

PROGRAM NAME: <u>HEALTH INFORMATION MANAGEMENT</u> PROGRAM REVIEW CONTACT: KELLEY REYNOLDS PHONE: 972.548.6819 EMAIL: <u>KREYNOLDS@COLLIN.EDU</u>

GUIDELINES

Time Frames:

1. **Scope**:

The time frame of program review is five years, including the year of the review. Data being reviewed for any item should go back the previous four years, unless not available.

2. Deadline Dates:

January 15th – Program Review Document due to Department Dean for review

February 1st – Program Review Document due to Program Review Steering Committee

3. Years:

Years 1 & 3 – Implement Action Plan of (CIP) and collect data

Years 2 & 4 – Analyze data and findings, Update Action Plan

Year 5 – Write Program Review of past 4 years; Write Continuous Improvement Plan (CIP) and create new Action

Plan

LENGTH OF RESPONSES: Information provided to each question may vary but should be generally kept in the range of 1-2 pages.

EVIDENCE GUIDELINES: In the following sections, you will be asked to provide evidence for assertions made.

a. **Sources**: This evidence may come from various sources including professional accreditation reviews, THECB, Texas Workforce Commission's CREWS, Institutional Research Office, National Student Clearinghouse, IPEDS, EMSI Analyst or EMSI Career Coach, and may be quantifiable and/or qualitative. If you are unfamiliar with any of these information sources, contact David Liska (<u>dliska@collin.edu</u>, 972.985.3714). Use additional data sources of which you are aware.

b. Examples of Evidence Statements:

- 1. Poor example: Core values are integrated into coursework. (Not verifiable)
- 2. Good example: Core values are integrated into coursework through written reflections. (Verifiable, but general)
- 3. Better example: Core values are integrating into coursework through written reflections asking the student to describe how s/he will demonstrate each of the core values in his or her professional life and demonstrated through service learning opportunities. (Replicable, Verifiable)

FOR MORE INFORMATION: Any questions regarding this review, including forms, calendars & due dates, should be addressed to Scott Parke (sparke@collin.edu, 972.599.3117) or David Liska (dliska@collin.edu, 972.985.3714) in Policy and Planning/Institutional Effectiveness.

Section I. Are We Doing the Right Things?



1. WHAT DOES YOUR WORKFORCE PROGRAM DO?

A. What is the program and its context?

Health Information Management – A National Perspective

The national initiative of patient-centered, value based, quality focused care; known as the Triple Aim, combined with the implementation of electronic health records places Health Information Management professionals at the epicenter of healthcare transition. Health Information Management roles are tasked with the responsibility of ensuring the availability, accuracy, integrity, and security of all data related to patient healthcare encounters resulting in better clinical and business decisions in order to enhance healthcare quality. HIM professionals work in a variety of settings throughout the healthcare industry including all entities within the healthcare delivery system, insurance companies, government agencies, pharmaceutical companies, schools, correctional institutions, public health agencies, and vendors.

Documentation of medical ailments and procedures has been a part of the healthcare continuum for centuries. Under titles like medical librarians and medical records, professionals worked to support the efforts of the physician. As healthcare evolved and governmental regulations required roles in reimbursement and compliance, non-clinical healthcare professionals moved into those roles to focus on documentation for reimbursement or to satisfy legal requirements. Technology has impacted the HIM role through the ability to leverage data into business intelligence. The American Health Information Management Association is in its initial phase of data gathering to determine what the profession will look like in the next 10 years. As chair of the Health Information Reimagined Taskforce, the Collin College HIM program director is spearheading this national initiative which will result in curriculum changes and additional credentials for programs throughout the United States.

The Health Information Management (HIM) program at Collin College exists to provide competent HIM professionals to our community of interest. The HIM program accomplishes this by providing a 60 credit hour online degree program accredited by the Commission on Accreditation for Health Informatics and Information Management (CAHIIM). The curriculum is based on the American Health Information Management Association (AHIMA) curricular competencies for Associate degree education and is approved by the Texas Higher Education Coordinating Board (THECB). Those competencies mirror tasks evaluated on the Registered Health Information Technician (RHIT) certification, the credential graduates of the HIM program are eligible for upon completion of the degree.

A selective admission program, Collin HIM incorporates classroom instruction and a professional practice experience designed to give students a good understanding of the field. The program prepares students to earn an Associate of Applied Science Degree in





Health Information Management. Upon successful completion of coursework and the credentialing exam (facilitated by AHIMA) the graduate earns the Registered Health Information Technician (RHIT) credential. The duration of the program is two academic years (four semesters) for full time students. Courses include AAS core courses as well as HIM program components.

B. Executive summary: briefly summarize the topics that are addressed in this self-study, including areas of strengths and areas of concern.

Continuously evolving since accreditation in March 2010, the HIM program uses the College Mission, Core Values, and program accreditation standards as guidelines for change. The current version of the HIM program reflects a foundation of academic excellence through the selective admission process and rigor of HIM courses. The program is committed to assisting students build their professional skills demonstrated by the requirement of resume creation and interview prep in their last semester. Upon admission, students work with the program director to develop a plan for completion. Continuous advising by the program director is provided throughout their HIM educational experience to keep students focused and motivated toward completion.

An active feedback loop between employers, Professional Practice Experience (PPE) sites, and other stakeholders encourages conversation around market need and potential partnerships. Change in the industry has provided the profession with an opportunity to enhance areas of specialization and market the profession to areas outside the traditional hospital setting.

The Collin HIM program has built a reputation of quality employment candidates. Area employers seek Collin grads for their HIM competency and knowledge of the industry. The generosity of the college has enabled the program director to be involved at the national level. This ensures the Collin HIM program is current and relevant as changes made nationally are quickly accommodated at the local level. The national exposure has also positioned the Collin program as a resource for the region in understanding the national landscape and for trends in HIM and healthcare.

The biggest challenge in the program is in creating and disseminating the HIM message to potential students and employers. Health Information Management is not a field understood by many outside the HIM family. This has to change. It is a struggle at all HIM levels from the education communities through the national healthcare organizations. A national HIM Awareness campaign was initiated in 2016 by AHIMA. The Collin HIM program director was on the workgroup that developed the campaign and she is the Texas coordinator for HIM Awareness. The functions of HIM are more important now than ever because of the need for quality information throughout the healthcare spectrum. As healthcare becomes more technologically complex, professionals tasked with the information's security and integrity become paramount. Clinicians must have confidence in the information available to them.



2. WHY DO WE DO THE THINGS WE DO: PROGRAM RELATIONSHIP TO THE COLLEGE MISSION, CORE VALUES & STRATEGIC PLAN.

• Provide program-specific evidence of actions that the program supports the <u>college mission</u>: "Collin County Community College District is a student and community-centered institution committed to developing skills, strengthening character, and challenging the intellect."

The Health Information Management (HIM) program fulfills the Collin College mission statement by providing students the necessary education and training to obtain an Associate Degree in Applied Science (AAS-HIM) and obtain the Registered Health Information Technician (RHIT) national certification. Increasing demands in the reimbursement and regulatory environment requires healthcare professionals to be competent in HIM areas. On the job training without formal education has proven unsatisfactory for employers. Education at the Associate level is strongly recommended for employment and promotion within the health information management industry. The RHIT credential is often cited as a job requirement in area hospital postings. The program challenges students to learn and develop skills necessary to further their education and careers. Our credentialing exam pass rates demonstrate our faculty is committed to student success. The HIM Advisory Board provides feedback ensuring we meet the needs of our community partners. Over the last two years, an emphasis on Advisory Committee representation outside the inpatient environment has led to the addition of a member from the revenue cycle area.

• Provide program-specific evidence of actions that support the case that the program and its faculty contribute to fulfillment of the college <u>core values</u>: "We have a passion for Learning, Service, Involvement, Creativity, Innovation, Academic Excellence, Dignity, Respect and Integrity."

Learning: National RHIT exam results for graduates are evidence that students are active in the learning process. Faculty are committed to the teaching and learning process and challenge students with on-line instructional delivery methods. The program has selective admission so students are committed to the program format. The program complies with required curricular competencies outlined by AHIMA.

Service and Involvement: Students are involved in the Collin Health Information Management Association. This organization participates in community service each semester and in 2013 won best new student organization. Students provide education to the community during the Health and Safety fair and in Service Learning projects with faculty. Faculty is involved in college service at both the division and college-wide levels. The program participates in area career fairs, campus events, and volunteer initiatives (Harvest boxes, NT food bank drive, Meals on Wheels).



Creativity and Innovation: Students perform data analysis of electronic health records which simulates the function of an RHIT in a healthcare environment. Students participate in on-campus multi-disciplinary simulations when available and are required to develop "Professional Practice Experience" (PPE) electronic notebooks. This project brings together all of the HIM course work and combines it with their professional practice experiences. The PPE project includes an electronic "portfolio" for students to use when they seek career opportunities. Faculty utilizes creative and innovative methods to teach online curriculum using available tools and resources including the educational electronic health record, NEEHR Perfect.

Academic Excellence: The Health Information Management (HIM) program strives for academic excellence by adhering to the accreditation requirements of the Commission on Accreditation for Health Informatics and Information Management (CAHIIM) education. The overall pass rate for students in the Collin HIM program is 83.6% which is higher than the national average. Students have been awarded Texas Health Information Management Association scholarships. A National Honor Society, through AHIMA is in development for HIM students.

Dignity and Respect: All students are treated with dignity and respect. Collin College and the HIM program does not discriminate based on race, color, religion, age, sex, national origin, disability or veteran status. The "Success in HIM" document provides the guidelines for behavior in an online environment. The student and program director sign it demonstrating the agreement of conduct expected in the HIM program.

Integrity: Integrity is a personal quality demonstrated by program faculty and administration. HIM program faculty members reinforce the importance of integrity by providing real world examples of high integrity standards and failed integrity within the HIM profession. There are class-specific assignments regarding medical ethics. Registered Health Information Technicians must follow the AHIMA Code of Ethics, which states...

"A health information management professional shall:

2.1. Act with integrity, behave in a trustworthy manner, elevate service to others above self-interest, and promote high standards of practice in every setting." (AHIMA Code of Ethics)

• Provide program-specific evidence that supports how the program supports the college strategic plan:

1. Improve academic success by implementing strategies for completion.

Students in the HIM program are encouraged to complete all courses in a timely manner and obtain their RHIT credential. They are encouraged to take a minimum of two courses a semester and obtain a position in the HIM industry upon graduation. Students enrolled in pre-requisite classes are provided the program application information. The program



director meets with each eligible student to discuss the expectations of the program and to work with the candidate to develop a plan to graduation. This process lays the foundation for student success. At the end of each semester, the director identifies students who are not progressing satisfactorily and reaches out to determine a plan of action, if appropriate. All faculty work with the director to advise struggling students. Partners in the community have opportunities for students in their last semester to obtain more work experience while they are still in school. Students able to take advantage of these opportunities are able to seek employment opportunities otherwise not available to them. Because of the involvement of HIM faculty and staff, many graduates of the HIM program approach faculty at various professional meetings and let them know how grateful they are to faculty and the program. One student in particular, availed himself of the opportunities of the program and reached out to the program director about six months after graduation to let her know that he is so appreciative of the Collin HIM program. He was able to find steady employment and is able to plan a future for himself. This is a common sentiment shared by many HIM graduates. The program uses a variety of methods to determine satisfaction levels for students, graduates, and employers. A survey tool for graduates and employers is sent to email addresses. Individual face to face/phone questionnaires and advisory board meetings are also implemented to determine if there are opportunities for improvement. Responses indicate graduates and employers are satisfied with the program and their experience at Collin College. The survey response rate for graduates hovers around 10%. The program is seeking other avenues to capture feedback.

2. Provide access to innovative higher education programs that prepare students for constantly changing academic, societal, and career/workplace opportunities.

The HIM program is designed specifically for the purpose of preparing students for career advancement in the HIM and/or healthcare industry. HIM employers seek competent graduates and typically require an Associates or Bachelor's degree for employment or promotion. HIM faculty members prepare students to meet this trend. Of the 15 eligible applicants for admission in Fall 2016, 4 had advanced degrees. Approximately 10% of HIM graduates continue on to a Bachelor's degree. All students are advised to continue their education after graduation. Students are encouraged to obtain degrees in complementary fields like Business Management, Informatics, or Information Systems.

3. Engage Faculty, students, and staff in improving a district-wide culture of adherence to the Collin College Core Values.

HIM program administration, faculty, and students are engaged with the college community and the community at large. Faculty are active in college service at both the division and college-wide level. The students have an official organization (Collin Health Information Management Association – CHIMA) that participates in community service each semester.





Program faculty and students participate in the annual Collin Health and Safety Fair by providing education to the community regarding personal health records and management of personal health information. HIM faculty and staff encourage students to become active in the local and state associations through volunteerism.

4. Enhance the College's presence in the community by increasing awareness, cultivating relationships, building partnerships and developing resources to respond to current and future needs.

The HIM program builds relationships with the community through partnerships with multiple area health care facilities. Through leadership at the local (Dallas/Ft. Worth Health Information Management Association), state (Texas Health Information Management Association), and national (American Health Information Management Association) levels of HIM, Collin HIM educators are extremely engaged in the progression of the profession. The program director is chairing a taskforce at the national level to determine what the profession will look like in 10 years. Students are encouraged to get involved with the professional organizations. Student membership fee is heavily subsidized by the national association which also includes state membership. There is always a strong Collin presence by educators, graduates, and students at all levels of the professional organization.

3. WHY WE DO THE THINGS WE DO: PROGRAM RELATIONSHIP TO STUDENT DEMAND

Make a case with evidence to show that students want the Degree or Certificate, and are able to complete the program.

198 students have graduated from the HIM Program since its inception in Spring 2010. The emphasis on academic excellence and the desire to build a quality HIM program required the program to understand which students they were serving. In Fall 2012, the HIM program adopted an admission process to effectively serve those students committed to HIM. The HIM Advisory Committee stressed the importance of developing a program that would graduate a group of potential employees capable of tackling the challenges of a changing healthcare system. As Admissions requirements aligned with other Health Science programs, the number of applicants decreased. Currently, the HIM program has stabilized between 13-17 qualified applicants each application period (applications accepted in May and November). Emphasis on obtaining the RHIT credential and the enhanced rigor in the classroom have encouraged more students to sit for the credentialing exam and more are passing. The class of May 2016 has a 100% pass rate.

Personalized advising occurs upon admission to the program. Barriers are identified and a graduation plan is developed. Students are strongly encouraged to take a minimum of 2 courses each semester, including summer in order to complete in a timely manner. Success on the credentialing exam requires students to be current in HIM competencies. As industry policy and federal laws change, students will be responsible for that information on the exam. In October 2015, the code set for disease and procedures significantly changed. If a student completed coding courses earlier in their academic career, remediation was required to prepare for the exam.





Degree audits are conducted after the completion of each semester to identify potential progression issues. If appropriate, students are advised of next steps to get them back on track toward graduation.

4. WHY WE DO THE THINGS WE DO: PROGRAM RELATIONSHIP TO MARKET DEMAND

Make a case with evidence to show that employers need and hire the program's graduates.

Across the healthcare spectrum, HIM roles and job requirements vary significantly and <u>none require licensure</u>, unlike our clinical counterparts. Hospitals have grown to respect and require the HIM credentials. However, the outpatient settings are not as familiar with the profession and continue to rely on employees with little to no training. The industry trend shows increasing levels of healthcare conducted in the outpatient space versus a decrease in the inpatient environment. This trend requires our program to shift its messaging to a new sector of employer. The national association, AHIMA, is aware of this issue and is addressing on multiple fronts: curriculum, workforce awareness, and professional understanding. As outpatient environments begin to understand the necessary competencies associated with transitions in healthcare, they will search to find competent employment solutions. Messaging with emphasis on credentials that led to success on the inpatient side is beginning to be conducted on the outpatient side as well.

According to a market survey performed by the American Health Information Management Association in 2012, HIM workers without degrees earn \$10-\$12/hour. Workers with AAS degrees earn an average of \$48,466/year and workers with a baccalaureate degree earn an average of \$52,412/year.

Over 50% of Collin HIM students work full time (many already in healthcare) while taking classes. In 2013, Parkland hospital mandated their existing HIM workforce to attain an HIM credential. The mandate gave employees 2 years to achieve the requirement. Collin College has now educated many of the employees in the HIM departments of Parkland, UT Southwestern, Children's Health, and the various Baylor, THR, and HCA organizations. The program has become the "go to" pool when employers like UTSW have openings. The Collin College HIM reputation has grown to reflect the expectation of a polished and professional graduate, well versed in best practices and current challenges in healthcare.

In the United States, there are 267 accredited Associate degree programs, 59 Bachelors, and 9 at the Graduate level. In Texas, there are 23 accredited Associate HIM programs. Texas State University and Texas Southern offer baccalaureate programs and Texas State is in the process of accrediting their Master's degree program.

In our area, Tarrant County College and Tyler Junior College have accredited Associate programs. Dallas County had an accredited program at one time and de-activated their accreditation. In January 2017, Collin was notified of their intention to re-activate their program.Tarrant County conducts their program in a face to face setting. Collin has a number of students each application period



apply from TCC primarily because the program is online and they can continue working while pursuing their educational goals. In an interview with an eligible HIM candidate, her reason for moving from TCC to Collin was because the emphasis at Collin was on other areas of HIM versus the emphasis of coding at TCC. This important distinction between the programs reflects the personalities of leadership at both programs. Tyler Junior College offers their courses online however require students to come to campus for testing. Tyler does not have a selective admission process.

Collin College	38	EIPaso CC	8	St. Philip's College	19
Tarrant Co. College	22	Houston CC	14	San Jacinto College	23
Tyler Junior College	14	Lamar Inst. Of Technology	0	South Texas College	NA
Austin Comm College	16	Lee College	0	Texas State Technical College	18
Blinn College	0	LoneStar CC	8	Texas State Technical College @	0
-				Harlingen	
Brightwood	NA	McLennan CC	0	Vernon College	8
College of the Mainland	10	Midland College	13	Wharton Co. Junior College	6
DelMar	10	Panola College	5		

2014-2015 AAS Degrees Awarded in Accredited Texas programs

There is a demonstrated need for more professionals in the HIM industry. We anticipate HIM market demand will increase in the next 5 years. The Bureau of Labor Statistics has reported the following statistics for the HIM sector.

Quick Facts: Medical Records and Health Information Technicians			
2015 Median Pay	\$37,110 per year \$17.84 per hour		
Typical Entry-Level Education	Postsecondary nondegree award		
Work Experience in a Related Occupation	None		
On-the-job Training	None		
Number of Jobs, 2014	188,600		
Job Outlook, 2014-24	15% (Much faster than average)		

8-10-2016



Quick Facts: Medical Records and Health Information Technicians				
Employment Change, 2014-24	29,000			

Toyoo	16,730	1.05 Location quotient – higher than 1 indicates a	\$18.66 (hourly mean	\$38,810 (Annual mean
lexas	jobs	higher share of employment than average	wage)	wage)

https://www.bls.gov/oes/current/oes292071.htm_May 2015

The hourly wage numbers are in line with the hourly rates offered to Collin graduates. Those students who already have a bachelors or Master's degree are able to secure a higher hourly rate with the RHIT certification.

We can point to the trend of employment with the credential as a positive indication that graduates are finding success after graduation. Area hospitals recognize the credential and many require it for employment. However, the credential is not an employment requirement and graduates sometimes make the decision not to take the certification exam. There is a correlation between graduates who wait later than six months to take the exam and a non-passing score. The program director reaches out to graduates once a year to encourage them to retake the review class if they have waited more than six months to take the exam. Unlike other healthcare professions, the testing entity of AHIMA does not require students to sit for the credential within a certain period of time.

Employment numbers

Year	# RHIT	# Employed
2010-2011	12	6
2011-2012	10	7
2012-2013	18	14
2013-2014	21	15
2014-2015	22	16
2015-2016	14*	11

*Summer 2016 will take RHIT exam late Fall 2016- Spring 2017

Internal Strengths





Involved faculty and leadership at all levels of the professional organization.

The program director served as chair for the Council for Excellence in Education in 2016. In 2013, she was part of a small taskforce charged with developing progressive curriculum at the Associate, Bachelor, and Master levels. In 2017, the new curriculum is required to be implemented nationally throughout all 332 accredited HIM programs. The Collin HIM program implemented this curriculum in Fall 2015. Beginning in 2017 the program director will serve as chair for the Health Information Management Reimagined taskforce which is charged with establishing the vision for HIM education through 2027. The program director is also an ex-officio commissioner on the certification body's (CCHIIM) board. Faculty serves in leadership positions at the local level and are active with state committees. All faculty teaching HIM specific content have been involved in HIM departments in major healthcare organizations. We have 2 currently serving as HIM directors in area hospitals.

Online delivery

More than 50% of the HIM student population work full time and a face to face class requirement would be difficult. In the last three semesters, we have accepted 5 students from Tarrant County College. They were unable to continue their education with TCC because of scheduling conflicts.

HIM is a role conducted autonomously. The online environment requires students to become comfortable with technology, a crucial skill for any HIM professional. Feedback from students indicates the courses are rigorous. Feedback from students transferring from other HIM programs indicates students see the courses at Collin as more rigorous than in previous institutions.

Selective admission

Health Information Management is linked with Coding and Billing. Schools providing for-profit coding and billing education advertise on daytime TV and in the back of magazines targeting stay at home women. The advertising created a perception that anyone can perform coding and billing jobs making good money from home, working in their pajamas. Perception is not reality. It was necessary for the HIM program to distance itself from the Medical Coding and Billing certificate in order to attract candidates who could be successful on the RHIT exam. The admissions process that began in Fall 2012 has been continually modified to its current form. Faculty has reported a more productive class environment and students appreciate the professional academic atmosphere. The Medical Coding and Billing certificate often becomes the starting point for students ultimately moving to the degree.

Internal Weaknesses



Health Information Management is vital to effective healthcare delivery. The profession does not do a good job promoting the skill sets of HIM professionals. Often, inpatient facilities require the RHIT credential but other delivery settings are unaware of the support an RHIT can offer. AHIMA, the national organization, launched *HIM Awareness* this year to all 50 component state associations. The awareness campaign is designed to educate HR professionals and employment communities at large of the skill sets of HIM professionals. The Collin College HIM program also needs to reach out to our marketplace and encourage those areas not currently employing an RHIT to re-evaluate their needs to determine if they can afford to be without credentialed support. The program works to increase visibility through presentations in the community and area employers. Collin HIM educators are active at the local, state, and national levels of the HIM association which serves to increase the visibility of the program to existing HIM professionals. The program needs assistance in creating and distributing the HIM message within the Collin community. This will require PR professionals to research and understand HIM before good messaging can be created.

Understanding course effectiveness

The tools the college currently implements for course evaluation produces unsatisfactory results. Response rates for student evaluations in online classes are very low and a robust faculty evaluation process for online faculty is not available. The current faculty "class visit" evaluation tool is not relevant for online faculty. HIM faculty continue to be at a disadvantage because they do not get the student evaluation response rate of on campus classes and they are not evaluated in a meaningful way. This has implications in the multi-year process.

Earlier student interaction

The online environment sometimes perpetuates gaps in understanding. Announcements regarding HIM application are made in all pre-requisite classes. However, students may not be processing the message. Students who come to the director for advising get a clear path to graduation as well as an involved description of the application process. Early advising for students results in a smooth path to completion. The program needs to develop a consistent message to engage students and enhance awareness of the application process. The earlier a student makes application, the more engaged they are and the higher the chance of eligibility for workforce opportunities and scholarships.

Section II. Are We Doing Things Right?





5. HOW EFFECTIVE IS OUR <u>CURRICULUM</u> AND HOW DO WE KNOW?

A. Make a case with evidence that there are no curricular barriers to completion. Review the course enrollment, course retention rate, course success rate, and periodic scheduling to identify barriers to program completion.

A. Students that complete the program receive an AAS in Health Information Management

Year	Enrolled	Completers	Not progressing	Moved to another semester
2011-2012	Unable to track	17	Unable to track	Unable to track
2012-2013	Unable to track	38	12	2
2013-2014	52	43	8	No cohort designation
2014-2015	48	38	4	6
2015-2016	43	32	1	10

Retention

In an effort to graduate HIM professionals capable of addressing the challenges in healthcare, students must be prepared to succeed on the RHIT exam. Given the parameters of online education, Collin HIM faculty agreed it was time to close the program to admit only those students who could demonstrate academic competency. For student success, it was necessary to identify pre-HIM students and to provide the resources necessary for timely completion. In November 2012, Collin evaluated the first group of applicants. In May 2013, the process was strengthened to determine eligibility based on PSB performance. At that time, 11 students applied to the program and 7 were deemed eligible and accepted admission. In Fall 2013, HIM began using The HOBET (the Health Occupations Basic Entrance Test - an Assessment Technologies Institute product) as the test for HIM admission because ATI benchmarked HIM skill sets to HOBET test results. The HOBET became the TEAS (Test of Essential Academic Skills) test in Fall 2015. A selective admissions process assists with the quality of student Collin HIM attracts, retains, and ultimately graduates. Qualitative analysis of students who have taken the RHIT exam demonstrates the longer a student waits to take the test, the higher the likelihood of failure, as a result it was imperative to establish a process to identify, advise, and complete students in a timely manner. The HIM faculty and director encourage students to take the exam within a few months of graduation. Faculty has responded positively to the increase in the quality of student they are seeing in their classrooms. As an online program, it is critical for the program to understand who their students are and connect with them routinely to create a committed student population.

Once students are admitted, they can take classes at their own pace, at least 2 courses a semester. Personalized advising within the program addresses any barriers to completion. Perception of the HIM profession is a barrier that has been identified prior to program



entry. Advertising for "coding and billing" employment led people to believe this was a job they could do from home with little or no training. The HIM Program application process and use of a standardized test with selective admission criteria has helped to change this perception.

Credentialing Exam Pass rates

116 students have attempted the RHIT exam since May 2010. 97 students have passed and 19 Failed (17 of the 19 were admitted under the open (old) admissions process). The overall pass rate is 83.6%. A few students have attempted the test twice and one student has taken the test 4 times. When a student is unsuccessful, the program director contacts the individual encouraging them to take the review class again. Students are encouraged to take the test within 6 months of graduation. Students are not required to sit for certification and there is no time limit. Currently, the Spring 2016 class has achieved a 100% pass rate.

- B. Show evidence that the THECB standards listed below have been met. For any standard not met, describe the plan for bringing the program into compliance.
 - 1. Credit Hour Standard: There are no more than 60 credit hours in the program plan.

Number of semester credit hours (SCH) in the program plan: 60. The HIM program transitioned to 60 hours in Fall 2015.

HIM Degree Plan AAS - Health Information Management		FICE 02361	CODE: 4	:		CIP 51.0707
PREREQUISITES		<u>Lec</u>	<u>Lab</u>	<u>Ext</u>	<u>Cont</u>	<u>Hours</u>
ENGL1301Composition IHITT1305Medical Terminology IPHIL2306Introduction to Ethics 1PSYC2301General Psychology 2		3 3 3 3	1 0 0 0	0 0 0 0	64 48 48 48	3 3 3 3
	Total Hours	12	1	0	208	12

FIRST YEAR

Primary Self Study Questions were adapted from Academic Program Review "Structuring the Six Self Study Questions", Michigan State University, 2008.



First S	emeste	r	<u>Lec</u>	<u>Lab</u>	<u>Ext</u>	<u>Cont</u>	<u>Hours</u>
<u>BIOL</u> HITT HITT HPRS	<u>2404</u> 1301 2471 2232	<u>Human Anatomy and Physiology Basic</u> Health Data Content and Structure Pharmacology and Pathophysiology Health Care Communications	3 2 3 2	4 2 3 0	0 0 0	112 64 96 32	4 3 4 2
		Total Hours	10	9	0	304	13
Secon	d Seme	ster	<u>Lec</u>	<u>Lab</u>	<u>Ext</u>	<u>Cont</u>	<u>Hours</u>
HITT HITT HITT <u>HUMA</u>	1311 1345 1341 <u>1301</u>	Health Information Systems Health Care Delivery Systems Coding and Classification Systems Introduction to Humanities I ³	2 2 2 3	2 2 3 0	0 0 0 0	64 64 80 48	3 3 3 3
		Total Hours	9	7	0	256	12
	ND YEA emeste		Lec	Lab	Ext	Cont	Hours
HITT	1160	Clinical I - Health Information / Medical Record Technology	0	0	3	48	1
HITT HITT HITT HITT	1353 2339 2346 2435	Legal and Ethical Aspects of Health Information Health Information Organization and Supervision Advanced Medical Coding Coding and Reimbursement Methodologies	3 2 2 3	0 2 3 3	0 0 0 0	48 64 80 96	3 3 3 4
		Total Hours	10	8	3	336	14
Secon	d Seme	ster	<u>Lec</u>	<u>Lab</u>	<u>Ext</u>	<u>Cont</u>	<u>Hours</u>

Primary Self Study Questions were adapted from Academic Program Review "Structuring the Six Self Study Questions", Michigan State University, 2008.



		GRAND TOTAL	46	28	19	1488	60	
		Total Hours	5	3	16	384	9	
HITT	2443	Quality Assessment and Performance Improvement	3	3	0	96	4	_
HITT	2361	Clinical II - Health Information / Medical Records Technology ⁴	0	0	16	256	3	

1 May substitute PHIL 1301, PHIL 1304, PHIL 2303, PHIL 2307 or PHIL 2321

2 May substitute ANTH 2302, ANTH 2346, ANTH 2351, ECON 1301, ECON 2301, ECON 2302, GOVT 2305, GOVT 2306,

HIST 1301, HIST 1302, HIST 2301 or SOCI 1301

3 May substitute ARTS 1301, ARTS 1303, ARTS 1304, ARTS 1313, DANC 2303, DRAM 1310, DRAM 2361, DRAM 2362,

DRAM 2366, DRAM 2367, ENGL 2322, ENGL 2323, ENGL 2327, ENGL 2328, ENGL 2332, ENGL 2333, ENGL 2342,

ENGL 2343, ENGL 2351, FREN 2303, FREN 2304, HIST 2311, HIST 2312, HIST 2321, HIST 2322, MUSI 1306, MUSI 1307 or MUSI 1310

4 HITT 2361 is the Capstone course

The above degree plan reflects the courses necessary for completion. The competencies required for accredited programs are attached to the end of the document. The competencies are mapped to specific courses in the degree. Currently, faculty are mapping specific activities to the required competencies. Those will be loaded into the notes column of the curriculum. This document will allow faculty who come in and out of courses to understand which specific activities are tied to a required competency thus assisting with quality maintenance in the courses.

 Completers Standard: Average 25 completers over the last five years or five completers per year. Average Number of completers: 33.6 per year.
 Definition of completer—Student has met the requirements for a degree or certificate (Level I or II)

AAS-HIM students fulfill the requirements of the degree and the Coding/Billing certificate. As a result, they should be counted for completing the degree and certificate.

AAS-HIM Completers by year 2011-2012 17



2012-2013	38
2013-2014	43
2014-2015	38
2015-2016	32

3. Licensure Standard: 90% of first time test takers pass the Licensure exam.

HIM does not require a license. The RHIT is a voluntary credential. Graduates can find jobs without it. Until the credential becomes mandatory (AHIMA is working on this effort), you will see a discrepancy between the number of graduates and those who take the exam.

Pass Rates for the RHIT exam

Grad date	# of grads	# taking RHIT	# pass RHIT	# failed RHIT	Pass rate
May 2010	2	1	1	0	100%
Dec 2010	4	4	3	1	75%
May 2011	11	9	8	1	88.8%
Aug 2011	2	1	0	1	0%
Dec 2011	4	3	3	0	100%
May 2012	8	5	5	0	100%
Aug 2012	5	2	2	0	100%
Dec 2012	13	7	6	1	85.7%
May 2013	16	8	7	1	87.5%
Aug 2013	9	5	5	0	100%
Dec 2013	19	13	10	3	76.9%
May 2014	16	9	7	2	77.7%
Aug 2014	9	5	4	1	80%
Dec 2014	11	11	9	2	81.8%
May 2015	12	8	6	2	75%
Aug 2015	14	9	7	2	77.7%
Dec 2015	13	9	7	2	77.7%
May 2016	10	6	6	0	100%
Aug 2016	10	1	1	0	100%
Dec 2016	10	NA	NA	NA	
Totals	198	116	97	19	83.6%



The HIM program has implemented a number of processes to provide the best possible opportunity for student success on the RHIT exam.

- The program included a standardized exam as part of its application process in Fall 2012. The TEAS test is a standardized timed test. If students have trouble with this, it will be difficult for them to sit for a 4 hour credential exam.
- Required the RHIT Competency Review class in Fall 2011.
- Required the AHIMA Practice exam beginning Spring 2014.
- Program director maps each student's course layout toward completion. The tracking holds students accountable each semester.
- Students are encouraged to take the exam within six months of graduation. An early testing application is now provided in the Competency Review class.

Test results for the RHIT did not map to program competencies until Q1 2014. Accredited Associate programs can now accurately evaluate weaknesses in competency categories and implement measures to improve scores. Collin College made this happen as the director identified the issue and explained the concern to AHIMA leadership

The RHIT Competency Review course was added to the degree plan in 2011 to assist students with RHIT exam preparation. Students use mock exams contained in the review guides to measure strengths and weakness and take a practice RHIT exam at the end of the competency class. This is a good indicator of future success on the exam.

HIM Quality timeline

- May 2010 First HIM graduates
- Nov 2010 First HIM student took test (passed)
- Fall 2011 Required HIM students to take HITT 2249 RHIT Competency Review
- Fall 2012 Moved to an application and the PSB exam
- May 2013 Required HIM applicants to score 25% or better on 4 of 5 scored components (Academic Aptitude, Reading
- Comprehension, Spelling, Natural Sciences, and Vocational Index) of the PSB exam
- Sept. 2013 AHIMA aligns RHIT exam reporting with curriculum so programs are able to evaluate academic strengths and weaknesses.
- Fall 2015 HIM program migrates to the new curriculum and to the 60 hour requirement.
- Fall 2017 Curriculum map will contain all competencies mapped to specific activities.



4. Retention Standard: 78% of census day students should earn a grade in the class.

Include the retention rate:

According to the data, all HIM classes have above a 78% retention standard. All HIM classes follow a grading scale that requires a student to earn a 75 in order to achieve a C in the class. This requirement is typical of the health science programs. HIM Grading scale is as follows:

A = 90-100 B= 80-89 C= 75-79 F = 74 – Below

This grading scale was implemented in Spring 2016 for all HIM courses. The accreditation standards require a C or better in all courses and the passing score on the certification exam is a 75%. The Advisory committee and faculty agreed the grading scale needed to reflect the necessary rigor students would be responsible for in class as well as on their certification exam.

5. C. Make a case that the program curriculum is current.

A standard national Health Information Management curriculum is developed by the Council for Excellence in Education and enforced by the accrediting body, Commission on Accreditation for Health Informatics and Information Management (CAHIIM). The most recent curriculum was developed in early 2014 and Collin College implemented the changes Fall 2015. The curriculum is required to be implemented nationally in January 2017. In 2013, the Collin program director served on the nine member taskforce to develop the current national curriculum. The program director has also served on the WECM HIM workgroup and works with Texas programs to encourage collaboration and collegiality.

In an effort to understand strengths and weaknesses in the curriculum and improve instruction, the HIM program purchases a practice exam for each student in the review class and is delivered by the professional organization, AHIMA. The practice exam, delivered in electronic format, allows the HIM faculty to evaluate scores looking for weaknesses that may be corrected in foundational curriculum. By purchasing the practice exam for students, scores are available for program investigation. Also, by tying their course grade to the outcome of the practice exam, students focus on RHIT preparation.

The Professional Practice Experience (PPE) and the RHIT review exam are used to determine competency in various areas of HIM curriculum while preparing students for the national RHIT credential exam and the workforce. The objectives of these two experiences are aligned with success on the RHIT exam and skills necessary in the workplace.

PPE sites evaluate students on their professional skills. Students have received satisfactory evaluations from their PPE sites and no obvious weaknesses have been identified in the site responses. The HIM Advisory Committee has expressed the continued need for professional "soft" skills. As the curriculum was modified to a 60 hour AAS-HIM degree, HPRS 2232 – Healthcare Communications



was included in the degree plan. The learning outcomes of the course will give students the opportunity to fine tune their communication skills.

- D. Make a case with the Advisory Minutes that the Advisory Committee has employers who are active members that are representative of area employers.
 - 1. How many employers does your Advisory Committee have? 16
 - 2. How many employers attended the last two meetings? 14
 - 3. How has the Advisory Committee impacted the program over the last years (including latest trends, directions, and insights into latest technologies)? The Committee validated the need for a selective admissions process. Healthcare Communications, a course in our updated degree plan, was added due to concerns over "soft skills". A number of accredited HIM programs require a student to pass an RHIT exam before they graduate from the program. The Collin HIM Advisory Committee overwhelmingly agreed a student should not be kept from graduating if they were unsuccessful on the Practice RHITexam.

4. Briefly summarize the curriculum recommendations made by the Advisory Committee over the last four years. We queried the Committee on their thoughts on the best method of transitioning from ICD 9 to ICD 10. They agreed we should follow the recommendations of AHIMA. The introduction of the healthcare communications course was the most significant curriculum recommendation.

	-	
Keeley Bowman	FT Faculty	Collin College
Keisha Carroll	HIM Director	Childrens Health Plano
Jennifer Clark	Director HIM	Oxford
Vicki Dale	Dir. New Business	THA/Healthshare
	Ventures	
Cherie Holmes-Henry	VP Gov't and	NextGen
	Industry Affairs	
Rhonda Houghton	HIM Director	Baylor White Rock
Krisi Ingram	HIM Director	Baylor Frisco
Anita Karim	IS Architect	Childrens Dallas
Melissa McKee	HIM Director	Stonegate
Patricia Pierson	FT Faculty	Collin College
Kimberly Rodenbusch	HIM Director	WarmSprings Rehab Hospital
Chirravoori Shyam	Coder	Wilson and Jones
Stephanie Steen	HIM Director	Lake Pointe Medical Center
Olanders Tasby	HIM Director	Methodist Richardson

Advisory Committee 2016-2017



Keisha Tolbert	Owner	Tolbert Consulting
Margaret Wang	Supervisor	AccentCare
Sarah Wilbert	HIM Director	Childrens Health Dallas
Mary Yarborough	Coding Auditor	

E. For any required program courses with enrollment below 15, explain a plan to grow enrollment or revise the curriculum.

The only courses that are routinely below 15 in a semester are the two Professional Practice Experience classes (HITT 1160 and HITT 2361) as well as the Review (HITT 2249). These three courses are offered every semester, including summer. If we were to consolidate to two semesters, we would get 15 per semester, however it would affect timely completion. With increased HIM visibility and awareness of the profession, we may be able to increase class numbers.

Course	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016*
HITT 1160	24	47	34	35	23
HITT 2361	25	45	38	34	23
HITT 2249	22	45	38	34	23

*Summer 2016 not captured in these numbers.

F. Make the case with evidence that the required courses in the program are offered in sequencing or at intervals appropriate to enable students to complete "on time" if a student was enrolled full-time and followed the degree plan.

Because students enter the program at various points in their academic career, it is important students get proper advising to develop a plan to completion. The plan must take into consideration the student's other time constraints (work, family, illness, etc.). The entire HIM curriculum is available online.

G. Make a case with evidence that students are satisfied with the program.

The first tool to determine student satisfaction is the course evaluations completed at the end of the semester. A majority of students do not complete their course evaluations and as a result the data is inherently skewed. Students in their last semester are queried on their experience through the HITT 2249 Review class, taught by the program director. Students are encouraged to be honest and to share their concerns to improve the program. It is conducted in class as a courtesy to the director and reminds students that their feedback is important to the continued success of the program. One of their requests was to lengthen the review class to 16 weeks from the original 8 weeks. The program accommodated the request.



Graduate surveys are conducted using survey monkey six months after graduation. The response rate averages less than 10%. Often the director will be talking to an alumnus individually and will solicit feedback. In both forums, graduates express satisfaction with the program.

H. Make a case with evidence that the program is well managed.

Academic achievement emphasizing workforce skills is the ultimate goal for the HIM faculty and staff. Faculty conduct their courses in an online environment. Instructor course assignment averages Full time 44.25% to 55.75% for part time faculty. Though the program decreased from 68 hours to 60 credit hours in Fall 2015, the number of sections or instructional units did not decrease significantly. Dual credit offerings increased in the HIM content area during the period and offset potential decreases. Enrollment averages vary by course category. For the introductory HIM courses (Medical Terminology, and Pathophysiology/Pharmacology) the average class size is 21.5, the HIM content courses average 20 per class, and the Professional Practice Experience (PPE) classes and the Review average 12. Students are required to be accepted into the program before they can take the PPE classes and the review. Earlier engagement with students should help balance the numbers. HIM content courses also reflect those students who may be in the medical coding/billing certificate with no plans for the degree.





7. HOW EFFECTIVELY DO WE COMMUNICATE AND HOW DO WE KNOW?

A. Make a case that the program literature and electronic sites are current, provide an accurate representation, and support the program's recruitment plan, retention plan and completion plan.

The Advisory Committee was contacted regarding accuracy of program literature and websites. No issues were noted. Students have not noted any deficiencies. As detailed in the internal weaknesses area, program awareness and quality messaging is an issue. The program needs assistance in creating and distributing the HIM message within the Collin community. This will require PR professionals to research and understand HIM before good messaging can be created.

B. Provide program website URLs (both the program website and the catalog information posted by the Curriculum Office): If no program website is available, describe plans for creation of website.

www.collin.edu/him

C. Describe the process used to keep all program literature (course descriptions, degree plans, catalog entries, etc.) and electronic sites updated and aligned with district-wide college literature and sites.

The website is updated before the start of each semester. Any updates are made throughout the semester. The Advisory Committee was contacted regarding accuracy of program literature and websites. No issues were noted. Students have not noted any deficiencies.

D. Provide the review date (after the close of the last full academic year.) in the Program Literature Review Table below that shows the elements of information listed on the website and in brochures were checked and updated for accuracy (current academic calendars, grading policies, course syllabi, program handouts, program tuition costs and additional fees, description of articulation agreements, availability of courses and awards, and local job demand in related fields) are accurate and available to the public.

Program Literature Review

Title	Type (i.e. URLs, brochures, handouts, etc.)	Date Last Reviewed and Updated
Test dates for TEAS test	www.collin.edu/him	1/31/17



Booklist	www.collin.edu/him	1/17/17

8. HOW WELL ARE WE LEVERAGING PARTNERSHIP RESOURCES AND BUILDING RELATIONSHIPS, AND HOW DO WE KNOW?

A. Make a case that the program enlists business, industry, government, college, university, and/or consultant partnerships to advance the program outcomes.

Actively seek partnerships with industry. An opportunity with Children's Health allows students to understand Clinical Documentation Improvement protocols. The Professional Practice Experience with Collin consists of two components. The first experience takes students in groups touring sites engaged in HIM practices. The second places individual students in a healthcare environment for 80 hours. Students are evaluated by the site at the end of their experience. The PPE coordinator consistently receives positive feedback from sites regarding the preparation of Collin HIM students. Many employers reach out to the Collin HIM program to recruit positions available to students and graduates.

B. Complete the Partnership Resources Table below.

Partnership Resources

Partner/Organization	Description (See Suggested points to consider)	Brief Description of the Partnership's Value to the Program
Medical City Hospital of Dallas	PPE Site	Provides students a valuable opportunity to understand how HIM workflows are facilitated in the clinical setting.
Hospice Compassus Dallas North Richland Hills McKinney	PPE Site	Provides students a valuable opportunity to understand how HIM workflows are facilitated in the clinical setting.



UTSW Ambulatory Centers	PPE Site	Provides students a valuable opportunity to understand how HIM workflows are facilitated in the clinical setting.
Baylor Medical Center at Garland	PPE Site	Provides students a valuable opportunity to understand how HIM workflows are facilitated in the clinical setting.
Stonegate Long Term Care,	PPE Site	Provides students a valuable opportunity to understand how HIM workflows are facilitated in the clinical setting.
Methodist Richardson Medical	PPE Site	Provides students a valuable opportunity to understand how HIM workflows are facilitated in the clinical setting.
Wilson N Jones, Sherman	PPE Site	Provides students a valuable opportunity to understand how HIM workflows are facilitated in the clinical setting.
Covenant Care Hospice	PPE Site	Provides students a valuable opportunity to understand how HIM workflows are facilitated in the clinical setting.
Baylor Scott and White: McKinney Plano	PPE Sites	Provides students a valuable opportunity to understand how HIM workflows are facilitated in the clinical setting.



Frisco		
White Rock Lake (Dallas)		
All Saints, Ft. Worth		
Garland		
Grapevine		
Centennial (Formerly Centennial Medical Center)		
Baylor Institute for Rehabilitation - Frisco	PPE site	Provides students a valuable opportunity to understand how HIM workflows are facilitated in the clinical setting.
Methodist McKinney	PPE site	Provides students a valuable opportunity to understand how HIM workflows are facilitated in the clinical setting.
Children's Medical Center	PPE sites	Provides students a valuable opportunity to understand how HIM
Dallas		workflows are facilitated in the clinical setting.
Plano		setting.
LifeCare Hospital	PPE Sites	Provides students a valuable
Dallas		opportunity to understand how HIM workflows are facilitated in the clinical setting.
Plano		setting.



Warm Springs Rehabilitation Hospital	PPE site	Provides students a valuable opportunity to understand how HIM workflows are facilitated in the clinical setting.
Texas Institute for Surgery	PPE site	Provides students a valuable opportunity to understand how HIM workflows are facilitated in the clinical setting.
Parkland	Tours	As the largest and oldest healthcare facility, there is tremendous value in understanding how they transition between the paper records of the past and the current electronic system.
Texas Health Resources Corporate Offices	Tours	THR Corporate offices show student the consolidated business perspective of a healthcare enterprise.
Health Information Management Systems Society	Scholarship	Support student achievement



9. ARE WE HIRING QUALIFIED FACULTY AND ADJUNCTS, AND SUPPORTING THEM WELL WITH PROFESSIONAL DEVELOPMENT, AND HOW DO WE KNOW?

Make a case with evidence that faculty are qualified, keep current, and fulfill instructional, scholarship, service and leadership roles that advance the program and the college. List program employees (full-time and part-time), their roles, credentials, and known professional development activity in the last four years.

	~		
Employee Name	Role in Program	Credentials	Professional Development since Last Program Review**
Michelle Millen	Program Director	Texas Tech University MS Clinical Practice Management Syracuse University BS Marketing/ BS Advertising College of Lake County - AAS-HIM RHIT	Chair for Council for Excellence in Education, AHIMA Ex-officio commissioner for certification body of AHIMA Chair Health Information Management Reimagined taskforce Member of the curriculum development taskforce. Texas HIM Awareness co- chair
Pat Pierson	Full time Faculty	UT Medical Branch , BS – Med Rec. Admin. RHIA	Maintains her credential, a required 20 CEUs every two years. She also attends Faculty Development and is a member of the Online Advisory Board. She was awarded the Triumph Award

Employee Resources

Primary Self Study Questions were adapted from Academic Program Review "Structuring the Six Self Study Questions", Michigan State University, 2008.



			by AHIMA. She was named Mentor of the Year in 2011.
Keeley Bowman	Full time Faculty and Professional Practice Experience Coordinator	East Central University - BS, HIM RHIA	Maintains her credential, a required 20 CEUs every two years. Keeley serves as the President for the DFW HIMA.
Oliviya Floyd	Part time Faculty	UAB - MS Health Administration UAB - BS HIM RHIA	Maintains her credential, a required 20 CEUs every two years.
Rhonda Houghton	Part time Faculty	TWU - MBA Arkansas Tech - BS HIM RHIA	Maintains her credential, a required 20 CEUs every two years.
Kristin Kidd	Part time Faculty	U of Phoenix – MBA Stephens College – BS HIM RHIA	Maintains her credential, a required 20 CEUs every two years.
Penny Pfeil	Part time Faculty	Texas State – BS Med Rec. Admin UT - BBA RHIA	Maintains her credential, a required 20 CEUs every two years.
Donna Olson	Part time Faculty	Calif. Coast University – MBA Illinois State – BS Med Rec. Admin. RHIA	Maintains her credential, a required 20 CEUs every two years.



Olanders Tasby	Part time Faculty	TWU – BS Med Rec. Admin. RHIA	Maintains her credential, a required 20 CEUs every two years.
Mary Yarborough	Part time Faculty	UTD – MS Mang. And Admin. Science Illinois State – BS Med. Rec Admin. RHIA	Maintains her credential, a required 20 CEUs every two years.

10. DO WE SUPPORT THE PROGRAM WELL WITH FACILITIES, EQUIPMENT, AND THEIR MAINTENANCE AND REPLACEMENT, AND HOW DO WE KNOW?

Make a case with evidence that current deficiencies or potential deficiencies related to program facilities, equipment, maintenance, replacement, plans, or budgets pose important barriers to program or student success. As part of your response, complete the Resource Tables below to *support* your narrative.

The HIM program is completely online. The program uses a classroom for one section of Medical Terminology. The move to Canvas has been welcomed by the faculty. In the next year, a program goal is to utilize Canvas to its potential, integrating technology and tools for efficient learning as well as classroom management.

The budget for HIM is sufficient currently. The travel allowance for the director is a wonderful resource to maintain the relevancy of the HIM program.

Office Location	Description	Meets N Current	Needs (Y or N): For Next 5 Years	Analysis of Classroom Utilization
H205	Program Director	Y	Y	
H216	FT Faculty Office	Y	Y	
H217	FT Faculty Office - shared	Y	Y	

Office Space

Section III. Continuous Improvement Plan





11. GIVEN OUR PRESENT STATUS, HOW DO WE INTEND TO CHANGE IN WAYS THAT HELP US ADVANCE?

Based on the information, analysis, and discussion that have been presented up to this point, summarize the strengths and weaknesses of this program. There should be no surprise issues here! Describe specific actions the faculty intends to take to capitalize on the strengths, mitigate the weaknesses, and improve student success.

Effective online learning poses challenges for faculty. The ability to understand course effectiveness through evaluation is an initiative the HIM program will be investigating. Canvas is a powerful Learning Management System and the ability to leverage the system to its potential is important to move the program forward. Developing effective messaging to potential students, employers, and the marketplace is critical to improving the applicant pool and graduate experience. Transitioning potential employers to employers will be essential for the sustainability of the program as the industry evolves.

12. HOW WILL WE EVALUATE OUR SUCCESS?

Complete the Continuous Improvement Plan (CIP) form that follows. The action plan produced by the CIP will begin to be implemented during the next academic year. Include the data summary and findings on which the improvement action is based.

Please select and focus on 2 to 3 program priorities, including at least 1 student learning outcome. You may also add short-term administrative, technological, assessment, resource or professional development goals, as needed.

Department's Mission: Academic achievement emphasizing workforce skills.

A. Outcome(s)	B. Measure(s)	C. Target(s)
Complete curriculum map capturing activities aligned with curricular competencies		Fall 2017
Student Learning outcome for review: Evaluate the revenue cycle management processes (mastery at a Blooms 5)	Final exam/projects in HITT 2435 and HITT 2346 will focus on this area. Students should be able to succeed at a 75% on the activity.	Fall 2017 for implementation.
Develop effective messaging to potential students and employers	Collateral will be available for distribution	Fall 2017



\checkmark	From	Part	I '	
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A. Outcomes	D. Action Plan Years 5 & 2	E. Implement Action Plan Years 1 & 3	F. Data Results Summary Years 2 & 4	G. Findings Years 2 & 4
Results expected in this department/program	Based on analysis of previous assessment, create an action plan and include it here in the row of the outcomes(s) it addresses.	Implement the action plan and collect data	Summarize the data collected	What does data say about outcome?
Apply concepts learned in foundation HIM courses to successfully complete the RHIT exam.	Year 2 – Activities were developed in HITT 1353, HITT 1301, and HITT 2435 to reinforce necessary learning objectives. We also realized students were not taking the Review test seriously so we approached the Advisory Board for guidance on how much weight we should give the exam. If they did not pass the review test, should they be able to pass the class? The Advisory Board	Year 1 – Use the Review guide to help students understand gaps in learning so they may properly prepare for the RHIT Exam <u>Year 3</u> – Implemented a weight of 40% for the review test. We also decided that we would purchase the "authentic" practice test from AHIMA. Graduates who did well on the RHIT mentioned it was a good part of their preparation.	Year 2 – Areas in Legal, Reimbursement, and Information Technology yielded the lowest student scores. Year 4 – Scores on the review for the targeted areas increased.	<u>Year 2</u> – Faculty met to understand where emphasis needed to be placed within the foundational courses in order to fill in the gaps for students. <u>Year 4</u> – The focus on the targeted areas may have attributed to higher scores. We now see areas of Coding, Quality, and Compliance need to be examined in the foundational courses to assist students with their learning gaps.

Primary Self Study Questions were adapted from Academic Program Review "Structuring the Six Self Study Questions", Michigan State University, 2008.



A. Outcomes	D. Action Plan Years 5 & 2	E. Implement Action Plan Years 1 & 3	F. Data Results Summary Years 2 & 4	G. Findings Years 2 & 4
Results expected in this department/program	Based on analysis of previous assessment, create an action plan and include it here in the row of the outcomes(s) it addresses.	Implement the action plan and collect data	Summarize the data collected	What does data say about outcome?
	unanimously voted to not prevent a student from graduating based on the Review test. <u>Year 5</u> – Continue to monitor practice test scores to determine possible gaps in learning.			

13. HOW DO OUR IMPROVEMENT PLANS IMPACT THE PROGRAM BUDGET?

A. What additional funding beyond the program's base budget is needed to implement your Continuous Improvement Plan? Briefly describe steps your department will take to secure these funds.



There are no impacts to the budget.

B. With these additional funds, please check which of the following areas will be impacted:

Increase and retain enrollment	Increase transfers to related baccalaureate
Increase completers	institutions
Develop resources	Increase effectiveness and/or efficiency
Update facilities	Improve student performance levels
Expand curricular opportunities	Expand services
Partner to increase post-graduation	Transform services
employment opportunities	Anything else? Briefly describe

WHAT HAPPENS NEXT? THE PROGRAM REVIEW REPORT PATHWAY

- A. Following approval by the Steering Committee,
 - a. Program Review Reports will be evaluated by the Leadership Team.
 - b. Leadership Team will approve the reports for posting on the intranet.
 - c. At any point prior to Intranet posting, reports may be sent back for additional development.
- B. Program responses to the Program Review Steering Committee recommendations received within 30 days will be posted with the Program Review Report at the request of the deans.

Leadership Team members will work with program supervisors to incorporate Program Review findings into program planning and program activity changes during the next five years.

Accredited curriculum for Associate programs

Curriculum map by course. Each competency will be mapped to an activity by Fall 2017.

Domain	HITT 1301	HITT 1311	HITT 1345	HITT 1341	HITT 1353		HITT 2346	HITT 2443	HPRS 2232	HITT 2249 (Review)	HITT 1160/2361 (PPE)
I.A Classification Systems											



2016

Domain	HITT 1301	HITT 1311	HITT 1345	HITT 1341	HITT 1353	HITT 2339	HITT 2435	HITT 2346	HITT 2443	HPRS 2232	HITT 2249 (Review)	HITT 1160/2361 (PPE)
Apply diagnosis/procedure codes according to current guidelines (3)				V				V				
Evaluate the accuracy of diagnostic and procedural coding (5)				Ø				Ø				
Apply diagnostic and procedural groupings (3)				V			$\mathbf{\Sigma}$					
Evaluate the accuracy of diagnostic/procedural groupings (5)				V			Ø	V				
I.B. Health Record Content and Documentation												
 Analyze the documentation in the health record to ensure it support the diagnosis and reflect the patient's progress, clinical findings, and discharge status (4) 	Ø							Ø	Ø			
 Verify the documentation in the health record is timely, complete, and accurate (4) 												
 Identify a complete health record according to, organizational policies, external regulations, and standards (3) 	V	Ŋ										
4. Differentiate the roles and responsibilities of various providers and disciplines, to support documentation												

8-10-



2016

HITT 1301	HITT 1311	HITT 1345	HITT 1341	HITT 1353	HITT 2339	HITT 2435	HITT 2346	HITT 2443	HPRS 2232	HITT 2249 (Review)	HITT 1160/2361
				-				Ī	Ī	(Review)	(PPE)
					V						
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		1301 1311 	1301 1311 1345 I I I <	1301 1345 1341 1301 1345 1341 1301 1345 1341 1301 130 1 1301 1300 1 1301 1300 1 1301 1300 1 1301 1300 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1301 1 1 1302	1301134513411353II<	13011345134113532339II	130113451341135323392435Image: state stat	1301134513411353233924352346Image: state sta	13011345134113532339243523462443Image: Image:	130113451341135323392435234624432232Image: Image:	1301134513411353233924352346244322322249 ReviewImage: Image: Imag

8-10-



2016

Domain	HITT 1301	HITT 1311	HITT 1345	HITT 1341	HITT 1353	HITT 2339	HITT 2435	HITT 2346	HITT 2443	HPRS 2232	HITT 2249 (Review)	HITT 1160/2361 (PPE)
electronic health information (3)												
 Apply retention and destruction policies for health information (3) 					Y				Ø			
 Apply system security policies according to departmental and organizational data/information standards (3) 		Ŋ										
II.C. Release of Information												
 Apply policies and procedures surrounding issues of access and disclosure of protected health information (3) 									Ø			
III.A. Health Information Technologies												
 Utilize software in the completion of HIM processes (3) 		Ø		V			V	Ŋ				
 Explain policies and procedures of networks, including intranet and Internet to facilitate clinical and administrative applications (2) 												
III.B. Information Management Strategic Planning												



2016

	Domain	HITT 1301	HITT 1311	HITT 1345	HITT 1341	HITT 1353	HITT 2339	HITT 2435	HITT 2346	HITT 2443	HPRS 2232	HITT 2249	HITT 1160/2361
												(Review)	(PPE)
1.	Explain the process used in the selection and		Ø										
	implementation of health												
	information management												
	systems (2)												
2.	Utilize health information to		V										
	support enterprise wide												
	decision support for strategic												
	planning (3)												
	C. Analytics and Decision												
	pport												
١.	Explain analytics and decision support (2)												
2	Apply report generation		V				V	V					
۷.	technologies to facilitate												
	decision-making (3)												
111.	D. Health Care Statistics												
1.	Utilize basic descriptive,									V			
	institutional, and healthcare												
_	statistics (3)												
2.	Analyze data to identify									\checkmark			
	trends (4)									_			
	E. Research Methods									$\overline{\checkmark}$			
١.	Explain common research methodologies and why they									V			
	are used in healthcare(2)												
111.	F. Consumer Informatics												
	Explain usability and			V									
	accessibility of health												
	information by patients,												
	including current trends and												
	future challenges (2)												

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Domain	HITT 1301	HITT 1311	HITT 1345	HITT 1341	HITT 1353	HITT 2339	HITT 2435	HITT 2346	HITT 2443	HPRS 2232	HITT 2249 (Review)	HITT 1160/2361 (PPE)
III.G. Health Information Exchange												
 Explain current trends and future challenges in health information exchange (2) 	V	V										
III.H. Information Integrity and Data Quality												
 Apply policies and procedures to ensure the accuracy and integrity of health data both internal and external to the health system (3) 		Ø										
IV.A. Revenue Cycle and												
Reimbursement1. Apply policies and												
procedures for the use of data required in healthcare reimbursement (3)			V				V					
2. Evaluate the revenue cycle management processes (5)				Ø			V					
V.A. Regulatory												
 Analyze policies and procedures to ensure organizational compliance with regulations and standards (4) 			Ø									
 Collaborate with staff in preparing the organization for 			V									



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											(Review)	(PPE)
accreditation, licensure,												
and/or certification (4)												
3. Adhere to the legal and					$\mathbf{\nabla}$				\square			
regulatory requirements related to the health												
information management												
(3)												
V.B. Coding												
1. Analyze current							V	V				
regulations and												
established guidelines in												
clinical classification												
systems (4)												
2. Determine accuracy of				Ø			$\mathbf{\nabla}$	$\mathbf{\nabla}$				
computer assisted												
coding assignment and												
recommend corrective												
action (5) V.C. Fraud Surveillance												
1. Identify potential abuse or					V				V			
fraudulent trends through												
data analysis (3)												
V.D. Clinical Documentation												
Improvement												
1. Identify discrepancies							A	A				
between supporting												
documentation and coded												
data (3)												
2. Develop appropriate								V				
physician queries to resolve												
data and coding												
discrepancies (6)												

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VI.A Leadership Roles												
 Summarize health information related leadership roles (2) 						V						
2. Apply the fundamentals of team leadership (3)						N						
3. Organize and facilitate meetings (3)						V						
VI.B. Change Management												
 Recognize the impact of change management on processes, people and systems (2) 						V						
VI.C. Work Design and												
Process Improvement												
 Utilize tools and techniques to monitor, report, and improve processes (3) 						V						
 Identify cost-saving and efficient means of achieving work processes and goals (3) 						Ŋ						
 Utilize data for facility-wide outcomes reporting for quality management and performance improvement (3) 									Ŋ			
VI.D. Human Resource												
Management												
1. Report staffing levels and productivity standards for						V						



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health information functions (3)												(FFE)
2. Interpret compliance with local, state, and federal labor regulations (5)					Ŋ							
 Adhere to work plans, policies, procedures, and resource requisitions in relation to job functions (3) 						V						
VI.E. Training and Development												
 Explain the methodology of training and development (2) 						Ŋ				V		
 Explain the return on investment for employee training and development (2) 						Ø						
VI.F. Strategic and Organizational Management												
 Summarize a collection methodology for data to guide strategic and organizational management (2) 									Ŋ			
2. Understand the importance of healthcare policy-making as it relates to the healthcare delivery system (2)			Ŋ									
 Describe the differing types of organizations, services, and personnel and their interrelationships across the 			V									



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											(Review)	(PPE)
health care delivery system (2)												
 Apply information and data strategies in support of information governance initiatives (3) 		Ŋ										
 Utilize enterprise-wide information assets in support of organizational strategies and objectives (3) 						Ŋ						
VI.G. Financial Management												
1. Plan budgets (3)						N						
2. Explain accounting methodologies (2)						V						
3. Explain budget variances (2)						\square						
VI.H. Ethics												
1. Comply with ethical standards of practice (5)					V							
 Evaluate the consequences of a breach of healthcare ethics (5) 					Ŋ							
3. Assess how cultural issues affect health, healthcare quality, cost, and HIM (5)										Σ		
 Create programs and policies that support a culture of diversity (6) 												
VI.I. Project Management												
 Summarize project management methodologies (2) 						V						

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Domain	HITT 1301	HITT 1311	HITT 1345	HITT 1341	HITT 1353	HITT 2339	HITT 2435	HITT 2346	HITT 2443	HPRS 2232	HITT 2249 (Review)	HITT 1160/2361 (PPE)
VI.J. Vendor/Contract Management									-			
1. Explain Vendor/Contract Management(2)												
VI.K. Enterprise Information Management												
 Apply knowledge of database architecture and design (3) 		R										
*Pathophysiology and Pharmacology (HITT 2471)												
*Anatomy and Physiology (BIOL 2404)												
*Medical Terminology (HITT 1305)												
*Computer concepts and applications												

*These courses do not have specific competencies tied to them. They are foundational to the HIM curriculum.