Introduction:

Since our last assessment, which was performed in the fourth quarter of 2013 and reported in January, 2014, the Healthcare Administration Program has undergone substantive changes. Most importantly, we have completed the development of all of our core courses for on-line delivery. The final on line course was piloted during the Spring Semester of this year (2015) and, with that, our Bachelor of Science degree is now one of approximately ten BYU Idaho degrees that can be completed entirely on line.

Program Enrollment

With the launching of our on line program, total enrollment has more than doubled since our last assessment and now stands at 937* total majors and minors, half being on-campus and half being on-line. Based on a 2014 report from AUPHA – the Association of University Programs in Health Administration -- which we have incorporated below, the Brigham Young University Idaho undergraduate program is now the second largest undergraduate program in the United States. *These data were generated from the BYU Idaho website December 13, 2015.

Undergraduate

Total Number of AUPHA Undergraduate Programs: 81
Estimation of Students Enrolled: 14,985

Average enrollment per Program: 185* students

Number of undergraduate programs on prospect (non-AUPHA) list: 223
Estimated enrollment: 41,255

Grand total: 56,240

*This number excludes outliers. We have one outlier program that enrolls close to 20,000 students between its campus and online programs. There are others that have 600+ students. These programs were excluded when calculating the average.
Teaching Non-Healthcare Administration Majors

A second significant change since our last assessment resulted from a decision by the Health Science Program and the Public Health Program, based on program accreditation criteria, to require that their majors complete HS 285 – Introduction to Healthcare Administration (our foundation course) – which has added approximately 1,300 students to our on-campus and online teaching responsibilities. They now coexist with our Healthcare Administration majors and are mixed freely in the various sections of HS 285, both on campus and online. We emphasize this change, because it has significantly altered our enrollment as well as the nature of our courses. In general, the faculty have experienced what we anecdotally interpret to be a lower level of intensity and commitment from these students than we have been accustomed to from our healthcare administration majors. Initially, we desired to segregate the various sections of HS 285 into discrete groups of healthcare administration majors and non-majors. An administrative decision was made that such segregation would not be permitted. This reality introduces a desire to formulate an assessment tool or methodology that can help us to measure and quantify how these two groups are performing under our teaching. We will address this issue in greater detail later in this assessment.

Relating the 2014 and 2015 Program Assessments

The focus of our 2014 assessment was primarily on how the BYU Idaho program was preparing students for graduate education and how they and their respective program directors evaluated the quality of their undergraduate preparation. That focus accurately represented our original program mission. However, with the expansion of our program to on line and with the unanticipated growth in enrollment, we now realize that our mission is evolving and that our assessments must evolve to reflect that changing mission.

The 2015 Qualtrix Survey

In September, 2015, we formulated a survey designed to update our database of where our alumni are located, their employment status and their perceptions of the quality of their undergraduate experience. A copy of that survey is attached hereto. The contact database for that survey was derived from the BYU Idaho Alumni Association. A copy of that database is also attached. Of the 444 Healthcare Administration students identified in that database, we received responses from only 3. This low level of response then prompted us to examine more closely why our alumni were not responding. The answer seems to be that students, after graduation, rarely use their BYU Idaho e-mail addresses, which are the basis for most alumni association contact information. Almost universally, they have established e-mail accounts with social network providers like Facebook, LinkedIn, G-Mail or Yahoo. In December, 2015, the BYU Idaho Alumni Association mailed to us instructions on how to utilize LinkedIn to establish a contact group – which we are now in the process of doing. It will become part of our assessment methodology for future years. [Attachment: 2015 Qualtrix Alumni Survey]
The 2015 Healthcare Administration Alumni Database

The 2015 Healthcare Administration Database was derived from printed BYU Idaho Commencement programs. It contains the name of every student who has completed the Bachelor of Science degree in Healthcare Administration since our program was launched officially in 2008. In addition, it contains the names and contact information for a number of students who majored in other programs – Economics, Business Administration, Accounting and Communications – and minored in Healthcare Administration and who have been admitted to graduate programs in Healthcare Administration. [Attachment: Alumni Updated Contact DB Attachment: Our Graduates.pptx]

Assessing the Performance of Non-Healthcare Administration Majors

As we noted above, our faculty – both on campus and on line – have anecdotally observed a difference in academic intensity and perceived commitment of the Health Science and Public Health majors who are now required to take and pass our HS 285 Introduction to Healthcare Administration course. With that in mind, we are analyzing the academic performance of all HS 285 students in all sections for the Fall Semester 2015. Within one week of completing the Fall semester, we will submit an addendum to this 2015 Assessment, analyzing the final grades of all HS 285 students, separated into (1) Healthcare Administration Majors and (2) Non-Healthcare Administration Majors. Based upon the outcome of this preliminary investigation, we will meet as a faculty to determine how to proceed with this assessment.

Exit Examination for all Healthcare Administration majors

We have now completed an Exit Examination that will be administered to all graduating Healthcare Administration majors and minors. It is our intent that this Exit Examination will help us to evaluate the effectiveness of our instruction – both for on-line and for on-campus students. To date, we have experienced “some” cheating by on-line students. It is our plan to devise a method by which these examinations may be taken in a fully proctored environment, so that we can be certain that our results are not tainted by academic dishonesty. Once that methodology is established and proven, we will use the Exit Examinations to determine how our on-campus and on-line students compare academically. A copy of the Exit Examination is attached hereto. [Attachment: Exit Examination for Graduating Seniors]

Assessment of the Decision Not to Seek CAHME Accreditation

In 2009, there was a discussion between President Kim B. Clark, Fenton Broadhead, Academic Vice President, Steven McGary, Dean of the College of Agriculture and Life Sciences and Dennis Tolman, Program Director for Healthcare Administration, regarding the desirability of seeking accreditation from CAHME (Council on Accreditation of Health Management Education). All parties recognized the relatively high cost and intense oversight associated with accreditation. The central issue, however, was regarding whether our BYU Idaho graduates might be
discriminated against when applying to graduate level programs, the best of which are accredited by CAHME. With no experience to draw upon, we determined that we would initially not seek program accreditation and that we would measure actual alumni outcomes to assess, over time, whether that decision was a good one. In the ensuing years, teams of faculty and administrators from BYU Idaho have made site visits to (1) The University of Minnesota, (2) St. Louis University, (3) Washington State University at Spokane, (4) Arizona State University, and (5) The University of Utah to promote our program. Please refer to the attached document entitled “Top 25 Graduate Healthcare Management Degrees in 2015”. In this document, we have inserted the names of forty seven BYU Idaho alumni who have been admitted to distinguished Master’s Degree programs in Healthcare Administration. Thirty-four of those forty-seven students have been admitted to Top 25 Programs. From these results, we conclude that BYU Idaho alumni not only are not being discriminated against, but are actually being highly recruited by elite programs. With this in mind, we conclude that the 2009 decision not to seek CAHME accreditation was correct. [Attachment: Top 25 Graduate Healthcare Management Degrees in 2015]

Summary

2015 has been a year of adjusting to the rapid changes in the Healthcare Administration program. We have utilized this year to analyze the program and to create assessment tools to help us take it where the rapid growth is taking us. “According to the Bureau of Labor Statistics (BLS) Occupational Handbook, the field of Healthcare Management and Administration is expected to increase by at least 23 percent between now and the year 2020. Due to this high rate of growth, there will be thousands of new jobs available to trained Healthcare Managers, Executives and Administrators.” The BYU Idaho program is poised to take advantage of this expansion of the executive workforce. We have experienced significant success in preparing our students for the requisite Master’s Degree programs that prepare them to work in acute care hospitals and related provider organizations. We need, now, to turn our attention to enhancing our curriculum for the graduates who are choosing to work in the industry sectors of Long-Term Care, Medical Group Management, Post-Acute Rehabilitation and Hospice/Palliative Care.

A significant challenge for us is to assess the on-line students – nearly five hundred of them – and to determine (a) how their learning compares to that of our on-campus students and (b) what we need to do to meet their needs for mentoring and networking for success.
Emphasize student-to-faculty advising ratios