HIM 2012
Baccalaureate Degree

Standards and Interpretations for Accreditation of Baccalaureate Degree Programs in Health Information Management
Who We Are

The Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM) is an accrediting organization which has independent authority in all actions pertaining to accreditation of educational programs in health informatics and health information management.

CAHIIM is located at 233 N. Michigan Avenue, 21st Floor, Chicago, Illinois, 60601, and on the web at www.cahiim.org

Public Interest

CAHIIM serves the public interest by operating in a consistent manner with all applicable ethical, business and accreditation best practices. Accreditation is a voluntary, self-regulatory process by which nongovernmental associations recognize educational programs found to meet or exceed standards for educational quality. Accreditation also assists in the further improvement of these educational programs as related to resources invested, processes followed, and outcomes achieved.

CAHIIM and its sponsoring organization(s) cooperate to establish, maintain, and promote appropriate standards of quality for postsecondary educational programs in health informatics and information management to provide competent, skilled professionals for the healthcare industry.

Mission

The Commission serves the public interest in advancing the value of health informatics and health information management through quality education by:

• Establishing and enforcing accreditation Standards for health informatics, and health information management higher education programs;
• recognizing programs that meet the Standards;
• assessing student achievement;
• respecting educational innovation and diversity;
• recognizing academic institutions’ autonomy;
• emphasizing the principle of volunteerism and peer review, and
• embracing a culture of continuous quality improvement.

CAHIIM strives to carry out its mission by promoting, evaluating, and improving the quality of undergraduate and graduate health informatics and information management education in the United States.

Through our partnership with academe and the practice fields, CAHIIM serves colleges and universities in a voluntary peer review process as a means to continuously improve quality education to meet healthcare workforce needs. As a result, CAHIIM accreditation becomes the benchmark by which students and employers determine the integrity of health informatics and health information management education.
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I  Sponsorship

1  Sponsoring Educational Institution

The sponsoring educational institution must be a postsecondary academic institution accredited by an institutional or national accrediting organization that is recognized by the U.S. Department of Education (USDE), and to award a degree. Institutional accreditation must enable the sponsoring institution of the program to establish eligibility to participate in the federal student financial assistance program administered under Title IV of the Higher Education Act.

The sponsoring institution’s Grant for Accreditation must provide provisions for establishing eligibility to participate in Title IV programs. Upon request, the applying campus program must provide the Office of Postsecondary Education Identifier (OPE ID) number assigned by the U.S. Department of Education as proof of participation for financial aid. State Board of Education approvals must also be completed.

II  Program Mission, Goals, Assessment and Outcomes

2  Program Mission

The program’s mission and goals must form the basis for program planning, implementation and be compatible with the mission of the sponsoring educational institution.

The health information management (HIM) baccalaureate degree program is designed in concert with the institutional mission and the goals of the college/university division or department in which it is located. Each program will define its own mission and goals which derive from the purposes of its sponsoring educational institution, its communities of interest, faculty expertise and program initiatives. The program’s mission and goals must be outcomes-focused.

3  Program Evaluation

The program must have an assessment plan for systematic evaluation of mission, goals and objectives.

The program must be involved in an ongoing effort to determine its effectiveness, which constitutes a quality improvement cycle.

4  Program Goals

Goals must be stated in terms of educational outcomes to be achieved, must be established annually, must be measurable, must reflect the principles and ethics of the health information management field, and fit within the mission of the sponsoring educational institution.

At a minimum, the program goals and measurable outcomes must incorporate goals related to curriculum, faculty development, students and graduates, communities of interest and advisory board.
5 Curriculum Goal

The program must assess the appropriateness and effectiveness of the curriculum, with the results of the program assessment used as the basis for ongoing planning and program improvement.

An annual assessment of the curriculum is required to determine where and when improvements are needed. Assessment is conducted using feedback from students, faculty, graduates, advisory committee, employers, and other relevant sources. At least one target outcome must be related to curriculum content, knowledge clusters, improvements and/or effectiveness in approach to curriculum content.

6 Faculty Development Goal

The program must provide a plan for faculty that establishes or assesses the knowledge, skills, qualifications, and experience pertinent to the professional curriculum content that they are assigned to teach.

The program must assure through annual goals, that faculty development planning is targeted to improve faculty knowledge and expertise in the areas in which they teach. This includes efforts to keep current in health information management and/or other relevant professional content and practice, as well as other components of advanced formal education.

7 Students and Graduates Goal

The program must provide assurance that the educational needs of students are met and that graduates demonstrate at least the AHIMA entry-level curriculum competencies.

The program must assess through goals and target outcomes that student learning outcomes are examined and demonstrate progress toward achievement of entry-level competencies. These assessments must demonstrate that graduates meet entry-level competencies.

8 Communities of Interest Goal

The program must indicate how it assesses the needs of its communities of interest and how it interprets these needs into educating a competent workforce.

Interpret, monitor and/or otherwise demonstrate responsiveness to the needs of the various communities including how the program serves as a source of continued education for its communities of interest.

9 Advisory Committee Requirement Goal

The program must have an advisory committee representative of its communities of interest that meets at least annually. The committee responsibilities include assisting program faculty and sponsoring educational institution personnel with the development and revision of program goals and curriculum, monitoring program needs and expectations, and ensuring program responsiveness to change.
The advisory committee must meet at a minimum, annually. It is anticipated that the advisory committee will meet at more frequent intervals when warranted to review program goals, curricula, etc. CAHIIM emphasizes the importance of a strong advisory committee comprised of individuals external to the academic institution—such as employers, graduates, healthcare executives and others representative of the communities of interest. Input from individuals in practice is very valuable in terms of curriculum assessment and keeping the program aligned with current practices.

10 Annual Assessment

The program must annually assess its program goals and outcomes as required by the designated CAHIIM reporting system.

The program must at least annually assess and document its effectiveness in achieving its stated goals and outcomes. At a minimum, this assessment must include performance metrics such as graduate placement rates, graduate and employer satisfaction rates, yearly attrition, national certification scores, and program completion rates.

11 Monitor Assessment Results

Results of the program annual assessment must be monitored and reflected in an action plan and reviewed by the program's advisory board.

Programs must conduct a qualitative and quantitative assessment of how the program achieves its mission, goals and target objectives for continual improvement, including a candid assessment of strengths and weaknesses in terms of the program's performance against the accreditation established thresholds.

12 Action Plan Implementation

Implementation of the action plan must be documented and results measured by ongoing assessment.

The program uses the results of assessment and documents and implements program improvements. CAHIIM will seek evidence that there is documentation of changes made in the program. Program officials and faculty are required to compare program performance with the goals, and identify ways in which the program can improve. These may include curriculum revisions, improvements in student services and faculty development activities. An institutional effectiveness survey or other institutional level evaluation data is not sufficient to replace the program's own evaluation plan.

III Program Director, Faculty and Staff

13 The Program Director

The program director must be a full time position of the sponsoring institution, have full employee status, rights, responsibilities and privileges as defined by institutional policy and be consistent with other similar positions at the institution.
14 Program Director Qualifications

The Health Information Management program director must be certified as a Registered Health Information Administrator (RHIA), and must have at minimum, a master’s degree.

It is expected that only HIM professionals with an RHIA credential and a minimum of a master’s degree would possess the necessary knowledge and background to effectively manage the HIM program. There is no exception to the required credential.

15 Program Director Responsibilities

The program director of the educational program must be responsible for the organization, administration, continuous program review, planning, development, and general effectiveness of the program. The director must have a role in the budget development process of the program. The program director must be given adequate release time to devote to curriculum development and evaluation, counseling of students, program management and administrative duties within the institution.

16 Faculty

A minimum of two full time individuals must be dedicated to the program: a program director and a full time faculty member. There must be faculty and instructional staff to advise and mentor students, and provide instruction and supervision on a regular planned basis.

The required faculty must provide students with adequate attention, instruction and supervised practice to acquire the knowledge and competence needed for entry-level practice. Consideration for additional faculty beyond this requirement must include the number and variety of courses taught, the employment status of faculty, the number of students enrolled, and the method of course delivery.

17 Faculty Qualifications

The program faculty must be qualified through professional preparation and experience, scholarship and/or teaching competencies and practice experience. Faculty must have status, rights, responsibilities, and be consistent with other similar positions at the institution.

The program must have faculty with clearly defined responsibilities, educational preparation, research and/or teaching competence, practice experience, and are able to completely support the program’s teaching, scholarship and service goals. Faculty must be sufficient in number to provide students with adequate attention, instruction and supervised practice to acquire the knowledge and competence needed for entry-level practice.

18 Professional Development

The program director and all faculty must demonstrate continuing professional development related to the curriculum content to which they are assigned.
Professional development may be considered continuing education in program management (if applicable), curriculum content areas, teaching techniques, or other areas related to the faculty’s responsibilities and/or teaching assignments.

19 Staff

The program must have clerical, technical and administrative staff to adequately support achievement of the program’s goals and outcomes.

IV Resources

20 Program Governance

The sponsoring educational institution must assure that governance and lines of authority are clearly defined.

The sponsoring educational institution must clarify the lines of authority and administrative governance of the health information management program within the framework of the sponsoring institution.

21 Learning Resources

The sponsoring educational institution must provide appropriate resources to support the learning experiences and achieve the program’s goals and outcomes.

The methods of demonstrating adequate resources must reflect the types of resources available to support the learning experiences of students and be sufficient enough to accommodate all students enrolled in the program. These include but are not limited to student access to current technology, computers and relevant software, practice resources and other materials.

22 Financial Support

Resources to support the program’s goals and outcomes must include evidence of financial support for the program.

The sponsoring educational institution must provide financial support to the program to achieve its goals and outcomes, and provide resources and support for faculty development.

23 Student Access to Resources

Students must have adequate access to program resources.

The program must demonstrate how it facilitates students’ access to the resources and experiences necessary to support the learning process. If the program is offered online, student access to resources must be clearly defined.
V Curriculum

24 The Curriculum

The program must demonstrate that the curriculum meets or exceeds the professional course content as published in the AHIMA HIM entry-level curriculum competencies and knowledge clusters for baccalaureate degree programs.

The curriculum syllabi and course content must ensure concise and adequate coverage of the AHIMA HIM entry-level curriculum competencies and knowledge clusters for baccalaureate degree programs. Each course syllabus must be evaluated against the required knowledge clusters, and demonstrate learning progression to achieve the stated entry-level curriculum competencies.

25 Curriculum – Sequence

Instruction must be delivered in an appropriate sequence of didactic, laboratory, and professional practice activities.

Course content must be logical and coherent with didactic instruction and related activities organized in each course. Courses must be sequenced appropriately, which means that knowledge and experience must be carefully analyzed and prerequisites appropriately identified and placed. (For example, medical science, computer literacy and health record content courses must be placed early in the curriculum sequence, as they contain skills and knowledge that the student will apply to later courses.) Institutions must have policies regarding the allocation of credit to courses, particularly with respect to the credit value of laboratory and professional practice experience courses.

26 Curriculum – Syllabi and Competencies

Instruction must be based on clearly written course syllabi describing entry-level competencies, course objectives, and evaluation methods.

Students must know at the outset of each course, what is required for successful completion, what they are expected to learn, what activities they will experience, and how and when they will be evaluated. The AHIMA HIM entry-level curriculum competencies must be made known to students at program admission, and related competencies included in each HIM professional course syllabus.

27 Curriculum – Evaluation

Evaluation of students must be conducted frequently enough to provide both the students and program faculty with valid and timely indications of the students’ progress toward and achievement of the competencies stated in the curriculum.

Student evaluation methodologies (tests, exams, projects, assignments, etc.) may vary in type and construction, must be conducted frequently, and must be able to test the different cognitive levels. Programs must show that students are being taught and tested at a variety
of taxonomic levels, with emphasis being placed on the use of application and problem-solving techniques. The analysis of situations in professional contexts and problem-based assessment must be emphasized.

28 Professional Practice Experiences

Professional practice experiences (PPE) must be designed and supervised to reinforce didactic instruction and must include program coordinated experience at professional practice site(s).

The program must describe how PPE (clinical practicum, directed practice experience) are designed, supervised and evaluated, and the objectives to be achieved in each PPE course. Simulation activities designed to replicate PPE are permitted but cannot totally replace all on-site PPE. The program must describe how simulation activities are designed, supervised and evaluated and the objectives to be achieved by using simulation activities. PPE, whether on-site or through simulations must relate to higher level competencies and result in a learning experience for the student and/or a deliverable to a practice site. The PPE must provide the student with the opportunity to reinforce competencies and skill sets. It is expected that HIM students will not be substituted for paid staff. The PPE does not prohibit a paid internship.

29 Health and Safety

The health and safety of patients, students and faculty associated with educational activities must be adequately safeguarded according to the health and safety practices of both the sponsoring educational institution and the professional practice site.

The responsibilities of the college, PPE site and student(s) must be documented for externships or professional practice experiences. Either a formal contract or a simple memorandum of understanding (MOU) will suffice, if in accordance with institutional practice. Health, safety or security policies and requirements must be outlined in the agreement or MOU, and students must be informed of these in advance of the PPE.

VI Fair Practices

The Commission on Accreditation for Health Informatics and Information Management Education expects the program and the sponsoring institution to comply with the following Fair Practice Standards.

30 Publications and Disclosures

All published program information must accurately reflect the program offered and must be known to all applicants and students.

• The sponsoring educational institution, programmatic accreditation status and curriculum
• Admissions policies and procedures
• Policies on advanced placement, transfer of credits, and credits for experiential learning
• Number of credits required for completion of the program
• Tuition/fees and other costs required to complete the program
• Policies and procedures for withdrawal and for refunds of tuition/fees
• Academic calendar
• Student grievance procedure
• Criteria for successful completion of each segment of the curriculum and graduation
• Information about student/graduate achievement that includes the results of one or more of the outcomes assessments as reported in the Annual Program Assessment Report (APAR)

31 Lawful and Non-Discriminatory Practices

All activities associated with the program, including student and faculty recruitment, student admission, and faculty employment practices, must be non-discriminatory and in accordance with federal and state statutes, rules, and regulations.

32 Student Records

Documentation must be maintained for student admission, advisement, counseling, and evaluation. Records of student evaluations must be maintained in sufficient detail to document learning progress and achievements. Grades and credits for courses must be recorded on the student transcript and permanently maintained by the sponsoring educational institution in a safe and accessible location.

Program officials must maintain student records that reflect evidence of student evaluation on all levels, and progression toward achievement of program requirements.

33 Substantive Change

The program must report substantive change(s) as described in the CAHIIM Accreditation Manual in a timely manner or as specified.

VII Administrative Requirements for Maintaining Accreditation

34 Submit the CAHIIM Annual Program Assessment Report (APAR) and other required reports by the determined CAHIIM date.

35 Each program must participate in a designated periodic site visit of the accredited program.

36 Inform CAHIIM of any adverse changes in the institution affecting the program’s accreditation.

Include changes in program officials (Chief Executive Officer, Dean and Program Director) within 30 days of the effective date.

37 Payment of all CAHIIM administrative fees.