
Master's Program Assessment Project

Self-Study Report Template

For August 2003 through August 2007

Due:

Alliance for Medical Management Education Executive Master of Science in Healthcare Management

Basic Information

1. Type of program: Select all that apply.

- Professional
- Research
- Interdisciplinary
- Applied

2. Date program founded or began. **May, 1998**

3. Describe the founding and development of any related centers. **N/A**

4. Attach department charter and bylaws.
5. Describe resources supporting the program such as libraries, laboratories, etc. N/A
6. Other information the department would like to provide.

Program Philosophy and Mission

1. What is the mission of the master's program?

The mission of the executive Master of Science in Healthcare Management is to help physicians advance their professional careers by providing them with the critical business and interpersonal skills they need to become more effective leaders of their healthcare organizations.

2. Is this a published official mission statement? Yes No

3. How is the program mission related to other key UTD statements, such as:

- a. the university's mission statement

The Graduate Certificate Program advances the University's strategic objective of educating current and future industry leaders.

- b. the Academic Plan

4. Please attach or submit your college or unit academic plan and/or strategic plan when available.
5. Is this program regionally or nationally ranked? If so, how and by whom? No
6. Other information the department would like to provide.

Benchmarking

1. Identify three peer programs.

American College of Physician Executives, University of Tennessee and Auburn University

2. Identify three aspirational peer programs. Same as above

3. Identify any other source from which benchmark or ranking data may be obtained. Please attach this data or provide the website where this information can be accessed.

The American College of Physician Executives. The ACPE is recognized by the American Medical Association as the specialty society of medical administration. It offers physicians a Certificate in Medical Management and a Masters in Medical Management (MMM) through four partnering universities: Carnegie Mellon University; Tulane University; The University of Southern California; and the University of Massachusetts Amherst. The ACPE's website is <http://www.acpe.org/ACPEHome/Index.aspx>

Program Design

1. What employment opportunities are students in the program being prepared for?

All of our students are currently employed as physicians (90%) or senior clinical administrators (10%). The program's target market is physicians who have moved—or desire to move—into a role of administrative or leadership responsibility in their healthcare organization based upon interest and natural ability, but who lack the requisite formal training in business and organizational leadership skills.

2. What are the requirements of the program?

- a. Fill in : hours in major field; hours in minor or cognate field; statistics or research design; etc.)

Physician admitted into the program must have an MD or DO from an accredited college or university and a current, unrestricted license to practice medicine in the United States. The program also admits a limited number (no more than 10% of the class) of senior clinical administrators with at least seven years management experience in a US healthcare organization.

The Master of Science in Healthcare Management requires successful completion of the following nine classes OR any eight classes and a four credit hour independent research project::

HMGT 6401 Negotiation and Conflict Management in Healthcare
HMGT 6402 Financial Management of Healthcare Organizations
HMGT 6403 Medical Cost and Performance Management
HMGT 6404 Service Quality Improvement and Patient Satisfaction
HMGT 6405 Healthcare Information Management and Technology
HMGT 6406 Strategic Leadership of Healthcare Organizations
HMGT 6407 Healthcare Policy and Regulation
HMGT 6408 Motivational Leadership in Healthcare Organizations
HMGT 6410 The Science and Practice of Influencing Behavior

- b. How many credits must be taken at UTD?

All classes must be completed at UTD

- c. If there are consortium arrangements with other universities, how is this requirement achieved?

The program is offered through an educational partnership with UT Southwestern Medical Center. UT Southwestern provides continuing medical education (CME) credit to class participants. The Graduate Certificate in Healthcare Management, which requires completion of any five of the above listed classes, is jointly awarded by both UTD and UT Southwestern.

3. How are the requirements of the program designed to ensure fulfillment of the mission?

The healthcare management classes are designed to directly address the knowledge and skills determined by the American College of Physician Executives—recognized by the American Medical Association as the specialty society of medical administration—to be required of successful physician executives.

4. Are key elements of the curriculum made available on a schedule that facilitates timely completion of the program by students? Attach course rotation schedules for the previous three years.

A different class is offered every two months, and physicians may take the classes in any order. If the classes are taken in sequence, the MS would require 16 months to complete.

5. a. If UTD offers a similar program at the undergraduate level, how is the post- baccalaureate program progressively more advanced in content? No similar program is offered at the undergraduate level.
- b. If there are courses of similar name or similar substantive content, how are the graduate courses progressively more advanced than those offered at the undergraduate level? N/A
- c. Are there any situations in which undergraduates and graduate students are co-enrolled in their respective courses at the same time with the same instructor? N/A

If so, how is the learning experience more advanced for the graduate students? N/A

6. Describe how the program and curriculum are reviewed and updated to maintain currency in the field.

The healthcare management classes are designed to directly address the knowledge and skills determined by the American College of Physician Executives—recognized by the American Medical Association as the specialty society of medical administration—to be required of successful physician executives.

Prior to each class, the faculty develop specific daily and overall learning objectives and a syllabus, including articles and case studies that support those learning objectives. Each class is redesigned every time it is taught based upon the continuing medical education (CME) evaluations as well as faculty notes and observations from the preceding time it was offered.

7. Do program requirements include courses in which students gain knowledge of literature of the discipline? If so, which courses?

Each class requires pre-course reading assignments on the subject matter to be discussed. Each participant also receives a continuing medical education (CME) binder which includes an additional 10-20 relevant articles and case studies.

8. Does program require students to be engaged in research, professional practicums, or similar training experiences? If so, what are they and how is this requirement structured?

The classes are case intensive. They require the physicians to analyze, discuss and make recommendations regarding actual healthcare industry problems and situations problems. Follow-up written assignments as well as the elective research project require the participants to apply the knowledge and skills developed in the classes to the analysis and resolution of a significant medical management issue in their practice, hospital or medical organization.

9. Other information department would like to provide.

Program Faculty

1. List all faculty who are providing instruction for the program by name, rank, tenure or tenure-track status, gender, years at UTD, year doctoral program was completed, institution granting the degree. Provide an updated CV for each person

The program's core faculty is listed below. Their CV's are on file and available from their respective institutions. A select group of physician executives with exceptional credentials also serve on the faculty in order to bring special expertise and experience to the program

NAME	RANK/TITLE	UNIVERSITY
Rajiv Banker, PhD	Professor	Temple University
John Barden, MBA	Senior Lecturer	UTD
Marie Chevrier, PhD	Associate Professor	UTD
David Deeds, PhD	Associate Professor	UTD
Gregory Dess, PhD	Professor	UTD
Robert Hicks, PhD	Clinical Professor	UTD
James Joiner	Program Director	UTD
Kirk Kirksey, MA	Vice President of Information Resources	UT Southwestern
Lowel D. Kiel, PhD	Professor	UTD
Constantine Konstans, PhD	Professor	UTD
John McCracken, PhD	Research Professor	UTD
Richard Miller, PhD	Visiting Professor	UTD
Ronald Peshock, MD	Professor	UT Southwestern
Divakar Rajamani, PhD	Clinical Professor	UTD
Suresh Radhakrishnan, PhD	Professor	UTD
David Springate, PhD	Associate Professor	UTD
Garry Young, PhD	Research Professor	George Washington University
Blake Waterhouse, MD, MBA	Adjunct Professor	UTD

Laurie Ziegler, PhD	Senior Lecturer	UTD
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2. Provide the following data regarding the instructional activities of core faculty:
 - a. --Number of dissertations (Doctoral) chaired.
 - b. --Number of Thesis (Master's) chaired.
 - c. --Number of dissertation committee memberships
 - d. --Number of organized classes taught
 - e. --Expected average number of organized classes taught by core faculty per
 - f. --academic year
 - g. --Other courses (internship supervision, clinical supervision, studio, research, dissertation, Thesis, etc.)

This data is on file and available from their respective universities.

3. Provide the following data comparing your program's faculty to three of the program's benchmark institutions and three of the aspirational peer groups:

Number of core (i.e. full time masters, tenured and tenure-track faculty) by rank, ethnicity, and gender in the program.

Number of publications (i.e. peer-reviewed publications in excellent or highly respected journals and publishing houses) per full-time faculty equivalent (FTFE) of core faculty per year.

Total dollar amount of research expenditures and dollar amount of research expenditures per FTFE of core doctoral faculty.

Average number of organized classes (both Graduate and Undergraduate) taught by core faculty for academic years 02-03, 03-04, and 04-05.

02/03: Rajiv Banker: 1; Marie Chevrier, 1; Royce Hanson, 1; Jim Joiner : 1 ; Doug Kiel, 1 ; Constantine Konstans, 1 ; Suresh Radhakrishnan, 1 ; David Springate, 1 ; Laurie Ziegler, 1.

03/04: Greg Dess, 1; Paul Gaddis, 1; Nancy Schreiber, 1; Doug Kiel, 3; Constantine Konstans, 2; Suresh Radhakrishnan, 2; David Springate, 1; Robert Hicks, 1.

04/05: Greg Dess, 1; Paul Gaddis, 1; Royce Hanson, 1; Richard Miller, 1; Doug Kiel 2; Constantine Konstans, 1; Suresh Radhakrishnan, 1; David Springate, 1.

4. List special honors that have been received by the program faculty during the last 3 years.

See UTD faculty website.

5. Other information the department would like to provide.

Students

1. From which universities do the new admits come?

Our students are practicing physicians.

2. Describe the admission standards and the process of selecting applicants for admission to the program used during the previous three years. Programs with approved holistic processes should also include this current selection procedure.

Physicians must have an MD or DO from an accredited college or university and a current, unrestricted license to practice medicine in the United States. Most are board-certified in their practice specialization and have 10-20 years of clinical experience and work at a senior capacity in a healthcare organization (e.g. Chief Medical Officer, Medical Director, etc.). A select number of administrators are admitted who must be currently employed in a healthcare organization and have at least 7 years experience in a senior capacity (e.g. VP Finance, CFO, Chief Nursing Officer, etc.).

3. Provide data for the last 3 years on:

- i. The number of applicants to the program for each year. 2004 – 25; 2005 – 36; 2006 – 46
- ii. The number and percentage admitted to the program each year compared with the number of applicants. 2004 – 84%; 2005 – 100%; 2006 – 98%
- iii. The number and percentage of new admits who enrolled compared with the number who were admitted. 2004 – 84%; 2005 – 100%; 2006 – 98%
- iv. The number of students who completed the degree program each year . 2004 – 9; 2005 – 9; 2006 - 1

4. Provide the number and percent of full-time and part-time doctoral students by gender and ethnicity (cross-tabs) for the last three years. N/A

Diversity: White, African American, Hispanic, Native American, Asian, Alaskan-Pacific Islander

U. S. Citizen, Permanent Resident, International

Male; Female

5. Provide the number and percent of full-time and part-time master's students with fellowships, scholarships, research assistantships, or teaching assistantships /teaching fellowships. N/A
6. Describe the types of financial support and dollar amounts provided to master's students in the program.

Some of the physicians receive financial support form their medical practice or hospital. None is provided by UTD.

Fellowships

Scholarships

TA

RA

7. How many students receive tuition support? Where does this support come from? **N/A**
8. Provide the number of master's student scholarly activities (peer-reviewed publications; presentations, exhibitions, or performances at national or international platforms or highly recognized state or regional venues).

Most of the physicians in the program have publications in peer reviewed medical journals, and those from academic medical centers have many of them, e.g., one 2006 participant, the Ob-Gyn Chair at New Mexico Health Science Center, has over 200 peer reviewed publications. The publications from those currently enrolled in the program would number between 500 – 1000.

9. Describe major accomplishments, honors, etc. among the program's master's graduates.

Many of the Certificate recipients have achieved professional prominence, including:

- ♦ Member, US House of Representatives
- ♦ President, Trinity Mother Frances Health System
- ♦ President, American Gastroenterological Association
- ♦ Chief Medical Officer, Seton Health System
- ♦ Senior Vice President of Medical Affairs, Christus Health System
- ♦ Board of Directors, Triad Hospitals, Inc.
- ♦ Trammel Crow Professor of Neurosurgery, UTSW
- ♦ Medical Director, Texas Dept. of Mental Health and Mental Retardation
- ♦ Chairman, Department of Surgery, Louisiana State University Health System
- ♦ Medical Director, CIGNA HealthCare
- ♦ Chairman, Center for Minimal Access Surgery, Harvard Medical School
- ♦ President, HealthTexas (Baylor Health System's physician group)
- ♦ President and Chief of Staff, Zale Lipshy University Hospital

10. Provide the following data comparing your program's master's students to three of the program's benchmark institutions and three of the program's aspirational peers.

- i. Average dollar amount of financial support (fellowships, TA's and RA 's) for master's students. **N/A**
- ii. Percentage of master's students receiving tuition waivers or tuition scholarships. **N/A**
- iii. Graduation/attrition rates **N/A**
- iv. Number of master's degrees conferred **To date – 69.**

11. Other information or data that the department would like to provide.

Outcomes

1. What are the key learning outcomes that have been identified for the program?
1. Students Demonstrate the Knowledge and Skills Required to Improve Operating Efficiency in a Healthcare Organization.
 - a. Evaluate the efficiency of key medical service processes. MED 6404
 - b. Identify and evaluate critical service processes that increase patient satisfaction. MED 6404
 - c. Evaluate the reasons for the success or failure of a healthcare IT project. MED 6405

- d. Create performance metrics for a healthcare organizations. MED 6403
2. Students Will Demonstrate the Ability to Make Financial Decisions that Create Economic Value.
 - a. Apply appropriate financial methods to capital project decision-making. MED 6402
 - b. Evaluate and interpret the financial statements of a healthcare organization. MED 6402
 - c. Apply cost analysis and budgeting tools to improve financial performance. MED 6403
 3. Students Will Demonstrate the Strategic Thinking Skills Required to Create Sustainable Competitive Advantage in a Healthcare Organization.
 - a. Conduct an external environmental analysis of a healthcare organization. MED 6406
 - b. Create alternative competitive strategies for a healthcare organization. MED 6406
 - c. Analyze the governance and oversight requirements of a healthcare IT project. MED 6405
 - d. Analyze the interests and position of key healthcare regulators and interest groups. MED 6407
 4. Students Will Develop the Interpersonal Skills Required to Improve Leadership Effectiveness in a Healthcare Organization.
 - a. Analyze competing interests and sources of power in a negotiation. MED 6401
 - b. Demonstrate intelligent listening and authentic feedback in a coaching situation. MED 6410
 - c. Assess an individual's readiness for change in a coaching situation. MED 6410
 - d. Evaluate the motivational needs and leadership styles of successful healthcare leader. MED 6408
 5. What methods are used to determine whether students have achieved the key learning outcomes of the program?

Learning assessment in the graduate business program for physicians consists of five separate but related activities:

1. Prior to every course, the participating faculty (both management and medical) meet to establish daily learning objectives and an overall course learning objective. They then develop a curriculum and case exercises that support those objectives. The last step is to decide who will teach what subject. Every class is redesigned and improved based on the feedback received in step 5.
2. At the end of each class day, every student fills out a continuing medical evaluation form in which they provide their comments and rate both the subject matter and the instructors for that day.
3. Also at the end of each class day, a response card is distributed to each student which asks two questions:
 - a. What is the main idea you learned today?
 - b. What is the main unanswered question(s) you leave class with today? What did you not understand
4. Each day the CME forms and response cards are collected and reviewed by the teaching faculty prior to the next day's class.
5. At the end of the course, the lead instructor and the program director develop written notes to inform faculty discussions the next time the class is scheduled to be taught (step 1).
6. How many graduates are employed in a position in their field within one year of completing their master's degree programs? Where have the graduates been employed?
All are physicians and have remained so. Most have advanced, however, into roles of increasing leadership responsibility in their healthcare organization.

7. Summarize improvements to the program that were based on assessment results for the 3 years.

Classes are team taught by both medical and management faculty. Prior to each class, the faculty develop specific daily and overall learning objectives and a syllabus, including articles and case studies that support those learning objectives. Each class is redesigned every time it is taught based upon the continuing medical education (CME) evaluations as well as faculty notes and observations from the preceding time it was offered.

8. What is the placement record for students who have graduated in the last three years?

The program has attracted licensed physicians from over 20 states, and most continue to practice medicine after completing their Masters, albeit in a role of increased administrative and leadership responsibility. They come from a wide variety of healthcare organizations, including hospitals and health systems, physician practice organizations, managed care organizations, and academic medical centers.

9. In what ways is this program distinctive from similar programs at other universities in Texas, and elsewhere?

The program targets a unique market: physicians who have moved into a position of leadership or administrative responsibility in their healthcare organization based on interest and natural aptitude, but who lack the requisite formal training in business and leadership. The learning objectives are designed to meet the needs of this market, and the class format is designed to accommodate their work schedules. Our format is unique: classes may be started at any time and taken in any order. Classes are four days in length (Saturday through Tuesday) and a different class is offered every two months.

Other outcome information the department would like to provide.

Budget

1. What is the approximate proportion of the total departmental budget that is dedicated to master's program support? Describe the areas of support.

The program is "off-books," and receives no state support. It is totally self-supported by tuition.

2. Describe budgetary challenges that the department has dealt with to support the master's program.

Making the program sufficiently attractive to induce physicians to be willing to bear the high opportunity cost of the time required away from their practice.

Departmental Conclusions and Recommendations

1. Describe the area(s) of the master's program that you (the department) consider excellent.

The program format and content is uniquely designed to meet the needs and work schedules of a clearly identified target market: physicians who have moved—or desire to move—into a position of administrative or leadership responsibility in their medical organization. Classes are four days in length and offered every two months, making it possible for physicians from throughout the United States to attend. The program has

attracted doctors from Hawaii, Florida, Delaware, Michigan, Idaho and all points in between, which significantly enriches the diversity, experience and perspectives of the class.

2. Describe the area(s) of the master's program that you (the department) consider areas of limitation or challenge.

If a physician must miss a class due to a work conflict, that same class will not be offered again for another 18 months.

3. If you (the department) were provided with additional funding each year for master's education that consisted of an amount equal to 5% of your total departmental budget, what would your (i.e. the department's) priorities be for spending the increase?

It would be spent on marketing and promotion.

4. List and explain the department's recommendations for improvement of its master's program.

The most important consideration is to continually improve the classroom content and educational experience of the participants by listening to them and responding to their needs. The program is recognized and highly regarded by physician leaders throughout the US, and word-of-mouth recommendations bring us a significant share of our students. To preserve this reputation, it is essential to continually update and upgrade classroom articles, cases and teaching methods. For this reason, each class is reviewed and redesigned each time it is offered (see response to Outcomes 5 above).

5. Other conclusions and/or recommendations that the department would like to provide.