Program Review

MS in Health Care Administration

College of Business

November 2012
Program Review
Marshall University

Date: October 26, 2012

Program: MS in Health Care Administration

Date of Last Review: Academic Year 2007 – 2008

Recommendation
Marshall University is obligated to recommend continuance or discontinuance of a program and to provide a brief rationale for the recommendation.

1. Continuation of the program at the current level of activity; or
2. Continuation of the program at a reduced level of activity or with corrective action. Corrective action will apply to programs that have deficiencies that the program itself can address and correct. Progress report due by November 1 next academic year; or
3. Continuation of the program with identification of the program for resource development: Resource development will apply to already viable programs that require additional resources from the Administration to help achieve their full potential. This designation is considered an investment in a viable program as opposed to addressing issues of a weak program. Progress report due by November 1 next academic year; or
4. Development of a cooperative program with another institution, or sharing of courses, facilities, faculty, and the like; or
5. Discontinuation of the program

Rationale for Recommendation: (Deans, please submit the rationale as a separate document. Beyond the College level, any office that disagrees with the previous recommendation must submit a separate rationale and append it to this document with appropriate signature.)

1. Recommendations:
   - Pockets, Lee
   - Signature of person preparing the report:
   - Date: 10/15/2012

1. Recommendations:
   - Fred Mober
   - Signature of Program Chair:
   - Date: 10/15/2012

1. Recommendations:
   - Danielle Mober
   - Signature of Academic Dean:
   - Date: 10/22/2012

1. Recommendations:
   - Signature of Chair, Academic Planning Committee: (Baccalaureate progs only)
   - Date:

1. Recommendations:
   - Tracy Chapple
   - Signature of President, Faculty Senate Chair, Graduate Council:
   - Date: 1/30/2013

1. Recommendations:
   - Signature of Provost and Senior Vice President for Academic Affairs:
   - Date: 2/1/13

1. Recommendations:
   - Signature of Chair, Board of Governors:
   - Date: 4/24/13
College/School Dean’s Recommendation

Deans, please indicate your recommendation and submit the rationale.

**Recommendation:** Continuation of the program at the current level of activity

**Rationale:**

(If you recommend a program for resource development identify all areas for specific development)

AACSB International accreditation awarded in January 2012

The MS in Health Care Administration (MS HCA) is a viable program providing graduate education to persons desiring to enter the field of business management in a health care setting. After a decline in enrollment due to nurse anesthetist students migrating to the Doctor of Management Practice in Nurse Anesthesia program, enrollment in MS HCA increased the past three years. The program now regularly enrolls 50-60 students and has an excellent graduation rate.

Alumni of the MS HCA report success in job placement and most are employed in a health care related field. Examples of places of employment reported by graduates include medical practices, hospitals, hospice, and nursing homes. HCA faculty members genuinely support students in seeking employment and assist in career advising.

The College of Business takes pride in the fact we are the only AACSB accredited program in the state offering a Master’s degree in HCA that is housed in a College of Business. The WVU Business School does not offer a health care degree and other universities (Fairmont State and WVU Institute of Technology) offer only a Bachelor’s degree in health care management. The program’s standard of excellence is due in no small part to the outstanding faculty and their efforts in connecting the program to the health care community. Weaknesses having a negative impact on the MS HCA are low faculty salaries and a lack of MS HCA-dedicated full-time faculty lines. With only two tenure-track professors and one temporary professor to teach the nine primary courses in the program, it is currently impossible to offer more elective courses. In addition, it would be beneficial to students to offer the program jointly on both the Huntington and Charleston campuses. Currently, the courses must rotate between the two sites. In addition, there is potential for growth of the program in other markets, but that is limited by the number of faculty to teach additional sections.

Deanna Mader
___________________        __________________
Signature of the Dean   Date

October 31, 2012
I. Accreditation Information

1. Name of Accrediting Organization

AACSB International, the Association to Advance Collegiate Schools of Business. AACSB International is a not-for-profit corporation of educational institutions, corporations and other organizations devoted to the promotion and improvement of higher education in business administration and management. Organized in 1916, the AACSB is the premier accrediting agency for bachelor’s, master’s and doctoral degree programs in business administration and accounting. This mission of AACSB International is to advance quality management education worldwide through accreditation and thought leadership.

The standards maintained by AACSB can be summarized in two key statistics:
   a. Only between 25% and 33% of all schools of business, worldwide, have earned AACSB accreditation.
   b. During the 12 months leading up to our latest accreditation visit (November 2011), one out of four accredited schools was placed on probation, most often for deficiencies in the Outcomes Assessment program.

2. Date of Most Recent Self-Study and Accreditation Visit

The college had the AACSB accreditation site visit on November 6, 2011. Accreditation maintained and extended in 2012 for the maximum period of 5 years.

3. Accreditation Status: (regular, probationary, etc.)

   Regular

4. Accrediting Organization’s Report: This should include and most recent action taken by the program’s accrediting body. Also, provide any significant findings from your most recent self-study and accreditation visit. If weaknesses or deficiencies were noted, please explain how these are being addressed.

   The AACSB letter conferring five year continuing accreditation is attached.
II. Adequacy of the Program

5. Curriculum: Summarize degree requirements and provide commentary on significant features of the curriculum. In Appendix I, list required courses, elective courses, and total hours required. The list of courses must provide specific course titles and numbers.

The Master of Science in Health Care Administration program includes in-depth courses on health finance, law, economics and management. In addition, breadth courses in health systems, complex health organizations and health information systems are required.

The entire 36 credit hour Health Care Administration curriculum is displayed in Appendix I.

The Health Care Administration degree is a generalist degree and is intended to provide broad administrative skills and knowledge necessary for the management of complex health institutions, private practices, health insurance programs and corporate environments.

6. Students:

   a. Entrance Standards: Describe the admission standards and procedures employed for making the admission decision. (GPA, ACT, other tests).

      Minimum requirements for Admission into the M.S. in Health Care Administration Program include:

      (1) A bachelor’s degree from a regionally accredited institution with an undergraduate Grade Point Average (GPA) of 2.5 or higher on a 4.0 scale for all previously completed undergraduate university work;

      (2) A minimum Graduate Management Admissions Test (GMAT) score of at least 450 or a minimum on the Graduate Record Examination (GRE) of 860 for tests taken after September 2002;

      (3) An index of 950 computed by multiplying the undergraduate Grade Point Average (GPA) by 200 and adding the GMAT score or 53% of the total GRE score;

      (4) Demonstrated computer literacy.

      Applicants meeting the above criteria will be fully admitted into the HCA program. This allows them to move immediately into the 36-hour HCA curriculum.
b. **Entrance and Exit Abilities of past five years of graduates**: Please refer to Appendices II and III for this information.

7. **Assessment Information**: NOTE: This section is a summary of your yearly assessment reports.

a. **Provide summary information on the following elements. Please include this information in Appendix IV.**
   - Your Program’s Student Learning Outcomes
   - The assessment measures used to assess student performance on these outcomes
   - The standards/benchmarks your program has set for satisfactory performance on the outcomes
   - The results/analysis, i.e. actual student performance on each outcome
   - Actions your program has taken to improve student learning based on the aforementioned results/analysis.

Program’s Student Learning Outcomes are summarized and attached in **Appendix IV**.

b. **Other Learning and Service Activities**: Provide a summary of learning and service activities not covered explicitly in Section a.

   N/A

c. **Plans for Program Improvement**: Based on assessment data, provide a **detailed** plan for program improvement. The plan **must** include a timeline.

   The Program improvement plans are shown in the summary assessment table in **Appendix IV**.

d. **Graduate Satisfaction**: Provide evidence and results of follow-up studies to indicate graduate satisfaction with the effectiveness of the educational experience they received in your program. Indicate the number of individuals surveyed or contacted and the number of respondents.

   A statistical sample of 50 students was taken with 10 students responding. Strengths of the MSHCA program noted included: knowledgeable faculty; well-structured program; small class sizes; opportunity be taught by faculty with real-life experience; and convenient scheduling. Students found faculty and classes very accessible. Graduates also felt the degree was helpful in getting jobs and promotions. Several indicated that increased
salaries or benefits were achieved due to the degree. The majority of the graduates indicated they would recommend the program to other students.

The weaknesses identified included: lack of electives (particularly healthcare ethics); lack of classes offered on both campus locations (Charleston and Huntington); not enough networking opportunities with business professionals; no required internship course; and lack of doctoral healthcare management program.

e. **Attach the previous five years of evaluations of your assessment reports provided by the Office of Assessment.** Letters are included in Appendix VIII.

8. **Previous Reviews:** State the last program review action by the Marshall University Board of Governors.

At its meeting of April 23, 2008, the Marshall University Board of Governors recommended that the MS in Health Care Administration continue at its current level of activity.

9. **Identify weaknesses and deficiencies** noted in the last program review and provide information regarding the status of improvements implemented or accomplished.

In its review, submitted in academic year 2007 – 2008, the MS in Health Care Administration listed the following weaknesses:

<table>
<thead>
<tr>
<th>Weaknesses</th>
<th>2007</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graduate and Employer Surveys</td>
<td>The Program noted that it needed to do a better job of gathering feedback from its MS in Health Care Administration graduates and their employers. The program reported having bought a subscription to “Survey Monkey” for this purpose.</td>
<td>Recently the Program conducted an alumni survey with limited results. Most home addresses were no longer relevant and Marshall email went unanswered. The Assistant Director is currently finding new ways to gather this information prior to graduation.</td>
</tr>
<tr>
<td>Slow start of MS in Health Care Administration’s Assurance of Learning (AOL) Activities for AACSB</td>
<td>The Program noted that this slow start was due to the initial emphasis on AOL at the undergraduate level.</td>
<td>Per suggestion, the Program has initiated and collected the AOL data since 2009 in an effort to assess student outcomes. AOL activities are now on track.</td>
</tr>
</tbody>
</table>
10. **Current Strengths/Weaknesses:** Identify the strengths and weaknesses of the program. Describe program plans for removing the weaknesses.

**Strengths:**

1. **The Program Itself**

   The Program is unique and different from that of other universities in West Virginia. We are the only AACSB accredited program in the state offering Master’s degree in HCA that is housed in College of Business. The WVU Business School does not offer health care degree and other universities (Fairmont State and WVU Institute of Technology) offer only Bachelor’s degree in health care management.

2. **Outstanding Faculty**

   The HCA professors are diversified and well recognized for their teaching and research abilities. All graduate school professors must meet strict Academically Qualified standards set by AACSB and by the COB. The healthcare management faculty stay current in their field and have had over 30 peer-reviewed articles published in the past three years.

3. **Connections to Business Community**

   The HCA Program is involved in the local community. The Program recognizes the benefits (student enrollment, scholarship, internship, grants, etc.) of having a strong tie with local health care organizations including the Charleston Area Medical Center Health System (CAMC), Cabell Huntington Hospital, St. Mary’s Medical Center, Saint Francis Hospital, state/local governments, and other nursing home facilities. The Program is well positioned to initiate and enhance the relationship with our local stakeholders.

4. **Internship Program**

   The internship was recently revived in the HCA Program. In a pilot effort, the internship program at the CarePoint Partners of WV, LLC was begun with three students. The Program is planning, upon completing this pilot effort, to establish an internship program by working with our medical community. These efforts will benefit students in finding future employment.

**Weakness:**

1. **Lack of Consistent contact with Alumni Base**

   There has been a lack of consistent contact with our alumni base due to outdated home addresses and ineffective email addresses. The Associate Director has begun a system to collect these addresses prior to graduation. Communicating with and getting feedback from our alumni remains significant to enhance the quality of the Program. This database will help to monitor job replacement and assess how our students perform after graduating.

2. **Insufficient Faculty**

   The alumni noted a program weakness in the lack of elective courses. With only two tenure-track professors and one temporary professor to teach the nine primary courses in the program, it is currently impossible to offer more elective
courses. In addition, it would be nice to offer the program jointly on both Huntington and Charleston campus. Currently, the courses must rotate between the two sites. In addition, there is potential to grow the program in other markets but that is limited by the number of faculty to teach additional sections.

III. Viability of the Program: Provide a narrative summary in each of the following sections in addition to the appendices.

1. Articulation Agreements: Describe program specific articulation agreements with other institutions for delivery of this program.

None

2. Off-Campus Classes: Describe/Summarize off-campus (other than the Huntington, or South Charleston campuses) courses offered. (Include locations, courses, and enrollments, in Appendix VI.) This information will be provided by the Office of Institutional Research.

None

3. Online Courses: Describe/Summarize online courses offered. (Include courses and enrollments in Appendix VI.) This information will be provided by the Office of Institutional Research.

None

4. Service Courses: Describe/Summarize departmental courses that are required for students in other majors and support programs outside the major. (Include enrollment data for these courses in Appendix VI.) This information will be provided by the Office of Institutional Research.

Currently HCA 600 and HCA 656 are required for the MS Health Informatics. Also, HCA 600 is a required course in the MS Exercise Science Program. A total of 43 students from the MS Exercise Science Program took HCA 600 in the past 5 years. The MS Health Informatics Program is relatively new and only 10 students had HCA 600 in the past 2 years. Enrollment data are detailed below.

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exercise Science</td>
<td>0</td>
<td>1 (S)</td>
<td>11 (F)</td>
<td>1 (S)</td>
<td>16 (F)</td>
<td>43</td>
<td></td>
</tr>
<tr>
<td>Health Informatics</td>
<td></td>
<td>6 (F)</td>
<td></td>
<td>8 (F)</td>
<td>1 (S)</td>
<td>10</td>
<td></td>
</tr>
</tbody>
</table>

F (Fall); S (Spring)

5. Program Course Enrollment: Describe/Summarize program area courses taken by students who are majors and include enrollment by semester for the past 5 years. Indicate required or elective courses. The purpose of this section is to indicate the availability and relative strength of the program area courses. Include all students enrolled in the courses, whether majors or not.

Program Course enrollments are included in Appendix V.
6. **Program Enrollment:** Summarize data indicating the number of new students admitted, number of principal majors enrolled from your college, number of second majors, the number of students enrolled as majors from other colleges (i.e., College of Education specialization majors), the number of minors, and the number of graduates for the program for each of the past five years. *(Appendix VII, which supports this section, will be supplied to you by the Office of Assessment, in conjunction with the Office of Institutional Research).*

The Office of Assessment will provide trend lines for total number of students enrolled in the program and number of graduates (Figure 1) for the period of the review.

During the first two years (2007-2009) of this review, enrollments were high in the range of 70-100 students. This high enrollment was due to the inclusion of master students in the MS/Nurse Anesthesiology program with CAMC. The nursing program separated in 2009 to become the Doctorate in Management Practice in Nurse Anesthesiology (DMPNA). The DMPNA is now a separate program and has its own program review.

The regular HCA program enrolls 50-60 students each year and about twenty regular HCA students graduate each year. See Appendix VI & Figure 1 for HCA Program enrollments for details in terms of the 5 year data for regular HCA students admitted, enrolled, and graduated.

### IV. Necessity of the Program:

Provide a narrative summary for each of the following items in addition to requested appendices.

1. **Graduates:** Provide information on graduates in terms of places of employment, starting salary ranges (where appropriate and known), number employed in field of specialization, and/or acceptance into baccalaureate or graduate programs. *(NOTE: Do not identify students by name.)* Include this information in Appendix VII.

   Based on the recent alumni survey, most of our graduates are successfully employed in health care organizations. Employment statistics are detailed in Appendix VII.

2. **Job Placement:** If the job placement rate reported above is low, can a course of action be identified that would improve this situation? Provide a summary of procedures utilized by the institution to help place program graduates in jobs or additional educational programs. Include activities supported by both the student’s academic department as well as the institution’s placement office. This summary should include the institution’s procedures and program organization for continuing contact and follow-up with graduates.

   The alumni survey suggests that there is no issue for job placement. Through surveys and research we have found that most of the HCA graduates are employed in a health care related field in places such as medical practices, hospitals, hospice, and nursing homes. HCA faculty members genuinely support students in seeking employment and, in consultation with the University Career
Services and college administration, are always available for advising so that our HCA students can be better prepared for employment search.

V. RESOURCE DEVELOPMENT (If applicable)

N/A
## Appendix I

### Required/Elective Course Work in the Program: MS in Health Care Administration

Degree Program: ___________________________________________  
Person responsible for the report: ________________________________

<table>
<thead>
<tr>
<th>Courses Required in Major (By Course Number and Title)</th>
<th>Total Required Hours</th>
<th>Elective Credit Required by the Major (By Course Number and Title)</th>
<th>Elective Hours</th>
<th>Related Fields Courses Required</th>
<th>Total Related Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>MKT 511 Marketing and Management</td>
<td>3</td>
<td>HCA 620 The Ethical Dimension of HC Management</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MGT 620 Human Resource Management</td>
<td>3</td>
<td>HCA 640 The Health Care Professional</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MGT 672 Organizational Behavior</td>
<td>3</td>
<td>HCA 650 Comparative Health Systems</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HCA 600 The Health Care System</td>
<td>3</td>
<td>HCA 651 Health Care Operations Management</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HCA 610 HC Financial Management</td>
<td>3</td>
<td>HCA 654 Human Resource Management in HC</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HCA 615 Health Care Economics</td>
<td>3</td>
<td>HCA 657 Health Care Law &amp; Public Policy</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HCA 630 Legal Issues in Health Care MGT</td>
<td>3</td>
<td>HCA 658 Long Term Care</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HCA 653 Integrated HC Delivery Systems</td>
<td>3</td>
<td>HCA 659 HC for Rural and Underserved Populations</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HCA 655 Health Care Marketing</td>
<td>3</td>
<td>HCA 697 Special Topics in Health Care Management</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HCA 656 MGT of Medical Tech/Info System</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HCA 695 Field Research in HC Management</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MGT 699 Business Policy and Strategy</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Expand table as needed.

Professional society that may have influenced the program offering and/or requirements:
Appendix II
Entrance Abilities of Past Five Years of Graduates: MS in Health Care Administration

<table>
<thead>
<tr>
<th>Year</th>
<th>N</th>
<th>Mean Undergraduate GPA</th>
<th>Mean GRE Verbal</th>
<th>Mean GRE Quantitative</th>
<th>GMAT Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007-2008</td>
<td>44</td>
<td>3.35</td>
<td>455.25 (n = 40)</td>
<td>531.00 (n = 40)</td>
<td>400.00 (n = 3)</td>
</tr>
<tr>
<td>2008-2009</td>
<td>49</td>
<td>3.30</td>
<td>443.26 (n = 43)</td>
<td>564.65 (n = 43)</td>
<td>472.00 (n = 5)</td>
</tr>
<tr>
<td>2009-2010</td>
<td>43</td>
<td>3.58</td>
<td>460.71 (n = 42)</td>
<td>527.38 (n = 42)</td>
<td>395.00 (n = 2)</td>
</tr>
<tr>
<td>2010-2011</td>
<td>18</td>
<td>3.41</td>
<td>433.57 (n = 14)</td>
<td>501.43 (n = 14)</td>
<td>421.67 (n = 6)</td>
</tr>
<tr>
<td>2011-2012</td>
<td>24</td>
<td>3.04</td>
<td>417.73 (n = 22)</td>
<td>494.55 (n = 22)</td>
<td>390.00 (n = 1)</td>
</tr>
</tbody>
</table>
# Appendix III

Exit Abilities of Past Five Years of Graduates: MS in Health Care Administration

<table>
<thead>
<tr>
<th>Year</th>
<th>N</th>
<th>Mean GPA</th>
<th>Licensure Exam Results</th>
<th>Certification Test Results</th>
<th>Other Standardized Exam Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007-2008</td>
<td>44</td>
<td>3.62</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>2008-2009</td>
<td>49</td>
<td>3.59</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>2009-2010</td>
<td>43</td>
<td>3.63</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>2010-2011</td>
<td>18</td>
<td>3.74</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>2011-2012</td>
<td>24</td>
<td>3.46</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>
## Component Area/Program/Discipline: MS in Health Care Administration

### Program Level

<table>
<thead>
<tr>
<th>Program’s Student Learning Outcomes</th>
<th>Assessment Measures (Tools)</th>
<th>Standards/Benchmark</th>
<th>Results/Analysis</th>
<th>Action Taken to improve the program</th>
</tr>
</thead>
</table>
| Written Ethical Analysis           | Case analysis and written response (HCA 655 & HCA 630) | More than 75% of the students will score more than 2.0 in a 3-point scale measurement. | HCA 655: 97.7% (Summer 2010)  
HCA 655: 100% (Spring 2011)  
HCA 630: 96% (Fall 2011) | **Summer 2010:** (1) Revision and change of written ethical assignment will be done in cycle 2; (2) Emphasis on the “Chooses an action” stage to improve.  
**Spring 2011:** Cycle 2: More emphasis will be on the “Chooses an action” stage to improve in Cycle 3.  
**Fall 2011:** Cycle 3: Focusing on stakeholders and continuing to put emphasis on “Chooses an action” in cycle 4. |
| Written Communications             | Research Projects (HCA 695) | More than 75% of the students will score more than 2.0 in a 3-point scale measurement. | HCA 695: 100% (Spring 2010)  
HCA 695: 100% (Spring 2011) | **Spring 2010:** (1) Changed scoring categories in rubric as suggested by the English Department; (2) Reinforced in Cycle 2 the organization objective by giving the table of contents and final product manuscript to follow.  
**Spring 2011:** Will emphasize the “Relevance” objective as it scored less than the rest. |
| Oral Communications | Research Projects (HCA 695) | More than 75% of the students will score more than 2.0 in a 3-point scale measurement | HCA 695: 84.4% (Spring 2010)  
HCA 695: 87.7% (Spring 2011)  
HCA 695: 85% (Spring 2012) | **Spring 2010**: (1) eye contact and elocution will be emphasized in cycle 2; (2) A BBA’s rubric style will be changed in cycle 2 as suggested by the Communication Department; (3) The personal appearance objective will be added to rubric in cycle 2 as suggested by the Communication Department.  
**Spring 2011**: (1) Eye contact and body language/voice quality objectives will be emphasized in cycle 3; (2) “Avoiding reading directly from slides” will be emphasized in cycle 3 as suggested by the Communication Dept.  
**Spring 2012**: (1) Continue heavy emphasis in eye contact. Video from previous cycle will be shown during the semester; (2) Continue heavy emphasis in eye contact. Video from previous cycle will be shown during the semester in cycle 4. |
| Teamwork | Peer Evaluations (HCA 653 & HCA 615) | More than 75% of the students will score more than 2.0 in a 3-point scale measurement. | HCA 653: 100% (Summer 2010)  
HCA 653: 96.6% (Summer 2011)  
HCA 615: 97% (Spring 2012) | **Summer 2010**: (1) More precise instructions on scoring will be given to students in cycle 1  
**Spring 2011**: (1) A peer review instrument is suggested to be used in cycle 3.  
**Spring 2012**: Similar results with previous cycle. It was concluded there is no proper instrument to assess teamwork. This rubric will not be measured again. |
| **Problem Solving/Decision Making** | Evaluation of case analysis (HCA 615 & HCA 653) | More than 75% of the students will score more than 2.0 in a 3-point scale measurement. | HCA 615: 75% (Spring 2010)  
HCA 615: 91.7% (Spring 2011)  
HCA 653: 97% (Spring 2012) | **Spring 2010**: (1) More emphasis on the “Analysis and Evaluation” objective in Cycle 2; (2) the class assignment will be changed to assess and target better this objective in cycle 2.  
**Spring 2011**: Problem identification and solution objectives will be emphasized in cycle 3.  
**Spring 2012**: Emphasis in presentation will be performed in cycle 4. |
| --- | --- | --- | --- | --- |
| **Technology/HIS** | Evaluation of case studies/reading analysis (HCA 656) | More than 75% of the students will score more than 2.0 in a 3-point scale measurement. | HCA 656: 87.5% (Fall 2009)  
HCA 656: 87.5% (Fall 2010)  
HCA 656: 88% (Fall 2011). | **Fall 2009**: (1) Correct answer of “reading assignment” for students will be created in cycle 2; (2) Emphasis on the “knowledge objective” in cycle 2.  
**Fall 2010**: (1) A refinement of correct answer will be performed for students to follow reading assignment in cycle 3; (2) The rubric scoring scale will be changed; (3) more heavy emphasis on knowledge objective will be performed in cycle 3.  
**Fall 2011**: Emphasis in knowledge will be continued in cycle 4. |
# HCA Five Year Loop Closing Schedule of Learning Goals

<table>
<thead>
<tr>
<th>Learning Outcomes</th>
<th>Schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Written Ethical Analysis</td>
<td>• Loop 3 (July/August, Summer 2012-2013)</td>
</tr>
<tr>
<td></td>
<td>• Loop 4 (July/August, Summer 2014-2015)</td>
</tr>
<tr>
<td></td>
<td>• Loop 5 (July/August, Summer 2016-2017)</td>
</tr>
<tr>
<td>2. Communication</td>
<td>• Loop 3 (July/August, Summer 2012-2013)</td>
</tr>
<tr>
<td></td>
<td>• Loop 4 (July/August, Summer 2014-2015)</td>
</tr>
<tr>
<td></td>
<td>• Loop 5 (July/August, Summer 2016-2017)</td>
</tr>
<tr>
<td>3. Teamwork</td>
<td>• Loop 3 (July/August, Summer 2012-2013)</td>
</tr>
<tr>
<td></td>
<td>• Loop 4 (July/August, Summer 2014-2015)</td>
</tr>
<tr>
<td></td>
<td>• Loop 5 (July/August, Summer 2016-2017)</td>
</tr>
<tr>
<td>4. Decision making/problem solving</td>
<td>• Loop 3 (July/August, Summer 2012-2013)</td>
</tr>
<tr>
<td></td>
<td>• Loop 4 (July/August, Summer 2014-2015)</td>
</tr>
<tr>
<td></td>
<td>• Loop 5 (July/August, Summer 2016-2017)</td>
</tr>
<tr>
<td>5. Technology/HIS</td>
<td>• Loop 3 (July/August, Summer 2012-2013)</td>
</tr>
<tr>
<td></td>
<td>• Loop 4 (July/August, Summer 2014-2015)</td>
</tr>
<tr>
<td></td>
<td>• Loop 5 (July/August, Summer 2016-2017)</td>
</tr>
</tbody>
</table>
### Appendix V

**Program Course Enrollment: MS in Health Care Administration**

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Name</th>
<th>Required/Elective</th>
<th>Delivery Method</th>
<th>Location</th>
<th>Year 1 2007-2008</th>
<th>Year 2 2008-2009</th>
<th>Year 3 2009-2010</th>
<th>Year 4 2010-2011</th>
<th>Year 5 2011-2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Su</td>
<td>Fa</td>
<td>Sp</td>
<td>Su</td>
<td>Fa</td>
</tr>
<tr>
<td>MKT 511</td>
<td>Marketing and Management</td>
<td>R</td>
<td>Td</td>
<td>Huntington/S. Charleston</td>
<td>52</td>
<td>25</td>
<td></td>
<td>15</td>
<td>50</td>
</tr>
<tr>
<td>MGT 620</td>
<td>Human Resource Management</td>
<td>R</td>
<td>Td</td>
<td>Huntington/S. Charleston</td>
<td>39</td>
<td>60</td>
<td></td>
<td>54</td>
<td>48</td>
</tr>
<tr>
<td>MGT 672</td>
<td>Organization Behavior</td>
<td>R</td>
<td>Td</td>
<td>Huntington/S. Charleston</td>
<td>29</td>
<td>60</td>
<td>27</td>
<td>52</td>
<td>49</td>
</tr>
<tr>
<td>HCA 600</td>
<td>Health Care System</td>
<td>R</td>
<td>Td</td>
<td>Huntington/S. Charleston</td>
<td>20</td>
<td>15</td>
<td></td>
<td>28</td>
<td>9</td>
</tr>
<tr>
<td>HCA 610</td>
<td>HC Financial Management</td>
<td>R</td>
<td>Td</td>
<td>S. Charleston</td>
<td>49</td>
<td>44</td>
<td></td>
<td>16</td>
<td>21</td>
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<tr>
<td>HCA 615</td>
<td>Health Care Economics</td>
<td>R</td>
<td>Td</td>
<td>Huntington/S. Charleston</td>
<td>29</td>
<td>27</td>
<td>19</td>
<td>22</td>
<td>22</td>
</tr>
<tr>
<td>HCA 630</td>
<td>Legal Issues in HC Management</td>
<td>R</td>
<td>Td</td>
<td>Huntington/S. Charleston</td>
<td>25</td>
<td>27</td>
<td>20</td>
<td>15</td>
<td>22</td>
</tr>
<tr>
<td>HCA 653</td>
<td>Integrated Delivery Systems</td>
<td>R</td>
<td>Td</td>
<td>Huntington/S. Charleston</td>
<td>17</td>
<td>15</td>
<td></td>
<td>18</td>
<td>22</td>
</tr>
<tr>
<td>HCA 655</td>
<td>HC Marketing</td>
<td>R</td>
<td>Td</td>
<td>S. Charleston</td>
<td>26</td>
<td>20</td>
<td></td>
<td>24</td>
<td>9</td>
</tr>
<tr>
<td>HCA 656</td>
<td>Management of HC Technology/Info Systems</td>
<td>R</td>
<td>Td</td>
<td>Huntington/S. Charleston</td>
<td>17</td>
<td>13</td>
<td></td>
<td>22</td>
<td>22</td>
</tr>
<tr>
<td>HCA 695</td>
<td>Field Research in HC Management</td>
<td>R</td>
<td>Td</td>
<td>Huntington/S. Charleston</td>
<td>26</td>
<td>28</td>
<td>7</td>
<td>28</td>
<td>20</td>
</tr>
<tr>
<td>MGT 699</td>
<td>Business Policy and Strategy</td>
<td>R</td>
<td>Td</td>
<td>Huntington/S. Charleston</td>
<td>13</td>
<td>43</td>
<td>50</td>
<td>23</td>
<td>49</td>
</tr>
</tbody>
</table>

Indicate all program and service courses. Please include all special topics courses offered as well as independent studies. When listing Independent studies, please list the **number of independent study students enrolled**, but **DO NOT** include individual names or the titles of the independent studies. Please use the following codes:
Required/Elective: Required = R; Elective = E (Please indicate all that apply; e.g. E + S, if the course is both an elective and a service course).
Delivery Method: Traditional = Td, Online = O, Hybrid = H
Location: Huntington, South Charleston, Point Pleasant, etc.

*Expand table as needed.*
Appendix VI
Program Enrollment: MS in Health Care Administration

<table>
<thead>
<tr>
<th>Students</th>
<th>Year 1 2007-2008</th>
<th>Year 2 2008-2009</th>
<th>Year 3 2009-2010</th>
<th>Year 4 2010-2011</th>
<th>Year 5 2011-2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>MS in Health Care Administration No Area of Emphasis</td>
<td>101</td>
<td>76</td>
<td>45</td>
<td>50</td>
<td>57</td>
</tr>
<tr>
<td>Second Majors Enrolled*</td>
<td>3</td>
<td>1</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Third Majors Enrolled:**</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grand Total of Students Enrolled in the Program</td>
<td>104</td>
<td>77</td>
<td>49</td>
<td>55</td>
<td>61</td>
</tr>
<tr>
<td>Graduates of the program</td>
<td>44</td>
<td>49</td>
<td>43</td>
<td>18</td>
<td>24</td>
</tr>
</tbody>
</table>

*If known. This information is not completely accurate at this time, as students often do not declare a second major until the junior evaluation or the student has her/his primary major in another college.

**On occasion you may have a student enrolled in your program who is declaring your program as a 3rd major.

***If known. This information is not completely accurate at this time, as students often do not declare minors until the junior evaluation or senior application for graduation.
Figure 1. Trend Line for Total Enrollment and Program Graduates: MS in Health Care Administration
## Appendix VII

### Job and Graduate School Placement Rates: MS in Health Care Administration

<table>
<thead>
<tr>
<th>Year</th>
<th># of graduates employed in major field</th>
<th># of graduates employed in related fields</th>
<th># of graduates employed outside field</th>
<th># of graduates accepted to further graduate study</th>
<th># of graduates not accounted for</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007-2008</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>2008-2009</td>
<td>10</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>2009-2010</td>
<td>11</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>2010-2011</td>
<td>8</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>2011-2012</td>
<td>12</td>
<td>0</td>
<td>6</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Five –Year Total</td>
<td>45</td>
<td>1</td>
<td>11</td>
<td>0</td>
<td>141*</td>
</tr>
</tbody>
</table>

*Out of 198 in total (2007-2012)
Appendix VIII
Assessment Letters

Dr. Alberto Coustosa, Program Director
Health Care Administration
College of Business

Dear Alberto:

The Graduate Council and I have completed our evaluation of the MS in Health Care Administration’s assessment of student learning. This letter will provide general comments and suggestions for improvement. I have included the scoring rubric we used to evaluate your assessment report in a separate document.

When the program’s goals are further broken down into objectives, it is clear that they emphasize higher levels of cognitive ability. However, the goals themselves are not all written as such. For example, “Students will recognize ethical dilemmas and state the principles and values for resolving them” uses two verbs (recognize and state) that are at the lowest level of the cognitive hierarchy. What about, “Students will evaluate ethical dilemmas and develop a plan to resolve them?”

As in the past, you’ve done a great job of collecting and analyzing data in such a way that relative strengths and weaknesses for each learning goal are apparent. You also effectively use the data to inform program improvement.

During the coming academic year, it will be important that you follow the plan you developed as part of the first two activities of the Open Pathways Demonstration Project. The project’s steering committee will provide more feedback regarding next steps in that project at summer’s end. If you have questions or concerns, please let me know.

Sincerely,

Mary E. Reynolds

Mary E. Reynolds
Director of Academic Assessment

C: Dr. Chong Kim, Dean, COB
Office of Assessment & Program Review

June 8, 2011

Dr. Alberto Coustasse, Coordinator
MS in Health Care Administration
LCOB

Dear Alberto,

The Graduate Council and I have completed our evaluation of the MS in Health Care Administration's assessment of student learning. This letter will provide general comments and suggestions for improvement. Although the scoring rubric we used to evaluate assessment reports was sent to you in April, I will not include numerical ratings in this letter. The reason for this is that the rubric is still relatively new and is continuing to be revised. At this time, I ask that you use it for formative purposes to help improve your assessment plan. We also would appreciate your comments concerning this rubric.

This is an excellent assessment plan! Your rubrics are nicely developed, your results analyzed in detail, and you have used these results to close the feedback loop!

During the academic year 2011 – 2012, I plan to meet with all programs to assist with further development of assessment plans and look forward to meeting with you. I will be in touch at the end of the summer about scheduling. If you have questions or concerns, please let me know.

Sincerely,

Mary E. Reynolds

Mary E. Reynolds
Director of Academic Assessment

C: Dr. Chong W. Kim, Dean, LCOB
   Dr. Harlan Smith, AOL Coordinator
Office of Assessment & Program Review

April 5, 2010

Dr. Alberto Coustasse, Coordinator
MS in Health Care Administration
LCOB

Dear Alberto:

I have completed my evaluation of the MS in Health Care Administration's assessment of student learning. This letter will provide my general comments and suggestions for improvement. Although the scoring rubric we used to evaluate assessment reports is attached, I will not include numerical ratings in this letter. The reason for this is that we used the attached rubric is still relatively new and, as you will see, it raises the bar for what is considered excellent assessment. However, I ask that you use it for formative purposes to help improve your assessment plan. We also would appreciate your comments concerning this rubric.

Your learning objectives are measurable, speak to higher orders of thinking, and overall are very well developed and written. Measures are complementary and appropriate. Although no data analysis has yet occurred, you have an excellent plan in place that should yield actionable results!

Please see the attached rubric. If you have questions or concerns, please let me know.

Sincerely,

Mary E. Reynolds

Mary E. Reynolds
Director of Academic Assessment

C: Dr. Chong W. Kim, Dean, LCOB
Dr. Harlan Smith, AOL Coordinator
Dr. Phillip Rutsohn, Program Director
MS in HCA
LCOB

Dear Phil:

The Graduate Council and I have completed our evaluation of the MS in HCA’s assessment of student learning. This letter will provide my general comments and suggestions for improvement. Although the scoring rubric we used to evaluate assessment reports is attached, I will not include numerical ratings in this letter. The reason for this is that we used the attached rubric for the first time this year and, as you will see, it has changed considerably from the ones used in previous years. It raises the bar for what is considered excellent assessment considerably and, since it was not shared with programs before this assessment cycle, I’m not comfortable using it to give programs a formal rating this year. However, I ask that you use it for formative purposes to help improve your assessment plan. We also would appreciate your comments concerning this new rubric.

Graduate Council reviewers and I agree that you have developed a nice assessment plan. Your student learning outcomes are well articulated and cover higher levels of learning. Assessment measures are well considered; however, I recommend that you use more than one assessment for each outcome. I also encourage you to develop analytic scoring rubrics for each assessment tool.

Please see the attached rubric and letter to Deans, Chairs, and Faculty detailing general suggestions for an effective assessment program. If you have questions or concerns, please let me know.

Sincerely,

Mary E. Reynolds

Mary E. Reynolds
Director of Academic Assessment

C: Dr. Chong Kim, Interim Dean, CITE
January 24, 2012

Chong W. Kim
Dean
Marshall University
Lewis College of Business
One John Marshall Drive, 107 Corbly Hall
Huntington, WV 25755-2300
UNITED STATES

Via email: kim@marshall.edu

Dear Dean Kim,

It is my pleasure to inform you that the peer review team recommendation to extend maintenance of accreditation for the undergraduate and master’s degree programs in business offered by Marshall University is concurred with by the Maintenance of Accreditation Committee and ratified by the Board of Directors. Congratulations to you, the faculty, the students, the staff, and all supporters of the school.

One purpose of peer review is to stimulate further continuous improvement of quality programs. As noted in the team report, the school is to be commended on the following strengths and effective practices:

1. The College’s Business Advisory Board plays a critically significant role in advancing the quality of the College and its outreach into the business community as well as Marshall University as a whole.

2. The College is commended for its effective recruitment and retention of students. University administration has made this a top strategic initiative and the College has added a new position of Director of Recruitment and Retention.

3. The College provides vital business, community and economic development outreach to the service region through a wide variety of course/degree based opportunities. Examples include: the College’s effective economic development outreach such as the Toyota/International Business program Problem Solving partnership; live cases in marketing and entrepreneurship program with the medical center; and, the MS in Health Care Administration Internships with Cabell-Huntington Hospital.

4. The College’s Hall of Fame Dinner Fundraiser each spring is a significant source of external funds and increases community prestige for the College as well as the
University as a whole.

5. In discussions with business faculty and the College Business Advisory Board the PRT learned that the College Dean has been effective in increasing the linkage between the College and the business community.

6. The College’s students laud the small class size, close association with faculty in learning and service as well as the faculty’s dedication to student success.

Additionally, in the interest of continuous improvement, Marshall University should closely monitor the following item and incorporate it into ongoing strategic planning initiatives:

a. The PRT was concerned that the Fifth Year Report did not adequately tell the story of the overall quality. The entire report was not well organized and lacked management and key faculty supervision and leadership. Even though an Executive Summary is no longer required by AACSB, the addition of a clear summary would have added an effective beginning to the entire maintenance report. All five parts of the Situational Analysis were entirely too brief and required PRT members to spend much time obtaining additional information. The report did not contain a table showing financial support for the College strategic action items for the next three years (report did contain discussion points).

2. The College should continue to use and mature its AoL program and more effectively demonstrate widespread faculty involvement and ownership in all aspects of the program and its implementation and assessment. It should ensure that results from the analysis of goals/objectives for each assessment cycle are more exact and have clear links to continuous improvements. Additionally, the College should be more consistent in developing AoL methodologies and processes used for all degree programs. (Standards 16-19: Assurance of Learning)

3. In the spirit of continuous improvement, the College should review and strengthen its process used to classify faculty intellectual contributions as basic, applied and pedagogical research. The Digital Measures system should be carefully implemented to ensure faculty intellectual data are correctly entered in Table 2-1. (Standard 2: Intellectual Contributions)

4. In the spirit of continuous improvement, the College should review and strengthen its maintenance of qualification definitions for AQ faculty, particularly related to the overall quality of peer-reviewed journals. The College should have sufficient AQ faculty resources prior to starting any new degree programs. (Standard 10: Faculty Qualifications)

Marshall University has achieved accreditation for five additional years. The next on-site maintenance review occurs in the fifth year, 2016-2017. A timeline specific to your visit year is attached. Please note that your Maintenance Review Application will be due on July 1st, 2014. You will be expected to provide an update on progress in addressing the concerns
stated above in addition to other relevant information for initiation of the next maintenance review.

Please refer to the *Maintenance of Accreditation Handbook* for more information regarding the processes for maintenance of accreditation. The handbook is updated periodically to provide the most current process improvements. Please monitor the website to make certain that you have the most current version.

Again, congratulations from the Accreditation Council and AACSB International - The Association to Advance Collegiate Schools of Business. Thank you for participating in the maintenance of accreditation process and for providing valuable feedback that is essential to a meaningful and beneficial review.

Sincerely,

Jan Williams, Chair
Board of Directors

cc: Peer Review Team
  Berkwood M. Farmer,
  Business Team Chair
  George W. Krull Jr.,
  Accounting Team Chair
  Henry Lowenstein,
  Business Team Member,
  Gary D. Burkette,
  Accounting Team Member