.

Grant proposal: "The Access & Cost Issues Related to Transitory Migrant Workers' Spread of Infectious Diseases" Robert Wood Johnson Foundation Health Care Investigator Awards - co-authored with Dr. Richard Griffin (Professor - Political Science, Program Director - Public Affairs, Ferris State University) Status: Passed first round, 3 year grant not awarded

Primary developer

2002

SERVICE

Recruiting & retention	
Critical Thinking Study Group	2005-2006
Critical Thinking Study Group	2004-2005
Dawg Days Critical Thinking Study Group	2003-2004
Dawg Days Open labs Critical Thinking Study Group	2002-2003
First Impressions Autumn Adventure Critical Thinking Study Group Pilot program – Learning Style Assessment	2001-2002
Critical Thinking Study Group Autumn Adventure Dawg Days	2000-2001

SERVICE, cont. M L Parry

University committees/task forces Health Promotion & Substance Abuse Prevention – Secretary 2006-2007 Center for Faculty Teaching and Learning - 'Think Tank' 2006-2007 Presidential Task Force - Health Information & Wellness Fall 2006 Open forum participant -- NCA accreditation online learning team May 22,2006 Health Promotion & Substance Abuse Prevention 2005-2006 Fall 2005 Presidential Task Force - Technology Support Faculty Senate member (elected) 2004-2005 Faculty Senate E-Board, at large (elected) 2003-2004 Faculty Senate member (elected) Chair – General Education Task Force Faculty Senate E-Board, at large (elected) 2002-2003 Faculty Senate member (elected) Chair - General Education Task Force Workload Review (requested) – College of Business 2001-2002 Faculty Senate member (elected) Programmatic Marketing (requested) General Education – communication Book Store Advisory - ex-officio Faculty Senate member (elected) 2000-2001 Programmatic Marketing (requested) General Education – communication sub-committee 'Extranet' ad hoc committee NCA self-study co-chair, criterion IIq 1999-2000 NCA self-study member, criterion IIe Secretary - Senate Budget Planning Committee 1998-99 VP Academic Affairs Search Committee 1997-98 Senate Budget Planning Committee Ferris Faculty Association Exception Committee General Education - Reasoning Ability Assessment Committee Pilot study member General Education – Life long learning sub-committee 1996-97 Arts & Lecture Committee

SE	RVICE, cont.	M L Parry	
	College committees/task forces Strategic Planning - chair Tenure committee - member (3 tenure track faculty) Search committee - School of Nursing	2006-2007	
	Interdisciplinary task force: strategic planning Strategic Planning Search committee - Clinical Lab Sciences Tenure committee - chair (1 tenure track faculty) Tenure committee - member (3 tenure track faculty)	Fall 2005 2005-2006	
	Chair – Strategic Planning Tenure committee – member (2 tenure track faculty)	2004-2005	
	Chair - Strategic Planning Core Curriculum Recruiting & Retention WebCT User Group Workload Review - Lab/Online Tenure committee - member (1 tenure track faculty)	2003-2004	
	Search committee – Dean of College of Allied Health Sciences Chair - Strategic Planning Recruiting & Retention WebCT User Group Tenure committee – member (1 tenure track faculty)	2002-2003	
	Chair - Strategic Planning WebCT User Group	2001-2002	
	Chair - Curriculum, Assessment & Planning	2000-2001	
	Curriculum, Assessment & Planning	1997-2000	
	CCHS Non-Clinical Core Task Force	1997-98	
	CCHS 101 Core Curriculum Committee	1998-99	
	HCMA (student organization) co-advisor, advisor	1996-1999	
	Department committees Chair - Search committee – programmatic faculty (tenure track) Chair -: Search committee – programmatic faculty (temporary 1 yr) Faculty mentoring, weekly	Spring 2 2005-20	
	Search committee- temporary faculty HCSA	2004-20	05
	Chair - search committee- tenure track faculty HCSA	2003-20	04
	Search committee- temporary faculty HCSA	2002-20	03
	Curriculum revision committee	2001-20	02

SERVICE, cont.	M L Parry
Community United Church - Liturgist & usher Salvation Army - Bell ringer Initiated & implemented college wide donation program of personal care items for WISE (Women's Information Service) & Manna (local food pantry)	1996 – present
Habitat for Humanity – pro bono review for State of Michigan Habitat for Humanity construction committee Friends of the Library – assist with book sales United Church – Mission Commission Relay for Life – volunteer & requested reader	2005
Habitat for Humanity construction committee Friends of the Library – assist with book sales United Church – Mission Commission Relay for Life – volunteer & requested reader	2004
Relay for Life – volunteer & requested reader Habitat for Humanity construction committee Friends of the Library – assist with book sales United Church – Mission Commission Starburst - assist with Christmas package wrapping/distribution Relay for Life – volunteer & requested reader	2003
Habitat for Humanity construction committee Habitat for Humanity – pro bono review for State of Michigan Friends of the Library – assist with book sales Starburst - assist with Christmas package wrapping/distribution	2002
Habitat for Humanity construction committee & volunteer Habitat for Humanity board volunteer Friends of the Library – assist with book sales Team manager – Grand Valley Soccer Association Team captain – CAHS – Relay for Life Faculty connection – Linking Together to Make A Difference (CCHS 101 fund raiser for American Red Cross – 9/11 tragedy)	2001
Habitat for Humanity board & construction volunteer Team captain – CAHS – Relay for Life United Church - Senior High Sunday School Teacher	2000
United Church - Senior High Sunday School Teacher	1999
Relay for Life – walker & fund raiser with student organization United Church - Substitute Sunday School teacher (& substitute) United Church - Spiritual Life Commission Playscape construction volunteer Citizens' Curriculum Advisory Committee member for Big Rapids Public Schools	1996-1998

Marilyn K. Skrocki

5558 Spring Knoll Lane, Bay City, Michigan 48706 989-686-1889 (home); 989-450-8032 (cellular phone); mksjd101@chartermi.net

EXPERIENCE

PROGRAM COORDINATOR/ASSISTANT PROFESSOR August 2005-present

Ferris State University; Big Rapids Michigan

Responsible for providing leadership for the Health Care Systems Administration program including; recruitment and retention activities; curriculum oversight; serving as the resource person for program faculty; provide classroom instruction; advising students; participation in program, departmental, and College meetings, and provides service to the department, college, university and professional community

DIRECTOR OF RISK MANAGEMENT/CORPORATE COMPLIANCE January - June 2005 Saint Mary's Medical Center; Saginaw Michigan

- Responsible for developing and setting standards for the implementation and maintenance of an effective Corporate responsibility Program, which is enforced so it will be effective in preventing and detecting unethical, unlawful conduct
- Responsible for oversight of all liability, automobile and directors and officers liability claims
- Oversee medical research activities in conjunction with the IRB Committee

VICE PRESIDENT OF LEGAL AFFAIRS May 2002-January 2005

Saint Mary's Medical Center; Saginaw Michigan

- ◆ Legal Counsel for 2,200 employee medical complex which included responsibility of reviewing and drafting contracts, leases, policies and procedures and medical staff bylaws, in addition to the above stated responsibilities as Director of Risk Management and Corporate Compliance.
- Provide educational in-services/presentations for compliance with state and federal laws and regulations.

RISK MANAGER July 2001-May 2002

Saint Mary's Medical Center; Saginaw Michigan

• Minimized risk potential by tracking and trending incidents, patient satisfaction concerns, falls, medication errors, etc.; instituted loss prevention measures; oversight of all liability claims

ADJUNCT PROFESSOR - Health Law 2001-present

Cooley Law School; Lansing Michigan

♦ The Health Law class covers cases, statutes, regulations that reflect problems faced by health lawyers

ASSOCIATE ATTORNEY November 1999-July 2001

Chaklos, Jungerheld, Hahn & Washburn, P.C.; Saginaw Michigan

• Responsible for litigation files in defense firm specializing in medical malpractice and healthcare related claims

LAW CLERK June 1999-November 1999

Kitch, Drutchas, Wagner, Denardis & Valitutti; Lansing Michigan

• Team member on various medical malpractice cases and corporate hospital issues

RISK MANAGEMENT/CORPORATE COMPLIANCE EXTERNSHIP September 1998-May 1999 Bay Health Systems; Bay City Michigan

♦ Actively participated in risk management of a 450-bed hospital; attended Core Compliance Team meetings and seminars with managers formulating individual department compliance programs

CAT SCAN/RADIOLOGIC TECHNOLOGIST October 1987-November 1999

Bay Medical Center; Bay City Michigan

• Performed diagnostic computer axial tomography procedures at an acute trauma center; served as a risk management representative for the diagnostic imaging department; served as department representative in continuous quality improvement projects

EDUCATION

Thomas M. Cooley Law School Lansing, Michigan

Juris Doctorate, Cum Laude; September 1999

- Accomplishments:
 - Class Ranking; Top 20%; 17/102
 - Book Award, Certificate of Merit in Labor Law
 - Book Award. Certificate of Merit in Health Law
 - Book Award, Certificate of Merit in Worker's Compensation

♦ Academic Honors Convocation — "Importance of Academic Success"

- Food and Drug Law Institute's Summer Internship Program at Georgetown, D.C. (1999)
- Admitted to the Practice of Law, May 2000

Ferris State University Big Rapids, Michigan

Bachelor of Science with High Distinction in Health Systems Management, August 1995

Delta College University Center, Michigan

Associate of Science in Radiology, August 1983

GUEST SPEAKER

Ferris	State	University
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Central Michigan University	
♦ Healthcare Law – "Role of Risk Manager/In-House Counsel"	March 2001
Saginaw Valley State University	
◆ "Introduction to the Healthcare Regulatory Environment"	November 2002
Torch Club International	
◆ "Paradoxes in the Healthcare Arena, Catch 22"	October 2002

March 2000

Saginaw Valley State University ♦ "Patient Rights – It's Not Just Confidentiality" March 2003

Saginaw Bar Association

"Ethical, Medical and Legal Issues of Terminally Ill Patients" February 2004 Ferris State University-Health Care Management Association

♦ "Roles in Healthcare Administration" **April 2005** "Future Trends of Managed Care" May 2005

PERSONAL INTERESTS/COMMUNITY INVOLVEMENT

- ♦ Member of Saginaw County Bar Association, Member of Michigan Bar Association
- Board of Directors Trustee, local chapter of TORCH International

Curriculum Vita

MARIE J SICKELSTEEL, MS RHIT

EDUCATION:

Masters of Science, Education, Ferris State University, Big Rapids, MI

EXPERIENCE:

Associate Professor, Health Management Programs, 1974-present Ferris State University, Big Rapids MI

- Instruction in both Associate Degree and Bachelors Degree medical records and Bachelors Degree health care systems administration curricula.
- Internship Coordinator Medical Records and Health Care Systems Administration (on-campus and off-campus students).
- Primary teaching responsibility in ICD-9-CM coding system, Internship Preparation, and Health Care Issues and Reimbursement.
- Advisor for medical records and health care administration students.

ACADEMIC ACTIVITIES:

<u>College of Allied Health Sciences, Ferris State</u> <u>University</u>

- Assisted in curriculum revision with creation of new courses and modification of existing courses for Medical Record Technology, Medical Record Management, and Health Care Systems Administration.
- Assisted with development of a coding certificate program.
- Developed and taught weekend and evening curriculum courses to off-campus students for Medical Record Technology, Medical Record Administration, and Health Care System Administration.
- Tenure Faculty Search Committee, Chair

2005

• Internship Coordination Task Force, Member

2003-2004

 Faculty Affairs Committee, Chair (Promotion & Merit, Sabbatical Leave, Tenure, Faculty Enrichment) 1999– present

 College of Allied Health Sciences Reorganization Task Force, Chair 1999-2000

<u>University</u>

	 Quality Improvement 2000+ member Curriculum Development & Approval Task Force member 	2002-2003 1999-2000
AWARDS:	Distinguished Member Award, Michigan Health Information Mgt. Assoc	2003
	Honorary Member, Southwest Michigan Health Information Mgt. Assoc.	2001
PROFESSIONAL	American Health Information Mgt. Assoc.	
Affiliations:	Michigan Health Information Mgt. Assoc.	
	PAST PRESIDENT	1990-91
	• PRESIDENT	1989-90
	PRESIDENT ELECT	1988-89
	VICE PRESIDENT	1984-85
	CODING PANEL MEMBER	1988-95
	MHIMA DELEGATE	1989-93
		1980-84
		1977-78
	NOMINATING COMMITTEE CHAIR	1999-00
	CENTRAL OFFICE PROJECT MANAGER	1991-93
	• SECRETARY	1976-77
	Southwest MI Health Information Mgt. Assoc.	
	Michigan Association of School Boards	
PRESENTATIONS:	Coding Roundtables, Facilitator	
	Coding Workshops	
	Medical Record Review Workshops for registration candidates	1976-2000
ELECTED OFFICE:	School Board Member, President, Tri County Areas Schools, MI	1989 - 2005
COMMUNITY ACTIVITIES:	Alzheimer's Association, West Michigan Chapter Facilitator for Big Rapids, MI, Support Group.	1996-2005

Curriculum Vita

MARIE J SICKELSTEEL, MS RHIT

EDUCATION:

Masters of Science, Education, Ferris State University, Big Rapids, MI

EXPERIENCE:

Associate Professor, Health Management Programs, Ferris State University, Big Rapids MI

- Instruction in both Associate Degree and Bachelors Degree medical records and Bachelors Degree health care systems administration curricula.
- Internship Coordinator Medical Records and Health Care Systems Administration (on-campus and off-campus students).
- Primary teaching responsibility in ICD-9-CM coding system, Internship Preparation, and Health Care Issues and Reimbursement.
- Advisor for medical records and health care administration students.

ACADEMIC ACTIVITIES:

<u>College of Allied Health Sciences, Ferris State</u> <u>University</u>

- Assisted in curriculum revision with creation of new courses and modification of existing courses for Medical Record Technology, Medical Record Management, and Health Care Systems Administration.
- Assisted with development of a coding certificate program.
- Developed and taught weekend and evening curriculum courses to off-campus students for Medical Record Technology, Medical Record Administration, and Health Care System Administration.
- Tenure Faculty Search Committee, Chair

2005

Internship Coordination Task Force, Member

2003-2004

1999-present

1974-present

 Faculty Affairs Committee, Chair (Promotion & Merit, Sabbatical Leave, Tenure, Faculty Enrichment)

 College of Allied Health Sciences Reorganization Task Force, Chair 1999-2000

<u>University</u>

	Quality Improvement 2000+ member	2002-2003
	Curriculum Development & Approval Task Force member	1999-2000
AWARDS:	Distinguished Member Award, Michigan Health Information Mgt. Assoc	2003
	Honorary Member, Southwest Michigan Health Information Mgt. Assoc.	2001
Professional Affiliations:	American Health Information Mgt. Assoc.	
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	PAST PRESIDENT	1990-91
	• PRESIDENT	1989-90
	PRESIDENT ELECT	1988-89
	VICE PRESIDENT	1984-85
	CODING PANEL MEMBER	1988-95
	MHIMA DELEGATE	1989-93
		1980-84
		1977-78
	NOMINATING COMMITTEE CHAIR	1999-00
	CENTRAL OFFICE PROJECT MANAGER	1991-93
	• SECRETARY	1976-77
	Southwest MI Health Information Mgt. Assoc.	
	Michigan Association of School Boards	
PRESENTATIONS:	Coding Roundtables, Facilitator	
	Coding Workshops	
	Medical Record Review Workshops for registration candidates	1976-2000
ELECTED OFFICE:	School Board Member, President, Tri County Areas Schools, MI	1989 - 2005
COMMUNITY ACTIVITIES:	Alzheimer's Association, West Michigan Chapter Facilitator for Big Rapids, MI, Support Group.	1996-2005

Curriculum Check Sheets

FERRIS STATE UNIVERSITY COLLEGE OF ALLIED HEALTH SCIENCES HEALTH CARE SYSTEMS ADMINISTRATION PROGRAM Guide for students who enter the program Fall 2006 and beyond

	Name	SS#
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		Professional Requirements - 48 cr. Required		
		Course Title prerequisites shown in ()	Cr.	Grade
HCSA	202	Health Care Law (CCHS 101)	3	
HCSA	205	Computers in Health Care (ISYS 105)	2	
HCSA	220	Health Services Administration (CCHS 101)	3	
HCSA	320	Principles of Managed Care (HCSA 205)	3	
HCSA	335	Supervisory Practices in Hlth Care (Mgmt 301 or permission of instructor)	4	
HCSA	345	Internship Orientation	1	
HCSA	401	Finance Concepts in Hlth Care (ACCT 201, CCHS 101)	4	
HCSA	433	Quality Improvement in Hlth Care (CCHS 101, MGMT 301, HCSA 205)	3	
HCSA	460	Principles of Long Term Care (HCSA 320)	3	
HCSA	474	Planning and Promotion in Health Care (HCSA 401-co-requisite)	4	
HCSA	392	Internship I (Department permit)	6	
HCSA	493	Internship 2 (Department permit)	12	
		Core Requirements – 26 cr. Required		
ACCT	201	Principles of Accounting 1 (MATH 110 with grade of C- or above)	3	
CCHS	101	Orientation to Health Care (None)	3	
CCHS	102	Safety Issues in Health Care (None)	1	
EHSM	315	Epidemiology and Statistics (Enrollment in CAHS)	3	
ISYS	105	Microcomputer Applications (None)	3	
ISYS	200	Database Applications (ISYS 101 or ISYS 105)	3	
MGMT	301	Applied Management (Junior standing or permission of instructor)	3	
MKTG	321	Principles of Marketing (ECON 221)	3	
MRIS	103	Medical Terminology (None)	4	
		Related Electives – 9 cr. (if MATH 115 is required select 6		
		cr. from the following)		
ACCT	202	Principles of Accounting 2 (ACCT 201)	3	<u> </u>
EHSM	317	Public Health Administration (EHSM 201 or departmental permission)	2	
EHSM	330	OSHA Laws and Regulations (EHSM 101 or departmental permission)	2	
FINC	322	Financial Management 1 (MATH 115, ACCT 202)	3	
FINC	323	Financial Management 2 (FINC 322)	3	
FMAN	321	Principles of Facilities Management (Department permit)	3	
нотм	301	Property and Facilities Management (Department permit)	3	
INSR	243	Principles of Risk Management and Insurance (Sophomore standing)	3	
INSR	375	Employee Benefits (INSR 284 or permission of instructor)	3	
MGMT	310	Small Business Management (Second Semester Sophomore standing)	3	
MGMT	373	Human Resource Management (MGMT 301)	3	
MGMT	374	Wage and Salary Administration (MGMT 373 or permission of instructor)	3	
MGMT	375	Collective Bargaining (MGMT 373 or permission of instructor)	3	
MRIS	204	ICD Coding (MRIS 103, BIOL 109, MRIS 101)	4	
MRIS	211	CPT Coding (MRIS 101, BIOL 109, MRIS 101)	3	
NURS	228	Nursing Care of the Elderly (permission of the instructor)	2	
PSYC	326	Industrial and Organizational Psychology (PSYC 150)	3	
SCWK	262	Health Related Social Services (None)	3	
SOCY	345	Field of Aging (SOCY 121 or SOCY 122 or ANTH 122)	3	1

		Communication Competence- 15 cr. Required		
		Course Title prerequisites shown in ()	Cr.	Grade
COMM	105/221	Interpersonal Communication OR Small Group Decision Making (none)	3	
COMM	365	Intercultural Communication (COMM 105 or COMM 221)	3	
ENGL	150	English 1 (074 or equivalent or competency test)	3	
ENGL	250	English 2 (ENGL 150)	3	
ENGL	321/325	Advanced Composition OR Advanced Business Writing (ENGL 250)	3	
		Scientific Understanding 8 cr. Required		
BIOL	109	Basic Human Anatomy and Physiology (None)	4	
		Select one course from ASTR, BIOL, CHEM, GEOG 111, GEOG 121, PHSC, PHYS	4	
		Quantitative Skills		
MATH	115	Intermediate Algebra (Math 110) (if ACT Math subscore of 24 substitute related elective)	0	
		Social Awareness – 9 cr. Required		
PSYC	150	Introduction to Psychology (None) OR		
SOCY	121	Introduction to Sociology (None)	3	
PSYC	326	Industrial and Organizational Psychology (PSYC 150) OR		
SOCY	373	Health and Illness in Society (SOCY 121)	3	
ECON	221	Principles of Economics 1 (MATH 110 or equivalent)	3	
		Cultural Enrichment – 9 cr. Required		
		Select 3 courses from the following subject areas, including one at the 200		
		level or above: One must meet the Global Consciousness Require-		
		ment. One must meet the race, ethnicity and gender requirement		
		ARTH, ARTS, FREN, GERM, HIST, HUMN, LITR, MUSI, SPAN, THTR.	ĺ	
		PHIL 216 is strongly recommended	<u> </u>	
		Cultural enrichment elective	3	
		Cultural enrichment elective	3	ļ
		Cultural enrichment elective	3	

124 credit hours required for graduation

Approved 11/03 Revised 3/29/05 Revised 4/26/06

FERRIS STATE UNIVERSITY COLLEGE OF ALLIED HEALTH SCIENCES

Health Care Systems Administration For students who enroll Fall 2006 and beyond

FIRST YEAR - FALL		FIRST YEAR – WINTER					
CCHS 101 Orientation to Health Care CCHS 102 Safety Issues in Hlth Care ENGL 150 English 1 *FSUS 100 ISYS 105 Microcomputer Applications MRIS 103 Medical Terminology	3 cr 1 cr 3 cr 4 cr 14 cr.	COMM 105 Interpersonal Communications OR	4 cr 3 cr 3 cr 3 cr 16 cr.				
SECOND YEAR - FALL		SECOND YEAR - WINTER					
ACCT 201 Principles of Accounting 1 ENGL 250 English 2 Computers in Health Care HCSA 220 Health Services Administration Cultural Enrichment Elective (Recommended PHIL 216)	3 cr 2 cr 3 cr	COMM 365 Intercultural Communication ECON 221 Principles of Economics 1 HCSA 202 Health Care Law Cultural Enrichment Elective Scientific Understanding Elective	3 cr 3 cr 3 cr 3 cr 4 cr 16 cr.				
THIRD YEAR - FALL		<u>THIRD YEAR – WINTER</u>					
HCSA 320 Principles of Managed Care 'GMT 301 Applied Management 'C 326 Organizational Psychology OR SOCY 373 Health and Illness in Society HCSA 345 Internship Orientation Elective Elective	3 cr		3 cr 3 cr 4 cr 3 cr 3 cr 16 cr.				
THIRD YEAR – SUMMER HCSA 392 Internship 1 6 cr.							
FOURTH YEAR – FALL		FOURTH YEAR - WINTER					
HCSA 401Finance Concepts in Health Care4 crHCSA 49312 crHCSA 433Quality Improvement in Health Care3 crHCSA 460Long Term Care Concepts3 crHCSA 474Planning & Promotion in Health Care4 cr14							
	ol algebra wit ement	n for MATH 115 or higher, or an ACT subscore o h a grade of C- or better is required for graduati					
*FSUS 100 - Required of all students with 12 hours or fewer in their first semester at FSU.							

124 credit hours needed for graduation

Revised 3/29/05 Revised 4/26/06

Sample Course Syllabi

FERRIS STATE UNIVERSITY College of Allied Health Sciences Health Management Department COURSE SYLLABUS – Fall 2006

TITLE OF COURSE:

HCSA 202 Health Care Law (3 credits) All Sections

INSTRUCTOR:

Marilyn Skrocki RT, BS, JD

Office: VFS 414

Office phone – (231) 591-2280 E-mail: skrockm@ferris.edu Office hours: M 2-4, T 1-3, W 2-3

COURSE DESCRIPTION: This course presents an overview of the legal issues facing the health care industry. It provides students with a basic working knowledge of health law. It is a comprehensive and inclusive review of a wide variety of health care legal issues. Students are provided with a realistic knowledge of health law and its application to the real world.

STUDENT TEXT: Pozgar, George D. Legal Aspects of Health Care Administration, 9th edition.

COURSE OBJECTIVES: At the end of this course, the student shall be able to understand the legislative and legal system, risk management for healthcare, importance of corporate compliance, health information laws, regulations and standards (such as HIPAA, JCAHO, state and federal laws governing healthcare), importance of organizational policies and procedures addressing health care rules and regulations, legal release of information and professional and practice related ethical issues.

<u>METHODS OF TEACHING</u>: Lecture, class discussions, group assignments, tests, quizzes. The class requires student participation in class discussions and group activities. Students will be expected to submit at three article/web reviews during the semester related to current legal issues in the health care field and be prepared to discuss them in class.

SCHEDULE: HCSA 202-001 M-W-F 11:00-11:50 PHR 201

HCSA 202-002 T 5:00-7:50 PHR 201 HCSA AGA M 6:00-8:50 RM 140

EVALUATION AND GRADING SCALE:

A	93 - 100	В-	80 - 82	D+	67 - 69
A-	90 - 92	C+	77 - 79	D	63 - 66
B+	87 - 89	C	73 - 76	D-	60 - 62
В	83 - 86	. C-	70 - 72	\mathbf{F}	Below 60

TENTATIVE COURSE SCHEDULE: Weeks Readings Topic August 28

Chapter 1 Historical Perspective-Take home assessment of chapter (1)

Chapter 2 Introduction to Law

September 5

Chapter 3 Tort Law

Sept 11

Guest Speaker, FLITE librarian Monday 001, Tuesday 002 Class will meet in library Chapter 4 Criminal Aspects of Health Care

Sept 18 Test over chapters 2-4, Group article/web discussion

Sept 25

Chapter 5 Contracts and Antitrust-Take home assessment of chapter (2)

Chapter 6 Civil Procedure and Trial Practice

October 2

Chapter 7 Corporate Liability
Chapter 8 Medical Staff

October 9 Test over chapters 6-8, Group article/web discussion

Oct. 16 Chapter 9 Nursing and the Law-Take home assessment of chapter (3)
Guest speaker Risk Management (potential)

October 23

Chapter 10 Liability by Departments and Health Care Professionals, EMTALA

October 30

Chapter 11 Information Management and Health Care Records, HIPAA

November 6

Consents, Authorizations, Subpoenas, Release of Information, Specialized Patient Records

November 13 **LEGAL PAPER DUE**

Test over Chapters 10-11, HIPAA, Release of Information, Group article/web disc.

November 20

Guest Speaker, Michigan Legislator Roger Kahn

Chapter 12 Patient Consent-Take home assessment of chapter (4)

November 27

Chapter 13 Legal Reporting Requirements-Corporate Compliance, Fraud and Abuse Chapter 15 Patient Rights and Responsibilities-Take home assessment of chapter (5)

December 4

Chapter 17 Health Care Ethics

Chapter 21 Managed Care and Organizational Restructuring

Chapter 22 Tort Reform and Reducing the Risks of Malpractice

Exam Week Test over Chapters 13, 17, 21-22

Ferris State University College of Allied Health Sciences Health Care Systems Administration Course Syllabus - Fall 2006

Course title

HCSA 205, Computers in Health Care

Course description

Overview of computer usage in health care agencies. Topics to be studied include clinical & administrative systems, uses of the internet, extranet & intranet, electronic health records, telemedicine, computerized medical devices, compatibility issues, billing via the Web, litigation issues surrounding the use of computer technology in health care & emerging technologies & their impact upon health care agencies. Pre-requisite: ISYS 105. 2 credits (2+0)

Course Objectives

At the end of the course the student will be able to:

- Discuss & illustrate the relationship of clinical & administrative systems.
- Discuss the clinical & administrative uses of internet, intranet, & extranets in health care.
- Describe how compatibility & security issues relate to computerized billing & electronic health records.
- Discuss the array of computerized medical devices.
- Discuss litigation issues related to computer technology in health care.
- Evaluate Web sources for validity per HON standards.
- Discuss current & upcoming technologies in health care.

Faculty Marcy Parry, Associate Professor

Office: VFS 332 Phone: 591-2273

Office hours: Wednesday 11 - 11:50 AM

Wednesday 12 - 12:50 PM Wednesday 2 - 2:50 PM Friday 1 - 1:50 PM

By request

Course schedule 1-1:50 PM Monday & Wednesday, VFS 419

Required course materials

- 1. **Text** Handbook of Informatics For Nurses & Health Care Professionals, 3rd edition, Hebda, Czar, Mascara, 2005. Prentice Hall Health, ISBN: 0-13-151262-5
- 2. Course manual Computers in Health Care, 4th edition, 2006
- 3. Blank notebook 8 1/2" by 11", college or wide ruled, maximum 100 pages

Evaluation (Scores will be posted in WebCT. It is your responsibility to inform me of any discrepancies. Changes are based on graded work.)

WebCT	60
Assignments	140
Quizzes	60
Final	40
Total	300

TIMELINESS

On time work is expected. There is no late credit in this course. Work is due at the beginning of class to be 'on time'. Any exceptions will be at the discretion of the faculty member. Advance notice, as always, is expected. This is true for completion of assignments & exams as well as for the course. Negotiation is possible IF you initiate communication in advance & have a reasonable rationale.

Grace period: You are allowed one 'grace' period. This permits you to submit any written assignment within 7 calendar days of the original due date for full credit consideration. Simply write 'I am using my grace period.' when you submit the assignment. This does not apply to WebCT discussion boards.

QUALITY OF WORK

Unless otherwise stated, all assignments are to be computer printed, proofed & grammar checked. Proper grammar & spelling are critical to a passing score... and a successful career.

My standard policy is to recognize that writing improves during your academic career. Thus lower level courses are 'permitted' limited grammar/spelling errors. After that, you could decrease your score by 1 point per error.

100 level course - 3 errors per page

200 level course - 2 errors per page

300 level course - 1 error per page

400+ level – I return the assignment for no credit if there are more than 5 errors. The assignment may not be re-submitted.

ACADEMIC DISHONESTY

It is a disservice to yourself, your classmates and our profession to submit work that is not your own. Cheating and/or plagiarism are not tolerated. Review University consequences for such actions.

http://www.ferris.edu/htmls/studentlife/handbook Click on University Policy, then Academic Misconduct

FERRIS STATE UNIVERSITY

COLLEGE OF ALLIED HEALTH SCIENCES

Department of Clinical Laboratory Sciences, Respiratory Care and Health Administration Programs

HCSA220 – AGA: Health Services Administration Fall 2006

INSTRUCTOR

Mark Fabbri MSE MSA NHA

Assistant Professor Office: VFS 415

Office phone: (231) 591-2237 E-Mail: fabbrim@ferris.edu

Office hours: M: 11-12N, & 1-2PM, T: 1:30-2:30PM, W: 11-12N, F:

11-12N & 1-2PM

Supplemental Contact Information: I Use the WebCT course email for all correspondence for this course. I routinely check my email at least daily. Also I will be available for face to face discussion after class time or by appointment. In an emergency you can contact me via my Ferris email address.

COURSE SCHEDULE

W: 6-8:50PM RM 140

REQUIRED TEXT

Wolper, L. (2004). Health care administration: Planning, implementing, and managing organized delivery systems (4th Ed). Sunbury, MA: Jones and Bartlett Publishers.

RECOMMENDED RESOURCES

American Psychological Association (APA) (2001). *Publication manual (5th Ed.)*. Washington DC: Author.

The course also has a companion WebCT course site that will have several resources available. Please use the site routinely for announcement and calendar updates, assignments and supplemental information.

COURSE OVERVIEW

This course is designed to provide an introduction to the spectrum of health services administration. It will explore the unique role of the administrator in the health care setting, expose students to the dual power structure in health care agencies, study the impact of the organization's culture on the role of the administrator as well as explore the administrative roles of planning, inventory control, facility and equipment management, productivity management, staffing and work distribution.

years. The annotated bibliography will be due on or before 11/29/06 by 10PM via an email Word or RTF email attachment. The annotated bibliography is worth 125 points (25 points APA (including spelling and grammar) and 100 points for content).

Grading Information

% of Grade Points

Unit Exams (3 exams)

30% 150 (50 points each)

Outside Reading Project

30% 150 points (includes 25 for topic and 125 for paper)

Ouizzes

40% 200 points (20 points each)

Total: 100% 500 points

Points/Grade

500 – 465	A	414 – 400	В-	349 – 335	D+
464 – 450	A-	399 – 385	C+	334 – 315	D
449 – 435	B+	384 - 365	C	314 - 300	D-
434 – 415	В	364 - 350	C-	Below 300	F

COURSE POLICIES

Please refer to the Student Handbook. For further information students can go to

Student Handbook - Ferris State University @

$\underline{http://www.ferris.edu/htmls/administration/StudentAffairs/Studenthandbook/homepage.ht\ \underline{ml}$

For this course be especially knowledgeable of the following policies:

Section 02: Code of Community Standards Regarding Misconduct:

Part I: Administrative

- A. Academic Misconduct
- B. Personal Misconduct on or off University Property

Participation: It is expected that students will attend every class scheduled. It is also important to be actively engaged in class discussions and group work (as assigned). Refrain from reading any outside material, unnecessary conversations with fellow students and doing work that is not specific to the topic or discussion at hand. If observed not actively engaged and involved in non-related work/activities a warning will be given. If a second warning has to be given then any points that would have been available will be forfeited for that evening (including open book quiz, exams, and extra credit if any and/or any other points made available).

FERRIS STATE UNIVERSITY

COLLEGE OF ALLIED HEALTH SCIENCES

Department of Clinical Laboratory Sciences, Respiratory Care and Health Administration Programs

HCSA320 – Principles of Managed Care Fall 2006

INSTRUCTOR

Mark Fabbri MSE MSA

Assistant Professor Office: VFS 415

Office phone: (231) 591-2237 E-Mail: fabbrim@ferris.edu

Office hours: M: 11-12N, & 1-2PM, T: 1:30-2:30PM, W: 11-12N, F: 11-

12N & 1-2PM

Supplemental Contact Information: I use the WebCT course email for all correspondence for this course.

<u>COURSE SCHEDULE</u> <u>Section 002</u>: M, W, F: 10-10:50AM: VFS: 325 (Make sure to have the right section) <u>Section 001</u>: T & Th: 12-1:15PM: VFS 325

REQUIRED TEXT

Kongstvedt, P. (2003). Essentials of Managed Health Care (4thEd). Boston: Jones and Bartlett Publishers, Inc.

RECOMMENDED RESOURCES

The course also has a companion WebCT course site that will have several resources available.

COURSE OVERVIEW

Managed health care is a complex and ever evolving set of health care systems that deal with both the finance and delivery of health care in a multitude of settings. This course will provide and overview of the managed care industry. Through lecture, discussion, and activities students will explore the origins of managed care, its mechanisms and effects on the purchaser, provider and patient.

COURSE OBJECTIVES

- 1. Learners will be able to demonstrate through examination a basic knowledge of managed health care, its terms and concepts.
- 2. Learners will be able to demonstrate through written assignments an understanding of managed health care, its terms and concepts.

- 3. Learners will be able to evaluate and synthesize what they learned through the application of a team project in specific areas of managed health care.
- 4. Specific areas of competencies will include the following:
 - a. Differentiate among the various types of managed care plans
 - b. Identify the major advantages/disadvantages of a variety of managed care plans
 - c. Understand key organizational functions of administering managed care programs including contracting, reimbursement systems, utilization review, quality assurance, plan management, case and disease management.
 - d. Understand government sponsored managed health care such as the managed care components of Medicare and Medicaid.

EVALUATION:

Exams: There will be 4 multiple choice/true-false and or short answer exams over the course of the semester. Failing to take an exam will result in no points awarded. If by some extraordinary circumstances a student is unable to take an exam at the time scheduled they should contact via email the instructor (prior to the quiz) to discuss options. Exams cannot be retaken. Each unit exam (1, 2 and 3) is worth 40 points towards your overall score. The final exam will include questions from the first 3 units as well as information from Unit 4. The final exam is worth 80 points.

Open book quizzes and group work: Throughout the course assignments will be given that measure the learner's understanding of the text readings and lecture, including but not limited to terms and concepts. Also included will be discussion questions. There will be 10 assignments given throughout the semester. Each will be worth 20 points.

Group discussions/work: Small and large group discussions on various topics in managed health care will be part of the course routine with points assigned for active participation in the discussion (scheduled at the discretion of the instructor).

Grading Information

%	of Grade	Points
Exams (4 exams)	40%	200 (40 points for exams 80 for the final)
Open book quizzes	40%	200 points (20 points each)
Group Discussions/Work	20%	100 points
Total:	100%	500 points

Points/Grade

500 – 465	A	414 – 400	В-	349 – 335	D+
464 - 450	A-	399 - 385	C+	334 – 315	D
449 – 435	B+	384 - 365	C	314 - 300	D-
434 – 415	В	364 - 350	C-	Below 300	F

COURSE POLICIES

Please refer to the Student Handbook. For further information students can go to

Student Handbook - Ferris State University @

 $\underline{http://www.ferris.edu/htmls/administration/StudentAffairs/Studenthandbook/homepage.html}$

For this course be especially knowledgeable of the following policies:

Section 02: Code of Community Standards Regarding Misconduct:

Part I: Administrative

- A. Academic Misconduct
- B. Personal Misconduct on or off University Property

Participation: It is expected that students will attend every class scheduled. It is also important to be actively engaged in class discussions and group work (as assigned). Refrain from reading any outside material, unnecessary conversations with fellow students and doing work that is not specific to the topic or discussion at hand. If observed not actively engaged and involved in non-related work/activities a warning will be given. If a second warning has to be given then any points that would have been available will be forfeited for that evening (including open book quiz, exams, and extra credit if any and/or any other points made available).

<u>TENTATIVE SCHEDULE</u>: Subject to change if the need is present. I will give notice when schedule needs to be changed. Recommend checking often the course' WebCT for announcements and calendar information.

Unit 1: Managed health care terms and concepts: (8/28-9/22)

• Exam 1: Week of 9/22-Covering lecture/PowerPoint and chapters 1-5 (pp. 1-79)

Unit 2: Managed health care contracts and reimbursement: (9/25-10/20)

• Exam 2: Week of 10/20-Covering lecture/PowerPoint and chapters 6-9 (pp. 85-175).

Unit 3: Managed health care operations and administration: (10/23-11/17)

• Exam 3: Week of 11/17-Covering lecture/PowerPoint and chapters 11 (pp. 197-231), 13-14 (pp. 249-291), 20-21 (pp. 454-459 and 461-506), 29 (643-653)

Unit 4: Government and managed health care (Medicare and Medicaid):

• Final Exam: Finals week- The exam will cover lecture/PowerPoint and chapters 30-31 (pp. 657-699), 35 (786-807) and 36 (810-821). There will also be exam items from units 1, 2 and 3.

Ferris State University
College of Allied Health Sciences
Health Management Department
Course Syllabus – Fall 2006
Section 221

Course Title

HCSA 335 Supervisory Practices for Health Care Workers 4 cr hr (Lecture 3, Lab 2)

Course Description Theory and practice in personnel recruitment, selection, management and utilization in health care facilities. Unique characteristics of professional, technical, skilled and unskilled health care workers will be stressed. Legal responsibilities, collective bargaining, and training are covered. Prerequisite: MGMT 301 or permission of professor.

Course Objectives

At the end of this course, the student shall be able to:

- 1. Conduct and participate in meetings.
- 2. Develop appropriate orientation and training sessions for employees.
- 3. Complete a job analysis and use it to develop a job description and perform a job evaluation for a health care position.
- 4. Demonstrate principles of employee selection through the use of appropriate recruitment and selection techniques.
- 5. Develop productivity standards as a basis for employee evaluation, counseling and job descriptions.
- 6. Demonstrate principles of employee discipline/counseling.
- 7. Develop policies and procedures.
- 8. Identify pertinent legislation that defines organizational and supervisory behavior
- 9. Select leadership style appropriate for work place situation/circumstances.
- 10. Recognize and implement appropriate motivational techniques for employees.
- 11. Appropriately delegate functions to empower employees.
- 12. Describe techniques to successfully negotiate solutions to work place problems.
- 13. Acknowledge diversity of employees and customers within the work place and recognize its value.
- 14. Describe the role of the supervisor in dealing with employees who are members of the bargaining unit.
- 15. Implement management techniques that are effective in supervising the health care employee.
- 16. Demonstrate appropriate written communication skills through the development of a training plan, policy, meeting minutes, etc.
- 17. Demonstrate appropriate oral communication skills and presentation skills by conducting a training session.
- 18. Demonstrate interpersonal skills through teamwork.

Instructor

Michael Stowe, MA

Office: VFS 304A

Office phone – (231) 591-3111 E-mail: stowem1@ferris.edu

Office hours: M 5:30p-6:30p, TW 1:45--3:45, Th. 11a-12p F 9a-10:30a For an appointment outside of these times, please call or email me to

arrange an appointment.

Course Schedule Lecture: Tuesday and Thursday 5:00p-6:15p and Thursday 6:30p-8:20p

Required materials:

Umiker, William, Management Skills for the New Health Care Supervisor.

Fourth Edition. Aspen Publishers, 2006

Wendover, Robert, Smart Hiring, The Next Level, Source Books Inc.

Course Packet

Three ring binder

Evaluation Uniform Health Management Department grading scale will be used.

A 93-100 B- 80-82 D+ 67-69 A- 90-92 C+ 77-79 D 63-66 B+ 87-89 C 73-76 D- 60-62 B 83-86 C- 70-72 F Below 60

Grade determination

Assignments/Projects/Tests/Final 90% Attendance/Participation 10%

Course Policies

See the Student Handbook Health Management Department for policy regarding the

following:

Assignments

Class Attendance

Disruptive student behavior

Honesty Harassment

Attendance Policy

When absent from class, the student is responsible for all the information covered during that session including contacting the instructor regarding materials and assignments handed out in class. An Absence Report will be filed with the Dean's Office when a student has an extended absence during which the instructor has not received any contact from the student. The in-class points for project and attendance may not be made up.

Assignments

All assignments are to be submitted on the date given in class. Assignments are due at the start of class. Failure to submit assignments on time or before the due date will result in an automatic deduction of points for each day that the assignment is late.

Tentative Class Schedule (Course schedule may be adjusted to accommodate class size)

Week 1 Introduction, Meetings, In-service Training, Week 2 In-service Training, Orientation Productivity Standards Job Analysis Job Description, Job Ad Week 3 Job Evaluation, Recruitment & Week 4 Interviewing, Hiring Week 5 Week 6 Performance Appraisals Policies & Procedures Week 7 Discipline, Counseling, Grievances Week 8 Week 9-14 Training Sessions, Student Presentations Unions Week 15 Week 16 Final

Unit Objectives At the end of this course, the student shall be able to -

Training -

Identify training/in-service needs.

Discuss the importance of measurable standards of performance when preparing training/in-service objectives.

Write objectives for a training presentation.

Contrast modes of training including lecture, laboratory exercise, audiovisual methods, computer simulations, discussion, group learning, etc.

Identify characteristics of the adult learner.

Design a plan for training sessions.

Design an assessment tool to evaluate learning as appropriate to the training session.

Prepare and present a training session, including a plan, objectives, and evaluation mechanisms.

Job Analysis -

Describe the contents of a job analysis.

State the purpose of a job analysis.

Complete a job analysis for a health care position.

Utilize a job analysis to create a job description.

Utilize a job analysis to conduct a job evaluation.

Job Description –

Describe the contents of a job description.

State the purpose of a job description.

List managerial uses of a job description.

Write a job description utilizing a job analysis.

Job/Performance Evaluation -

Describe the purpose of a job evaluation.

Perform a job evaluation utilizing a job analysis.

Meetings -

Write a memo to organize a meeting.

Organize a meeting through preparation of an agenda.

Use elementary parliamentary procedure.

Conduct meetings and participate in meetings.

Describe types of meetings and identify examples of these types of meetings in a health care setting.

Record meeting minutes.

Recruitment/Selection -

Identify appropriate recruitment sources.

Write an ad for a health care position.

Plan and prepare appropriate questions for an interview.

Conduct an interview for a health care position.

Compile and analyze interview information in order to make a selection.

Plan appropriate orientation for a new employee.

Policy/Procedure -

Define policy, procedure and rule.

State the purpose of policies, procedures and rules.

Describe the contents and format of a policy.

Write and/or revise a health care organization policy.

Describe the contents and format of a procedure.

Write and/or revise a health care organization procedure.

Productivity/Performance Appraisal -

Develop productivity standards based upon work measurement and job description criteria.

Conduct an employee performance appraisal utilizing performance standards.

Counsel an employee in developing an improvement plan based upon employee performance.

Discipline -

Describe the role of the supervisor in the discipline process.

Define due process and just cause in regard to discipline.

Complete a discipline form.

Conduct a disciplinary session.

Counseling -

Describe the first line supervisor's role in counseling.

Explain how the Employee Assistance Program provides support for the supervisor.

Grievances -

Define grievances in the workplace.

Describe a grievance process.

Describe the role of the supervisor in the grievance process.

Human Resource Department -

Describe how the Human Resource Department supports the departmental managers/supervisors.

Describe the basic functions of the Human Resource Department. Identify how the Human Resource Department fits in the "chain of command."

Supervisory practices -

Identify elements of the health care industry that may impact choice of supervisory techniques and leadership style.

Describe the impact of the changing health care delivery environment on employee motivation

Identify various leadership styles.

Describe how to select the most effective leadership style for the circumstance.

Describe various factors which motivate employees.

Describe how to delegate functions to empower employees.

Identify reasons managers fail to delegate.

Describe various forms of negotiation.

Describe how to prepare for negotiation and how to carry out the major steps in negotiation.

Identify and acknowledge diversity in the work place.

Describe the value of a diverse work force.

Equal Opportunity/Wage & Hour laws -

Describe major equal employment opportunity and affirmative action legislation which define fair employment standards.

Describe wage/hour laws as they pertain to the health care industry.

Labor law -

Describe the major legislation that resulted in labor unions.

Explain the reasons that employees unionize.

Explain why health care organizations are target opportunities for union organizing. Describe the typical union organizing approach.

Define the supervisor's role during a union organizing campaign.

Describe the rights of employees and employers during a strike.

Ferris State University College of Allied Health Sciences Health Care Systems Administration Course Syllabus – Fall 2006

Course title

HCSA 401

Financial Concepts in Health Care 4 cr hr

(Lecture 3, Lab 2)

Course description

Theory & practice in financial interactions between payers, consumers, & providers of health care, both public and private. Orientation to financial management issues including analysis of financial information. Emphasis on formulation of budgets, analysis of accounting reports and their use in the health care industry.

Faculty

Marcy Parry, MS, MAcct, CPA

VFS 332

200 Ferris Drive, Big Rapids, MI 44907

231-591-2273

Toll free phone

1-800-GOBULLDOGS (Business hours) or

1-800-592-6499

email via WebCT

Office hours

Wednesday 11 - 11:50 AM

12 - 12:50 PM

2 - 2:50 PM

Friday

1 - 1:50 PM

Course schedule

Monday -

10 - 10:50 AM

Wednesday 10 - 10:50 AM

Friday

10 AM - 12:50 PM

Required materials

- 1. Health Care Finance: Basic Tools for Nonfinancial Managers, 2nd edition, Baker, Judith & Baker, R.W., Aspen, 2006, ISBN 0-7637-2660-5
- 2. Course materials "Thinking about Healthcare Finance", 3rd edition, Parry 2006
- 3. An 8 ½" by 11" notebook, college or wide ruled, maximum 100 pages
- 4. A minimum of 3 health care annual reports, (available free from PRARS.com)

On reserve in FLITE:

- Health Care Finance: Basic Tools for Nonfinancial Managers, 2nd edition
- Professional journals

Available

Author resources: http://www.aspenpublishers.com/books/hcfinance.html Includes: PowerPoint slides, web links (minimal), student exercises & tools (primarily sources for financial information, e.g., Wall Street Journal)

COURSE OBJECTIVES

- 1. Discuss the impact of payers, payer mix & case mix in the health care arena.
- 2. Discuss reimbursement methods & impacts in myriad health care settings.
- 3. Discuss & utilize tools to analyze & manage A/R.
- 4. Discuss the unique properties of compensation in health care & project compensation expense.
- 5. Discuss & demonstrate how to manage both payroll & non-payroll expense.
- 6. Discuss the role of the Finance Department & the services it should offer.
- 7. Read & interpret annual reports & common financial reports in health care.
- 8. Utilize financial analysis tools: financial & operating ratios, horizontal & vertical analysis.
- 9. Discuss sources of capital financing.
- 10. Demonstrate Excel proficiency through a series of exercises.

Unit objectives (At the course's conclusion, the student will be able to:)

Unit: Background/foundation/context

- 1. Identify and discuss key factors leading to rising health care costs.
- 2. Identify and discuss key approaches to controlling health care costs.
- 3. Identify and discuss key ethical issues we face when we try to control costs.
- 4. Discuss the role of the Finance Department in HCOs.

Unit: Financial statements

- 1. Identify & read the basic financial statements.
- 2. Discuss the accounting basis for preparing the financial statements.
- 3. Discuss the role of footnotes.

Unit: Financial analysis

- 1. Analyze and explain financial statements using horizontal analysis and vertica (common size) analysis.
- 2. Compute and explain results of key financial ratios.
- 3. Compute and explain key operating ratios and related benchmarks.

Unit: Cost information

- 1. Define & identify fixed & variable costs.
- 2. Compute & explain contribution margin.
- 3. Compute and explain breakeven.
- 4. Discuss the role of breakeven in decision-making.

Unit: Budgeting

- 1. Discuss the purposes of budgeting.
- 2. Describe how budgeting fits into the planning/control cycle.
- 3. Explain the roles of the major budgets & how they relate to each other.
- 4. Construct fully documented volume & operating budgets in Excel.
- 5. Describe the purpose of variance analysis.
- 6. Compute & explain variances.

Same text 0003

COLLEGE OF ALLIED HEALTH SCIENCES HEALTH MANAGEMENT DEPARTMENT COURSE SYLLABUS - WINTER 2006

COURSE TITLE

HCSA 433 Quality Improvement In Health Care

3 CREDITS [2+2]

COURSE OBJECTIVES:	. 1	Demonstrate knowledge and skills regarding continuous quality improvement in the health care system: theory implementation, and applications.
	¥ 2	List the differences between quality assurance and quality improvement.
	₹ 3	Describe the external and internal pressures in today's health care environment and their impact on quality improvement programs.
	4 4	Discuss the purpose of quality improvement activities.
	√ 5	Describe the JCAHO Ten Step process and PDCA.
	№ 6	Discuss the history of quality improvement in the U.S.
	A 7	Discuss the purpose of utilization management.
	r 8	Identify the procedures which comprise the utilization review process.
	№ 9	Identify critical pathways.
	10	Discuss the role of federal, accrediting and licensing agencies in quality improvement programs (NCQA, JCAHO, HEDIS, URAC).
	A 11	State the purposes of, and charges to, peer review organizations.
	12 /	Recognize the importance of data quality and illustrate the importance of fusing data to drive quality improvement activities.
	. 13	Discuss the legal and confidentiality issues related to the

quality improvement components.

Practice team building techniques.

Design data retrieval forms.

Apply quality improvement techniques and tools.

Apply data retrieval techniques and calculations.

16

v 17

18 Assign DRGs.

- 19 Evaluate data quality linkage with reimbursement.
- 20 Discuss case mix management, managed care and case management.
 - Discuss billing forms: UB92, HCFA 1500, Claim Adjustment, Inquiry, Remittance Advice, Explanation of Benefits, Electronic Claim Processing.
 - Define PAR/NonPAR, RBRVS, UCR, Fee Schedules, APCs, \(\chi^{\text{t}}\)
 ASC's, Blended Rates, Contractuals.
 - 23 Discuss various fraudulent and abuse activities.
 - 24 Discuss content and importance of a compliance program.
 - Interpret the meaning of the JCAHO standards 'Improving Organization Performance.'
 - Develop a philosophy that consumer satisfaction is the hallmark of excellence.
 - 27 Conduct an interview with a healthcare provider.

COURSE DESCRIPTION

Quality and reimbursement issues as they impact the health care setting. Students will gain an understanding of and experience in applying the JCAHO quality standards. Introduction to reimbursement issues including assignment of appropriate codes, case mix and utilization management.

Prerequisites: CCHS 101, MGMT 301

INSTRUCTOR

OFFICE HOURS

1

COURSE SCHEDULE

TUESDAY

5:00 - 6:50 P

THURSDAY

5:00 - 6:50 P

Same fert as 03

Same plats

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COLLEGE OF ALLIED HEALTH SCIENCES HEALTH MANAGEMENT DEPARTMENT COURSE SYLLABUS - WINTER 2006

COURSE TITLE

1

13

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16

N 17

HCSA 433 Quality Improvement In Health Care

Demonstrate knowledge and skills regarding continuous

Discuss the legal and confidentiality issues related to the

3 CREDITS [2+2]

COURSE OBJECTIVES:		quality improvement in the health care system: theory, implementation, and applications.
	¥ 2	List the differences between quality assurance and quality improvement.
	∜ 3	Describe the external and internal pressures in today's health care environment and their impact on quality improvement programs.
	¥ 4	Discuss the purpose of quality improvement activities.
	_√ 5	Describe the JCAHO Ten Step process and PDCA.
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INSTRUCTOR

OFFICE HOURS

COURSE SCHEDULE

TUESDAY

5:00 - 6:50 P

THURSDAY

5:00 - 6:50 P

RECUITRED	MATERIALS
KEUUIKED	MAILALD

Course Packet

- Handouts
- GOAL/QPC, <u>The Memory Jogger</u>
- CodeMaster Plus

EVALUATION

93-100	Α	87-89	B+	77-79	C+	67-69	D+	4 60	F
90-92	A-	83-86	В	73-76	С	63-66	D		
		80-82	B-	70-72	C-	60-62	D-		

GRADE DETERMINATION

		POINTS	RECORD YOUR POINTS
•	Assignments	20	
•	Projects	10	
•	Journal Article Reviews	4	
•	Interview	3	
•	Tests	35	
•	Quizzes	20	
•	Course Notebook	2	
•	Final Examination	5	
•	Class Participation [Attendance]	1	
	TOTAL POINTS	100	

POLICIES

• DISRUPTIVE STUDENT BEHAVIOR

Acts of obstruction or disruption that disturb classroom activities are not allowed..

<u>Classroom Chitchat</u>: Demonstrate respect for others, inappropriate conversation when someone else is speaking is disruptive to the entire class.

• ACADEMIC DISHONESTY

Cheating and plagiarism is considered unethical and unprofessional. Please refer to the Student Handbook.

• SEXUAL HARASSMENT

Ferris is committed to maintaining an educational and working environment free of conduct that degrades or oppresses individuals, including conduct that sexually humiliates individuals.

ATTENDANCE/LATENESS

Attend each class. Students who arrive late disturb the class.

• ASSIGNMENTS

All assignments and projects are to be handed in on the DUE DATE. Five (5) points will be deducted for each day (Monday-Friday) late that the material is received. After five days the assignment is not accepted and a "0" grade is recorded. Or if assignment has been returned to the rest of the class, your assignment will not be accepted.

TESTS

All tests will be announced at least one week before the test. Mandatory attendance is required. If you are ill or an emergency occurs, please notify the instructor before class; a voice mail e-mail message is acceptable. A missed test due to illness will require supporting documentation.

Emergency - a sudden, generally unexpected occurrence or set of circumstances demanding immediate action

QUIZZES

All quizzes are unannounced and cannot be made up.

CLASS PARTICIPATION

Active participation is necessary to learn to apply, analyze, synthesize, and problem solve. Team and group activities require action of each person.

Performance Scale of Class Participation

- participates or gets involved in all discussions and group activities
- attempts to answer all questions given to the class or group
- ask questions and is involved in group activities
- expresses herself or himself every once in awhile
- does not offer information in class and does not participate

RED PEN

<u>Do not use</u> a red pen on any course assignment! The assignment will not be accepted.

UNIT 1 - DATA RETRIEVAL

- 1. Define the components of a criterion.
- 2. Describe the different categories of criteria
- 3. List the rules for applying the standards to the criteria
- 4. Define if the element is present or absent in the record to meet the standard
- 5. Define what a variation/variance is in data retrieval
- 6. Define what a deficiency is in data retrieval
- 7. Calculate compliance with the criterion
- 8. Calculate noncompliance with 100% criteria
- 9. Calculate noncompliance with 0% criteria
- 10. Calculate the adjusted number of records
- 11. Calculate the incidence of a criterion
- 12. Calculate compliance with critical management
- 13. Describe a chart audit
- 14. Retrieve data from the State of Michigan Department of Community Health web-site
- 15. Complete a variety of data retrieval forms
- 16. Define quality
- 17. Display data in a useable format

UNIT 2 - QUALITY IMPROVEMENT

- 1. Define continuous quality improvement
- 2. Describe the role of JCAHO, NCQA, URAC in health care quality improvement
- 3. Describe the use of HEDIS
- 4. Describe the JCAHO Ten Step Process
- 5. Describe the PDCA process (FOCUS PDCA)
- 6. Describe the ISO 9000 process
- 7. Complete a scatter diagram using Excel
- 8. Complete a pareto chart using Excel

- 9. Complete a run chart using Excel
- 10. Complete a flowchart and a cause and effect chart using VISIO.
- 11. Describe the purpose and use of the following; scatter diagram, pareto chart, run chart, control charts, flowchart, cause and effect diagram, brainstorming, checksheets, histogram, and nominal group techniques.
- 12. Discuss the purpose of continuous quality improvement tools and techniques.
- 13. Apply team building techniques.
- 14. Define the purpose of surveys.
- 15. Analyze data.
- 16. Define sentinel event.
- 17. Define root cause analysis.
- 18. Define 'structure + process = outcome.'
- 19. Define what an indicator is and types of indicators.
- 20. Define thresholds for indicators.
- 21. List the purpose of storyboards and minutes of meetings.
- 22. List the purpose of a Gantt chart.
- 23. List the purpose of ORYX.
- 24. Describe the organizational structure for quality/performance improvement.
- 25. Define benchmarking.
- 26. Describe what critical/clinical pathways are used for.
- 27. Describe the JCAHO Improving Organizational Performance standards.
- 28. Define a 'cross functional team.'

UNIT 3 - UTILIZATION MANAGEMENT

- 1. Define utilization management.
- 2. Describe the role of the utilization coordinator/case manager.
- 3. Define intensity of service (IS) and severity of illness (SI).
- 4. Define generic criteria for SI/IS.

- 5. Describe the UR process.
- 6. Apply the IS/SI criteria to an inpatient for admission review.
- 7. Certify charts for LOS.
- 8. Define MPRO's role in UR.
- 9. Complete a web-site search of MPRO.
- 10. List the steps in the utilization review process.
- 11. Define 'termination of benefits.'

UNIT 4 - DIAGNOSIS RELATED GROUPS

- 1. Define DRG and MDC.
- 2. Discuss the role of CMS in DRGs.
- 3. Define and apply principal diagnosis, secondary diagnoses, principal procedure and secondary procedures.
- 4. Describe the importance of CCs (comorbidities and complications).
- 5. Define a grouper.
- 6. Describe decision trees.
- 7. Describe medical and surgical partitioning.
- 8. Describe surgical hierarchy.
- 9. Describe the importance of ICD-9-CM codes.
- 10. Assign MDC and DRG to case studies.
- 11. Discuss fraud and abuse.
- 12. Describe case mix.
- 13. Discuss relative weight.
- 14. Discuss LOS vs. G/LOS.
- 15. Discuss the importance of discharge planning.
- 16. Describe the importance of **accurate** and **complete** record documentation.
- 17. Distinguish between indemnity insurance, Medicare's prospective payment system, and managed care.

<u>UNIT 5 - JCAHO 'IMPROVING ORGANIZATION</u> PERFORMANCE'

1. Team project with presentation of assigned standards

TENTATIVE SCHEDULE

ORDER OF COURSE CONTENT

UNIT 1

- 1. Orientation to quality assurance/improvement
- 2. Data Retrieval
- 3. Data Display
- 4. Data Interpretation
- 5. Data Integrity

UNIT 2

- 1. Quality Improvement
- 2. CQI/TQM Tools and Techniques
- 3. JCAHO Ten Step Process and PDCA
- 4. Regulatory Agencies
- 5. Team Building Skills

UNIT 3

- 1. Utilization Management
- 2. Peer Review Organizations

UNIT 4

1. DRGs

UNIT 5

1. JCAHO Team Project

GENERAL INFORMATION

- 1. Assignments and projects will correspond with the above content.
- 2. Three to 4 tests.
- 3. Several quizzes unannounced.
- 4. Special projects; record due dates on your planning calendar.
- 5. Final Examination comprehensive

JOURNAL ARTICLE REVIEWS

4 POINTS

1. Prepare a $1 - 1\frac{1}{2}$ page typewritten summary of a journal article on each of the following:

*	Continuous quality improvement	Due:	1 Point
*	JCAHO or accrediting/licensing agencies	Due:	1 Point
*	Diagnosis related groups	Due:	1 Point
*	Current health care issue	Due:	1 Point

- 2. Write a summary of the article. Summary must include:
 - 2.1. What does the article say to you?
 - 2.2. How will it impact practice?
 - 2.3. How will it impact you?
 - 2.4. Your reaction to the article.
- 3. Attach a stapled copy of the article to the typewritten summary. The instructor will retain the copy; the summary will be returned.
- 4. Evaluation:

1.

ARTICLE RECENT (20)	02 OR LATER) .25	•	SUMMARY COMPLETE	.25
AND RELATES TO COL	ING.			
GRAMMAR AND SPELL	ING .25	•	YOUR REACTION	.25

Susan Adams HCSA 433 Journal Review Jan. 31, 2006

Smith, Susan J. "DRGs And Reimbursement". Journal of the American Health Information Management Association. 60/1 (Sept, 2005), 25-27. <u>Summary</u>

Reaction

My reaction to this article was

2. INTERVIEW DUE -

3 POINTS

- INTERVIEW a health care manager in any type of health care setting.
 - 1.1. You will be responsible for making an appointment to conduct the interview.
 - 1.2. A list of suggested questions is included.
- 2. Your interview must be done in person, this semester, and before the above due date. Phone interviews will not be accepted.
- 3. Submit a typed report of the results of your interview and be prepared to discuss your findings with the class. Type your question first and then on a new line type the response [answer] of the person you interviewed. Number each question. At the end of your report include a summary of your reaction [positive and negative] to the interview and findings.
- 4. You may want to consider asking for an organizational chart of the facility, job description, sample of departmental policies, etc.
- 5. Please have the interviewee sign the attached interview validation sheet and attach it to your report. Your report will not be accepted without this signed validation.
- 6. Enjoy the interview, it is an excellent opportunity for you to gather information from the 'real world' and it may be useful to you when looking for the 'right' job or internship.
- 7. Use the following **format** as the heading of your interview report:

Name of Facility	Address	Dhana #	
Person Interviewed Date of Interview	Type of	Phone # Service[s]	

8. The following questions serve as suggestions, you may add or delete, however your report must contain sufficient [at least 30] and comprehensive job related questions.

Avoid asking questions that only require a 'yes' or 'no' response. If this happens, follow-up with 'why.'

Suggested questions:

- 1. Title?
- 2. Are you licensed, credentialed, certified, etc.?
- 3. How long in this position?
- 4. How long employed in this facility?
- 5. Education?
- 6. What was the value of your education?

- 7. Experience
- 8. Why have you moved?
- 9. Why have you stayed?
- 10. Describe your job satisfaction or dissatisfaction?
- 11. Why did you choose this career?
- 12. Would you choose the same job again?
- 13. What are your opportunities for promotion?
- 14. How do you feel about health care reform and do you think it will ever happen?
- 15. What are the major concerns/issues related to your job responsibilities?
- 16. What is your work schedule? Is flex time available?
- 17. How are you treated by your employer/supervisor?
- 18. How did you get your current position?
- 19. What would you add to the education classes based on your experience?
- 20. Would you hire a new graduate-----why or why not?
- 21. What should a new grad do to get that first position?
- 22. Describe the training program for new employees.
- 23. Advantages and disadvantages of your job?
- 24. Is continuing education required or encouraged? Are seminars paid by your employer?
- 25. Do you get tuition reimbursement?
- 26. Do you have TQM in your facility? Do you work in teams?
- 27. How are you evaluated?
- 28. Do you have productivity standards?
- 29. What are some of the employee benefits?
 - health care
 - fitness programs
 - child care services available; what if your child is sick
 - how is vacation time or time off acquired
 - retirement
 - flex time
- 30. Do you have a job description? [You might ask for a copy.]
- 31. What is the job market for this profession?
- 32. Do you know other department personnel that work different shifts?
- 33. What happens when you make a mistake [error]?
- 34. Who do you report to? Do you have an organizational chart?
- 35. Is there a union? Advantages and disadvantages.
- 36. What do you know about other departments in the facility?

- 37. Who are your customers?
- 38. What are your short and long term goals? Where do you see yourself in 10 years?
- 39. Salary range ---- starting and current?
- 40. Other responsibilities?
- 41. Ask any other questions that you may have.
- 42.Include a summary of your reaction [positive and negative] to the interview and findings.

HCSA 433

HEALTH CARE MANAGER INTERVIEW VALIDATION

Student's Name:			
Date & Time of Interview:		·	
Person Interviewed:			
Name of Facility:		·	
I was interviewed by the a	above Ferris State	University stu	ıdent
This interview was con-	ducted in person.	YES NO	
Si	gnature		
	Title		
The second secon	Date		

3. COURSE NOTEBOOK DUE - 2 POINTS

- 1 Maintain a three ring notebook (2-3") of the contents of this class.
- The "Notebook" will be evaluated by the professor date to be announced by the professor.
- 3 Notebook Requirements:
 - 3.1 Notebook labeled.
 - 3.2 Title page, yours not mine.
 - 3.3 Table of Contents, SPECIFIC not broad. Labeled tabs. Your table and tabs must allow me to quickly locate notebook contents. The table must be typed.
 - 3.4 Course syllabus, course outline, notes, handouts, assignments, and projects-everything.
 - 3.5 Appropriately organized for easy reference, neatly arranged and well assembled.

MY HCSA 433 PLAN

THE	LETTER GRADE I E	EXPECT TO RECEIVE:	
In H	ICSA 433, I wa	ant to learn:	
1.			
2.			
3.			
-			·
I WII	LL do the following	g to receive the above grade.	
1.			
2.	The second secon		
3.			
4.		·	
5. 6.		·	
7. —			
8.			
9.			
		·	
	DATE	YOUR SIGNATURE	

STUDENT INFORMATION HCSA 433

Please complete this sheet and return to the instructor.

NA	ME		DATE				
PHONE #: E-MAIL							
	□ Other Curriculum + HCSA? [i.e. Nuc Med.]						
	If you currently work in a healthcare setting, what do you do?						
	ABOUT ME:						
	cademic <u>strong points</u>	Academic <u>weak</u>	<u>points</u>				
	Prior health care experience						
<u> </u>	Three words that describe me as a:						
stu	<u>person</u>						
	What I love most about learning						
	My self-discipline to learning (circle) low 1 2 3 4 5 6 7 8 9 10 high						
	Priorities that impact my time						
	I want you to know this – to help me succe speaking, test taking skills, medical issues,						

Thank you.

FERRIS STATE UNIVERSITY

COLLEGE OF ALLIED HEALTH SCIENCES

Department of Clinical Laboratory Sciences, Respiratory Care and

Health Administration Programs

HCSA460 - Long Term Care Concepts Fall 2006

INSTRUCTOR

Mark Fabbri MSE MSA NHA

Assistant Professor Office: VFS 415

Office phone: (231) 591-2237

E-Mail: fabbrim@ferris.edu (email through WebCT)

Office hours: M: 11-12N, & 1-2PM, T: 1:30-2:30PM, W: 11-12N, F: 11-

12N & 1-2PM

COURSE SCHEDULE

Lecture: W & F: 2-2:50PM: VFS 419

Lab:

Th: 1:30-3:20PM: VFS 419

REQUIRED TEXT

Pratt, J. R. (2004). Long-term care: Managing across the continuum (2cd Ed). Boston: Jones and Bartlett Publishers, Inc.

RECOMMENDED RESOURCES

American Psychological Association (APA) (2001). Publication manual (5th Ed.). Washington DC: Author.

COURSE OVERVIEW

This course is designed to provide an introduction to long-term care. Long-term care is term used to identify a wide range of services that meet the medical and psychosocial needs of very diverse groups. Those groups include but are not limited to persons needing assistance in daily functions, persons with chronic illness including dementia causing diseases, mental retardation, mental illness and other debilitating diseases such as acquired immune deficiency (AIDS). This class will examine several aspects of long-term care within the context of a continuum of services provided in a variety of settings. The leaner will also gain exposure to administrative responsibilities, management, community activities, public relations, ethical practices, support services available, and state and federal requirements in long term care.

COURSE OBJECTIVES

Learners will be able to demonstrate through examination a basic knowledge of long-term care terms and concepts.

Points/Grade

500 – 465	A	414 – 400	B-	349 – 335	D+
464 – 450	A-	399 – 385	C+	334 – 315	D
449 – 435	B+	384 – 365	С	314 – 300	D-
434 – 415	В	364 - 350	C-	Below 300	F

COURSE POLICIES

Please refer to the Student Handbook. For further information students can go to

Student Handbook - Ferris State University @

http://www.ferris.edu/htmls/administration/StudentAffairs/Studenthandbook/homepage.html

For this course be especially knowledgeable of the following policies:

Section 02: Code of Community Standards Regarding Misconduct:

- Part I: Administrative
 - A. Academic Misconduct
 - B. Personal Misconduct on or off University Property

Participation: It is expected that students will attend every class scheduled. It is also important to be actively engaged in class discussions and group work (as assigned). Refrain from reading any outside material, unnecessary conversations with fellow students and doing work that is not specific to the topic or discussion at hand. If observed not actively engaged and involved in non-related work/activities a warning will be given. If a second warning has to be given then any points that would have been available will be forfeited for that evening (including open book quiz, exams, and extra credit if any and/or any other points made available).

TENTATIVE SCHEDULE: Subject to change if the need is present. I will give notice when schedule needs to be changed. All assignments will be submitted via the course WebCT email as an attached Word or Rtf document. Check often WebCT for announcements and calendar postings. WebCT will be used for this course as a supplemental source for information.

Unit 1: Understanding who we serve: (8/28-9/22)

• Quiz 1: Week of 9/22-Covering lecture/PowerPoint and chapters 1, 2 and 3.

Unit 2: Types of service providers: (9/25-10/20)

• Quiz 2: Week of 10/20-Covering lecture/PowerPoint and chapters 3(review), 4,5,6,7, and 8.

Unit 3: The continuum of care, ethics and regulatory compliance: (10/23-11/17)

• Quiz 4: Week of 11/17-Covering lecture/PowerPoint and chapters 9, 10, 11, 12 and 13.

Unit 4: Long-term care administration: (11/20-12/8)

• Final Exam (Finals week): Covering lecture/PowerPoint and chapters 14, 15, 16, 17 and 18 as well as items from Units 1, 2 and 3.

Ferris State University College of Allied Health Siciemces Health Care Systems Administration Course Syllabus – Fall 2006

Course Title

HCSA 474

Strategy & Planning - Health Care 4 cr. hr

(Lecture 3 Lab 2)

Course Description

An introduction to the techniques involved in the strategic planning process. The course consists of two segments: the actual simulation of a planning problem and an examination of the relevant literature addressing the planning process. This course is designed to be the final course in the program sequence.

Faculty

Marcy Parry, MS., CPA Associate Professor

Office

VFS 332

Office hours

Wednesday 11-11::50 AM

2 - 2 = 50 PM

3 -- 3:450 PM

Friday

1 -- 1:50 PM

Office phone

1-231-591-2273

Toll free phone

1-800-GOBULLDOCGS (Buisliness hours) or

1-800-592-6499

E-Mail

Use WebCT for contact

Mailing address

200 Ferris Drive, FSIU, Bla Rapids, MI 49307

Course schedule

Monday, Wednesday

3:000 - 4:15 PM

Monday

4:30 - 6:20 PM

Required materials

Book

Planning, Program Dieviellopment, and Evaluation

Timmreck, Jones & Bartlett, 2003

ISBN: 0-7637-00622-2

Course pack

Planning Concepts in Healthcare, 3rd edition, Parry

Course Objectives

At the conclusion of the course, the student will be able to:

1 Strategic planning

- 1. Describe the strategic planning process.
- 2. Assess value, vision & mission for a health care organization.
- 3. Interpret a situational analysis using the SWOT technique.
- 4. Identify critical issues resulting from a SWOT analysis.
- 5. Draft goals & objectives pertinent to critical issues.
- 6. Explain the purpose of & interactions with a marketing department within the HCO.
- 7. Discuss how a coordinated HCO information system relates to strategic planning.

II Planning and promotion

- 1. Construct & utilize a Gantt chart.
- 2. Explain the relationship between a Gantt chart & PERT diagram.
- 3. Distinguish among business, disaster, project, marketing, systems & strategic planning.
- 4. Compare time management techniques.
- 5. Design a floor plan to support an intended purpose.
- 6. Utilize Excel to support planning documentation.
- 7. Utilize Visio to prepare graphical support for planning documents.
- 8. Utilize creativity within the planning process & discuss its value in succeeding professionally.
- 9. Implement a planning model for health promotion.
- 10. Demonstrate critical thinking in assessment & discussions.
- 11. Demonstrate professional work behaviors.

II Materials management & purchasing

- 1. Examine the relationship of a materials management department to other departments in an HCO.
- 2. Discuss the purpose & methods of group purchasing options.
- 3. Discuss primary tools in inventory management.
- 4. Discuss the decision process related to capital budgeting.
- 5. Prepare an RFB/Q.
- 6. Evaluate responses to an RFB/Q.
- 7. Evaluate & recommend vendors.
- 8. Prepare a capital budget request with supporting justification.
- 9. Discuss the relationship of capital budgeting & CON requirements.

Survey Instruments



FERRIS STATE UNIVERSITY COLLEGE OF ALLIED HEALTH SCIENCES

November 13, 2006

Dear Ferris State University Alumni,

Once every five years, Ferris State University reviews each program to evaluate its effectiveness. This year Health Care Systems Administration is conducting such an assessment. Alumni surveys are the most valuable tool to assess our program. Please complete the attached survey and mail it in the self addressed stamped envelope provided.

Sincerely,

Marilyn Skrocki

Health Care Systems Administration

Program Coordinator/Assistant Professor

enclosure

Perris Drive Rapids, MI 49307-2740

Phone: (231) 591-2270 or 1800-462-8553 **Web:** www.ferris.edu

Ferris State University Health Care Systems Administration Program Graduate Survey

As an annual part of our program review and improvement efforts, we send surveys to our graduates and their employers. Please take a few minutes to complete the survey and return it in the enclosed self-addressed stamped envelope. We sincerely appreciate your time and input.

Directions: Please select only one option for each question unless the question specifically states that you may select more than one choice.

Q1	In what year did you graduate? 2000 2001 2002 2003 2004	Q4	How long have you been employed in your present position? Less than 1 year 1-3 years 3-4 years More than 4 years
	2005	Q5	What is your current employment status?
Q2	Which of the following professional membership(s) (state and/or national) do you maintain? (Please select all that apply.) American College of Healthcare Executives Healthcare Financial Management Association Health Care Compliance Association American College of Healthcare Administrators Other	Q6	Not currently employed, not seeking employment (Please skip to Q8) Not currently employed, seeking employment (Please skip to Q7) Temporary/Flex/Contracting Part-time Full-time What is your current salary range?
	Please Specify:		Less than \$25,000 \$25,001-40,000 \$40,001-55,000 \$55,001-75,000
Q3	Which of the following job classifications/areas have you worked in since graduation? (Please		More than \$75,000
	select all that apply.) Manager/Supervisor of a Clinical Area		
	Human Resources Management	Q7	If you were seeking employment, how long did it take to secure a desired position?
	Quality/Compliance/Risk Management		Less than 6 months
	Non-hospital Management (physician's office practice, vendor, contracting) Other Please Specify:		6-9 months 9-12 months More than 12 months

Q13 If you have not continued your education, do you plan to do so within the next five years? Yes No Undecided	Q14 Please use this space to make any additional comments/suggestions which you believe would help us to evaluate and improve the Health Care Systems Administration program.
--	---

Thank you for your time and participation.

HCSA APR Graduate Survey...Skrocki

Frequencies

Prepared by: Institutional Research & Testing, 01/07

Statistics

		N			
	Valid	Missing	Mean	Median	Std. Deviation
Year graduated	23	0	3.57	4.00	2.107
Profes'l Memberships: ACHE	1	22	1.00	1.00	
Profes'l Memberships: HFMA	2	21	1.00	1.00	.000
Profes'l Memberships: HCCA	0	23			
Profes'l Memberships: ACHA	1	22	1.00	1.00	
Profes'l Memberships: Other	11	12	1.00	1.00	.000
Profes'l Memberships: Other specified	23	0			
Jobs: Mgr/Supervisor Clinical Area	4	19	1.00	1.00	.000
Jobs: Human Resource Mgmt	3	20	1.00	1.00	.000
Jobs: Quality/Compliance/Risk Mgmt	0	23			
Jobs: Non-hospital Mgmt	3	20	1.00	1.00	.000
Jobs: Other	13	10	1.00	1.00	.000
Jobs: Other specified	23	0			
How long employed present position	21	2	2.00	2.00	.949
Current employment status	22	1	4.68	5.00	1.041
Current salary range	21	2	2.86	3.00	.964
How long to secure desired position	16	7	1.38	1.00	1.025
Prepared: Common Software Pkgs	23	0	4.00	4.00	.739
Prepared: Query/Generate Reports	23	0	3.17	3.00	1.072
Prepared: Knowledge Regulatory Agencies	22	1	3.73	4.00	.935
Prepared: Payment & Reimbursement	23	0	3.26	3.00	1.137
Prepared: Basic Mgmt/Supervision Principles	22	1	3.68	4.00	1.211
Prepared: HRM-Staff Orientation	22	I	3.64	4.00	1.217
Prepared: HRM-Performance/Discipline	22	I	3.41	4.00	1.368
Prepared: Plan & Conduct Meetings	22	I	3.91	4.00	1.109
Prepared: Develop Policies & Procedures	22	I	3.68	4.00	1.171
Prepared: Determine Productivity/Performance Stds	22	1	3.45	3.50	1.011
Prepared: Risk Mgt/Corporate Compliance	22	1	3.23	3.00	1.066
Prepared: Strategic Plans, Goals, Objectives	22	I	3.91	4.00	.868
Prepared: Confidentiality (HIPAA)	22	1	4.00	4.00	.976
Prepared: Legislative Process/Court System	22	1	3.05	3.00	1.046
Prepared: Inventory Mgt Tools	22	1	3.27	3.50	1.032
Prepared: Time Mgt	22	1	4.14	4.00	.774
Prepared: Critical Thinking Skills	21	2	3.95	4.00	.973
Overall, adequately prepared	23	0	1.30	1.00	.470
Recommend FSU's HCSA program	23	0	1.17	1.00	.388
Continued education	23	0	1.57	2.00	.507
Specify degree achieved/currently seeking	2.3	0			
Not cont'd ed, plan to do in next 5 yrs	14	9	1.64	1.00	.842
Additional Comments	23	0			

Frequency Table

Year graduated

		Frequency	Percent	Valid Percent	Cumulative Percent
	2000	6	26.1	26.1	26.1
	2001	4	17.4	17.4	43.5
	2002	1	4.3	4.3	47.8
Valid	2003	2	8.7	8.7	56.5
	2004	3	13.0	13.0	69.6
1	2005	7	30.4	30.4	100.0
	Total	23	100.0	100.0	

Profes'l Memberships: ACHE

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	1	4.3	100.0	100.0
Missing	System	22	95.7		
Total		23	100.0		

Profes'l Memberships: HFMA

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	2	8.7	100.0	100.0
Missing	System	21	91.3		
Total		23	100.0		

Profes'l Memberships: HCCA

		Frequency	Percent	
Missing	System	23	100.0	

Profes'l Memberships: ACHA

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	1	4.3	100.0	100.0
Missing	System	22	95.7		
Total		23	100.0		

Profes'l Memberships: Other

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	11	47.8	100.0	100.0
Missing	System	12	52.2		
Total		23	100.0		

Profes'l Memberships: Other specified

		Frequency	Percent	Valid Percent	Cumulative Percent
		10	43.5	43.5	43.5
	AARC, MSRC	I	4.3	4.3	47.8
	AHIMA	2	8.7	8.7	56.5
	MI Society of Infection Control	1	4.3	4.3	60.9
3.7-11.4	Neither	1	4.3	4.3	65.2
Valid	None	4	17.4	17.4	82.6
	PAC, HIMSS, AHIMA	1	4.3	4.3	87.0
	Society of Nuc Med	2	8.7	8.7	95.7
	Society of Nuc Med, NMTCB, ARRT	1	4.3	4.3	100.0
	Total	23	100.0	100.0	

Jobs: Mgr/Supervisor Clinical Area

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	4	17.4	100.0	100.0
Missing	System	19	82.6		
Total		23	100.0		

Jobs: Human Resource Mgmt

	,	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	3	13.0	100.0	100.0
Missing	System	20	87.0		
Total		23	100.0	·	

Jobs: Quality/Compliance/Risk Mgmt

		Frequency	Percent
Missing	System	23	100.0

Jobs: Non-hospital Mgmt

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	3	13.0	100.0	100.0
Missing	System	20	87.0		
Total		23	100.0		

Jobs: Other

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	13	56.5	100.0	100.0
Missing	System	10	43.5		
Total		23	100.0		

Jobs: Other specified

		Frequency	Percent	Valid Percent	Cumulative Percent
		8	34.8	34.8	34.8
	Analyst for the State of MI	1	4.3	4.3	39.1
	Coding Revenue Analyst	1	4.3	4.3	43.5
	Coord-Coding Dept. Coding Specialist	1	4.3	4.3	47.8
	Customer Svc.	1	4.3	4.3	52.2
	Educator of a Resp. Dept.	1	4.3	4.3	56.5
	Financial Analyst-Hosp; Healthcare Consultant-Acct'g firm	1	4.3	4.3	60.9
	Gov't Relations, Grass Roots, Mktg, Real Estate	1	4.3	4.3	65.2
Valid	HRIS	1	4.3	4.3	69.6
	Neither	1.	4.3	4.3	73.9
	None	1	4.3	4.3	78. <i>3</i>
	Nuc Med Technologist	1	4.3	4.3	82.6
	Ofc. Mgr./Secretary	1	4.3	4.3	87.0
	Proj. AdminPriority Health	1	4.3	4.3	91.3
	Sales-could find no one in med field to hire me	1	4.3	4.3	95.7
	Technologist	1	4.3	4.3	100.0
	Total	23	100.0	100.0	

How long employed present position

		Frequency	Percent	Valid Percent	Cumulative Percent
	Less than 1 yr	7	30.4	33.3	<i>33.3</i>
	1-3 yrs	9	<i>39.1</i>	42.9	76.2
Valid	3-4 yrs	3	13.0	14.3	90.5
	More than 4 yrs	2	8.7	9.5	100.0
	Total	21	91.3	100.0	
Missing	System	2	8. <i>7</i>		
Total		23	100.0		

Current employment status

		Frequency	Percent	Valid Percent	Cumulative Percent
	Not employed, not seeking	I	4.3	4.5	4.5
37-1:1	Not employed, seeking	I	4.3	4.5	9.1
Valid	Full-time	20	87.0	90.9	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
Total		23	100.0		

Current salary range

		Frequency	Percent	Valid Percent	Cumulative Percent
	Le'ss than \$25,000	2	8.7	9.5	9.5
	\$25,001-40,000	5	21.7	23.8	33.3
Valid	\$40,001-55,000	8	34.8	38.1	71.4
	\$55,001-75,000	6	26.1	28.6	100.0
	Total	21	91.3	100.0	
Missing	System	2	8.7		
Total		23	100.0		

How long to secure desired position

		Frequency	Percent	Valid Percent	Cumulative Percent
	Less than 6 mos	14	60.9	87.5	87.5
Valid	More than 12 mos	2	8.7	12.5	100.0
	Total	16	69.6	100.0	
Missing	System	7	30.4		
Total		23	100.0		

Prepared: Common Software Pkgs

		Frequency	Percent	Valid Percent	Cumulative Percent
	Moderately Prepared	6	26.1	26.1	26.1
37-11.4	Adequately Prepared	11	47.8	47.8	73.9
Valid	Fully Prepared	6	26.1	26.1	100.0
	Total	23	100.0	100.0	

Prepared: Query/Generate Reports

		Frequency	Percent	Valid Percent	Cumulative Percent
	Inadequately Prepared	2	8.7	8.7	8.7
	Minimally Prepared	3	13.0	13.0	21.7
\$7.4°.4	Moderately Prepared	9	39.1	39.1	60.9
Valid	Adequately Prepared	7	30.4	30.4	91.3
	Fully Prepared	2	8.7	8.7	100.0
	Total	23	100.0	100.0	

Prepared: Knowledge Regulatory Agencies

		Frequency	Percent	Valid Percent	Cumulative Percent
	Minimally Prepared	2	8. <i>7</i>	9.1	9.1
	Moderately Prepared	7	30.4	31.8	40.9
Valid	Adequately Prepared	8	34.8	36.4	77.3
	Fully Prepared	5	21.7	22.7	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
Total		23	100.0		

Prepared: Payment & Reimbursement

		Frequency	Percent	Valid Percent	Cumulative Percent
	Inadequately Prepared	1	4.3	4.3	4.3
ĺ	Minimally Prepared	5	21.7	21.7	26.1
37-114	Moderately Prepared	8	34.8	34.8	60.9
Valid	Adequately Prepared	5	21.7	21.7	82.6
	Fully Prepared	4	17.4	17.4	100.0
	Total	23	100.0	100.0	

Prepared: Basic Mgmt/Supervision Principles

		Frequency	Percent	Valid Percent	Cumulative Percent
	Inadequately Prepared	1	4.3	4.5	4.5
	Minimally Prepared	4	17.4	18.2	22.7
X7-1: 1	Moderately Prepared	2	8.7	9.1	31.8
Valid	Adequately Prepared	9	39.1	40.9	72.7
	Fully Prepared	6	26.1	. 27.3	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
Total		23	100.0		

Prepared: HRM-Staff Orientation

		Frequency	Percent	Valid Percent	Cumulative Percent
	Inadequately Prepared	2	8.7	9.1	9.1
	Minimally Prepared	2	8. <i>7</i>	9.1	18.2
Valid	Moderately Prepared	3	13.0	13.6	31.8
vand	Adequately Prepared	10	43.5	45.5	77.3
	Fully Prepared	5	21.7	22.7	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
Total		23	100.0		

Prepared: HRM-Performance/Discipline

		Frequency	Percent	Valid Percent	Cumulative Percent
	Inadequately Prepared	. 3	13.0	13.6	13.6
	Minimally Prepared	3	13.0	13.6	27.3
₹7-1: J	Moderately Prepared	3	13.0	13.6	40.9
Valid	Adequately Prepared	8	34.8	36.4	77.3
	Fully Prepared	5	21.7	22.7	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
Total		23	100.0		

Prepared: Plan & Conduct Meetings

		Frequency	Percent	Valid Percent	Cumulative Percent
	Inadequately Prepared	I	4.3	4.5	4.5
	Minimally Prepared	2	<i>8.7</i>	9.1	13.6
X7-1:-I	Moderately Prepared	2	<i>8.7</i>	9.1	22.7
Valid	Adequately Prepared	10	43.5	45.5	68.2
	Fully Prepared	7	30.4	31.8	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
Total		23	100.0		

Prepared: Develop Policies & Procedures

		Frequency	Percent	Valid Percent	Cumulative Percent
	Inadequately Prepared	2	8. <i>7</i>	9.1	9.1
	Minimally Prepared	1	4.3	4.5	13.6
Valid	Moderately Prepared	4	17.4	18.2	31.8
vanu	Adequately Prepared	10	43.5	45.5	77.3
	Fully Prepared	5	21.7	22.7	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
Total		23	100.0		

Prepared: Determine Productivity/Performance Stds

		Frequency	Percent	Valid Percent	Cumulative Percent
	Inadequately Prepared	1	4.3	4.5	4.5
	Minimally Prepared	2	8. <i>7</i>	9.1	13.6
3.7-11:3	Moderately Prepared	8	34.8	36.4	50.0
Valid	Adequately Prepared	8	34.8	36.4	86.4
	Fully Prepared	3	13.0	13.6	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
Total		23	100.0		

Prepared: Risk Mgt/Corporate Compliance

		Frequency	Percent	Valid Percent	Cumulative Percent
	Inadequately Prepared	2	8. <i>7</i>	9.1	9.1
	Minimally Prepared	2	8.7	9.1	18.2
	Moderately Prepared	9	39.1	40.9	59.1
Valid	Adequately Prepared	7	30.4	31.8	90.9
	Fully Prepared	2	8.7	9.1	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
Total		23	100.0		

Prepared: Strategic Plans, Goals, Objectives

		Frequency	Percent	Valid Percent	Cumulative Percent
	Minimally Prepared	1	4.3	4.5	4.5
	Moderately Prepared	6	26. I	27.3	31.8
Valid	Adequately Prepared	9	39.1	40.9	72.7
	Fully Prepared	6	26.1	27.3	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
Total		23	100.0		

Prepared: Confidentiality (HIPAA)

		Frequency	Percent	Valid Percent	Cumulative Percent
	Minimally Prepared	1	4.3	4.5	4.5
	Moderately Prepared	7	30.4	31.8	36.4
Valid	Adequately Prepared	5	21.7	22.7	59.1
	Fully Prepared	9	39.1	40.9	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
Total		23	100.0		

Prepared: Legislative Process/Court System

		Frequency	Percent	Valid Percent	Cumulative Percent
	Inadequately Prepared	2	8. <i>7</i>	9.1	9.1
	Minimally Prepared	3	13.0	13.6	22.7
T7-11-1	Moderately Prepared	11	47.8	50.0	72.7
Valid	Adequately Prepared	4	17.4	18.2	90.9
	Fully Prepared	2	8.7	9.1	100.0
	Total	22	95.7	100.0	
Missing	System	I	4.3		
Total		23	100.0		

Prepared: Inventory Mgt Tools

		Frequency	Percent	Valid Percent	Cumulative Percent
	Inadequately Prepared	2	8.7	9.1	9.1
	Minimally Prepared	2	8.7	9.1	18.2
3.7-11.1	Moderately Prepared	7	30.4	31.8	50.0
Valid	Adequately Prepared	10	43.5	45.5	95.5
	Fully Prepared	I	4.3	4.5	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
Total		23	100.0		

Prepared: Time Mgt

		Frequency	Percent	Valid Percent	Cumulative Percent
	Moderately Prepared	5	21.7	22.7	22.7
37-11.1	Adequately Prepared	9	39.1	40.9	63.6
Valid	Fully Prepared	8	34.8	36.4	100.0
	Total	22	95.7	100.0	
Missing	System	1	4.3		
Total		23	100.0		

Prepared: Critical Thinking Skills

		Frequency	Percent	Valid Percent	Cumulative Percent
	Inadequately Prepared	I	4.3	4.8	4.8
	Moderately Prepared	4	17.4	19.0	23.8
Valid	Adequately Prepared	10	43.5	47.6	71.4
	Fully Prepared	6	26.1	28.6	100.0
	Total	21	91.3	100.0	
Missing	System	2	8.7		
Total		23	100.0		

Overall, adequately prepared

		Frequency	Percent	Valid Percent	Cumulative Percent
	Yes	16	69.6	69.6	69.6
Valid	No	7	30.4	30.4	100.0
	Total	23	100.0	100.0	

Recommend FSU's HCSA program

		Frequency	Percent	Valid Percent	Cumulative Percent
	Yes	19	82.6	82.6	82.6
Valid	No	4	17.4	17.4	100.0
	Total	23	100.0	100.0	

Continued education

		Frequency	Percent	Valid Percent	Cumulative Percent
	Yes	10	43.5	43.5	43.5
Valid	No	13	56.5	56.5	100.0
	Total	23	100.0	100.0	

Specify degree achieved/currently seeking

		Frequency	Percent	Valid Percent	Cumulative Percent
		13	56.5	56.5	56.5
	BSN	1	4.3	4.3	60.9
	Master's Degree	I	4.3	4.3	65.2
	Master's of HCSA	1	4.3	4.3	69.6
	Master's of Public Admin.	1	4.3	4.3	73.9
Valid	Masters in Health Systems Admin at U-M	1	4.3	4.3	78.3
	MBA	2	8.7	8.7	87.0
	MBA Health Mgmt.	1	4.3	4.3	91.3
	MS in Health Admin.	1	4.3	4.3	95.7
	Pre-req's for NURS prog	1	4.3	4.3	100.0
	Total	23	100.0	100.0	

Not cont'd ed, plan to do in next 5 yrs

	·	Frequency	Percent	Valid Percent	Cumulative Percent
	Yes	8	34.8	57.1	57.1
37-1:3	No	3	13.0	21.4	<i>78.6</i>
Valid	Undecided	3	13.0	21.4	100.0
	Total	14	60.9	100.0	
Missing	System	9	39.1		
Total		23	100.0		:

Additional Comments

		Frequency	Percent	Valid Percent	Cumulative Percent
		10	43.5	43.5	43.5
	FSU needs to stress to students that the HIT & HCSA progs don't limit one to work'g directly in healthcare setting. One could work for vendors, do consult'g, research, grass roots/lobby'g & more w/ these deg's.	1	4.3	4.3	47.8
	I can't gain employmt; my current stu loans are in default. I wouldn't recommend continuing this major-it's "useless." Since graduation, I can't get a job in this field b/c I didn't have work experience. No one is willing to give me a chance or job although I did complete 2 internships-1 in a hosp. & 1 in corp ofc of hosp HR. What I discovered is the health industry is very "racist."	1	4.3	4.3	52.2
	I feel this was a great opportunity to grad from FSU & the HCSA prog. I learned so much from the prog that I applied to my mgmt career. Students really need to know Excel & how to give a good present in. Team bldg is a great tool to have under your belt. Thank you for a great experience at FSU.	1	4.3	4.3	56.5
	I really think my 2+2 prog was excellent. I would recommend it to anyone. I know more about mgmt fxns than my team leader!!	1	4.3	4.3	60.9
	I was adequately prep'd for an entry level pos'n. The problem is that my "entry-level" is a promotion for someone w/ a technical deg. Since most companies would rather promote, I could find nothing in the med field.	1	4.3	4.3	65.2
	I was an unconventional student when I entered the prog. I thought it was very good, but all the classes should have been offered in GR more frequently.	1	4.3	4.3	69.6
	Make sure stu's have a clinical bkground-otherwise, HCSA degree is useless!	1	4.3	4.3	73.9
	More train'g on procing strategies, changemasters, reimbursemt & compliance would be helpful.	1	4.3	4.3	78.3
	Please see enclosed sheet.	111	4.3	4.3	82.6
Valid	The HCSA prog shouldn't be offered alone-should be w/ clinical prog. The fac at FSU needs to teach of more realistic goals & opportun's. No one ever preached of how new grads w/ only this deg don't obtain mgr'l roles. Deg is too broad. Love to actually talk to fac about improv'g prog b/c there is so much rm for improvemt; my contact info at top of 2nd pg of survey. Internshipis conplete inconvenience & waste of time & money. Dept should help stu's obtain internship. Work'g 40 hrs/wk for free is downright wrong. We are adults w/ bills. I struggled to complete 40 hr/wk internship & work another job to pay bills. FSU/fac didn't help or offer advice/assistance financially. It's really crazy to mandate such labor. At my site no one knew what the deg was so it was hard to place interns in good pos'ns. The fac, esp. Marie S., was horrible at respond'g to questions/comments during internship. FSU/dept. should try (really try) to offer stu's help in find'g good jobs for that is what a good school of excellence would do. Hav'g to do the internship was one of the worst times of my life, there was much pain & suffer'g as a result of it & has yet to pay off. (Survey # 14)	. 1	4.3	4.3	87.0
	The payor systems need to be more in depth. Expert areas would be a plus like Area Wage Index, Medicare bad debts, DSH paymts, & of course access. These are the areas that "excellent" employers are look'g for. If a person wants to succeed & make a decent salary, "We" "FSU" needs to prep the stu's for the "real" world of health care admin. by being more specific. We aren't competitive enough in our classrm applications as well as our externships.	1	4.3	4.3	91.3
	The prog really needs to involve more about the insurance industry as a whole. In 1 way or another, we are all affected by it. In addition, I think additional emphasis must be placed on our pc skills-which are more & more necessary. Some items are hard to answer as it's been almost 5 yrs since grad & some things I haven't used are forgotten.	1	4.3	4.3	95.7
	While at FSU, I also completed an Assoc. deg in Nuc Med. I've been a Technologist since graduation.	1	4.3	4.3	100.0
	Total	23	100.0	100.0	



FERRIS STATE UNIVERSITY COLLEGE OF ALLIED HEALTH SCIENCES

November 13, 2006

Dear Site Coordinator for Health Care Administration students,

Once every five years, Ferris State University reviews each program to evaluate its effectiveness. This year Health Care Systems Administration is conducting such an assessment. Employer surveys are the most valuable tool to assess our program. Please complete the attached survey and mail it in the self addressed stamped envelope provided.

Sincerely,

Marilyn Skrocki

Health Care Systems Administration

Program Coordinator/Assistant Professor

enclosure

Ferris Drive Big Rapids, MI 49307-2740

Phone: (231) 591-2270 or 1800-462-8553 **Web:** www.ferris.edu

Ferris State University Health Care Systems Administration Program Employer Survey

As an annual part of our program review and improvement efforts, we send surveys to our graduates and employers. Please take a few minutes to complete the survey and return it in the enclosed self-addressed stamped envelope. We sincerely appreciate your time and input.

Directions: Please select only one option for each question unless the question specifically states that you may select more than one choice.

Q1	your emp	se indicate the job classifications her organization by FSU graduates you loy. (Please select all that apply.) Manager/Supervisor of a Clinical Area Human Resources Management Quality/Compliance/Risk Management Non-hospital Management (physician's o practice, vendor, contracting) Other ease Specify:		Q2	employ 6 18	ng has/have the dat your orges than 6 months to less than 8 months to 3 years fore than 3 years	han 18 months ars	been
Q3		Please rate your level of satisfaction	on with the gra Very Dissatisfied	Son	e's know newhat atisfied	ledge in each Somewhat Satisfied	of the following Very Satisfied	ng areas. Not Applicable
		Medical Terminology		[
		Managed Care Long Term Care		[
		Budgeting Process Computer Applications		[
		Finance Oral Communication		[
	<u> </u>	Written Communication Problem Solving/Critical Thinking		[
		Teamwork Professionalism Other (Please specify in the Comments section)		[] [

HCSA Academic Program Review Survey 2006-2007 **Currently Enrolled Students**

Directions: Please answer the following questions by marking the option that best fits

your opinion. Please note that some questions (if indicated) allow you to choose more than one option. The answers will be used to improve the quality of the program. Thank you for taking time to fill out this survey.
 Do you meet with your HCSA advisor or attend group advising at least once a semester? a. Yes b. No
2. Has your HCSA advisor or group advising been helpful?

- 3. Please utilize this space for any comments you with to make regarding your advisor or the group advising sessions.
- 4. Have your HCSA instructors been generally available outside of class? a. Yes
 - b. No

a. Yes b. No

- 5. Have your HCSA instructors been generally helpful?
 - a. Yes
 - b. No
- 6. Please utilize this space for any comments you wish to make regarding your instructors.
- 7. If you beginning your college career again, would you still choose to attend FSU?
 - a. Definitely Yes
 - b. Probably Yes
 - c. Probably Not
 - d. Definitely Not

	6. Please indi		the HO	CSA Pro	gram ha	as prepared you within the
		4 – Very Pro 3 – Adequat 2 – Somewh 1 – Not At A	tely Pre nat Prep	pared		
13	. Demonstrate	e interpersonal	skills	necessar	ry to suc	ceed in the work force.
		4	3	2	1	
14.	Demonstrate	e oral commun	ication	skills n	ecessary	to succeed in the work force.
		4	3	2	1	
15.	Demonstrate	e computer ski	lls nece	essary to	succee	d in the work force.
		4	3	2	1	
16.	Demonstrate solving a new		ng skil	ls to app	oly previ	iously learned knowledge to
		4	3	2	1	
17.	Demonstrate	analytical ski	lls nece	essary to	interpre	et data.
		4	3	2	1	
18.	Demonstrate force.	written comm	nunicat	ion skill	s necess	ary to succeed in the work
		4	3	2	1	
19.	Demonstrate	professional	conduc	t.		
		4	3	2	1	
20.	Speak the lan	nguage of the l	nealth o	care prof	fession(s	3).
		4	3	2	1	
21.	Demonstrate	understanding	g of the	laws th	at pertai	n to healthcare.
		4	3	2	1	

Faculty perceptions survey

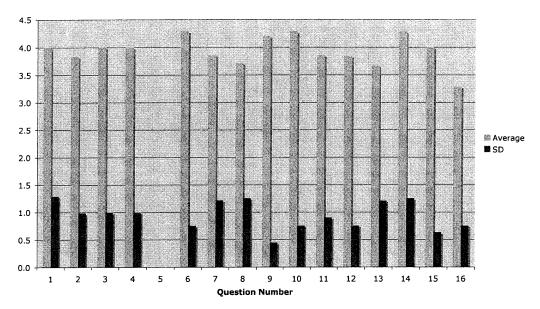
A 17-item instrument was utilized to secure faculty perceptions of the program. Handwritten comments were optional. Question 5 was inappropriate for the program; as such, all responses were N/A. Full-time on campus faculty who are assigned to the HCSA program plus faculty in a sister program, Health Information, were surveyed for an n=7. The composition of faculty included:

HCSA	1 tenured faculty 2 tenure-track (in 2 nd year) faculty 1 full-time temporary faculty (new in F 2006)
MRIS	3 tenured faculty
	7 total
Combined	4 tenured faculty 2 tenure-track (in 2 nd year) faculty 1 full-time temporary faculty (new in F 2006) 7 total

Evaluations encompassed perceptions from the entire range: very inexperienced to very experienced in the program's purpose and role in producing graduates to meet the needs of the State of Michigan. Interpretation of results should consider the degree of knowledge that supports the perceptions. All tenured faculty have been vested in the growth and direction of the program for a number of years. They have each followed interns through their internships and talked with site coordinators as well as employers. They garnered information about the ability of HCSA students to perform in the workplace. Additionally, one tenure-track faculty has worked with interns and had the role of program coordinator for over three (3) semesters. These experiences intensified the interest and knowledge base regarding the HCSA program. Thus, five (5) faculty provided input based on significant background and understanding of the program while the remaining two (2) faculty, one tenure-track and one new full-time temporary faculty, have less background and understanding. It is expected that there would be a wide range of responses and comments. That was the case.

The following chart reflects the averaged responses with related standard deviations for the instrument questions. See attached instrument.

HCSA Faculty Perceptions Survey Results as Averages with Rlated Standard Deviation February 2007



Over half of the questions resulted in good or excellent ratings, as an average of all respondents. Average ratings of 4.2 or higher, on a scale of 1-5, related to

- involvement in program evaluation
- secretarial support
- library support and
- lab equipment

for the program. Handwritten comments stated that the quality of secretarial support was excellent yet inadequate. The recent addition of a part-time assistant may partially mitigate the perception that inadequate secretarial support exists. The secretarial support question had one of the largest dispersions in responses with a standard deviation of 1.3. Clearly, many responses were at the high end to result in an average rating of 4.3.

Average ratings of 4.0, related to

- administrators seeking and responding to faculty input in developing and revising programmatic plans
- curriculum meeting graduates' needs
- curriculum meeting employers' needs and
- the level of instructional support staff

for the program. Handwritten comments indicate that instructional support staff exist outside the college rather than inside. The administrator question had one of the largest dispersions in responses with a standard deviation of 1.3. Comments were not provided to explain this; the responses were simply widely spread.

All remaining responses were within the "acceptable range", i.e., 3.3 to 3.9, as averages. Of greatest concern are the two lowest averaged results with noted comments:

- 3.6 the quality of the faculty assigned to the program
 - Some newer faculty are not appropriately qualified and do not recognize their limitations.
 - While some new faculty are excellent, some are below expectations.
 Some new faculty are not prepared or experienced to teach in the program.
 - A lot of student complaints regarding quality of an instructor. Felt class is easy "A" but students complaining of not learning. Instructor not knowledgeable in course content.
- 3.3 the number of faculty assigned to the program
 - o too dependent on adjunct faculty
 - quality of program is jeopardized by excessive use of temporary and adjunct faculty. Consistent overtime usage of full-time faculty contributes to burnout and a lessening of quality.

FERRIS STATE UNIVERSITY COLLEGE OF ALLIED HEALTH SCIENCES HEALTH CARE SYSTEMS ADMINISTRSATION

Every 6 years, the program is required to undergo a review by a college-wide committee. The purpose of this review is to make sure that the programs are meeting the needs of its customers. As an advisory committee member for the program, you are a very important part of the program. We are asking that you complete the following survey by marking the bubble on the scantron that corresponds with your experiences or belief about the program. Please be very candid and honest in your answers.

Please rate each of the following statements using the following scale. If you are unable to answer the statement, please just skip it rather than answering.

A Excellent (top 5-10%)

B Good (top 1/3)

C Acceptable (middle 1/3)

D Below Expectations (bottom 1/3)

E Poo	E Poor (seriously inadequate)								
				PERC	EPTION	S OF PR	OGRAM	Į.	
1.	Cours	ses are	availab	le at tin	nes that a	re conver	nient for s	tudents	
	A	В	C	D	E				
2.	The p	rogran	n meets	the nee	ds of the	health ca	re admini	stration co	ommunity
	A	В	C	D	E				
3.	Facul	ty in th	ne progr	am are	qualified				
	A	В	C	D	E				
4.	Labor	ratory f	facilitie	s for the	program	n are adeq	uate		
	A	В	C	D	E				
5.	The g	raduate	es are in	n high d	emand				
	A	В	C	D	E				
6.	The c	urricul	um is re	eflective	e of curre	nt health	informati	on practic	e
	A	В	C	D	E				

FERRIS STATE UNIVERSITY COLLEGE OF ALLIED HEALTH SCIENCES HEALTH CARE SYSTEMS ADMINISTRSATION 2006

Every 6 years, the program is required to undergo a review by a college-wide committee. The purpose of this review is to make sure that the programs are meeting the needs of its customers. As an advisory committee member for the program, you are a very important part of the program. We are asking that you complete the following survey by marking the bubble on the scantron that corresponds with your experiences or belief about the program. Please be very candid and honest in your answers.

Please rate each of the following statements using the following scale. If you are unable to answer the statement, please just skip it rather than answering.

A Excellent (top 5-10%)

C Acceptable (middle 1/3)

D Below Expectations (bottom 1/3) E Poor (seriously inadequate)

B Good (top 1/3)

Out of 4 surveys sent out, only 2 were returned.							
			P	ERCE	PTION	S OF PROGRAM	
1.	Cours	es are a	vailable	at time	s that a	re convenient for students	
	A	B 1	C	D	E	No Response	
2.	The pr	_	meets tl	he need:	s of the	health care administration community	
	A 2	В	C	D	Е		
3.	_	y in the	progra	m are qu	ualified		
	A 2	В	C	D	E		
4.	_	atory fa	cilities	for the p	orogram	are adequate	
	A	B 1	C	D	E	No Response	
5.	The gr	-	are in l	high der	nand	1	
	A	B 1	C	D	E		
6.	The cu	_	m is ref	lective o	of curre	nt health information practice	
	A 2	В	C	D	E		
	-						

APR Plan, Timeline, Budget

PROGRAM EVALUATION PLAN HEALTH CARE SYSTEMS ADMINISTRATION PROGRAM

Degree Awarded: B.S. in Science Health Care Systems Administration

Program Review Panel:

Chair and Program Coordinator: Marilyn Skrocki Program faculty: Marcy Parry, Mark Fabbri College of Allied Health faculty: Dan DeRegnier

Individual(s) with special interest in the Program: Paula Hagstrom, Marie Sickelsteel

Faculty member outside the College of Allied Health: Allison Scott

Health Management Department Head: Roger Daugherty

Purpose: To conduct a study of the Health Care Systems Administration program to evaluate its needs and effectiveness so the University can make informed decisions about resource allocations.

Data Collection Techniques

- 1. Graduate surveys completed in 2000-2005.
- 2. Employer surveys from 2000-2005.
- 3. Student evaluation of program and courses from 2006.
- 4. Faculty perception of program from surveys to Health Care Systems Administration faculty.
- 5. Advisory Committee board member perceptions of the program from questionnaire.
- 6. Labor Market analysis information from current market indicators.
- 7. Evaluation of facilities and equipment by doing a review of the adequacy of classrooms and computer facilities.
- 8. Curriculum evaluation information will be taken from the Program Review documents completed in 2000, and evaluation of current curriculum by all faculty members, including recent tenure and full-time temporary faculty members, who have been actively practicing in Health Care Systems Administration arena.

Schedule of Events

Activity	<u>Leader</u>	Target Date
Graduate Survey	Marilyn Skrocki	Dec. 8, 2006
Employer Survey	Marie Sickelsteel	Dec. 8, 2006
Student Evaluation	Marilyn Skrocki, Marcy Parry	Dec. 8, 2006
Faculty Perceptions of Program	Marcy Parry	Dec. 8, 2006
Advisory Committee Perceptions	Paula Hagstrom	Dec. 8, 2006
Labor Market Analysis	Mark Fabbri	Dec. 8, 2006
Evaluation of Facilities	Dan DeRegnier	Dec. 8, 2006
Curriculum Evaluation	Paula Hagstrom, Roger Daugherty	Dec. 8, 2006

Timeline

September 11-October 1, 2006- Review various program review documents, attend inservice presentations, discuss survey methods with University Research, amend questionnaires to assure information needed is sought by appropriate questionnaires. Determine/invite members to be on Program Review Panel, Submit budget for approval.

October 9, 2006 (revised date) Self-evaluation plan and Budget due to APRC

October 19, 2006-First program review panel meeting

October 20, 2006-Revised Self-evaluation plan due to APRC

October 27, 2006-Surveys to be sent out by University Research

December 8, 2006-Survey tallies/results due

January 22, 2007-Begin analyzing data, invite dean to meeting to discuss survey results

February 5 to March 30-Write report and gather appendices

April 13, 2007-Analysis of report by department head

April 27, 2007- Analysis of report by dean

June 18, 2007-Initial report (final draft) to APRC

August 13, 2007-Final report, with corrections and multiple copies, to APRC

BUDGET (approved by Roxanne Cullen September 15, 2006)

Surveys (graduate and employer, and advisory committee)

Copying Costs Postage	\$ 50.00 \$100.00
Binders (3-Ring for Final Report)	\$150.00
Final Report Copying Costs	\$400.00
Total Proposed Costs	\$700.00

Analysis of Programs by Department Head & Dean

Internship Sites

Tables

Ferris State University APR 02-06 Enrollment by Sex and Ethnicity AHS

Health Care Systems Administration

		Se	x		•	Enrollment						
Term	Enrolled	Male	Female	Blank	Black	Hispanic	Indian/ Alaskan	Asian/Pac Islander	White	Foreign	Full-Time	Part-Time
2002F	86	13	73	2	16	1	. 0	2	64	1	70	16
2003F	86	12	74	3	11	3	3	1	65	0	72	14
2004F	136	28	108	7	23	1	2	2	101	0	115	21
2005F	212	44	168	10	20	2	7	5	167	1	167	45
2006F	255	52	203	10	23	0	4	3	214	1	199	56

Section 3 Table 1.2

Ferris State University
APR 02-06 Enrollment by Sex and Ethnicity
AHS

Pre-Health Care Systems Administration

		Se	x		Enrollment							
Term En	Enrolled	Male	Female	Blank	Black	Hispanic	Indian/ Alaskan	Asian/Pac Islander	White	Foreign	Full-Time	Part-Time
2002F	1	0	1	0	1	0	0	0	0	0	1	0
2003F	2	0	2	0	1	0	0	0	1	0	2	0
2004F	8	1	7	0	2	0	0	0	6	0	6	2
2005F	9	1	8	0	5	0	0	0	4	0	8	1
2006F	18	3	15	0	5	0	0	0	13	0	15	3

Ferris State University
APR 02-06 Enrollment by Residency, Age, FSU GPA, and ACT
AHS
Health Care Systems Administration

		Resid	lency		Age		FSU GP	4	ACT			
Term	Blank	Midwest Compact	Non-Resident	Resident	Avg. Age	Avg. GPA	Min. GPA	Max. GPA	Avg. ACT	Min, ACT	Max. ACT	
2002F	0	1	1	84	26	2.897	1.839	4	18.8	13	27	
2003F	0	1	0	85	25.1	2.963	1.748	3.972	18.9	12	27	
2004F	0	1	. 0	135	24.7	3.011	2.005	3,982	18.7	11	27	
2005F	0	2	1	209	24.7	3,043	2,047	4	19.7	12	30	
2006F	0	4	1	250	24.3	3.169	0.68	4	20,4	12	29	

Ferris State University APR 02-06 Enrollment by Residency, Age, FSU GPA, and ACT **AHS Pre-Health Care Systems Administration**

		Resid	lency		Age Avg. Age		FSU GP	Ą	ACT			
Term	Blank	Midwest Compact	Non-Resident	Resident		Avg. GPA	Min. GPA	Max. GPA	Avg. ACT	Min. ACT	Max. ACT	
2002F	0	0	0	1	22	2.123	2.123	2,123	20	20	20	
2003F	0	0	0	2	22	2.658	2.423	2,893	20.5	20	21	
2004F	0	1	0	7	21.8	2.409	2.007	3.107	18.1	15	22	
2005F	0	0	0	9	23.1	2.36	2.13	2,633	16.3	13	21	
2006F	0	0	. 0	18	22.2	2.36	2.02	2.98	17.7	13	21	

Ferris State University Administrative Program Review 2006 College of Allied Health Sciences Health Care Systems Administration BS

Student Enrollment

	Fail 2002			Fall 2003			Fali 2004			Fall 2005			Fall 2006		
	On	Off	Total												
Freshman Headcount	3		3	2	2	4	2		2	6		6	6		6
Freshman SCH's	36		36	29	8	37	26		26	77		77	82		82
Sophomore Headcount	12	1	13	5		5	16	2	18	31	3	34	36	6	42
Sophomore SCH's	169	4	173	70		70	217	9	226	433	18	451	487	38	525
Junior Headcount	24	3	27	25	3	28	35	2	37	44	9	53	64	10	74
Junior SCH's	341	12	353	339	18	357	474	8	482	577	58	635	833	80	913
Senior Headcount	35	8	43	45	4	49	71	8	79	101	18	119	108	25	133
Senior SCH's	466	47	513	611	17	628	945	42	987	1322	100	1422	1431	195	1626
TOTAL HEADCOUNT	74	12	86	77	9	86	124	12	136	182	30	212	214	41	255
TOTAL SCH's	1012	63	1075	1049	43	1092	1662	59	1721	2409	176	2585	2833	313	3146

Graduates

	Acad	Academic Yr 01/02			Academic Yr 02/03			Academic Yr 03/04			mic Yr 0	4/05	Academic Yr 05/06		
	On	Off	Total	On	Off	Total	On	Off	Total	On	Off	Total	On	Off	Total
Number of Graduates	19	4	23	11	2	13	19	2	21	16	1	17	20	1	21

Ferris State University Administrative Program Review 2006 College of Allied Health Sciences

Pre-Health Care Systems Administration BS

Student Enrollment

	F	all 2002			Fall 2003			Fall 2004	ŀ	Fail 2005				Fall 2006	i
	On	Off	Total	On	Off	Total	On	Off	Total	On	Off	Total	On	Off	Total
Freshman Headcount			0			0			0	1		1	2		2
Freshman SCH's			0			0			0	14		14	29		29
Sophomore Headcount	1		1			0	2		2			0	2		2
Sophomore SCH's	14		14			0	30		30			0	29		29
Junior Headcount			0			0	4		4	3		3	9		9
Junior SCH's			0			0	50		50	34		34	109		109
Senior Headcount			0	2		2	2		2	5		5	5		5
Senior SCH's			0	36		36	18		18	66		66	48		48
TOTAL HEADCOUNT	1		1	2		2	8		8	9		9	18		18
TOTAL SCH's	14		14	36		36	98		98	114		114	215		215

Graduates

	Academic Yr 01/02		Academic Yr 02/03		Academic Yr 03/04		Academic Yr 04/05			Academic Yr 05/06					
	On	Off	Total	On	Off	Total	On	Off	Total	On	Off	Total	On	Off	Total
Number of Graduates			0			0			0			0			0

ENROLLMENT BY PROGRAM FALL SEMESTER

COLLEGE	2002/03	2003/04	2004/05	2005/06	2006/07
ALLIED HEALTH SCIENCES					
CLINICAL LAB, RESP CARE, & HLTH ADMIN Environmental Health & Safety Management Environmental Health & Safety Technology Health Care Systems Administration Medical Laboratory Technology Medical Record Administration Medical Record Technology Medical Technology Nuclear Medicine Technology AAS Nuclear Medicine Technology BS Phlebotomy Pre-Environmental Health & Safety Management Pre-Health Care Systems Administration Pre-Medical Laboratory Technology Pre-Medical Record Administration Pre-Medical Record Technology Pre-Nuclear Medicine 2-Yr Pre-Nuclear Medicine 4-Yr Pre-Respiratory Care Respiratory Care On-Campus Total	26 0 74 7 19 25 32 43 13 0 1 1 1 2 1 1 32 1 13 12 313	25 2 77 10 28 24 33 57 11 0 2 2 4 2 3 46 0 18 15 359	20 2 124 8 33 37 29 56 7 0 8 2 1 6 51 2 12 33 431	13 1 182 12 27 36 47 49 0 5 0 9 4 11 67 0 21 34 527	6 0 214 8 24 33 63 43 0 5 0 18 4 3 8 59 0 17 32 537
OFF-CAMPUS Coding/Reimbursement Specialist Cert Environmental Health & Safety Management Environmental Health & Safety Technology AAS Environmental Health & Safety Technology Cert Health Care Systems Administration Medical Record Administration Medical Record Technology Phlebotomy Pre-Respiratory Care Respiratory Care Off-Campus Total	56 1 15 1 12 3 37 0 0 0 125	57 18 0 2 9 10 68 0 21 185	32 21 0 0 12 15 66 8 0 18 172	12 13 0 0 30 16 85 18 0 68 242	14 1 0 0 41 16 76 6 4 103 261
DEPARTMENT TOTAL	438	544	603	769	798
DENTAL HYGIENE & MEDICAL IMAGING Dental Hygiene Diagnostic Medical Sonography Opticianry Radiography Pre-Dental Hygiene Pre-Diagnostic Medical Sonography Pre-Radiography On-Campus Total	104 41 1 90 113 18 40 407	112 36 0 98 128 39 82 495	113 33 0 94 112 25 114 491	109 30 0 80 128 35 114 496	101 26 0 70 95 36 111 439
OFF-CAMPUS Dental Hygiene	0	0	0	0	1
Off-Campus Total	0	0	0	0	1
DEPARTMENT TOTAL	407	495	491	496	440

Ferris State University APR Graduated 2001-02 Through 2005-06 AHS Health Care Systems Administration

Graduated Students

		FSU GP	4	ACT					
Year	Avg. GPA	Min. GPA	Max. GPA	Avg. ACT	Min. ACT	Max. ACT			
2001-2002	3.207	2.402	3.959	20	13	30			
2002-2003	3.149	2.296	3.925	18.3	10	29			
2003-2004	3.151	2.368	3.86	18.4	12	27			
2004-2005	2.897	2.604	3.191	. 18	18	18			
2005-2006	3.109	2.324	3.95	19.2	13	24			

2004/2005 Graduate Follow-Up Survey Summary

College: Allied Health Sciences

		Degrees		Placement Information				
ALLIED HEALTH SCIENCES	CERT	AS	BS	% Response	Placement Rate	A	ve Salary	
HEALTH MANAGEMENT								
Coding/Reimbursement Specialist	33			18%	100%	\$	39,211	
Environmental Health & Safety		1	10		96%	\$	37,250	
Health Care Systems Administration			17	48%	100%	\$	39,480	
Medical Record Administration			9	60%	100%	\$	41,360	
Medical Record Technology		25		64%	100%	\$	29,872	
Occupational Health and Safety				NA	NA		NA	
Phelbotomy	3			33%	100%		NA	
HEALTH RELATED PROGRAMS	e Baran							
Diagnostic Medical Sonography		12		67%	100%	\$	39,846	
Medical Laboratory Technology		2		50%	100%		NA	
Medical Technology			11	64%	100%	\$	37,469	
Nuclear Medicine Technology		34	2	78%	97%	\$	33,144	
Radiography		47		80%	98%	\$	33,103	
Respiratory Care		14		71%	100%	\$	34,760	
NURSING & DENTAL HYGIENE								
Dental Hygiene		61		55%	100%	\$	38,468	
Master of Science in Nursing				NA	NA		NA	
Nursing		55	48	55%	99%	\$	40,755	
Nursing Education	5					Ī		
Allied Health TOTAL	41	251	97	57%	99%	No	calculated	

Ferris State University Retention and Graduation Rates of Full-Time FTIAC Students - By Major Four-Year Degree Programs

Fall Term

						rai	ı rerm		
Entering Fall Term	Major	N							
				Year 2	Year 3	Year 4	Year 5	Year 6	Year 7
1999F	HCSA	2							
			% Graduated By	0	0	0	50	50	50
			% Still Enrolled In	50	50	50	0	0	0
			% Persisters	50	50	50	50	50	50
		•	% Non-Persisters	50	50	50	50	50	50
2000F	HCSA	1							
20001	ПСОЛ	'	Of Craduated Dy	0	0	0	100	100	100
			% Graduated By % Still Enrolled In	100	100	100	0	0	0
			% Still Enrolled in % Persisters	100	100	100	100	100	100
			% Non-Persisters	0	0	0	0	0	0
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
,									
2001F	HCSA	1		•	•	•	400	100	m
			% Graduated By	0	0	0	100 0	100 0	
			% Still Enrolled In	100 100	100 100	100 100	100	100	
			% Persisters % Non-Persisters	0	0	0	0	0	
			70 14011-1 C13131C13	-	_	-			
2002F	HCSA	3							
			% Graduated By	0	33	66	66		
			% Still Enrolled In	66	33	34	0		
			% Persisters	66 34	66 34	100 0	66 34		
			% Non-Persisters	34	34	U	34		
2003F	HCSA	2							
			% Graduated By	0	0	0			
			% Still Enrolled In	50	100	50 50			
			% Persisters % Non-Persisters	50 50	100 0	50 50			
			% Non-Persisters	30	U	50			
2004F	HCSA	3							
			% Graduated By	33	33			•	
			% Still Enrolled In	67	67				
			% Persisters	100 0	100 0				
			% Non-Persisters	J	J				
		_							
2005F	HCSA	2	•						
			% Graduated By	0					
			% Still Enrolled In	100					
,			% Persisters	100					
			% Non-Persisters	0					

Ferris State University Degree Program Costing 2002- 2003 (Summer, Fall, and Winter)

College:

Allied Health Sciences

Department:

Health Management

Program Name:

Health Care Systems Administration BS

Program Credits Required (Total credits to graduate)

*Instructor Cost per Student Credit Hour(SCH) (Average for program)

\$122.96

123

**Department Cost per Student Credit Hour

\$28.61

***Dean's Cost per Student Credit Hour

\$22.26

Total Cost per Student Credit Hour (Average for program)

\$173.82

Total Program Instructor Cost (Assumes a student will complete program in one year)

\$15,123.94 \$3,519.17

Total Program Department Cost Total Program Dean's Cost

\$2,737.37

otal Program Cost (Assumes a student will complete program in one year)

\$21,380,47

Course ID Level Instructor Cost Dept Cost Dean's Cost SCH's Produced Cost/SCH Instructor Cost/SCH Dean's Cost/SCH Creck Cost/SCH Requ BIOL109 L \$84,512 \$44,147 \$8,783 1476 \$57 \$30 \$6 CCHS101 L \$117,914 \$59,943 \$59,441 1746 \$68 \$34 \$34 CCHS102 L \$48,335 \$17,372 \$17,226 506 \$96 \$34 \$34 COMM105 L \$290,824 \$48,206 \$18,441 3099 \$94 \$16 \$6 COMM365 U \$15,543 \$1,960 \$750 126 \$123 \$16 \$6	red Cost 3 \$305 4 \$229 3 \$203 1 \$96	Program Dept Cost \$65 \$120 \$103	Program Dean's Cost \$52 \$24
ACCT201	3 \$305 4 \$229 3 \$203 1 \$96	\$65 \$120	\$52
BIOL109 L \$44,147 \$8,783 1476 \$57 \$30 \$6 CCHS101 L \$117,914 \$59,943 \$59,9441 1746 \$68 \$34 \$34 \$34 \$34 \$34 \$34 \$34 \$34 \$34 \$34	4 \$229 3 \$203 1 \$96	\$120	
BIOL109 L \$84,512 \$44,147 \$8,783 1476 \$57 \$30 \$6 \$6 \$34 \$34 \$34 \$59,943 \$59,441 1746 \$68 \$34 \$34 \$34 \$34 \$60 \$17,372 \$17,226 506 \$96 \$34 \$34 \$34 \$34 \$60 \$60 \$18,441 \$10,900 \$16 \$6 \$6 \$6 \$6 \$6 \$6 \$6 \$6 \$6 \$6 \$6 \$6 \$6	3 \$203 1 \$96		¶ \$24 i
CCHS101 L \$117,914 \$59,943 \$59,441 1746 \$68 \$34 \$34 CCHS102 L \$48,335 \$17,372 \$17,226 506 \$96 \$34 \$34 COMM105 L \$290,824 \$48,206 \$18,441 3099 \$94 \$16 \$6 COMM365 U \$15,543 \$1,960 \$750 126 \$123 \$16 \$6	1 \$96	\$103	
CCHS102 L \$48,335 \$17,372 \$17,226 506 \$96 \$34 \$34 COMM105 L \$290,824 \$48,206 \$18,441 3099 \$94 \$16 \$6 COMM365 U \$15,543 \$1,960 \$750 126 \$123 \$16 \$6			\$102
COMM105 L \$290,824 \$48,206 \$18,441 3099 \$94 \$16 \$6 COMM365 U \$15,543 \$1,960 \$750 126 \$123 \$16 \$6		\$34	\$34
COMM365 U \$15,543 \$1,960 \$750 126 \$123 \$16 \$6	3 \$282	\$47	\$18
	3 \$370	\$47	\$18
CULTELE E \$2,095,711 \$340,667 \$132,576 21581 \$97 \$16 \$6	8 \$777	\$126	\$49
FCON221	3 \$246	\$65	\$52
#FHSM315 #U # \$47.515 \$15,449 \$15,320 450 \$106 \$34 \$34	3 \$317	\$103	\$102
ENGL150 L \$668.824 \$93.436 \$40.416 6792 \$98 \$14 \$6	3 \$295	\$41	\$18
FNGL250 L \$499,521 \$71,315 \$30,848 5184 \$96 \$14 \$6	3 \$289	\$41	\$18
"FNGL321 U \$306.279 \$29.839 \$12,907 2169 \$141 \$14 \$6	3 \$424	\$41	\$18
HCSA202 \$5 114 \$3,193 \$3,166 93 \$55 \$34 \$34	3 \$165	\$103	\$102
HCSA205	2 \$91	\$69	\$68
HCSA220 L \$6,458 \$927 \$919 27 \$239 \$34 \$34 \	3 \$718	\$103	\$102
HCSA320 N \$15.271.137 \$3,812,904 \$2,102,742 101733 \$150 \$37 \$21	2 \$300	\$75	\$41
HCSA333 U \$3,044 \$824 \$817 24 \$127 \$34 \$34 \$	3 \$381	\$103	\$102
HCSA335 U \$42.314 \$15,930 \$15,796 464 \$91 \$34 \$34 \$34	4 \$365	\$137	\$136
HCSA345 U \$3,137 \$927 \$919 27 \$116 \$34 \$34	1 \$116	\$34	\$34
HCSA392 U \$23.082 \$2,472 \$2,451 72 \$321 \$34 \$34	6 \$1,924	\$206	\$204
HCSA401 U \$15,865 \$3,845 \$3,813 112 \$142 \$34 \$34 \$34	4 \$567	\$137	\$136
HCSA460 U \$2,435 \$1,854 \$1,838 54 \$45 \$34 \$34	4 \$180	\$137	\$136
HCSA474 U \$12,300 \$4,257 \$4,221 124 \$99 \$34 \$34	4 \$397	\$137	\$136
HCSA493 U \$49,409 \$7,828 \$7,762 228 \$217 \$34 \$34	2 \$2,600	\$412	\$409
ISYS105 L \$240,424 \$85,062 \$44,104 2547 \$94 \$33 \$17	3 \$283	\$100	\$52
ISYS200 L \$118.614 \$30.157 \$15.636 903 \$131 \$33 \$17	3 \$394	\$100	\$52
MGMT301 U \$206,956 \$57,697 \$36,156 2088 \$99 \$28 \$17	3 \$297	\$83	\$52
MKTG321 U \$207,234 \$70,792 \$26,234 1515 \$137 \$47 \$17	3 \$410	\$140	\$52 \$426
MPIS103 \$83 171 \$29.937 \$29.686 872 \$95 \$34 \$34	4 \$382	\$137	\$136
MRIS209 L \$12.145 \$2,987 \$2,962 87 \$140 \$34 \$34 \$34	3 \$419	\$103	\$102
MRIS211 L \$24,018 \$11,741 \$11,643 342 \$70 \$34 \$34	3 \$211	\$103	\$102
PSYC150 L \$266,229 \$83,283 \$27,527 4626 \$58 \$18 \$18 \$6 }	3 \$173	\$54	\$18
SCILIFIE F \$2 943 071 \$793,257 \$182,284 30633 \$96 \$26 \$26 \$	4 \$384	\$104	\$24
SOCY345 U \$17,477 \$3,133 \$1,035 174 \$100 \$18 \$6	3 \$301	\$54	\$18
SOCY373 U \$8,024 \$1,836 \$607 102 \$79 \$18 \$6	3 \$236	\$54	\$18

Instructor Cost - Salary & Fringe - the actual cost to teach a course

Department Cost - Departmental Level Non Instructor Compensation, Supplies and Equipment - departmental average applied to all course prefixes within a department

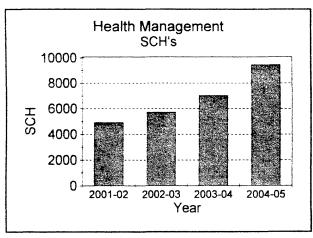
^{***} Dean's Cost - Dean's Level Non Instructor Compensation, Supplies and Equipment - college average applied to all course prefixes within a college

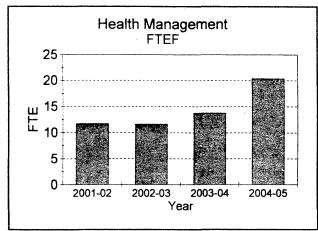
Ferris State University

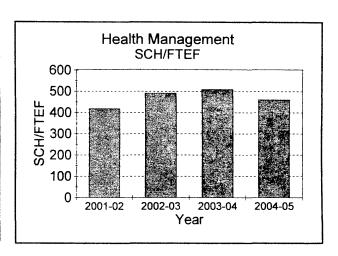
Student Credit Hours (SCH), Full Time Equated Faculty (FTEF) and SCH/FTEF Aggregated by Department

Fall and Winter Terms Combined

Health Management (College of Allied Health Sciences)





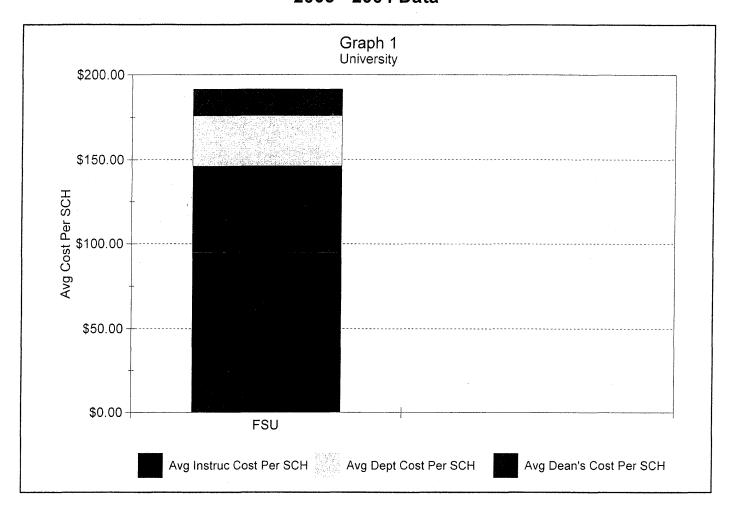


<u>Year</u>	<u>SCH</u>	FTEF	SCH/FTEF
2001-02	4,895.00	11.73	417.29
2002-03	5,686.00	11.62	489.23
2003-04	6,989.00	13.77	507.53
2004-05	9,375.00	20.38	459.99

<< College of Allied Health Sciences Reorganized in 2005-06 >> << see detailed information for the FTE & SCH for the 2005-06 data >>

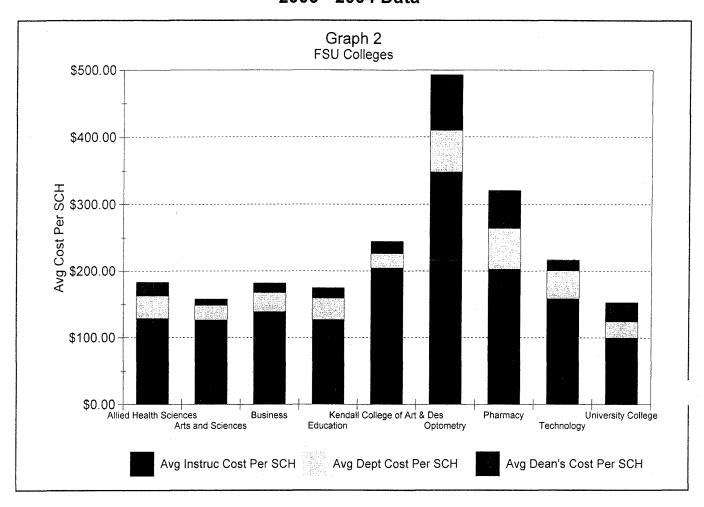
Caution: When viewing graphs, please note the differences in scales Source: Office of Institutional Research, g:\...\factorized for the difference of Institutional Research, g:\...\factorize

Ferris State University
Average Instructor, Department and Dean's Cost Per SCH for Degree Programs
The University
2003 - 2004 Data



University	Avg Instructor	Avg Dept	Avg Dean's	Total Avg
	Cost/SCH	Cost/SCH	<u>Cost/SCH</u>	<u>Cost/SCH</u>
FSU	\$146.08	\$29.80	\$15.68	\$191.56

Ferris State University
Average Instructor, Department and Dean's Cost Per SCH for Degree Programs
FSU Colleges
2003 - 2004 Data



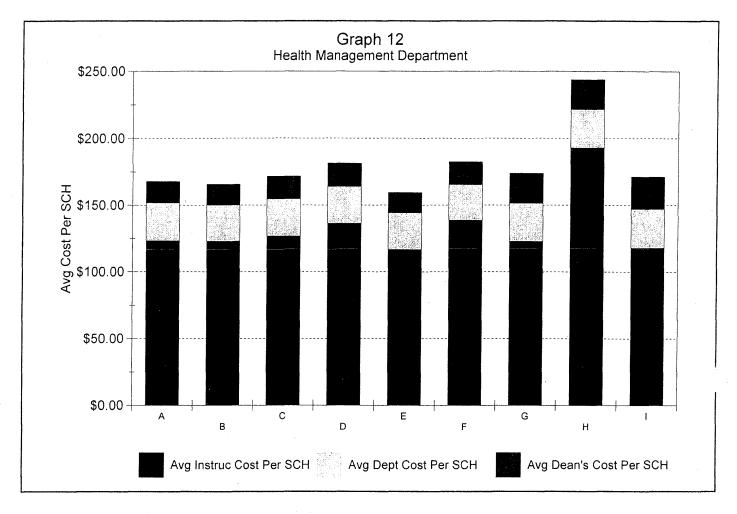
Colleges	Avg Instructor Cost/SCH	Avg Dept Cost/SCH	Avg Dean's <u>Cost/SCH</u>	Total Avg Cost/SCH
Allied Health Sciences	\$129.05	\$33.60	\$20.56	\$183.21
Arts and Sciences	\$126.58	\$21.93	\$9.52	\$158.04
Business	\$138.86	\$28.78	\$14.30	\$181.95
Education	\$127.05	\$32.14	\$15.49	\$174.67
Kendall College of Art & Design	\$204.55	\$21.75	\$18.11	\$244.41
Optometry	\$347.89	\$61.93	\$83.22	\$493.04
Pharmacy	\$202.84	\$61.38	\$56.26	\$320.47
Technology	\$158.57	\$42.03	\$16.47	\$217.06
University College	\$100.08	\$24.14	\$28.61	\$152.83

Section 3 Table 2.5 Ferris State University

Average Instructor, Department and Dean's Cost Per SCH for Degree Programs

Health Management Department





	· ·	Instructor Cost/SCH	Avg Dept Cost/SCH	Avg Dean's Cost/SCH	Total Avg Cost/SCH
Α	Environmental Health & Safety Mgmt (Env Health option) BS	\$123.24	\$28.62	\$15.97	\$167.84
В	Environmental Hith & Safety Mgmt (Haz Material Mgmt opt) BS	\$122.88	\$27.22	\$15.55	\$165.65
С	Environmental Hith & Safety Mgmt (Indust Hygiene option) BS	\$126.70	\$27.91	\$16.94	\$171.55
D	Environmental Hlth & Safety Mgmt (Indust Safety option) BS	\$136.22	\$27.72	\$17.49	\$181.44
Ε	Environmental HIth & Safety Tech (Env Health option) AAS	\$116.71	\$27.58	\$15.10	\$159.39
F	Environmental HIth & Safety Tech (Occ HIth & Safe opt) AAS	\$138.68	\$26.70	\$17.06	\$182.45
G	Health Care Systems Administration BS	\$122.96	\$28.61	\$22.26	\$173.82
Н	Medical Record Administration BS	\$193.01	\$28.75	\$22.02	\$243.78
1	Medical Record Technology AAS	\$118.06	\$29.17	\$23.99	\$171.22

Table I

Degree Program Costing Summary Alpha Listing of Programs 2003-04

Program Name	Prog Crs Req	Total Instructor Cost*	Total Dept Cost**	Total Dean's Cost***	Total Program Cost	Instructor Cost Per SCH	Dept Cost Per SCH	Dean's Cost Per SCH	Total Cost Per SCH
Early Childhood Education AAS	63	\$6,512.86	\$1,875.17	\$998.90	\$9,386.93	\$103.38	\$29.76	\$15.86	\$149.00
Elect/Electron Engr Tech (Indust Auto) BS (Yrs	68	\$10,866.10	\$2,426.80	\$1,036.41	\$14,329.32	\$159.80	\$35.69	\$15.24	\$210.73
Elect/Electron Engr Tech (Tech Integration) BS	68	\$9,819.50	\$2,320.64	\$1,039.87	\$13,180.02	\$144.40	\$34.13	\$15.29	\$193.82
Elementary Education BS	120	\$11,284.62	\$3,159.78	\$1,500.52	\$15,944.91	\$94.04	\$26.33	\$12.50	\$132.87
English Composition BA	126	\$17,884.83	\$2,427.06		\$21,468.85	\$141.94	\$19.26	\$9.18	\$170.39
English Education BS	140	\$14,161.46	\$3,234.79	1	\$18,921.09	\$101.15	\$23.11	\$10.89	\$135.15
English Literature BA	126	\$15,969.45	\$2,515.08	\$1,215.25	\$19,699.78	\$126.74	\$19.96	\$9.64	\$156.35
Environmental Health & Safety Mgmt (Env Healt	131	\$16,145.02	\$3,749.82	\$2,092.24	\$21,987.09	\$123.24	\$28.62	\$15.97	\$167.84
Environmental Hlth & Safety Mgmt (Haz Materia	126	\$15,483.25	\$3,429.14	\$1,959.13	\$20,871.51	\$122.88	\$27.22	\$15.55	\$165.65
Environmental Hith & Safety Mgmt (Indust Hygis	1 1	\$15,710.95	\$3,460.86	\$2,100.88	\$21,272.69	\$126.70	\$27.91	\$16.94	\$171.55
Environmental Hith & Safety Mgmt (Indust Safet	124	\$16,891.46	\$3,437.83	! !	\$22,498.39	\$136.22	\$27.72	\$17.49	\$181.44
Environmental Hith & Safety Tech (Env Health c	63	\$7,352.54	\$1,737.77	\$951.34	\$10,041.65	\$116.71	\$27.58	\$15.10	\$159.39
Environmental Hith & Safety Tech (Occ Hith & S	1 1	\$8,598.37	\$1,655.48	\$1,057.82	\$11,311.67	\$138.68	\$26.70	\$17.06	\$182.45
Facilities Management BS (Yrs 3 & 4)	68	\$10,154.95	\$3,328.12		\$14,638.14	\$149.34	\$48.94	\$16.99	\$215.27
Facilities Management Certificate	12	\$2,232.04	\$871.32	\$262.25	\$3,365.61	\$186.00	\$72.61	\$21.85	\$280.47
Finance/Investment Concentration BS	123	\$21,360.45	\$2,727.85	\$1,700.92	\$25,789.21	\$173.66	\$22.18	\$13.83	\$209.67
Fine Arts/Art/K-12 Art Education Certification Bl		\$15,438.43	\$3,537.93	· /	\$21,540.59	\$115.21	\$26.40	\$19.14	\$160.75
Fine Arts/Drawing BFA	120	\$15,719.18	\$2,773.80	\$2,153.96	\$20,646.95	\$130.99	\$23.11	\$17.95	\$172.06
Fine Arts/Drawing MFA	60	\$34,837.79	\$1,821.58	\$1,085.14	\$37,744.50	\$580.63	\$30.36	\$18.09	\$629.08
i Fine Arts/Dual Concentration MFA	60	\$34,837.79	\$1,821.58	\$1,085.14	\$37,744.50	\$580.63	\$30.36	\$18.09	\$629.08
Fine Arts/Painting BFA	120	\$15,318.49	\$2,802.78	\$2,153.96	\$20,275.23	\$127.65	\$23.36	\$17.95	\$168.96
Fine Arts/Painting MFA	60	\$34,837.79	\$1,821.58	\$1,085.14	\$37,744.50	\$580.63	\$30.36	\$18.09	\$629.08
Fine Arts/Photography BFA	120	\$15,806.49	\$2,729.45	\$2,153.96	\$20,689.91	\$131.72	\$22.75	\$17.95	\$172.42
Fine Arts/Photography MFA	60	\$34,837.79	\$1,821.58	\$1,085.14	\$37,744.50	\$580.63	\$30.36	\$18.09	\$629.08
Fine Arts/Printmaking BFA	120	\$16,820.57	\$3,030.93	\$2,178.44	\$22,029.94	\$140.17	\$25.26	\$18.15	\$183.58
Fine Arts/Printmaking MFA	60	\$34,837.79	\$1,821.58	\$1,085.14	\$37,744.50	\$580.63	\$30.36	\$18.09	\$629.08
Fine Arts/Sculpture BFA	120	\$24,859.19	\$2,802.78	\$2,153.96	\$29,815.94	\$207.16	\$23.36	\$17.95	\$248.47
Fine Arts/Woodworking & Functional Art BFA	120	\$19,384.74	\$3,025.07	\$2,170.28	\$24,580.10	\$161.54	\$25.21	\$18.09	\$204.83
Furniture Design BFA	120	\$24,799.63	\$2,153.51	\$2,153.96	\$29,107.11	\$206.66	\$17.95	\$17.95	\$242.56
General Business AAS	63	\$7,011.61	\$1,565.45	\$886.91	\$9,463.96	\$111.30	\$24.85	\$14.08	\$150.22
General Studies AA	60	\$5,896.09	\$1,372.43	\$1,137.83	\$8,406.35	\$98.27	\$22.87	\$18.96	\$140.11
Geographic Information Systems Certificate	6	\$900.66	\$224.88	\$124.02	\$1,249.55	\$150.11	\$37.48	\$20.67	\$208.26
Health Care, Systems Administration BS	123	\$15,123.94	\$3,519.17	\$2,737.37	\$21,380.47	\$122.96	\$28.61	\$22.26	\$173.82
Heavy Equipment Service Eng Tech BS (Yrs 3	70	\$8,853.74	\$4,578.37	\$1,228.53	\$14,660.63	\$126.48	\$65.41	\$17.55	\$209.44
Heavy Equipment Technology AAS	68	\$12,603.70	\$6,986.72	\$1,187.57	\$20,777.99	\$185.35	\$102.75	\$17.46	\$305.56
Heavy Equipment Technology Komatsu Equip R	18	\$2,701.98	\$674.63	\$372.05	\$3,748.66	\$150.11	\$37.48	\$20.67	\$208.26
History BA	126	\$14,615.92	\$2,655.43	\$1,261.14	\$18,532.50	\$116.00	\$21.07	\$10.01	\$147.08
Horticulture for Golf Course Managers Certifica	11	\$3,213.44	\$329.01	\$65.46	\$3,607.91	\$292.13	\$29.91	\$5.95	\$327.99
Hotel Management BS (Yrs 3 & 4)	63	\$8,539.37	\$1,612.70	\$862.29	\$11,014.36	\$135.55	\$25.60	\$13.69	\$174.83
Hotel Management Certificate	12	\$964.17	\$331.59	\$207.79	\$1,503.55	\$80.35	\$27.63	\$17.32	\$125.30
Human Resource Management BS	124	\$16,365.81	\$2,925.89	\$1,641.20	\$20,932.89	\$131.98	\$23.60	\$13.24	\$168.81
HVACR Engineering Technology BS (Yrs 3 & 4	64	\$10,702.14	\$3,693.30	\$1,076.67	\$15,472.12	\$167.22	\$57.71	\$16.82	\$241.75

Instructor Cost - Salary & Fringe
Department Cost - Departmental Level Non Instructor Compensation, Supplies and Equipment

^{***} Dean's Cost - Dean's Level Non Instructor Compensation, Supplies and Equipment

Table II

Degree Program Costing Total Program Cost Ranked High to Low 2003-04

	Program Credits	Total Instructor	Total Dept	Total Dean's	Total Program
Program Name	Required	Cost*	Cost**	Cost***	Cost
Recreation Leadership & Mgmt/Outdoor-Adv Edu Track	128	\$16,132.68	\$4,203.19	\$2,041.65	\$22,377.52
New Media Printing and Publishing BS (Yrs 3 & 4)	68	\$17,861.55	\$3,311.48	\$1,038.28	\$22,211.31
Tech & Professional Comm (Computer Info Writing Track	121	\$17,997.32	\$2,860.09	\$1,248.35	\$22,105.76
Accountancy (Professionally Directed Track) BS	124	\$17,416.76	\$2,833.69	\$1,783.97	\$22,034.42
Fine Arts/Printmaking BFA	120	\$16,820.57	\$3,030.93	\$2,178.44	\$22,029.94
Mathematics Education BS	142	\$16,905.23	\$3,336.87	\$1,785.67	\$22,027.77
Environmental Health & Safety Mgmt (Env Health option)	131	\$16,145.02	\$3,749.82	\$2,092.24	\$21,987.09
Management BS	130	\$16,871.15	\$3,145.27	\$1,812.90	\$21,829.32
Construction Management (Highway/Bridge Track) BS	129	\$16,822.72	\$2,893.27	\$2,093.52	\$21,809.51
Biochemistry BA	126	\$17,767.24	\$2,724.31	\$1,201.69	\$21,693.24
Tech & Professional Comm (Multimedia Writing Track) E	121	\$17,458.76	\$2,906.28	\$1,291.37	\$21,656.41
Recreation Leadership & Mgmt/Sports Management Trac	128	\$15,501.37	\$4,127.80	\$2,019.94	\$21,649.10
Tech & Professional Comm (Automotive Writing Track) I	121	\$17,298.34	\$3,007.37	\$1,299.71	\$21,605.43
Fine Arts/Art/K-12 Art Education Certification BFA	134	\$15,438.43	\$3,537.93	\$2,564.23	\$21,540.59
Construction Management (Mech/Elect/Plumbing Track)	129	\$16,336.30	\$3,076.27	\$2,093.52	\$21,506.09
Fralish Composition BA	126	\$17,884.83	\$2,427.06	\$1,156.96	\$21,468.85
Feation Leadership & Mgmt/Leisure Service Track Bt	128	\$15,292.13	\$4,140.92	\$2,024.85	\$21,457.90
Construction Management (Commercial/Indust Track) B	129	\$16,259.20	\$3,076.27	\$2,093.52	\$21,428.99
Health Care Systems Administration BS	123	\$15,123.94	\$3,519.17	\$2,737.37	\$21,380.47
Environmental Hlth & Safety Mgmt (Indust Hygiene option	124	\$15,710.95	\$3,460.86	\$2,100.88	\$21,272.69
Music Industry Management BS	124	\$15,568.22	\$3,780.36	\$1,707.56	\$21,056.14
Advertising BS	125	\$15,589.81	\$3,779.52	\$1,684.11	\$21,053.44
Applied Speech Communication BS	126	\$17,129.75	\$2,611.68	\$1,286.73	\$21,028.16
Operations & Supply Management BB	124	\$15,863.51	\$3,319.20	\$1,839.35	\$21,022.06
Printing & Digital Graphic Imaging Technology AAS	62	\$15,744.01	\$4,116.10	\$1,102.40	\$20,962.51
Tech & Professional Comm (Sci & Medical Writing Track)	121	\$16,993.52	\$2,747.10	\$1,196.27	\$20,936.90
Human Resource Management BS	124	\$16,365.81	\$2,925.89	\$1,641.20	\$20,932.89
Environmental Hith & Safety Mgmt (Haz Material Mgmt o	126	\$15,483.25	\$3,429.14	\$1,959.13	\$20,871.51
Business Administration w/ AAS in Legal Studies	128	\$15,897.13	\$3,106.14	\$1,814.31	\$20,817.58
Heavy Equipment Technology AAS	68	\$12,603.70	\$6,986.72	\$1,187.57	\$20,777.99
Fine Arts/Photography BFA	120	\$15,806.49	\$2,729.45	\$2,153.96	\$20,689.91
International Business BS	125	\$15,887.98	\$3,057.49	\$1,741.09	\$20,686.56
E-Commerce Marketing BS	124	\$15,152.64	\$3,746.00	\$1,750.67	\$20,649.31
Fine Arts/Drawing BFA	120	\$15,719.18	\$2,773.80	\$2,153.96	\$20,646.95
Visual Communication - Print Media Focus BFA	120	\$16,425.22	11	\$2,153.96	\$20,644.01
Professional Golf Management BS	127	\$14,801.56	\$3,980.91	\$1,790.06	\$20,572.53

^{***} Dean's Cost - Dean's Level Non Instructor Compensation, Supplies and Equipment