



2005 Interpretation of Standards
Associate Degree



Who We Are

CAHIIM (Commission on Accreditation for Health Informatics and Information Management Education) is the accrediting organization for degree-granting programs in health informatics and information management.

The Standards (*2005 Standards for Health Information Management*) are the minimum standards of quality used in accrediting programs that prepare individuals to enter the health information management profession at the associate degree level. The accreditation Standards therefore constitute the minimum requirements to which an accredited program is held accountable.

Public Interest

CAHIIM serves the public interest by establishing quality standards for the educational preparation of future health information management (HIM) professionals. When a program is accredited by CAHIIM, it voluntarily undergoes a rigorous review process and has been determined to meet or exceed the Standards.

Mission

CAHIIM Advances the value of health informatics and health information management practice through quality education; establishes and enforces accreditation Standards for educational programs; recognizes through accreditation, programs that meet the Standards and encourages educational innovation and diversity.



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Interpretations of Standards follow in gray.

I Sponsorship

1.A Sponsoring Educational Institution A sponsoring educational institution must be a post-secondary academic institution accredited by an institutional accrediting agency that is recognized by the U.S. Department of Education, and must be authorized under applicable law or other acceptable authority to provide a post-secondary program, which awards a minimum of an associate degree.

Sponsoring educational institution must be accredited either by a regional accrediting agency or a specialized accrediting agency representing the type of academic institution stated, and the accrediting agency must be recognized by the U.S. Department of Education.

1.B Responsibilities of the Sponsoring Educational Institution The sponsoring educational institution must assure that governance and lines of authority are clearly defined and that the provisions of these Standards are met.

The sponsoring educational institution must clarify the lines of authority and administrative governance of the HIM program within the framework of the sponsoring institution. The sponsoring educational institution must assure that the provisions of the Standards are met.

II Program Goals, Assessment and Outcomes

II.A Program Goals The program goals must form the basis for program planning, implementation and evaluation. Program goals with measurable outcomes must be established annually and be compatible with the mission of the sponsoring educational institution. At a minimum, goals and measurable outcomes must address the following areas:

II.A.1 Curriculum The program must assess the appropriateness and effectiveness of the curriculum required to meet these Standards with the results of the assessment used as the basis for ongoing planning and appropriate action.

An annual assessment of the curriculum is required to determine where and when improvements are needed, and must be 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 competencies.

II.A.2 Faculty development Establish and assess the program's plan for faculty development as it relates to knowledge, skills, qualifications, and experience pertinent to the professional curriculum content that they are assigned to teach.

Assure through annual goals, that faculty development planning is targeted to improve faculty knowledge and expertise in the areas in which they teach, in efforts to keep current in HIM professional content, advanced formal education and as educators to maintain their knowledge of current HIM practice.

II.A.3 Students and graduates Provide assurance that the educational needs of students are met and that graduates demonstrate at least the entry-level competencies as defined by AHIMA.

Assess through goals and target outcomes that student learning outcomes are examined and demonstrate progress toward achievement of entry-level curriculum competencies. Demonstrate that graduates meet the entry-level competencies.

II.A.4 Communities of interest Demonstrate monitoring and responsiveness to the substantiated needs of the various communities of interest including healthcare providers and employers.

The program must indicate how it assesses the needs of its communities of interest, how it interprets these needs into educating a competent workforce and serving as a source of continuing education for its communities of interest.

When the needs of the community of interest fall outside of the nationally accepted competencies for an RHIT, the program must determine if the curriculum can accommodate additional content and/or courses without sacrificing the required learning domains. For example, when the community of interest expresses a need for medical transcription, the HIM program must determine if transcription courses can be incorporated into the required curriculum without sacrificing the depth of instruction in other required competencies such as the information technology, reimbursement methodologies, or legal and ethical issues.

II.A.4.a An advisory committee, which is representative of these communities of interest, must be designated and charged with the responsibility of meeting at least annually, to assist program faculty and sponsoring educational institution personnel in formulating and periodically revising appropriate goals and curriculum, monitoring needs and expectations, and ensuring program responsiveness to change.

By requiring that the advisory committee meet at least annually, it is anticipated that the advisory committee must meet at more frequent intervals when warranted by reviews of program goals, curricula, etc. The CAHIIM wishes to emphasize 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 during times of transition in the profession, as input from those in practice will be very valuable in terms of curriculum assessment.

II.B Program Evaluation

II.B.1 The program must at least annually assess and report its effectiveness in achieving its stated goals and outcomes.

It is required that each program must annually assess its program goals using the CAHIIM Annual Program Assessment Report (APAR) system.

Student outcomes reflect the overall educational success of the program. The program must be involved in an ongoing effort to determine its effectiveness which constitutes a quality improvement cycle.

II.B.2 At a minimum, this assessment must include graduate performance measures, employer and graduate satisfaction, job placement, yearly attrition, national certification scores, and program completion rates.

This assessment includes the collection of information on a regular basis from a variety of sources and may include the use of a number of methods to collect the information. Programs may collect additional information that reflects their institution's specific educational goals.

II.B.3 The results of this evaluation must be reflected in an action plan.

Results of these and other evaluations as well as recommendations from the program's Advisory Committee serve as the basis of analysis and action planning for program improvement or changes.

II.B.4 Implementation of the action plan must be documented and results measured by ongoing assessment.

The CAHIIM will seek evidence that there is documentation of changes made in the program that were the result of these evaluations and recommendations. Program officials and faculty must 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.

Note: An institutional effectiveness survey or other institutional-level evaluation data is not sufficient to replace the program's own evaluation plan which should follow the template developed by the CAHIIM.

III Program Director, Faculty and Staff

III.A The sponsoring educational institution must provide a program director, sufficient faculty, and staff with the necessary qualifications to achieve the program's goals and outcomes.

III.A.1 Program Director

III.A.1.a Qualifications The HIM program director must be certified as a Registered Health Information Administrator or Registered Health Information Technician and must have a minimum of a baccalaureate degree.

It is expected that only HIM professionals with an RHIA or RHIT credential and a minimum of a baccalaureate degree would possess the necessary knowledge and background to effectively manage the HIM program.

III.A.1.b Responsibilities The program director of the HIM educational program must be responsible for the organization, administration, continuous program review, planning, development, and general effectiveness 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.

The Program Director must be responsible for the administrative tasks associated with the program. The equivalent of a minimum of one 3 credit hour course/per term (quarter/semester) must be devoted to program management, curriculum development and evaluation, counseling and selection of students, and administrative duties within the institution. If a program director is part time, then it is expected that their sole responsibility is program administration, and no teaching responsibilities.

III.A.1.c Professional Development The program director must demonstrate continuing professional development related to their role and responsibilities, and the health information management profession.

Professional development is considered to be continuing education in curriculum content areas, program management, teaching techniques, or other areas related to the program director's responsibilities and teaching assignments.

III.A.2 Faculty

III.A.2.a Qualifications Faculty and professional practice coordinators must demonstrate current knowledge in course content and effectiveness in teaching assigned subjects.

Faculty/instructional staff and clinical coordinator must have adequate knowledge, skills, and experience that are directly pertinent to the professional curriculum content that they teach. The knowledge/skills of faculty members can be inferred from items such as professional development activities, additional certification, and student/peer review of teaching. Faculty professional development activities should be reflective of the practice/content for which they are assigned to teach or continuing education supporting improved teaching techniques.

Note: The standard requires that faculty 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. Determining this number or ratio, must depend on the number and variety of courses taught, the full/part time component of students and faculty, and method of course delivery.

III.A.2.b Responsibilities Whenever a student is assigned didactic or professional practice instruction there must be a qualified individual designated to provide supervision and related frequent assessments of the student's progress in achieving acceptable program requirements.

Faculty assigned to didactic instruction have the responsibility to assess student learning outcomes and to meet acceptable program requirements. There is no absolute requirement in terms of faculty–student ratio. The standard requires that faculty 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. Determining this number will depend on the number and variety of courses, the full time/part time component of students and faculty, and method of course delivery, but must at a minimum, be consistent with the sponsoring educational institution's policies.

Professional practice instruction must be under the supervision of either a qualified program faculty member assigned this responsibility, or an individual at a PPE site who is qualified in the area to which the students are assigned.

III.A.2.c Professional Development Faculty must demonstrate continuing professional development related to the curriculum content to which they are assigned.

Professional development is considered to be continuing education in curriculum content areas, teaching techniques, or other areas related to the faculty's responsibilities and teaching assignments.

III.A.3 Staff

III.A.3.a The sponsoring educational institution must provide staff to adequately support achievement of the program's goals and outcomes.

Staff support such as clerical, technical and administrative assistance is evaluated based on the institution's policies and must be consistent with other academic programs on the campus, and must be sufficient to support the program's goals and outcomes.

IV Resources

IV.A.1 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 (including hardware and software applications), practice records and other materials sufficient to support the learning experiences based on the number of students enrolled in the program.

IV.A.2 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. The HIM program director must have a role in the budget development process.

IV.B Students must have adequate access to program resources.

The program must demonstrate how it enables students' access to the resources and experiences necessary to support the learning process. If the program is offered online, student access to resources should be clearly defined.

V Curriculum

V.A The program must demonstrate that the curriculum meets or exceeds the professional course content as published in the AHIMA Model Curriculum for Associate Degree Programs that includes the HIM Entry-Level Competencies and Knowledge Clusters.

The curriculum syllabi and course content must ensure adequate coverage of the AHIMA Curriculum Competencies and Knowledge Clusters while avoiding unnecessary redundancy. Each course syllabus must be assessed against the required knowledge clusters, and demonstrate progression of learning to achieve the stated entry-level curriculum competencies.

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

The content of courses 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 should 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.

V.C 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 Entry-Level Curriculum Competencies must be made known to students at program admission, and related competencies included in each HIM professional course syllabus.

V.D Evaluation of students must be conducted with sufficient frequency 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.) must be conducted frequently and vary in type and construction, and must be able to test the different cognitive levels. For HIM academic programs to meet accreditation standards, they 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.

V.E.1 Professional practice experiences must be designed and supervised to reinforce didactic instruction.

The program must describe how professional practice experiences (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 actual professional practice are permitted if appropriately supervised and with regular student interaction and feedback. The professional practice experience (PPE) must include some

meaningful program-coordinated experience at professional practice site(s). The experience must relate to higher level competencies and result in a deliverable to the practice site.

V.E.2 Responsibilities of the sponsoring educational institution and the professional practice site must be clearly documented in a written agreement regarding the instruction and supervision of student learning activities and assessments.

The responsibilities of the college, clinical site and student(s) must be documented according to the sponsoring educational institution's requirements 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.

Note: CAHIIM does not require a formal agreement for short term visits or tours.

V.E.3 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.

Clinical site 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 clinical experience.

V.E.4 All activities required in the program must be educational and students must not be substituted for paid staff. Policies and procedures by which students may perform service work while enrolled in the program should be made known to all students.

It is expected that programs include a service work statement in the PPE materials available to both students and clinical supervisors, stating that HIM students must not be substituted for paid staff. This does not prohibit a paid internship or PPE but is designed to assure that students gain experience to reinforce the competencies and skill sets, and are not used simply for backlog work in the absence of appropriate paid staff.

VI Fair Practices

VI.A All published program information must accurately reflect the program offered.

Published information about the program, its accreditation status and curriculum must be accurate and consistent wherever it appears.

VI.B At least the following must be made known to all applicants and students:

VI.B.1 The sponsoring educational institution and programmatic accreditation status;

VI.B.2 Admissions policies and procedures;

VI.B.3 Policies on advanced placement, transfer of credits, and credits for experiential learning;

VI.B.4 Number of credits required for completion of the program;

VI.B.5 Tuition/fees and other costs required to complete the program;

VI.B.6 Policies and procedures for withdrawal and for refunds of tuition/fees.

VI.B.1—VI.B.6 Policies covering these areas must be published and made available to students and the public in the college catalogue (and/or online website), and that such information will be consistent wherever it appears.

VI.C At least the following must be made known to all students:

VI.C.1 Academic calendar;

The academic calendar must be published and available to all students.

VI.C.2 Student grievance procedure;

The sponsoring educational institution's procedure for filing student grievances must be clearly published and available to all students.

VI.C.3 Criteria for successful completion of each segment of the curriculum and graduation.

Clearly published pre-requisites, co-requisites, minimum grade point average, and required courses for each segment of the curriculum.

VI.D 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.

The college catalog and/or website must include an official non-discrimination statement and it must be clear that the HIM program adheres to the non-discrimination policy as regards faculty employment and student admissions.

VI.E 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.

VI.F Administrative requirements for maintaining accreditation:

VI.F.1 Submitting the CAHIIM Annual Program Assessment Report (APAR) and other required reports by the determined CAHIIM date.

VI.F.2 Participating in a designated periodic site visit of the accredited program.

VI.F.3 Informing CAHIIM of any adverse changes in the institution affecting the program's accreditation. Changes in program officials (Chief Executive Officer, Dean and Program Director) *within 30 days of the effective date*.

VI.F.4 Payment of all CAHIIM administrative fees.

