

CURRICULUM REVISION TO ADDRESS A CHANGING HEALTH CARE ENVIRONMENT

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ABSTRACT

The U.S. health care system has been an evolving industry in the past few decades and the instability of the environment continues. According to a report published by the PwC's Health Research Institute, the US health industry is undergoing seismic change generated by a collision of several forces in the health care market. Some of these forces, such as the shift to paying for value and not volume, are moving quickly and are familiar. Others, such as consumerism, are just beginning to reshape the health landscape. The current political climate indicates that more changes are likely. The unpredictable nature of the health care system in the United States necessitates continual monitoring by health care management programs in colleges and universities in the United States to assure the curriculum offered is adequate to prepare graduates for work in this shifting terrain.

At Lander University, the process of reviewing and revising curriculum in the Health Care Management (HCMT) program in the College of Business revealed gaps and the need for both the addition of new courses and modifying the scope and content of existing courses in the health care management curricula. The process for these changes are described in this article.

For some time deficiencies in the quality of patient care, as well as patient safety issues, have led to calls for change in health professions education by healthcare organizations and policy makers such as the Institute of Medicine (IOM) (Berwick, 2002). The foundation for any proposed curricular revision or changes in teaching practices must be firmly grounded in a comprehensive review of the literature and input from students, alumni, and the professional health care community. The process for curriculum change in the Lander University health care emphasis is described in this article.

Key Words: Healthcare Reform, Affordable Care Act, Curriculum, Healthcare Administration Programs.

INTRODUCTION

Lander University in upstate South Carolina has an enrollment of approximately 2500 students. The health care management program (HCMT) enrollment represents approximately 25% of the total enrollment for the College of Business. The Bachelor of Science in Business Administration with an emphasis in Health Care Management prepares students for careers working in healthcare systems. Students enrolled in the Healthcare Management program are challenged to identify and provide solutions for the unique problems and issues facing healthcare organizations today. The mission of the four-year curriculum is to provide students with a broad base of business knowledge and skills. The HCMT program was designed to help students gain

the necessary general business, analytical, communication, and management competencies needed for professional jobs in the field of healthcare management.

The curriculum for this program has not undergone a review process since 2003. Curriculum revision is either being considered or is in process in many health care management programs across the country in response to the seismic changes occurring in the health care industry. Any curriculum revision process is well served to examine the trends in health administration programs. The decision for a curriculum review process is also necessary because the program coordinator, faculty, and Dean of the College of Business at Lander have made the decision to pursue the Association of University Programs of Health Administration accreditation, which is the gold standard for health care administration programs.

The process used for this curriculum review included researching the AUPHA requirements for accreditation, a curriculum mapping process to determine how much of these requirements are already being met, a comparison of the Lander course offerings in health care management (HCMT) to other programs in the state and region, and a survey of alumni and the healthcare professionals and preceptors in the internship program. A literature review of trends at the national level in undergraduate education in healthcare administration provided insight into the current developments, and all these inquiries provided data for developing a plan for curriculum transition.

According to Dr. Don Berwick, former Director of Medicare and Medicaid, the *Crossing the Quality Chasm* report of 2001 posits that the US healthcare system needs improvement in six dimensions of health care performance: safety, effectiveness, patient-centeredness, timeliness, efficiency, and equity. Berwick and colleagues assert that those improvements cannot be achieved within the constraints of the existing system of care. The report provides a rationale and a framework for the redesign of the U.S. health care system at four levels: patients' experiences; the "microsystems" that actually give care; the organizations that house and support microsystems; and the environment of laws, rules, payment, accreditation, and professional training that shape organizational action. Many of these redesign initiatives have been implemented since Berwick's article in 2002 (Amalberti, R., Auroy, Y., Berwick, D., Barach, P., 2005). However, the professional training component has not seen the dramatic change Berwick envisioned.

Reform of health education is not new. There have been three generations of educational reforms during the twentieth century. The first reforms were introduced at the beginning of the 20th century and resulted in a science-based curriculum. The second group of reforms introduced problem-based instructional innovations. During the last decade or so, a movement toward the third reform has occurred with a focus on systems based education to improve the performance of health systems by adapting core professional competencies to specific contexts according to then Global Independent Commission on Education of Health Professionals for the Twenty-first Century (Frenk, et al, 2010). The literature review for this process indicates that competency based curriculum has been widely adopted for graduate programs, but a knowledge-based approach is still the most commonly used in undergraduate health care management programs. The foundational competencies that any curriculum change should include have received a great deal of research in healthcare administration graduate programs. Competency-based program assessment has become a fundamental part of the accreditation process for graduate health

administration programs, as well as a method for program assessment by deans and department directors, but undergraduate competency based curriculum has not been widely investigated or implemented. However, curriculum changes that focus on preparing students for work in the 21st century healthcare system should be mindful of providing opportunities to develop the competencies necessary to meet market demands. The focus on measurable outcomes and competencies did not happen quickly. The general acceptance of evidence-based medicine was a natural antecedent to an evidence-based approach to healthcare management (Kovner, A., Fine, D., D' Aquila, R., 2009). Competency-based assessments can be employed to pinpoint specific program strengths and weaknesses in order to make program changes to ensure students are adequately prepared to enter the field. (Stiffl and Bontempo, 2012). The insight provided by this study and others provide information to consider in developing appropriate curriculum changes in the HCMT program at Lander. It is the consensus of many of the stakeholders involved in this process that the development of competencies such as leadership, communication, and the ability to work in teams among others need to be integrated into the HCMT curriculum.

The healthcare managers of today must have management ability superior enough to parallel the increased complexity of the healthcare environment. Academic health care management programs must produce graduates able to match these demands. The Healthcare Leadership Alliance (HLA), a consortium of six major professional membership organizations, used the research from and experience with their individual credentialing processes to posit five competency domains common among all practicing healthcare managers: (1) communication and relationship management, (2) professionalism, (3) leadership, (4) knowledge of the healthcare system, and (5) business skills and knowledge (Stefl and Bontempo, 2008). Curriculum for the 21st century managers should consider the development of these competencies when changing curriculum.

In 2012, a Harvard professor named Regina Herzlinger conducted interviews with 58 leading global health care sector CEOs about their future needs. The CEOs wanted people who could solve problems, work as part of a diverse team, understand and learn from failure, manage change, and innovate through processes, systems, and organizations. The words they used most were leadership, change, and innovation. Both undergraduate and graduate programs in healthcare management have the daunting task of providing curriculum that adjusts to the dynamic healthcare environment and provides students with the skills that prepared them for the challenges of the twenty-first century healthcare environment. Herzlinger stated that “comparing the feedback from academics and CEOs who attended several conferences revealed that one of the areas of strongest agreement between our academic conferees and the CEOs interviewed was that modern health care needs innovation in processes and systems more than it needs new inventions.” Herzlinger commented that a chair/CEO of a health care cost-effectiveness company stated that, “Innovation, in our world, is not going to be necessarily about the thing, it is going to be about the way you do it. Although we make some products, it is largely a service business and that means innovating around services is just as powerful.” Professor Herzlinger also stated that a related point of agreement in her study was the importance of the ability to solve problems and improve performance across a range of business processes. Though traditional classroom teaching continues to offer a great deal of value according to the study results, the responses of both CEOs

and academics reflect the strong belief that other modes of learning and teaching are required. Healthcare management programs should continue to pursue and improve classroom-based pedagogical strategies, but project-centered education, field study, and mentorships offer invaluable real-world experience and respond directly to the CEOs' request for more practical education (Herzlinger, R., Vasant. K., Kevin Schulman, K., Staman, K., 2015) .

Health care reform under the Obama administration has brought many changes in the delivery of healthcare. Additional changes are probable under the Trump administration. These changes in the way health care is delivered in the United States necessitate a review of the knowledge base needed for students to be adequately prepared for these dramatic shifts in the healthcare system. Healthcare Administration textbook authors cannot be counted on to produce texts that provided a didactic contribution that will publish changes quickly enough to provide a comprehensive understanding of the ever-changing industry. Successful programs must diligently monitor the industry to remain current. New skills and competencies are needed by health care administrators to function successfully in vertically integrated delivery systems and systems in which the focus has changed from fee-based reimbursement to performance-based reimbursement. The new focus on prevention, a higher level of coordination of care, and the emphasis on population health requires an ever expanding knowledge base and skill set. These competencies include management skills across hospitals, ancillary providers, physician practices, ambulatory settings, risk management skills, and skills in quality improvement. The healthcare industry is also moving away from procedure based fee-for-service medicine toward prevention and wellness and population management (Love and Ayadi, 2015).

Many health care administration programs across the county are struggling to adapt curriculum to prepare students to succeed in this dynamic environment. The only thing that appears certain is the need for change, however, academia may be even more resistant to change than other segments of society, as academics often feel protective of their courses and consider the content and delivery as a part of their academic freedom. Changing the focus from curriculum revision to a process of transitioning to new conditions, rather than change, may help faculty become more willing to consider all activities needed to develop a new curriculum for the 21st century.

The accrediting body for Health Care Administration Programs, the Association of University Programs of Healthcare Administration (AUPHA), has authored a Body of Knowledge whose purpose is to delineate the content that students in health management programs should learn during the course of their study. This is a living document that is still in the development process and is an invaluable tool for programs seeking AUPHA accreditation. The AUPHA's Body of Knowledge assumes that competency in application requires a basic knowledge of facts, theories and analytical approaches. The Body of Knowledge is distinct from accreditation requirements of CAHME or CEPH in that it encompasses detailed subject matter in addition to broad topics. This Body of Knowledge was used as a guide in the Lander University curriculum revision process in order to assure that the curriculum in Lander's Health Care Administration program is sufficient to AUPHA recommendations.

The completion of the review of literature and the AUPHA guidelines brought the next phase of the review process which consisted of a curriculum mapping process, summarizing data gathered from program comparisons, surveys of alumni and health care professional and

preceptors, and the development of a plan for the revisions if needed. The curriculum mapping process was completed in fall of 2016, surveys were completed in spring of 2016 and the program comparison study was completed in fall of 2016.

The curriculum mapping included reviewing each of the four courses in the previous curriculum (Introduction to Healthcare Management, Legal and Ethical Aspects of Healthcare, Healthcare Systems, and Healthcare Finance) to determine if the AUPHA recommended content was included and where it is being taught. Additionally, much of the AUPHA recommended content was found in the core business courses that all college of business students are required to take including accounting, finance, human resources, management, marketing and strategic planning. Recommendations based on the above process were given to the curriculum committee in fall of 2016. New courses were developed and introduced in spring of 2017.

The program comparison survey looked at course offerings of 17 health care administration programs that have earned AUPHA accreditation located mostly in the southeastern United States. The data gathered included courses offered and credit hours per course. Please see appendices for the complete list. The comparison provided information on which courses were commonly offered in both the larger and smaller comparable programs which would be considered leaders and competitors. Eight schools offered health care operations, quality management, healthcare research methods, and introduction to long-term care. Ten schools offered public health courses and health information management. Nine schools taught courses in healthcare ethics and diversity.

In April of 2016, the Lander Business Administration Curriculum surveys were conducted online using survey monkey. Three nearly identical surveys were conducted with different target sample groups:

1. *Graduates since 2006 with a BS in Business Administration; using email addresses provide by alumni affairs.*
2. *Seniors in Business Administration who are HCMT majors taking BA 499 – Business Seminar and who graduated in May or August 2016.*
3. *Health Care Administration professionals in the Greenwood area; using an email list provided by the Greenwood Chamber of Commerce and other listings of health care professionals used previously by Lander College of Business including preceptors in the internship program .*

There were over 281 invitations sent to Alumni to participate in the survey, and there were 98 completed surveys from this group, or a response rate of 26 %. HCMT Professional Survey 36 responses of 66 invitations (54%). The professional invitations were to recent HCMT preceptors and other health care professionals in SC.

The survey results from the alumni participants revealed consistent information concerning courses they would consider important additions from the perspective of former graduates of the program. Around 65 percent of the responses came from individuals who had graduated from the program since 2006 and that group had the benefit of the most recent curriculum changes of 2005.

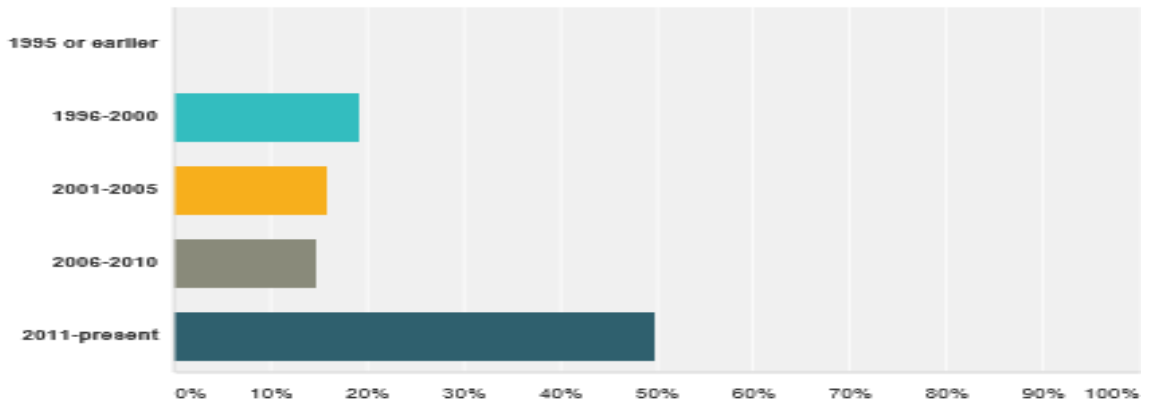
Approximately 61% of respondents currently work in health care and 81% are non-clinical professionals.

Results of Alumni Survey:



What year did you receive your degree from Lander?

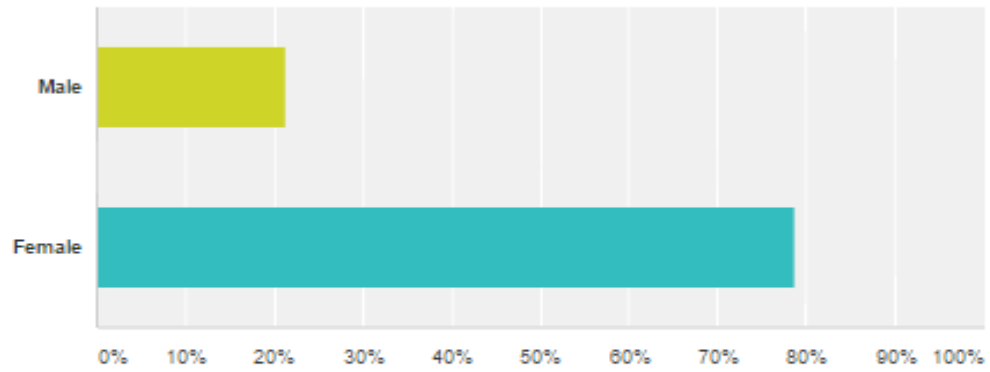
Answered: 94 Skipped: 0



Answer Choices	Responses
1995 or earlier	0.00% 0
1996-2000	19.15% 18
2001-2005	15.96% 15
2006-2010	14.89% 14
2011-present	50.00% 47
Total	94

Are you male or female?

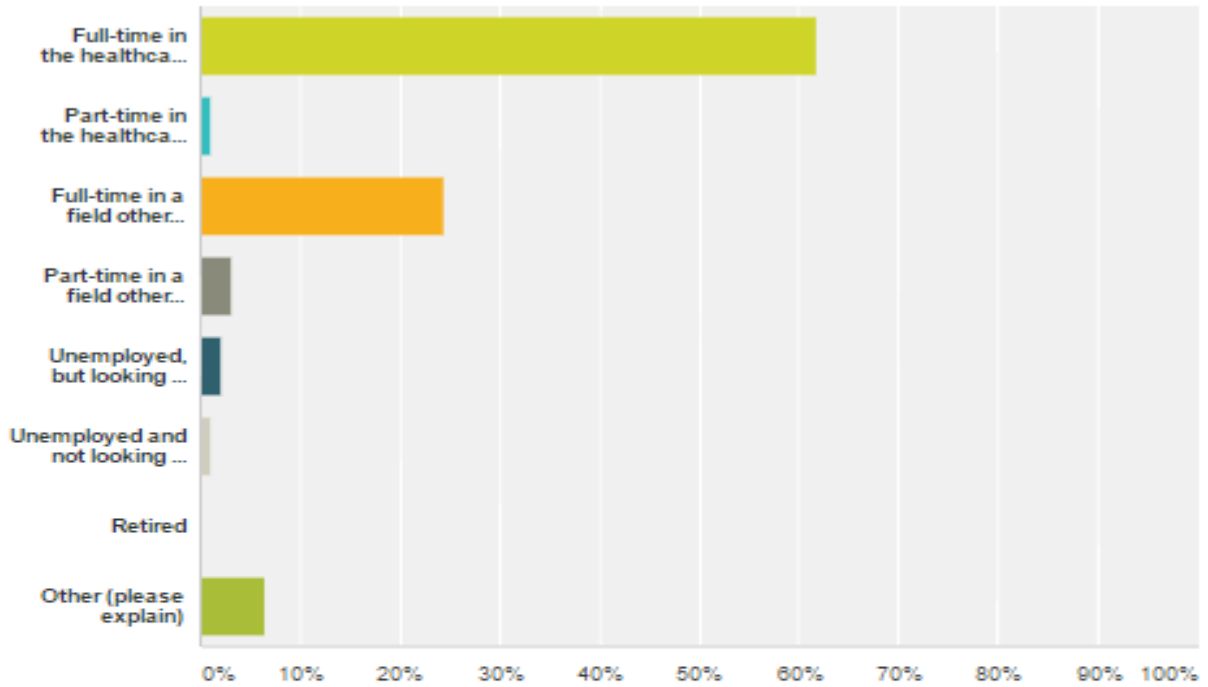
Answered: 94 Skipped: 0



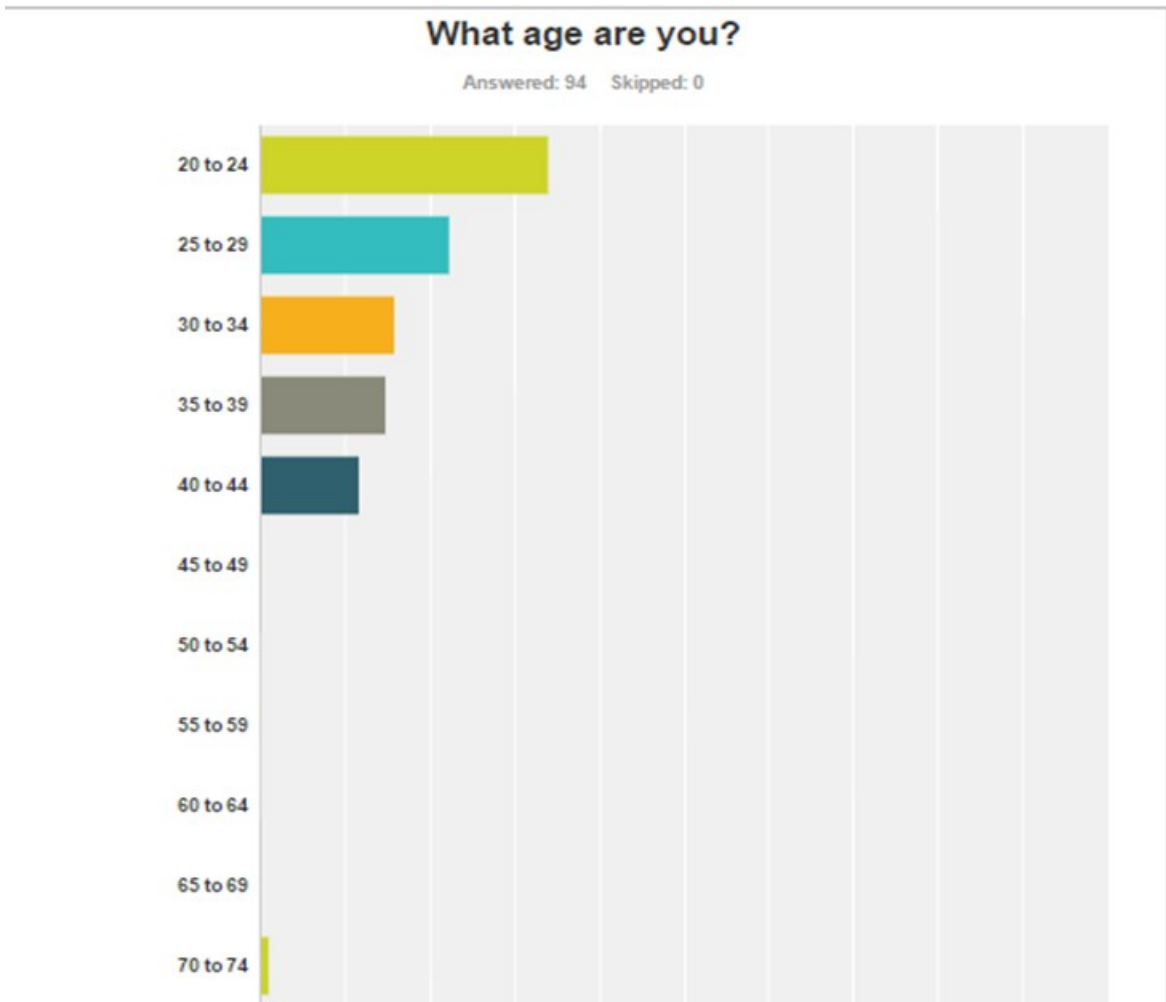
Answer Choices	Responses
Male	21.28% 20
Female	78.72% 74
Total	94

What is your employment status?

Answered: 94 Skipped: 0

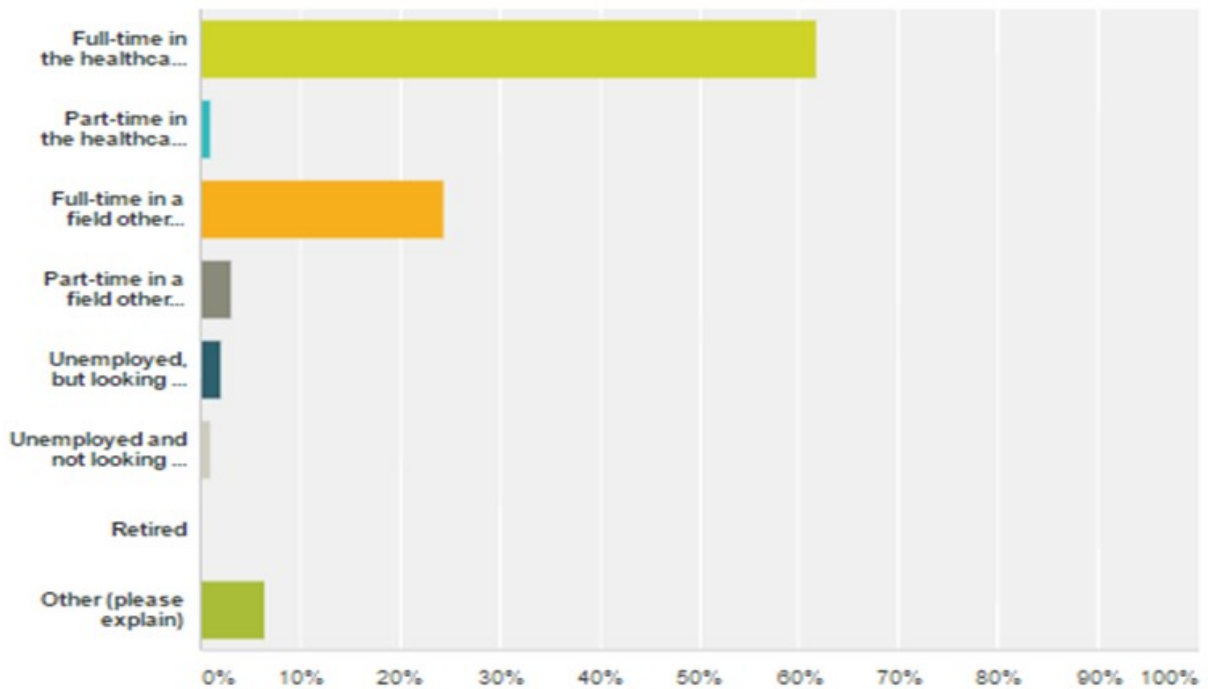


Answer Choices	Responses
Full-time in the healthcare field	61.70% 58
Part-time in the healthcare field	1.06% 1
Full-time in a field other than healthcare	24.47% 23
Part-time in a field other than healthcare	3.19% 3
Unemployed, but looking for professional position.	2.13% 2
Unemployed and not looking for a position.	1.06% 1
Retired	0.00% 0
Other (please explain)	6.38% 6



What is your employment status?

Answered: 94 Skipped: 0



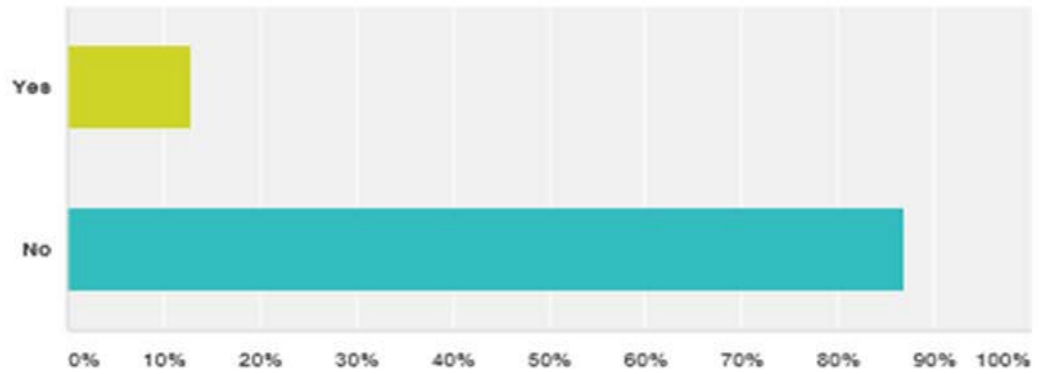
Answer Choices	Responses	Count
Full-time in the healthcare field	61.70%	58
Part-time in the healthcare field	1.06%	1
Full-time in a field other than healthcare	24.47%	23
Part-time in a field other than healthcare	3.19%	3
Unemployed, but looking for professional position.	2.13%	2
Unemployed and not looking for a position.	1.06%	1
Retired	0.00%	0
Other (please explain)	6.38%	6

WHAT IS YOUR CURRENT JOB?

Executive Director	Self-employed	Financial Sales Rep	Public Relations Coordinator	Admin Assistant	High School Teacher
Student Services and Program Coordinator	GI Endoscopy Nurse	Server	Dental Assistant	Patient Coordinator	Operations Supervisor
Administrative Assistant	HR Coordinator	Business Office Associate	Human Resource Manager	Denial Mgmt Insurance	Program Coordinator II
Business Office Manager/HR Coordinator	Systems Director for Emergency Management	Materials Resource Specialists	Executive Director	Pt Access Specialist	Recovery Auditor
Eligibility Specialists Medicaid	Coding Technician OP certified	Administrative Assistant of Insurance Services	Human Resource Specialist	Disease Intervention Specialist	Marketing and Communications Officer
Customer Service Representative	Field Adjuster	Refund Coordinator	Admissions Coordinator	Regional Director Marketing	Emergency Services Registration
Human Resources Recruiter	Customer Service Supervisor	Training Specialists UNC healthcare	Business Analyst	Assisted M Administrator	Office Manager
Coordinator of Veterans Affairs	Business Office Supervisor	EMT support specialist	Senior Payroll Administrator	Residential Counselor	Executive Director
Sales Specialist	Guest Service Specialist	HR Business Partner Manager	Team Lead for HIM	Agent Principal	
Business Manager	Elementary Principal	Health Promotion Program Assistant	Optometric Technician	Customer service Advocate II	
Production Operator	Data Base Associate	Insurance Specialists	Transfer Counselor/Recruiter	Business Services Representative	
Homemaker	Director Health Care Marketing	Human Resource Generalists	Certified Coding Specialist	Sales Associate	
Reimbursement Counselor	Human Resource Compliance Coordinator	Managed Care Systems Analyst	Practice Manager	Nursing Home Administrator	
HR Manager	Graduate Student	Physician Liaison	Department Physician Billing	Marketing Rep Life Insurance Co	
EHR analyst	Billing/Insurance Specialist	Medical Clerk	Accounts Payable/Bookkeep	IT Analyst	
Patient Service Coordinator	Patient Account Manager	Graduate Assistant/Revenue Cycle	Customer Service Support	Front Office Staff	

In your professional career have you worked full-time in a clinical position?

Answered: 93 Skipped: 1

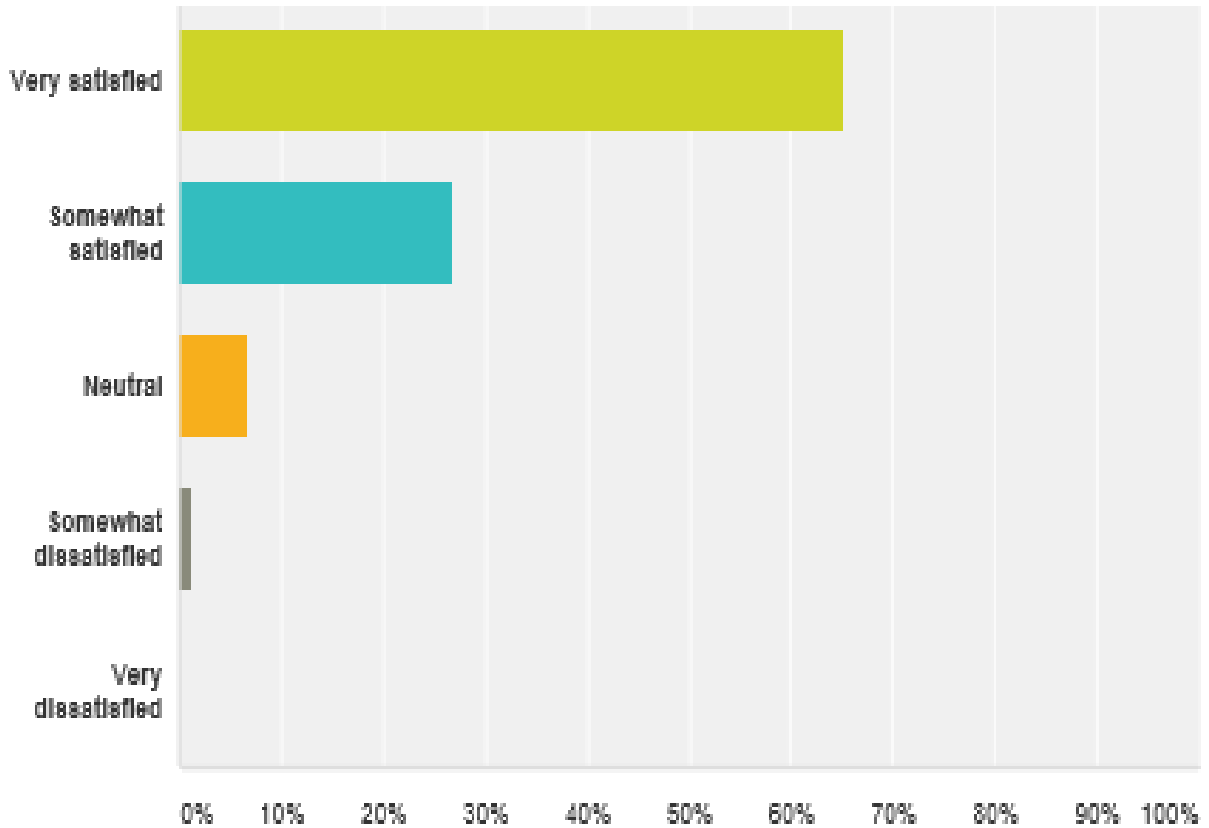


Answer Choices	Responses	
Yes	12.90%	12
No	87.10%	81
Total		93

Concerning questions about their satisfaction with their program at Lander and the expansion of the current curriculum, the responses from alumni were interesting as seen below.

Reflecting on your education experience in the business program at Lander, how satisfied are you overall?

Answered: 36 Skipped: 8

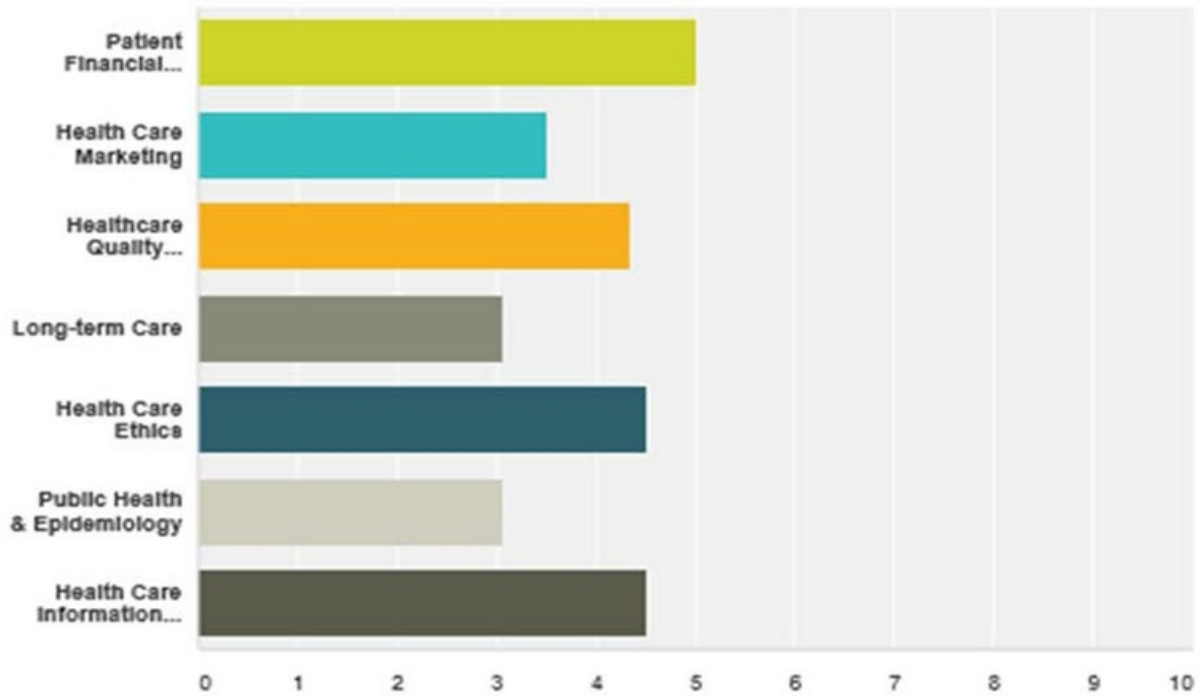


All business majors in our current curriculum must take the core courses below. For business professionals working in the healthcare field please indicate the level of importance of each course in preparation for the field.

	Unimportant	Somewhat Important	Important	Critical	Uncertain / Do not Know	Total
MATH 121 - Math for Business, Life Science, and Soc. Science	9.41% 8	28.24% 24	43.53% 37	18.20% 13	3.53% 3	85
BA 101 - Intro to Business	3.53% 3	11.76% 10	58.82% 50	24.71% 21	1.18% 1	85
ACCT 201 - Accounting- Financial	3.49% 3	18.60% 16	33.72% 29	43.02% 37	1.18% 1	86
ACCT 202 - Accounting- Managerial	7.06% 6	16.47% 14	36.47% 31	39.82% 33	1.18% 1	85
ECON 101 (201 & 202) - Economics	10.47% 9	30.23% 26	39.53% 34	17.44% 15	2.33% 2	86
ENGL 273 - Business Writing	3.97% 3	2.38% 2	40.49% 34	52.38% 44	1.18% 1	84
BA 201 - Business Law	0.00% 0	12.79% 11	40.70% 35	44.19% 38	2.33% 2	86
MGMT 301 - Intro to Management	0.00% 0	9.31% 8	44.19% 38	47.67% 41	2.33% 2	86
MKT 301 - Intro to Marketing	4.65% 4	22.09% 19	42.84% 37	23.26% 20	1.18% 1	86
FIN 301 - Intro to Finance	7.14% 6	16.67% 14	35.71% 30	39.29% 33	1.18% 1	84
BA 304 - Mgt Information Systems	2.33% 2	15.12% 13	38.37% 33	43.02% 37	1.18% 1	86
BA 325 - Advanced Analytical Methods	9.31% 8	22.09% 19	33.72% 29	31.40% 27	5.99% 5	86
MGMT 330 - Operations Management	0.00% 0	10.47% 9	37.21% 32	50.00% 43	2.33% 2	86
BA 414 - Business Strategy	0.00% 0	6.98% 6	34.88% 30	54.88% 47	1.49% 1	86
BA 400 - Business Seminar	0.00% 0	7.06% 6	32.94% 28	55.29% 47	4.71% 4	85

Recent feedback from stakeholders has indicated a need to offer more course options in the HCMT emphasis. From the list of potential new courses below, please rank them in priority of importance in comparison to the others.

Answered: 36 Skipped: 3

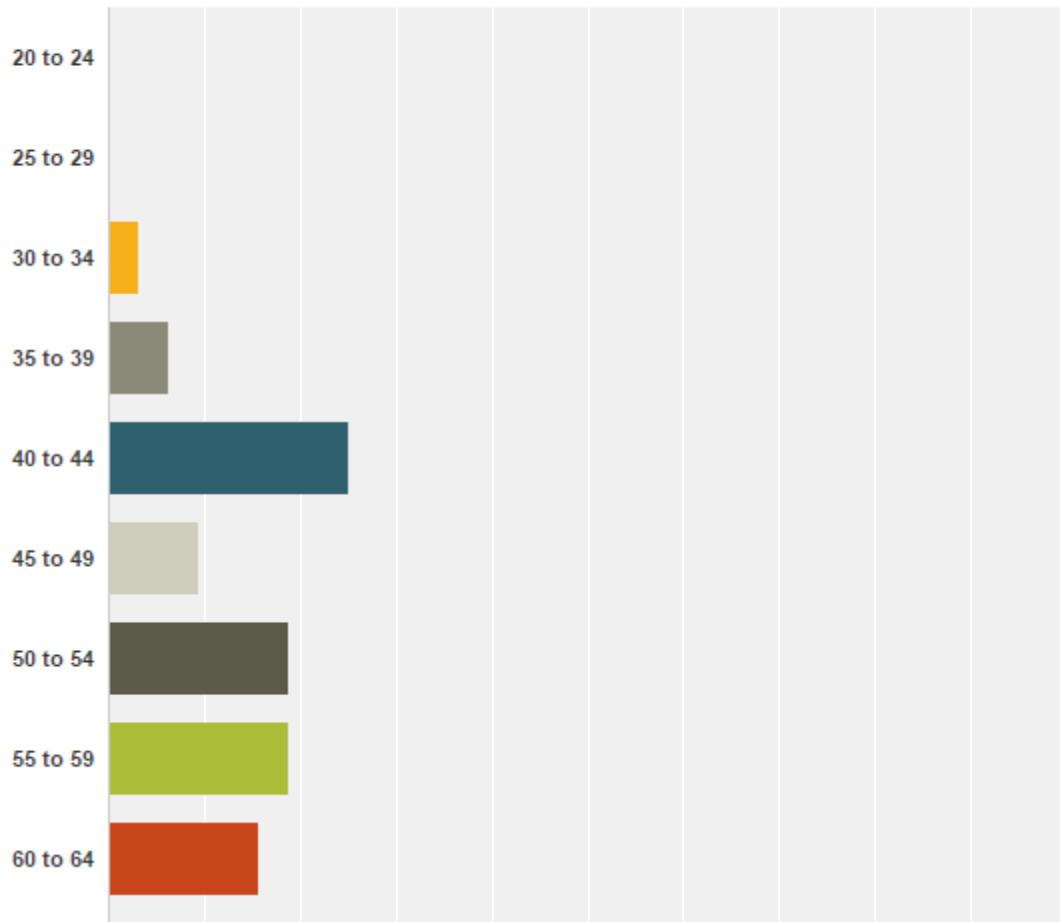


Members of the professional community who responded to the survey consisted of health care professionals many of whom are preceptors for HCMT students. The majority of respondents to the professional survey are over 40 years of age and representative of many different health care settings and positions.

Results of the Health Professions survey:

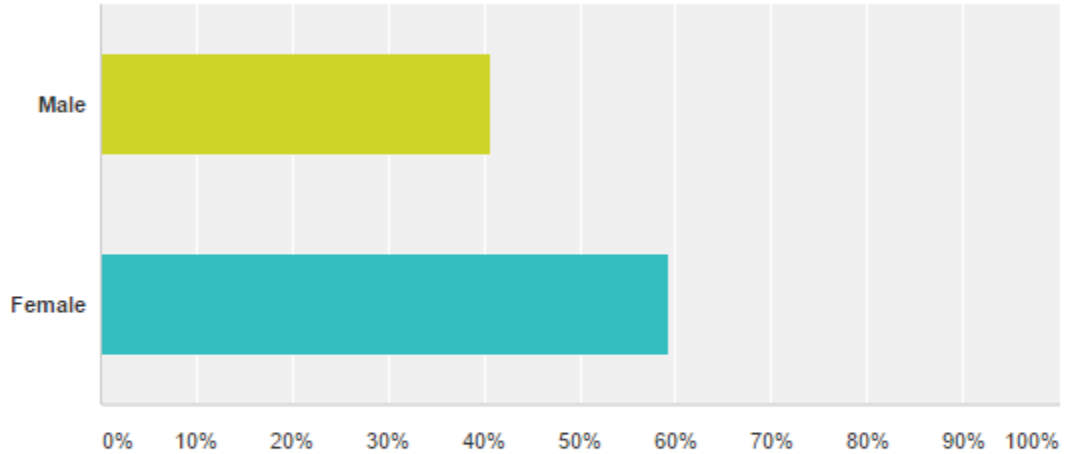
What age are you?

Answered: 32 Skipped: 0



Are you male or female?

Answered: 32 Skipped: 0



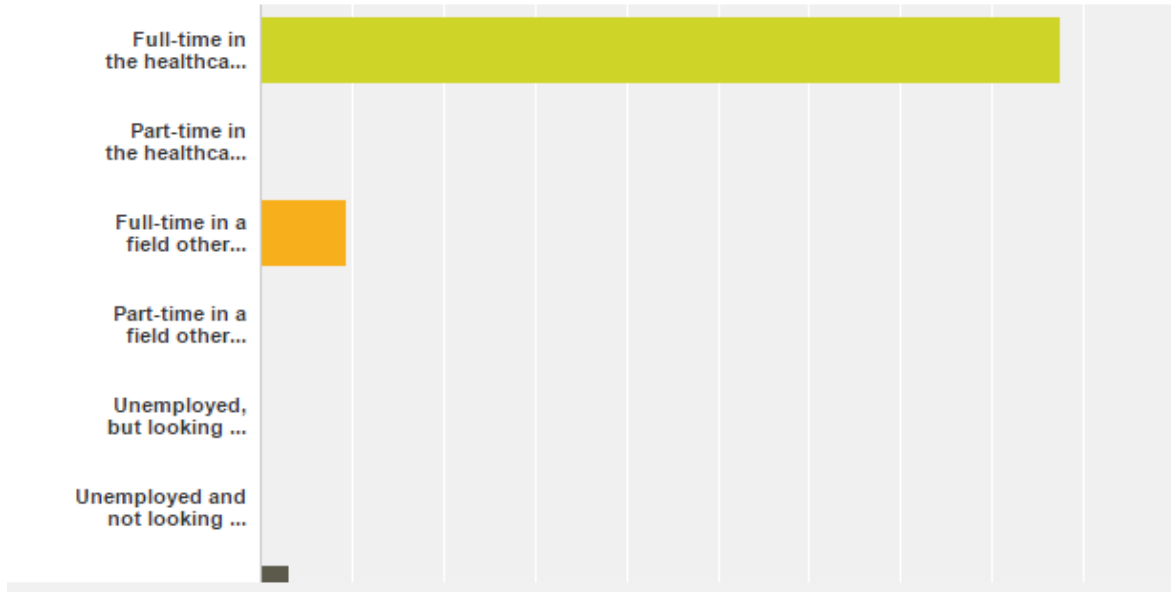
Answer Choices	Responses
Male	40.63% 13
Female	59.38% 19
Total	32

Some of the jobs held by the Health Care Professionals Surveyed included:

- Practice Administrator
- VP of Operations
- Organizational Development Director
- Emergency Management Coordinator
- Director of Strategic Planning
- VP Professional Services/ Chief Quality Officer
- Practice Administrator
- VP of Operations
- Organizational Development Director

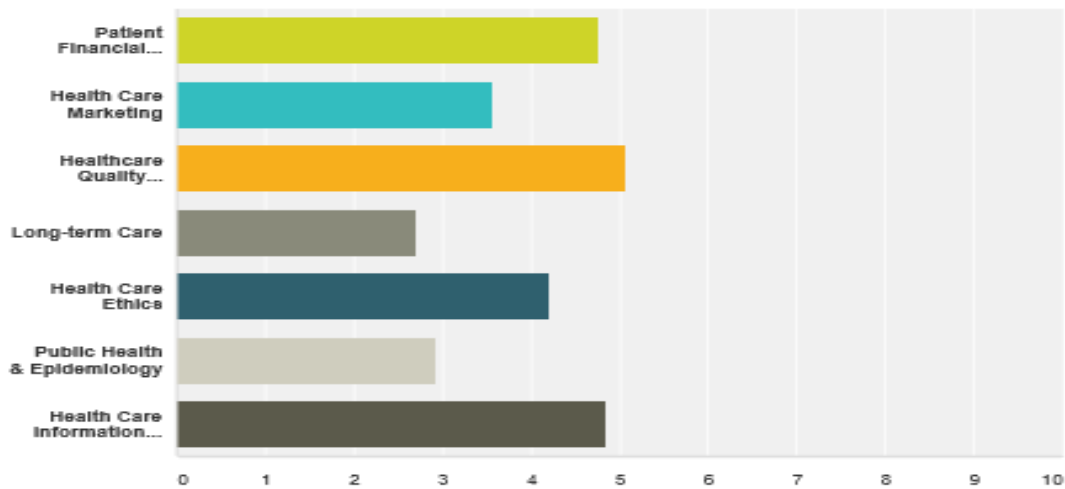
What is your employment status?

Answered: 32 Skipped: 0



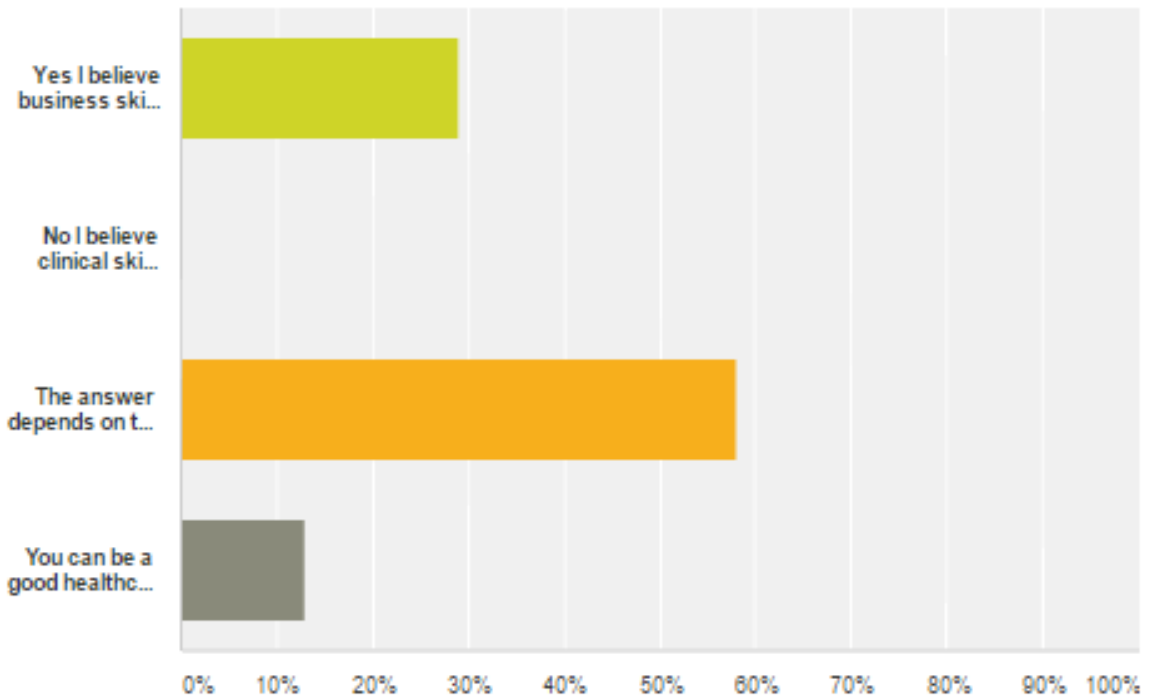
Recent feedback from stakeholders has indicated a need to offer more course options in the HCMT emphasis. From the list of potential new courses below, please rank them in priority of importance in comparison to the others.

Answered: 30 Skipped: 2



In the healthcare field in general, do you feel that business skills are as important as clinical skills for a manager?

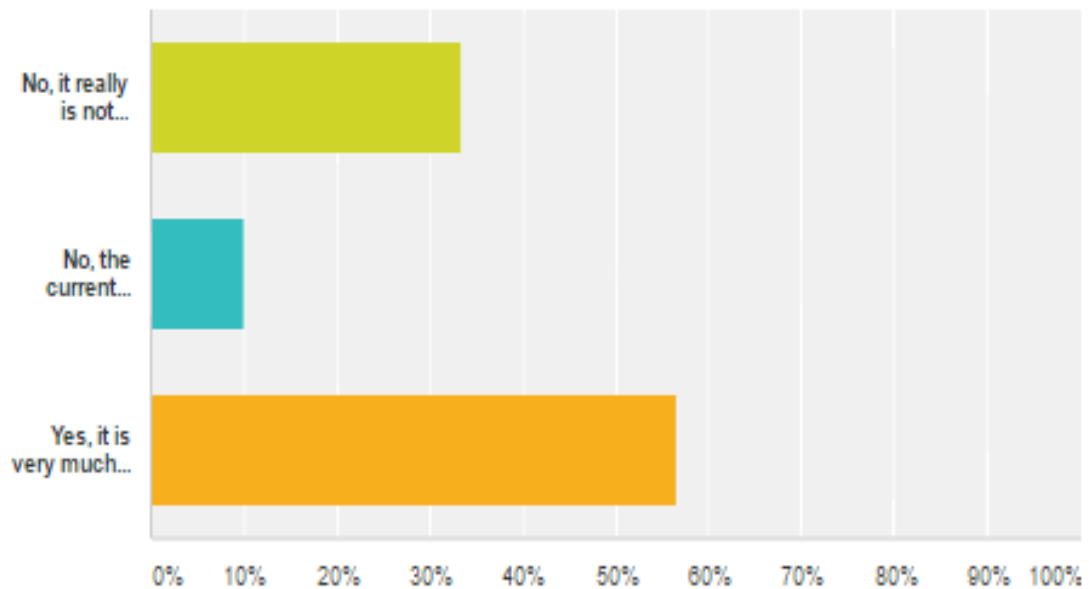
Answered: 31 Skipped: 1



Answer Choices	Responses
Yes I believe business skills are as important	29.03% 9
No I believe clinical skills are more important	0.00% 0
The answer depends on the position, clinical managers need both	58.06% 18
You can be a good healthcare manager without clinical skills	12.90% 4
Total	31

Should business students in the HCMT emphasis be given more exposure to the clinical side of healthcare?

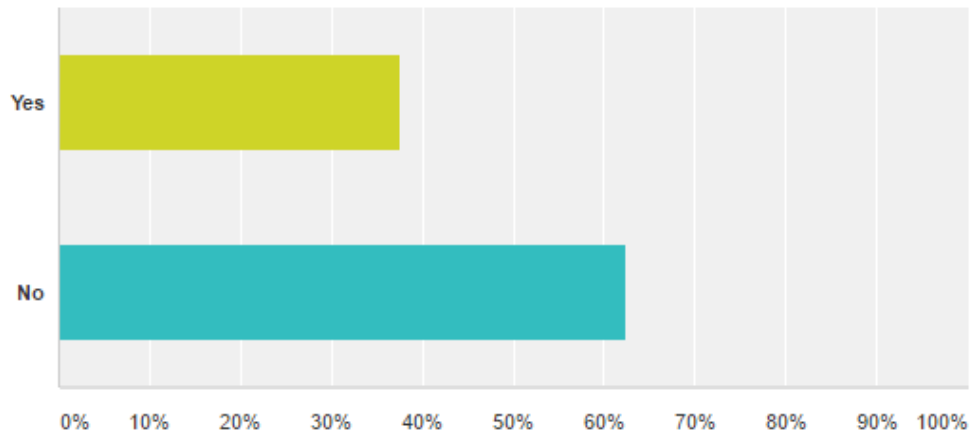
Answered: 30 Skipped: 2



Answer Choices	Responses
<ul style="list-style-type: none"> ▼ No, it really is not necessary 	33.33% 10
<ul style="list-style-type: none"> ▼ No, the current curriculum is fine 	10.00% 3
<ul style="list-style-type: none"> ▼ Yes, it is very much needed 	56.67% 17
Total	30

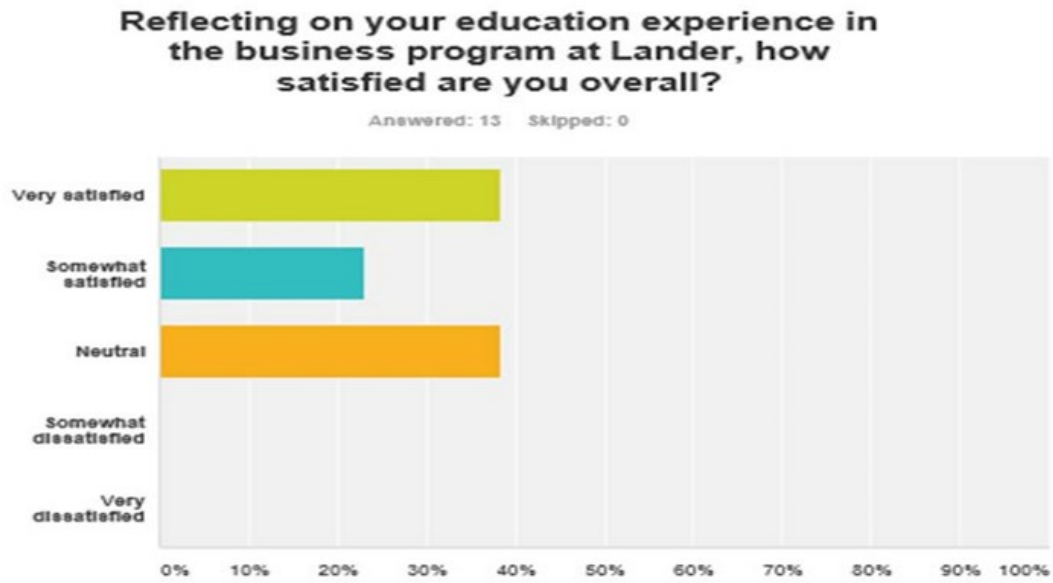
In your professional career have you worked full-time in a clinical position?

Answered: 32 Skipped: 0



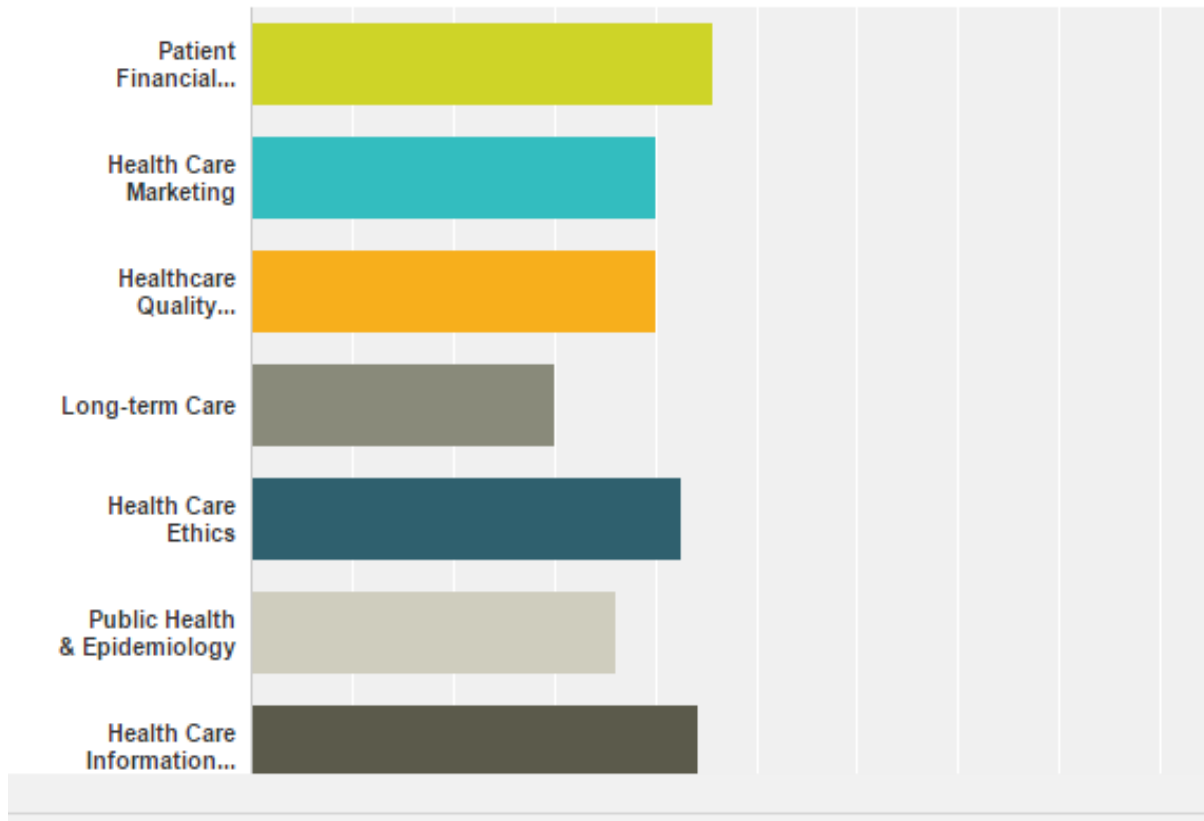
Answer Choices	Responses
Yes	37.50% 12
No	62.50% 20
Total	32

Twenty-nine Lander HCMT students who are seniors and in the 499 capstone course were invited to participate in the survey. There were 13 responses that provided:



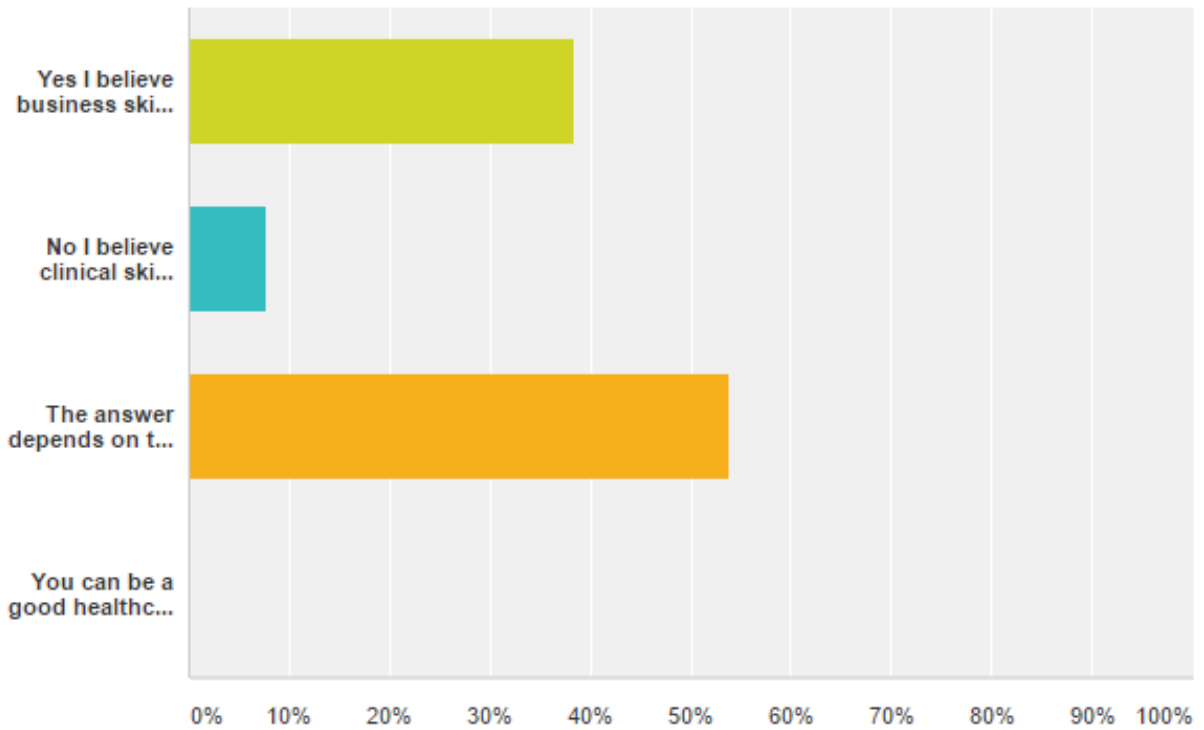
Recent feedback from stakeholders has indicated a need to offer more course options in the HCMT emphasis. From the list of potential new courses below, please rank them in priority of importance in comparison to the others.

Answered: 13 Skipped: 0



In the healthcare field in general, do you feel that business skills are as important as clinical skills for a manager?

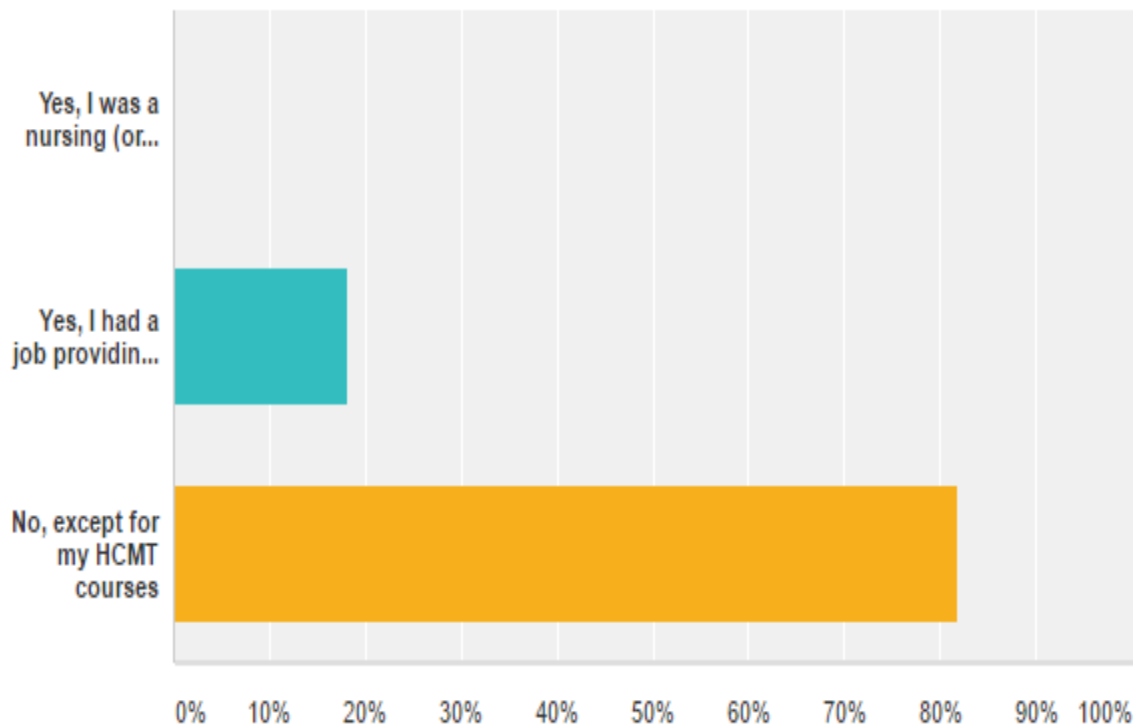
Answered: 13 Skipped: 0



Answer Choices	Responses
Yes I believe business skills are as important	38.46%
No I believe clinical skills are more important	7.69%
The answer depends on the position, clinical managers need both	53.85%
You can be a good healthcare manager without clinical skills	0.00%

During your time at Lander, did you have any clinical exposure?

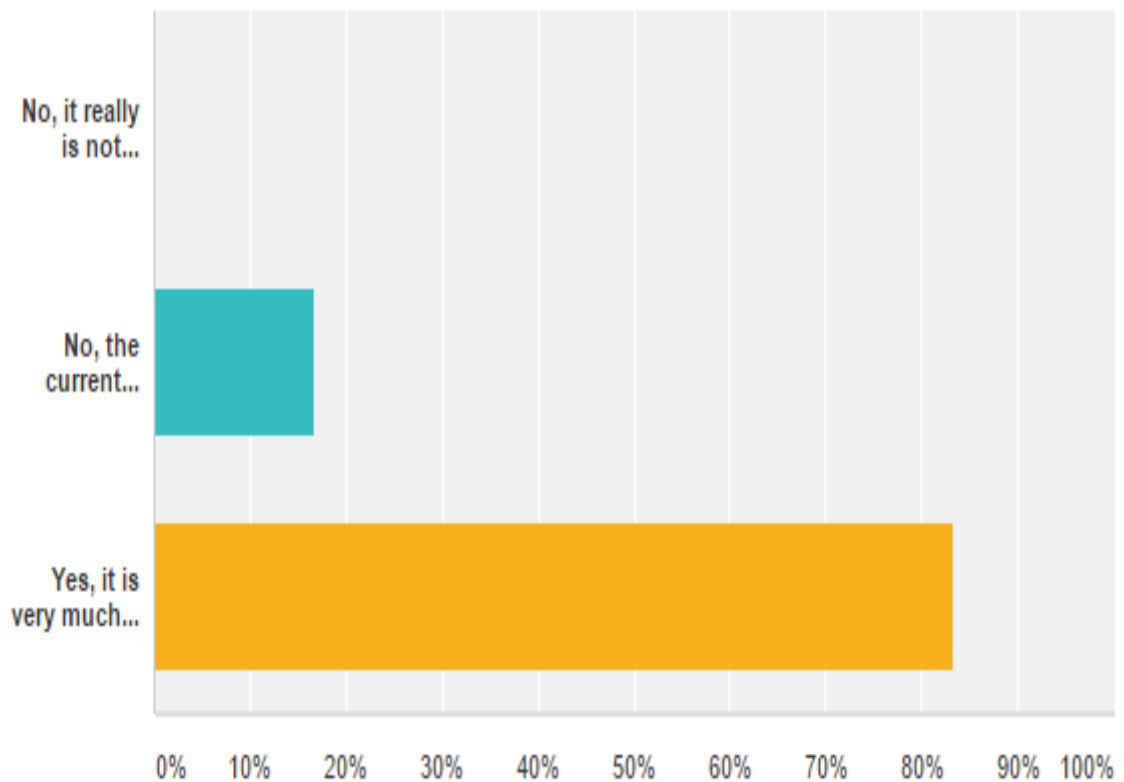
Answered: 11 Skipped: 2



Answer Choices	Responses
Yes, I was a nursing (or pre-nursing) student and took clinical courses	0.00% 0
Yes, I had a job providing care to patients	18.18% 2
No, except for my HCMT courses	81.82% 9

Should business students in the HCMT emphasis be given more exposure to the clinical side of healthcare?

Answered: 12 Skipped: 1



Answer Choices	Responses
▼ No, it really is not necessary	0.00% 0
▼ No, the current curriculum is fine	16.67% 2
▼ Yes, it is very much needed	83.33% 10
Total	12

DISCUSSION

The courses identified by all stakeholders as needed additions to the curriculum included courses pertaining to reimbursement, changing financial structures, and health care marketing. The other courses that were mentioned most often as needed additions included health care quality management, healthcare information management, public health, health care ethics and long-term care.

Finally, curriculum mapping provided information on the courses containing overlap and the courses that are currently taught that can be expanded to provide adequate coverage of the identified gaps. The results revealed that the HCMT 301 (Healthcare Ethics and Regulations) course can be revised to cover health care regulations and policy as well as expanding the coverage of ethics including a module on healthcare ethics case studies. The HCMT 410 course will become the capstone course and will be revised to include a module on health care marketing. The health care finance course has been updated and revised with a new textbook starting in Spring of 2017 and will continue to focus on changing financial structures, reimbursement and will include an added course project that will require students to bring updated financial changes to the system into the coursework using reliable internet sources.

Both the professional respondents and the alumni surveyed indicated they believe that HCMT students would benefit from greater exposure to clinical settings in their internships. One health care professional used an interesting analogy, “Possibly this will make sense: It would be like a business owner selling lawn mowers and has never cut grass before; or at least sat on a lawn and appreciated it's beauty after a fresh cut. So the HC manager who has done a clinical rotation (walked side by side with a nurse/Doctor) will understand work flows (check-in, patient visit, EMR documentation, ordering tests, ordering e-Rx, check-out). Without this experience they lack the skills to tie both together.” The faculty responsible for managing the internships is developing a clinical shadowing component to the internship curricula. Additionally, the HCMT faculty are working with the regional medical center to provide an opportunity for first year students within the major to spend a day at the facility to tour many of the departments including the administrative offices. An agenda of guest speakers for each semester will include both administrative and clinical professionals from the health care community. Meetings with preceptors will provide opportunities for their input as to how to expand the internship experience to include more clinical exposure for HCMT students. The revamping of the internships began in Spring of 2017 with the expansion of preceptors and the inclusion of specific opportunities for exposure to increased clinical experiences.

Developing effective assessment strategies for the new additions to the curriculum and the historical courses in the emphasis is an ongoing process and will continue to be revised as needed. Specific outcome measures for the previous curriculum are not available making it very difficult to assess and compare student learning outcomes in each phase of curriculum development. However, several mechanisms are being implemented to assess the curriculum going forward including the following model from the American College of Health Care Executives (Appendix A) .

In conclusion, the summary of all the data revealed opportunities to expand the HCMT curriculum in addition to course revisions that eliminated overlap and provided opportunities to add missing and relevant course content. The expanded curriculum will include four new courses beginning spring 2017, including Public Health, Quality Management, Long-term care, and Health Care Information Management. The addition on one faculty member is planned for the 2017/2018 academic year and will provide expanded course coverage and enable the HCMT emphasis to meet the criteria for moving forward with the accreditation process. As the health care delivery system evolves, colleges and universities will continue to have new opportunities to provide students with the knowledge, skills, and competencies to be well- prepared managers in health care organizations.

The assessment, evaluation, and revision of the health care administration curriculum at Lander University will be ongoing process to assure that Lander graduates can successfully manage the challenges that are coming in the health care system of the 21st Century.

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Appendix A

Health Care Executives Competency Model.

BUSINESS SKILLS AND KNOWLEDGE

Know, apply and integrate the content of the major¹.

KNOWLEDGE OF HEALTH CARE ENVIRONMENT

Ability to discuss and apply knowledge of the healthcare system and the environment in which healthcare managers and providers function;
 Demonstrate an understanding of the interrelationships among cost, quality, access, resource allocation, accountability and community;
 Ability to incorporate a patient perspective and knowledge of patients' rights and responsibilities in evaluating a management/service provision issue;
 Ability to apply basic problem solving skills along with knowledge of healthcare funding and payment mechanisms;
 Demonstrate an understanding of the complexity associated with interacting and integrating among health care sectors to improve service efficiency and quality.

COMMUNICATION AND RELATIONSHIP MANAGEMENT

Ability to communicate clearly and concisely, establish and maintain relationships, and facilitate constructive interactions with individuals and groups;
 Demonstrate effective written, oral and presentation skills;
 Prepare and deliver business communications including meeting agendas, presentations and business reports;
 Provide and receive constructive feedback;
 Demonstrate effective interpersonal relations.

PROFESSIONALISM

Ability to align personal conduct with ethical and professional standards that include a service orientation and a commitment to lifelong learning;
 Be attentive, proactive and ready to learn;
 Meet commitments and complete tasks according to assigned requirements;
 Treat others with respect; show sensitivity to their views, values and customs;
 Demonstrate ethical behavior consistent with professional codes of ethics;
 Assume responsibility for one's own career management and goal-setting;
 Demonstrate effective resume and interview skills;
 Prepare for lifelong learning and career planning.

LEADERSHIP AND TEAMWORK

Ability to inspire individual and group excellence;
 Participate in and lead teams;
 Focus on goal achievement;
 Guide team toward achievement of common goals;
 Maintain group cohesion, follower satisfaction and productivity;
 Incorporate and apply management techniques and theories.

Adapted directly from American College of Healthcare Executives http://www.ache.org/pdf/nonsecure/careers/competencies_booklet.pdf unless otherwise noted.