| Institution Name: *Enter here typeover* | | | | |
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| SITE VISIT AGENDA | | | | |
| Site Visit Agenda-Day 1 | | |  | |
| Program Title/Degree Level: | | |  | |
| Address: | | |  | |
| Date: | | |  | |
| Day 1 Agenda | | | | |
| Time (EST) / Location | **Meeting Title** | **Description** | | **Attendees** |
|  |  |  | |  |
| 9:00 – 9:30  8:00-8:30 ( CST) | **Introductory Meeting** | Welcome meeting with the appropriate Dean, Program Director and other administrators (budget and advising) who are responsible for the HIM or Health Informatics program | | Complete Attendee Table Below. |
| 9:35-10:45  8:45- 9:45 ( CST) | **Meeting with Program Director** | -Discuss, review and clarify information received in the self assessment (if needed)  -Discuss professional course content of HIM or Health Informatics curriculum*. This meeting is with just the program director* | | (Name/Title) |
| 10:45-11:00 | **Break** |  | |  |
| 11:00-12:00  10:00-11:00 CST | **Review Panel Team Meeting** | -Review program materials, curriculum/competencies  -Internet (Wi-Fi) access for personal laptops required  -Peer Reviewers must have **faculty level access** for all courses offered online prior to the visit This includes weblink and login instructions for each review panel member | | Review Panel  (Program Director & faculty should be available upon request) |
| 12:00-1:00  11:00 – 12:00 CST | **Review Team Business Lunch** | Working lunch for Review Panel | | Review Panel |
| 1:00-1:45  12:00 – 12:45 CST | **Interview with program faculty** | Conduct interview with program faculty and other faculty teaching Health Informatics professional content | | **Complete Table Below**  **(Excludes Program Director)** |
| 1:45-2:30  12:45 – 1:30 CST  Approx. 45 minutes total  If students and graduates are interviewed separately about 25 mins for current students | **Interview with students and graduates.** | -The team will meet with students and graduates during this time  - This meeting excludes the program director, any faculty and/or staff, advisory board member. Any students that have a role as a graduate student and teaching assistant for the program may attend the Faculty session or the Student session but not both.  -If the program has graduates, both students & graduates are required for attendance  - Ideally, students invited to this meeting should include a new student, students that are half-way through the program and students that are about to graduate  -The goal is to have at least 10 participants in this session | | Complete Attendee Table Below – pages 3 & 4  (10+ students to attend if possible) |
|  |  |  | |  |
| 2:30-2:45 | Break |  | |  |
| 2:45-3:30  1:45 – 2:30 CST | **Program Resources Tour conducted by Program Director or Faculty** | -Review student access to learning resources/virtual resources, and all other program resources. Provide faculty guide through program’s virtual resources with example of each application used. | | Program Director (Name/Title)  (Staff involved directly with the Health Informatics program |
| 3:30-4:30  2:30 – 3:30 CST | **Interview with Advisory Board members** | -Conduct interview with advisory board members  Faculty on the Advisory Committee should be interviewed with Faculty only | | (Name(s)/Title(s))  Excludes internal staff and members of the institution |
| 4:30-5:00  3:30 – 4:00 CST | **Meeting with Program Director** | -Review/clarify pending items | |  |

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| Site Visit Agenda-Day 2 | | | | |
| Program Name | |  | | |
| Date: | |  | | |
| Day 2 Agenda | | | | |
| Duration | **Meeting Title** | | **Description** | **Attendees** |
| 9:00-10:15  8:00 – 9:15 CST | **Review Panel Team Meeting** | | Final program review conference  =================================  **Note: Time subject to change based on program review; as determined by Review Panel** | Review Panel  (Program Director & faculty available upon request) |
| 10:15-10:30  9:15 – 9:30 CST | Break | |  |  |
| 10:30-11:00  9:30 – 10:00 CST | **Meeting with Program Director** | | Discuss the site visit team’s preliminary assessment results with the Program Director with respect to the Standards  =================================  **Note:**  *This meeting excludes additional faculty, staff and administration* | (Name(s)/Title(s)) |
| 11:00-11:30  10:00 – 10:30 CST | **Closing Meeting** | | Review panel findings/results meeting with the appropriate Dean, Program Director and other administrators (budget and advising) who are responsible for the Health Informatics program.  =================================  **Note: Time subject to change based on program review; as determined by Review Panel** | Complete Attendee Table Below |
| ADJOURN | | | | |

# Meeting Attendee Table (Add or remove rows as needed) Please be advised, if a person is not listed in the tables, they will not be granted access to a Zoom meeting

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| **Introductory & Closing Meeting** | **Attendee Name, Credentials** | **Job Title** |
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| **Student Interview Meetings** | **Attendee Name** | **Program Level (1st, 2nd, etc.)** |
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| **Graduate Interview Meeting** | **Attendee Name** | **Year/Term Graduated** |
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| **Faculty** | **Attendee Name, Credentials** | **Employer(s), Job Title(s)** |
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| **Advisory Committee** | **Attendee Name, Credentials** | **Employer(s), Job Title(s)** |
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