A decorative graphic in the top left corner consisting of several overlapping triangles in various shades of blue, creating a dynamic, abstract shape.

Rutgers Master of Health

Administration

Master Assessment Plan (MAP)

Report

August 2020

Submitted by:

Raphael Caprio, Program Director

Ann Marie Hill, Co-Chair, Self-Study Committee

RMHA-MAP Report - Spring 2020

The RMHA-MAP is a comprehensive, integrated approach to:

1. Assessing student progress toward mastery of program competencies;
2. Assessing program-level effectiveness at facilitating student competency attainment via faculty review of competency currency/relevance and systematic curricular adjustment as needed;
3. Assuring continuous program improvement by “closing the loop” through data review of student- and program-level competency assessments; and
4. Assessing those metrics related to program goals and objectives.

This assessment plan has eight data collection modules:

- Modules 1 - 4 collect student and cohort-level data on competency attainment and program effectiveness;
- Modules 5 - 8 collect program-level data on program effectiveness and competency currency and relevance; and
- Modules 7 and 8 are Environmental Scans of practitioners, students and stakeholders.

Table 1 summarizes the modules, their assessment tools, frequency of administration, and data review process. Following the table, each module is described in detail and summarized, with the most recent results of the assessments found in the appendices.

Table 1. RMHA-MAP Summary

Module	Assessment Tool	Frequency of Administration	Data Review Process	
Assessment of Student Achievement of Competencies				
1	Student Self-Reflective Assessments	Internet survey	Baseline in 501/581; in 563 and 595/586	Advisors provide feedback to individual students.
2	Student Exit Survey	Internet survey	Six weeks before graduation	Aggregate data used for program level review by the QIC.*
3	Course-Level Assessment of Student Achievement Competency	Canvas OUTCOMES	At the end of each semester	Course-level data is shared with students through OUTCOMES; QIC review allows for course and program-level review.
4	Comprehensive Knowledge Assessment	Objective test	Completed in 501/581 and 595/586	Aggregate data are reviewed by faculty for overall competency achievement.

Assessment of Program Effectiveness and Competency Relevance				
5a	Preceptor Assessment of Student Achievement	Preceptor Evaluation Tool	Completed near the end of 595	Individual data are reviewed by instructors; aggregate data are reviewed by the QIC for program assessment.
5b	Project Evaluation by Faculty, Preceptors and External Stakeholders	Project Evaluation Tool	Completed during final project presentations in 595	Faculty provide feedback to individual students; aggregate data are reviewed by the QIC.
6	Alumni Survey	Internet survey	Completed 3 months from graduation; then annually for next 3 years; and then every 3 years	Bloustein Student Services updates contact information; job placements and promotions are tracked.
Environmental Scans of Practitioners, Students and Stakeholders				
7	Practitioner and Student Focus Groups	Environmental Scan; Focus Groups; Town Halls	Practitioner and student focus groups held triennially following an Environmental Scan; Town Halls for students held 3 times per term	Focus group results are reviewed by the faculty and program leadership, and by the decanal unit. Town Hall concerns are brought to the next faculty meeting.
8	External Stakeholder Groups	Semi-structured discussion groups	Triennially, following an Environmental Scan	Minutes of the meetings are reviewed by the QIC and used for program level adjustment

*QIC = Quality Improvement Committee

Module 1. Student Self-Reflective Assessments

Upon intake, students review and discuss the five Domains covered by the Program (1 - The Healthcare Environment; 2 - Leadership and Professional Development; 3 - Management and Business; 4 - Communication and Relationship Management; and 5 - Entrepreneurship and Innovation) along with their respective three to six core competencies with faculty. They then complete an online Self-Reflective Assessment in their first required course, Principles of Health Administration (501), to set their baseline competencies [baseline metrics first obtained Fall 2019]. They repeat the same assessment in Health Systems Operations (563) and during Professional Practicum with Seminar (595) [final assessment for full-time Traditional Track students on track for graduation will occur in Spring 2021]. Executive Track students take the initial assessment during Executive Theory Cluster 1 (581) [baseline metrics first obtained Spring 2020] and in Professional Development Seminar Summer II (586) [will occur for these students Summer 2021]. The assessments are uploaded into the Graduate Portal where they are used to track each student's competency mastery as well as overall program

effectiveness. The Self-Reflective Assessment Tool is found in [Appendix 1](#). The results of the Spring 2020 Self-Reflective Assessment are found in [Appendix 2](#).

Summary of the Module 1 Assessment Process

Data collection method	Internet survey tool
Respondent categories	Incoming students
Timing of administration	Near inception of program of study
Frequency of administration	On-going
Data outputs	Baseline metric for student competency assessment
Data analysis baseline	All incoming cohorts since Fall 2018
Data audience	Faculty and program leadership
Data audience purposes	Monitoring student mastery of core competencies
Data audience review period	On-going throughout student's program of study

Module 2. Student Exit Survey

This capstone survey is required of all graduating students, administered as part of graduation requirements. It provides information on student- and program-wide satisfaction of competency requirements. It also collects post-graduation employment and job status, baseline intentions and permanent (i.e., non-University) contact information. The results of the Student Exit Surveys for 2019 and 2020 are found in Appendices 3-5. The Program Evaluation Results are located in [Appendix 3](#); the Faculty Mentoring Results in [Appendix 4](#); and the Evaluation and Coursework Evaluations in [Appendix 5](#).

Summary of the Module 2 Assessment Process

Data collection method	Internet survey tool
Respondent categories	Graduating students
Timing of administration	Near completion of program
Frequency of administration	On-going
Data outputs	Outgoing metric for program assessment
Data analysis baseline	NA
Data audience	Faculty and program leadership
Data audience purposes	Feedback on program and post-graduation intentions
Data audience review period	Upon program completion

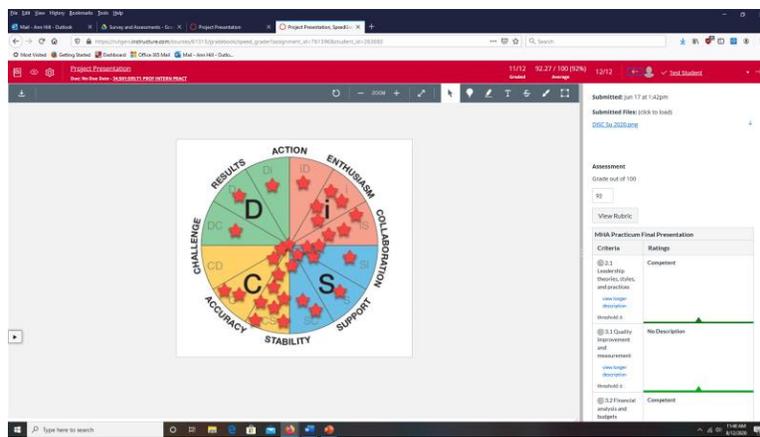
Module 3. Course-Level Assessment of Student Achievement of Competency

At the close of each course, the instructor will report on each student's mastery of the competencies addressed in that course as per the standard grading rubrics. This assessment relies upon OUTCOMES, a tool in Canvas, with the capability of linking key course competency assessments to a student competency tracking system. This tool provides a "Proof of Concept" approach to assessment through the use of rubrics for grading. It allows review of student attainment levels by competency. Samples of the output from OUTCOMES appear below:

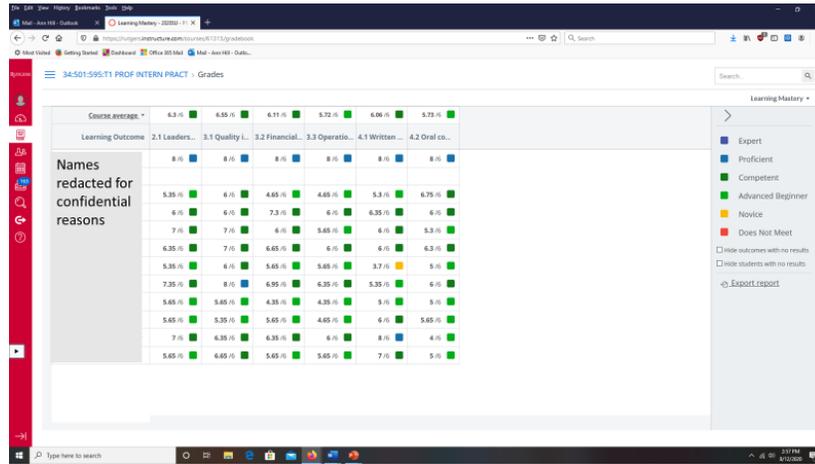
Sample - OUTCOMES Report for Student Assessments

Criteria	10.0 pts	9.0 pts	8.0 pts	7.0 pts	6.0 pts	5.0 pts	4.0 pts	3.0 pts	2.0 pts	1.0 pts	0.0 pts	Pts
2.1 Leadership Theories, rights and priorities (rubric) (assessment) (max: 6.0 pts)	Expert	No Description	Proficient	No Description	Competent	No Description	Advanced Beginner	No Description	Novice	No Description	Does Not Meet	
3.1 Quality Improvement and measurement (rubric) (assessment) (max: 6.0 pts)	Expert	No Description	Proficient	No Description	Competent	No Description	Advanced Beginner	No Description	Novice	No Description	Does Not Meet	
3.2 Financial analysis and budgets (rubric) (assessment) (max: 6.0 pts)	Expert	No Description	Proficient	No Description	Competent	No Description	Advanced Beginner	No Description	Novice	No Description	Does Not Meet	
3.3 Operational management (rubric) (assessment) (max: 6.0 pts)	Expert	No Description	Proficient	No Description	Competent	No Description	Advanced Beginner	No Description	Novice	No Description	Does Not Meet	
4.1 Written communication (rubric) (assessment) (max: 6.0 pts)	Expert	No Description	Proficient	No Description	Competent	No Description	Advanced Beginner	No Description	Novice	No Description	Does Not Meet	
4.2 Oral communication (rubric) (assessment) (max: 6.0 pts)	Expert	No Description	Proficient	No Description	Competent	No Description	Advanced Beginner	No Description	Novice	No Description	Does Not Meet	
Total Points:												

Sample - OUTCOMES Report for Course Rubric Assessments



Sample - OUTCOMES Report for Course Level Competencies



Summary of the Module 3 Assessment Process

Data collection method	Canvas direct assessment
Respondent categories	Faculty
Timing of administration	At course completion
Frequency of administration	On-going
Data outputs	Incremental metrics of student competency mastery
Data analysis baseline	Incoming cohorts beginning Fall 2018
Data audience	Faculty and program leadership
Data audience purposes	Monitoring student mastery of core competencies
Data audience review period	On-going throughout student's program of study

Module 4. Comprehensive Knowledge Assessment

Students take a comprehensive assessment that measures growth in knowledge around competencies using an objective tool. Those in the Traditional Track take the assessment in their first semester during Principles of Health Administration (501) and repeat it in Professional Practicum with Seminar (595). Those in the Executive Track take the assessment in Cluster 1 (581) and again in Professional Development Seminar (586). The assessment tool is not provided in this report to maintain its security for additional implementation. Results from the Spring 2020 Comprehensive Assessments appear below:

Executive Track	Traditional Track
581 Executive Theory Cluster 1 – 92.8	501 Principles of Health Admin – 64.5
	595 Professional Practicum with Seminar – 71

Summary of Module 4 Assessment Process

Data collection method	Knowledge-based survey tool
Respondent categories	All students
Timing of administration	At intake and upon program completion
Frequency of administration	On-going
Data outputs	Interval metric of student’s awareness of competency mastery
Data analysis baseline	Pretested and implemented Spring 2019
Data audience	Students, faculty and program leadership
Data audience purposes	Monitoring and student awareness of core competency mastery
Data audience review period	Early fall following prior year’s data collection

Module 5a. Preceptor Assessment of Student Achievement

Near the end student completion of Professional Internship Practicum (595), preceptors complete an internet survey on student field placements or worksite project practicums. A copy of the Preceptor Evaluation Tool is found in [Appendix 6](#). Results from preceptor assessments are confidential and cannot be shared.

Summary of Module 5a Assessment Process

Data collection method	Internet survey tool
Respondent categories	Preceptors
Timing of administration	End of each semester
Frequency of administration	On-going
Data outputs	Individual-level assessment of field preparedness
Data analysis baseline	Pretested and implemented Spring 2019
Data audience	Faculty and program leadership
Data audience purposes	Monitoring student field readiness and mastery of core competencies
Data audience review period	On-going

Module 5b. Project Evaluation by Faculty, Preceptors and External Stakeholders

Students complete an outcomes-driven project as a major part of their Professional Internship Practicum (595). The project is presented in a public forum and assessed by faculty, preceptors and other stakeholders using a Presentation Scoring Tool with a competency-based rubric. These assessments allow student attainment to be evaluated by faculty, and they aide the Quality Improvement Committee in identifying needs for program-level improvement. For example, Module 5 Project Evaluation assessment indicated that more emphasis was needed on project management. As a result, the Health Systems Operations (563) class added a section on project management. As the project evaluations contain confidential information that could be linked to individual students, they remain confidential. The Presentation Scoring tool, however, is found in [Appendix 7](#).

Summary of Module 5c Assessment Process

Data collection method	Final presentations
Respondent categories	Faculty, preceptors and external stakeholders
Timing of administration	End of each semester
Frequency of administration	Just prior to graduation
Data outputs	Individual-level assessment of key competencies
Data analysis baseline	Pretest, spring 2018
Data audience	RMHA faculty and program leadership
Data audience purposes	Monitoring student mastery of core competencies
Data audience review period	NA

Module 6. Alumni Survey

The Alumni Survey is sent out 3-months post-graduation, then annually for the next 3 years, followed by every 3-year period after that. This data collection module post-tests program competencies and updates post-graduation employment data. Alumni Survey tool is found in [Appendix 8](#) and the non-confidential Alumni Survey Results are found in [Appendix 8a](#).

Summary of Module 6 Assessment Process

Data collection method	Internet survey, with mail survey supplement
Respondent categories	RMHA programs alumni, at least one-year post-graduation
Timing of administration	May-June
Frequency of administration	Triennially
Data outputs	On-going monitoring of long-term program effectiveness
Data analysis baseline	Summer 2022 (includes graduates from 2019, 2020, and 2021)
Data audience	RMHA faculty and program leadership
Data audience purposes	Program effectiveness; graduate employment tracking
Data audience review period	Fall following summer data collection

Module 7. Practitioner and Student Focus Groups

This Data Collection Module provides for a triennial set of focus groups with practitioner-part-time faculty and students to review the core competencies considering the most recent triennial Environmental Scan and to recommend adjustments, as appropriate. The transcripts and results of these focus groups are found in [Appendix 9](#).

Summary of Module 7 Practitioner and Student Focus Group Process

Data collection method	Focus group(s)
Respondent categories	Practitioner faculty, Executives-in-Residence, Industry Advisory Board
Timing of administration	June-July
Frequency of administration	Triennially, following completion of most recent Environmental Scan
Data outputs	Competency and curricular currency and relevance
Data analysis baseline	Spring 2019 (following AY18-19 triennial Environmental Scan)
Data audience	RMHA faculty and program leadership, and Bloustein Decanal Unit
Data audience purposes	Competency currency and relevance; programmatic effectiveness
Data audience review period	Fall semester following spring data collection

Module 8. External Stakeholder Groups

This Data Collection Module provides for semi-structured discussions with the External Advisory Board members and others to assess new trends in healthcare field and suggest improvements to the RMHA competency model and curriculum. Members of the QIC participate in these discussions and use them as part of the Environmental Scan and to recommend adjustments as appropriate. In addition, this module facilitates the collection of data from in-field practitioners on the applicability of competencies and curriculum to professional practice demands.

Summary of Module 8 Stakeholder Focus Group Process

Data collection method	Semi-structured discussion group
Respondent categories	Representatives of non-RU organizations hosting internship(s)
Timing of administration	July-August
Frequency of administration	Triennially, following completion of the most recent Environmental Scan
Data outputs	Competency and curricular currency and relevance
Data analysis baseline	Summer 2019 (following AY18-19 triennial Environmental Scan)
Data audience	Faculty and program leadership, and the Bloustein Decanal Unit
Data audience purposes	Competency currency and relevance; programmatic effectiveness
Data audience review period	Fall semester following summer data collection

Modules 7 and 8 Summary Findings

A summary of the Focus Group findings was presented to the faculty at the 2020 Retreat. The summary can be found in [Appendix 10](#). A word analysis was also done ([Appendix 11](#)). The Word Cloud from that analysis appears as the graphic below:

Appendices

Appendix 1a. Student Self-Reflective Assessment Tool

Appendix 2. Self-Reflective Assessment Results Spring 2020

Appendix 3. Student Exit Survey Results - Program Evaluation

Appendix 4. Student Exit Survey Results - Faculty Mentoring

Appendix 5. Student Exit Survey Results - Advising and Course Quality

Appendix 6. Preceptor Evaluation Tool

Appendix 7. Presentation Scoring Tool

Appendix 8. Alumni Survey Tool

Appendix 8a. Alumni Survey Results

Appendix 9. Practitioner and Student Focus Group Analysis

Appendix 10. Focus Group Findings for the Faculty Retreat

Appendix 11. Focus Group Word Analysis

Appendix 1. Student Self-Reflective Assessment Tool

RMHA Competencies Self-Assessment

Start of Block: Default Question Block

1 Master in Health Administration Program Professional Practice and Development: Self-Assessment of Skills and Competencies Job analysis surveys conducted under the auspices of the American College of Healthcare Executives (ACHE) have identified over 150 detailed competencies “needed to successfully perform as a healthcare manager regardless of the setting.”[1] Within this larger context, MHA programs typically identify domains and competencies that are consistent with their mission and goals. The mission [2] of Rutgers University’s traditional and Executive MHA programs is to train entry level and early/mid-level careerists throughout New Jersey and its neighboring regions for positions of increasing responsibility and leadership in the healthcare field, and; to contribute to the health, economic, and social well-being of New Jersey and nearby communities through research, policy, and planning in healthcare.

Given the program mission, the Rutgers MHA and Executive MHA programs have been designed around five main domains: 1) The Healthcare Environment 2) Leadership and Professional Development 3) Management and Business 4) Communication and Relationship Management 5) Entrepreneurship and Innovation

[1] ACHE Healthcare Executive 2018 Competencies Assessment Tool, American College of Healthcare Executives, at:

https://www.ache.org/pdf/nonsecure/careers/competencies_booklet.pdf, p.1.

[2] CAHME Accreditation Candidacy Application, Edward J. Bloustein School of Planning and Public Policy, April 2018, p. 1

Page Break

2 There are three to six competencies in each domain (see list below). These are not exhaustive, but an essential base upon which to build successful continuing professional development. Critical to this is achieving objective self-awareness:

DOMAIN: A. The Healthcare Environment 1. Healthcare structure 2. Healthcare policy, law, and ethics 3. Healthcare quality 4. Disparity in clinical and population-level health outcomes

DOMAIN: B. Leadership and Professional Development 1. Leadership theories, styles and practices 2. Strategic planning 3. Ethical leadership and commitment to lifelong learning

DOMAIN: C. Management & Business 1. Quality improvement and measurement 2. Financial analysis and budgets 3. Operational management 4. Human resource management 5. Health information systems 6. Ethics and compliance 7. Data Analytics

DOMAIN: D. Communication and Relationship Management 1. Written communication 2. Oral communication 3. Team dynamics

DOMAIN: E. Entrepreneurship and Innovation 1. Entrepreneurship and Innovation 2. Emerging Technologies

Page Break

3 The Task The Professional Practice and Development Self-Assessment of Skills and Competencies will require a candid assessment of progression in each of the 19 competencies the program has strived to achieve. MHA candidates are asked to consider each competency independently, and assess their level of achievement for each: (1) Consider the extent to which this is an essential portion of your current position (2) Self-assess your own level of competency entering the program on the item (from Novice to Expert, realizing “Expert” being something you can do “without even thinking about it!” (or, I can teach it) (3) Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

Page Break

4 For this exercise to be useful in your own professional development, and for us to engage in continuous curriculum improvement in a meaningful way, you should complete the initial assessment honestly and to the best of your ability. Please be objective and realistic.

The survey is confidential. Your name will not be associated with your responses. If you have any questions regarding this survey, please contact Professor Ann Marie Hill (annmariehill@ejb.rutgers.edu). Thank you for your assistance. Please click next to continue...

Page Break

Q1 Name



Q2 MHA program start date

Page Break

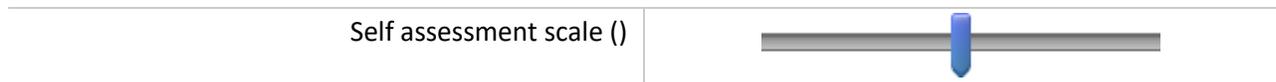
Q3 Domain 1- The Healthcare Environment.

Competency- Healthcare Structure: Demonstrate knowledge of different types of health services organizations, insurance providers, and healthcare providers.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100

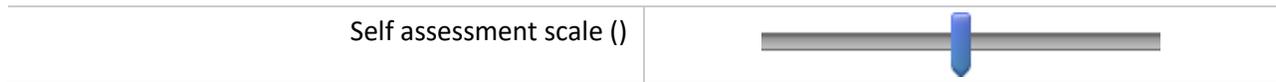


Q4 Domain 1- The Healthcare Environment.

Competency- Health policy, law, and ethics: Describe the health policy making process and ethical issues at the local, state, regional, and national level.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80- 100 is a Senior high-level Health care Manager.** (1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100



Q5 Domain 1- The Healthcare Environment.

Competency- Healthcare Quality: Determine the essential domains of healthcare quality assurance (Safe, Effective, Patient-centered, Timely, Efficient, Equitable).

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100

Self assessment scale ()	
--------------------------	--

Q6 **Domain 1- The Healthcare Environment.**

Competency- Disparity in Clinical and Population-level health outcomes: Analyze the sources of existing disparity in health outcomes, both at an individual and community level, and tools to improve population health.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100

Self assessment scale ()	
--------------------------	--

Page Break

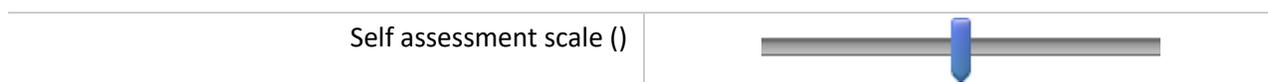
Q7 Domain 2- Leadership and Professional Development.

Competency- Leadership theories, styles, and practices: Demonstrate understanding of different leadership theories, styles, and practices, and managing change and expectations in a wide variety of health services organizations.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100

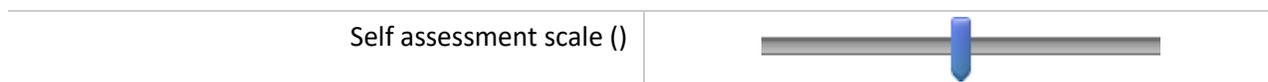


Q8 Domain 2- Leadership and Professional Development.

Competency- Strategic Planning: Understand the importance and the process of strategic planning in a healthcare organization to meet the organization’s mission and vision and efficient allocation of resources in different situations.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.** (1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100



Q9 Domain 2- Leadership and Professional Development.

Competency- Ethical leadership and commitment to lifelong learning: Demonstrate ethical values, responsibilities, and pursuit of lifelong learning.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior**

high-level Health care Manager.

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100



Page Break

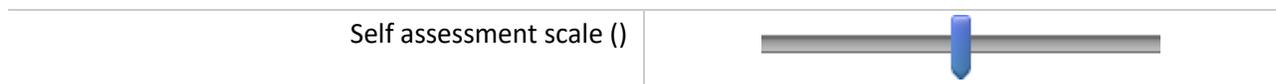
Q10 Domain 3- Management and Business.

Competency- Quality improvement and measurement: Determine the importance of quality improvement tools like LEAN, Six Sigma to improve clinical and operational outcomes.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100



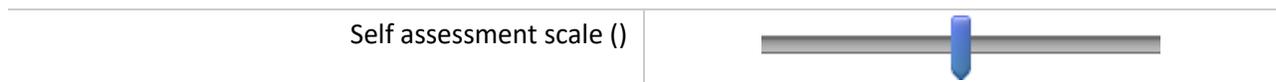
Q11 Domain 3- Management and Business.

Competency- Financial Analysis and Budgets: Understand and apply the basics of financial management, budgeting, and interpreting different financial matrix to measure organizational performance.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100



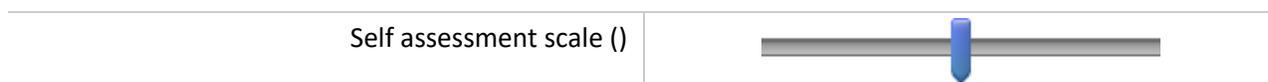
Q12 Domain 3- Management and Business.

Competency- Operational Management: Analyze different approaches for healthcare delivery and organization of services.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100



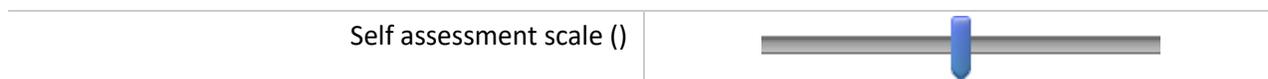
Q13 **Domain 3- Management and Business.**

Competency- Human Resource Management: Examine various principles of human resource management and regulatory requirements in healthcare.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100



Q14 **Domain 3- Management and Business.**

Competency- Health Information Systems: Demonstrate the role of health information systems for administrative purpose and emerging issues like cyber security and data privacy and security in healthcare.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100

Self assessment scale ()



Q15 **Domain 3- Management and Business.**

Competency- Ethics and Compliance: Assess ethics and regulatory compliance issues in healthcare.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100

Self assessment scale ()



Q16 **Domain 3- Management and Business.**

Competency- Data Analytics: Apply different statistical analysis techniques and the use of data visualization software to healthcare data for benchmarking and business intelligence.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100

Self assessment scale ()



Page Break

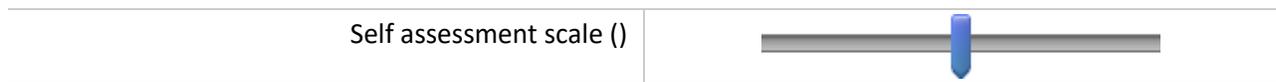
Q17 **Domain 4- Communication and Relationship Management.**

Competency- Written Communication: Demonstrate effective written business and verbal skills.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100



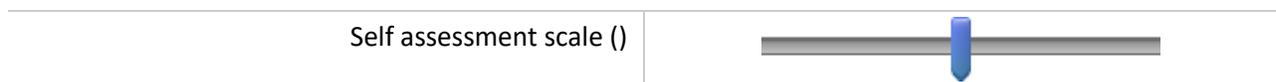
Q18 **Domain 4- Communication and Relationship Management.**

Competency- Oral Communication: Demonstrate effective verbal communication skills, in individual and group settings.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100



Q19 **Domain 4- Communication and Relationship Management.**

Competency- Team Dynamics: Explain the importance of teamwork in a healthcare setting and developing competencies to work effectively in different roles within a team.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior**

high-level Health care Manager.

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100



Page Break

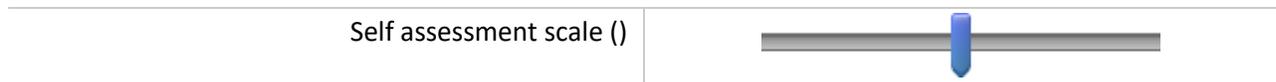
Q20 Domain 5- Entrepreneurship and Innovation.

Competency- Entrepreneurship and Innovation: Understand the concept and examples of disruptive technologies and applying to the healthcare industry to promote innovation.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100



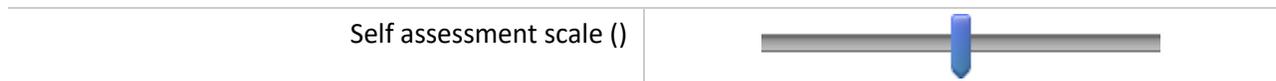
Q21 Domain 5- Entrepreneurship and Innovation.

Competency- Emerging technologies: Examine the role of emerging technologies on the healthcare delivery system and consumer behavior.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where **80-100 is a Senior high-level Health care Manager.**

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent
61/80 Proficient 81/100 Expert)

0 10 20 30 40 50 60 70 80 90 100



End of Block: Default Question Block

Appendix 2. Self-Reflective Assessment Results Spring 2020

SELF-REFLECTIVE ASSESSMENT RESULTS (N=128)

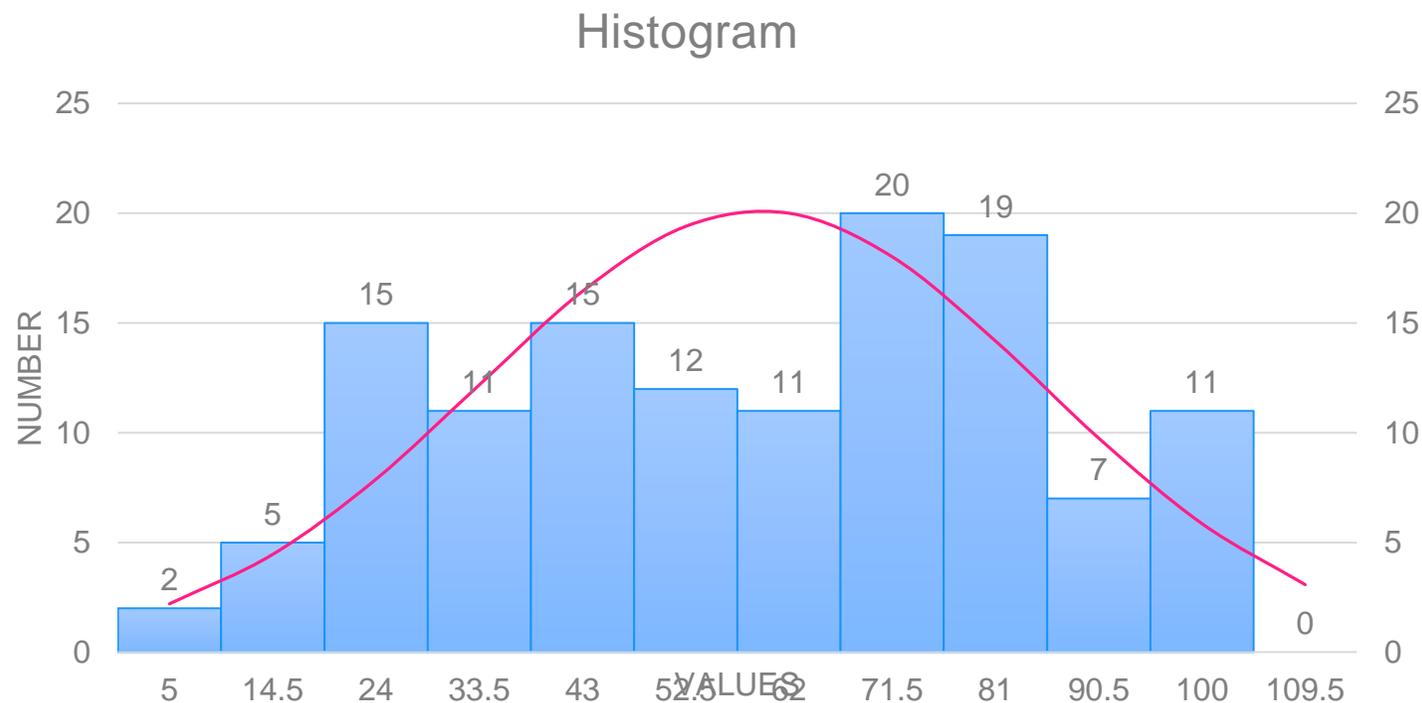
Descriptive Statistics

8.3.2020

Domain 1- The Healthcare Environment

1.1 Healthcare Structure: Demonstrate knowledge of different types of health services organizations, insurance providers, and healthcare providers

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)c



Mean	54.64
Mode	70.00
Standard Deviation	25.85

Minimum	5.00
Median	60.00
Maximum	100.00
Range	95.00

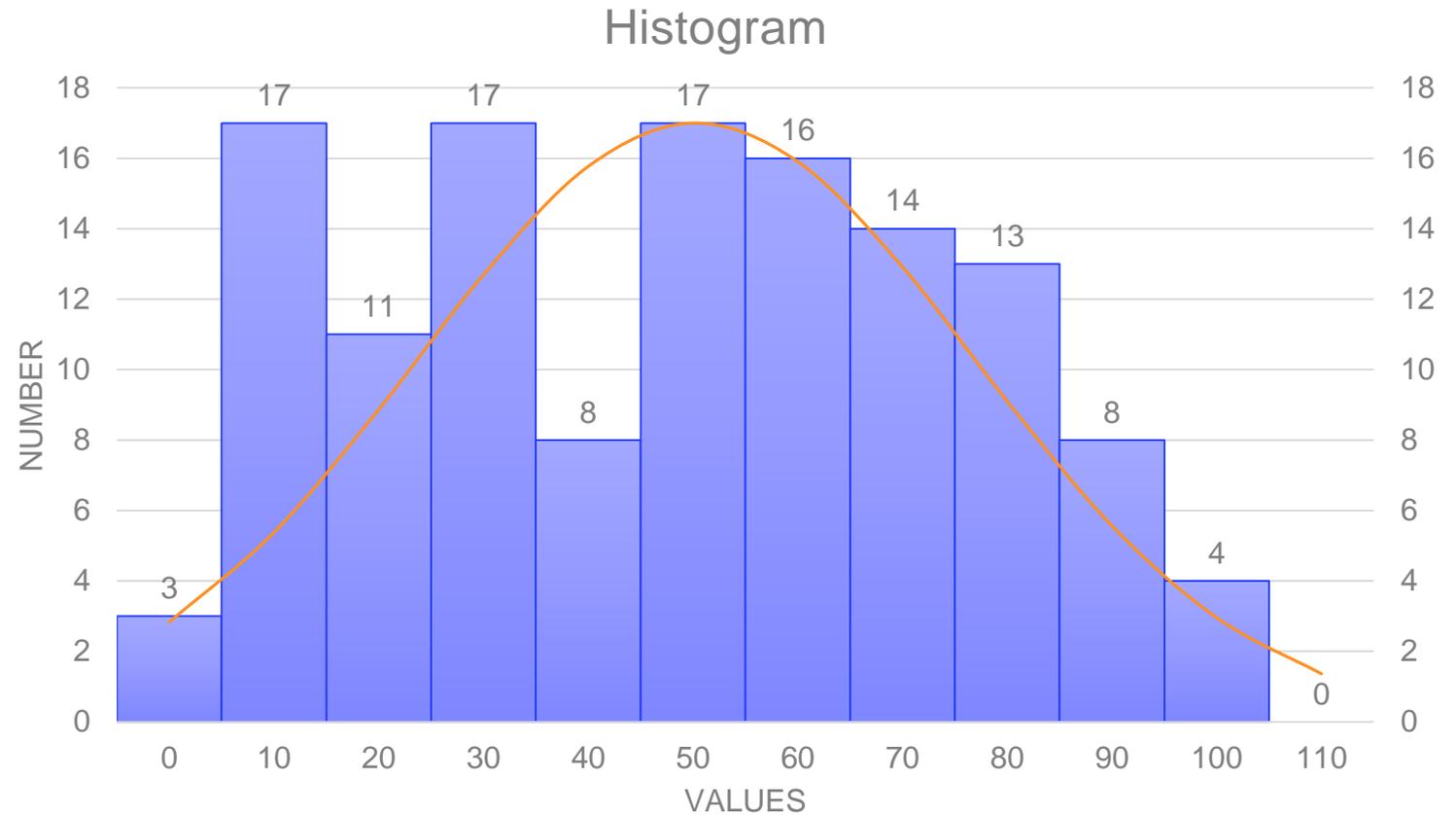
Domain 1 - The Healthcare Environment

1.2 Health Policy, Law, and Ethics: Describe the health policy making process and ethical issues at the local, state, regional, and national level.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)

Mean	45.31
Mode	10.00
Standard Deviation	26.56

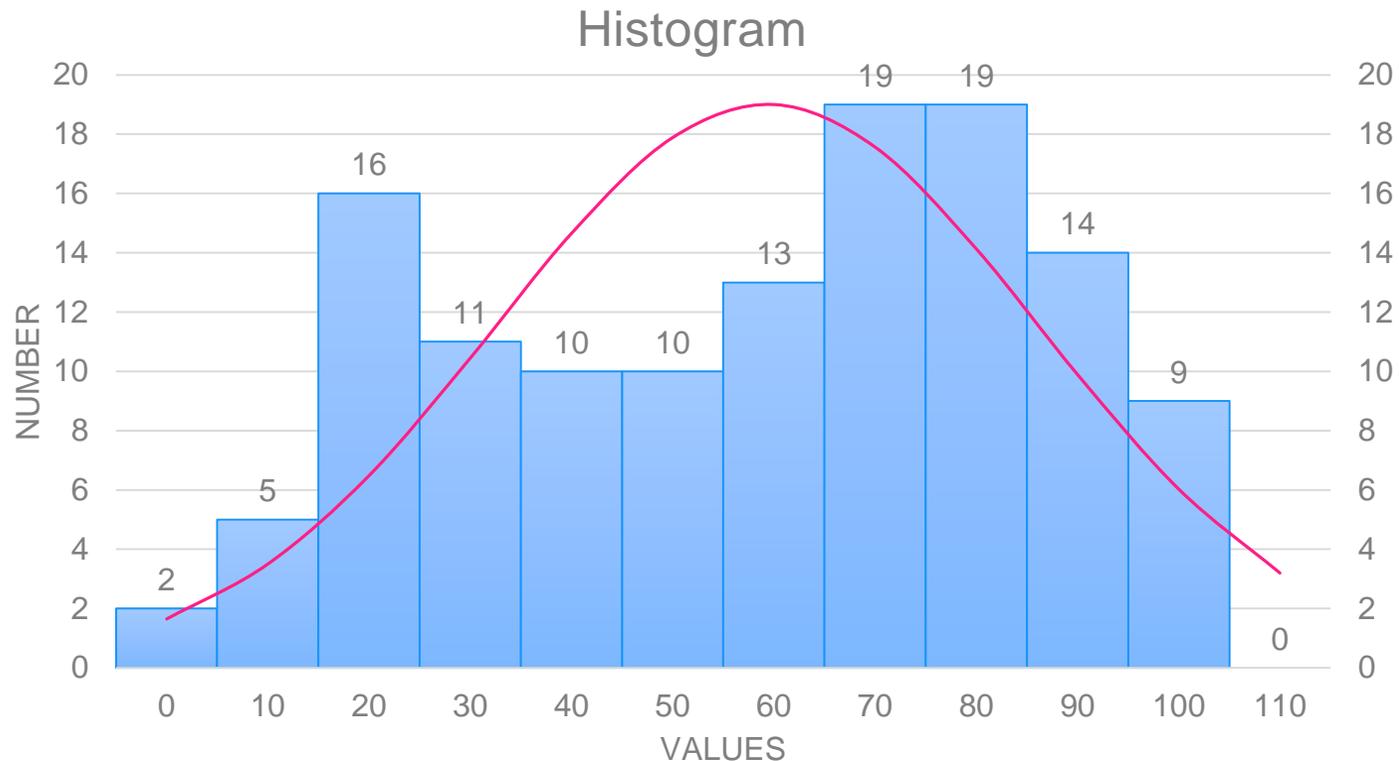
Minimum	0.00
Median	50.00
Maximum	100.00
Range	100.00



Domain 1 - The Healthcare Environment

1.3 Healthcare Quality: Determine the essential domains of healthcare quality assurance (Safe, Effective, Patient-centered, Timely, Efficient, Equitable)

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)



Mean	54.34
Mode	20.00
Standard Deviation	26.82

Minimum	0.00
Median	59.50
Maximum	100.00
Range	100.00

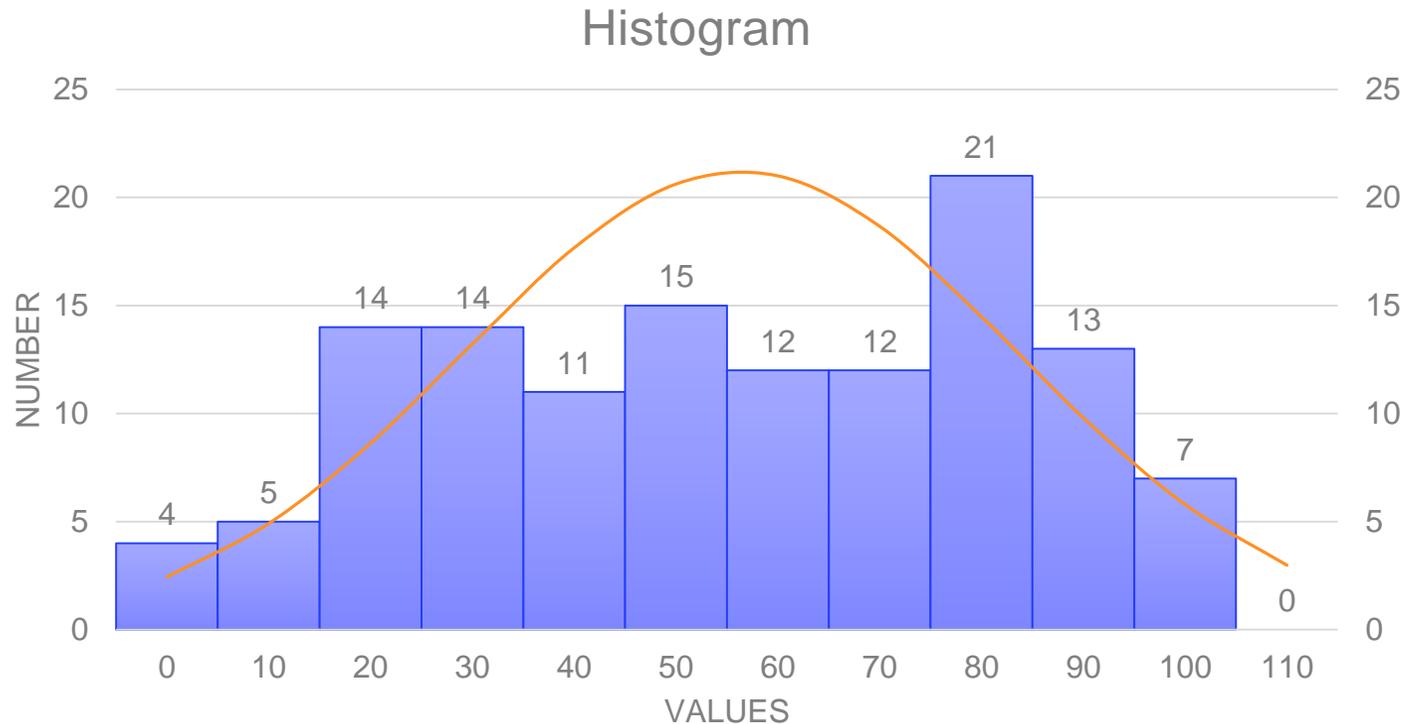
Domain 1- The Healthcare Environment

1.4 Disparity in Clinical and Population-level health outcomes: Analyze the sources of existing disparity in health outcomes, both at an individual and community level, and tools to improve population health

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)

Mean	51.34
Mode	80.00
Standard Deviation	27.12

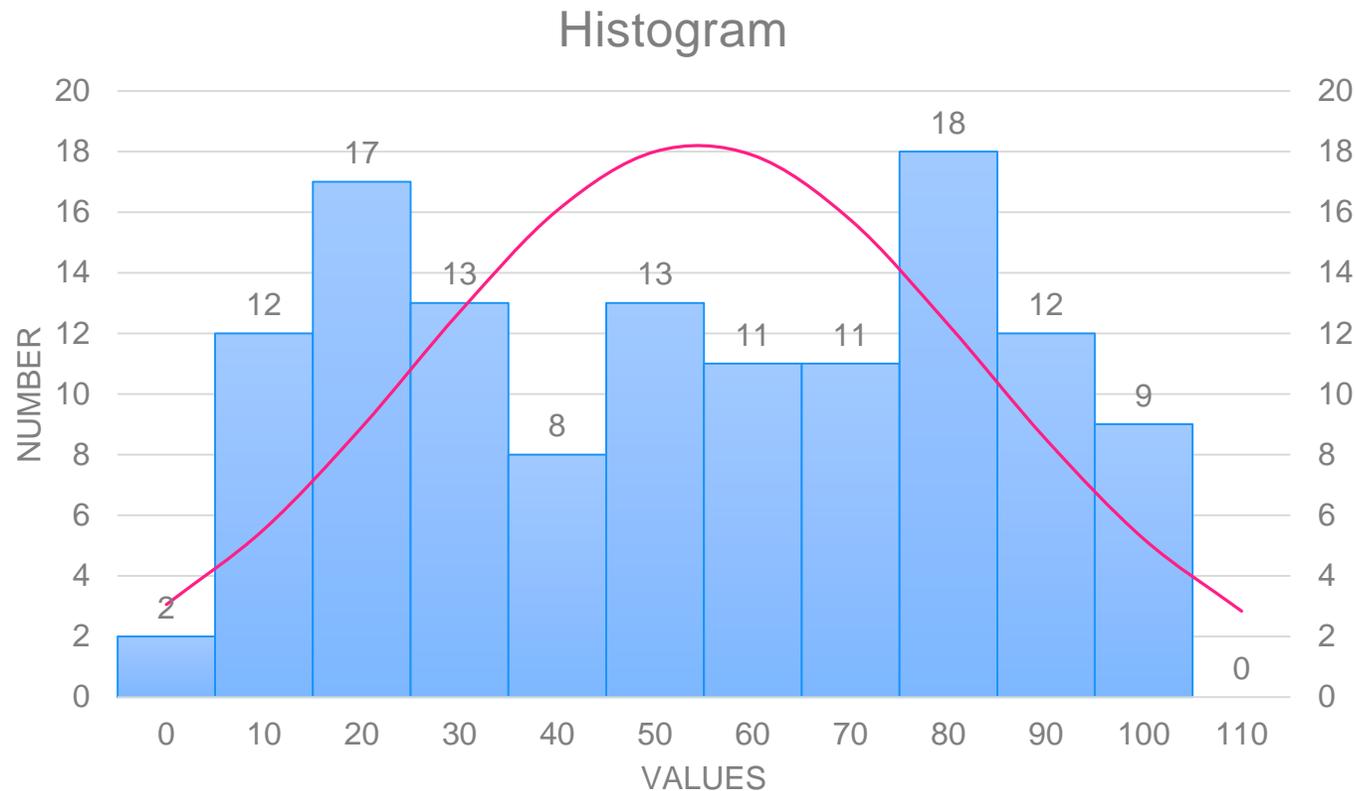
Minimum	0.00
Median	51.00
Maximum	100.00
Range	100.00



Domain 2- Leadership and Professional Development.

2.1 Leadership theories, styles, and practices: Demonstrate understanding of different leadership theories, styles, and practices, and managing change and expectations in a wide variety of health services organizations

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)



Mean	49.444
Mode	20.000
Standard Deviation	28.788

Minimum	0.000
Median	48.500
Maximum	100.000
Range	100.000

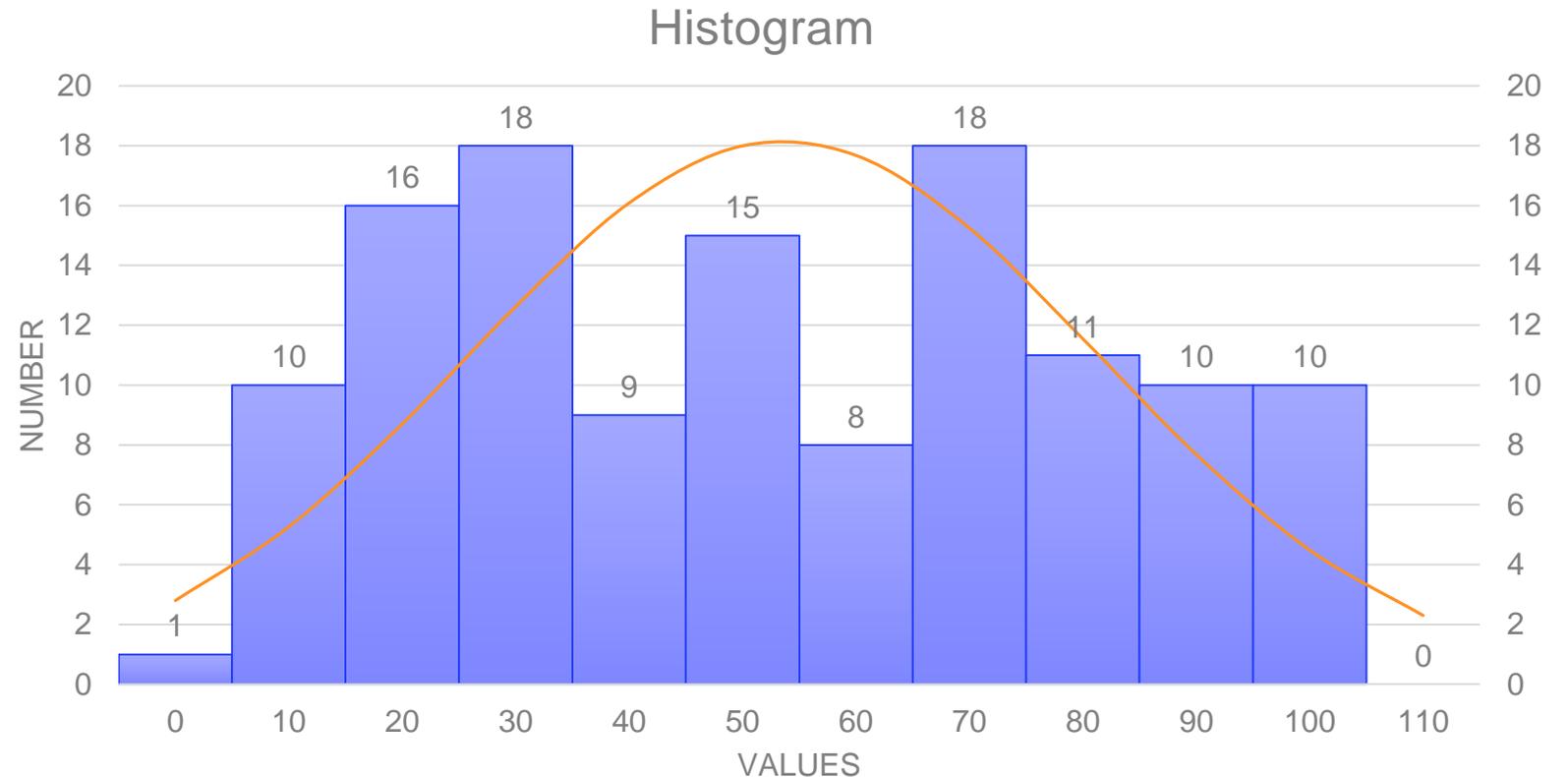
Domain 2- Leadership and Professional Development

2.2 Strategic Planning: Understand the importance and the process of strategic planning in a healthcare organization to meet the organization's mission and vision and efficient allocation of resources in different situations

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager. (1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)c

Mean	48.67
Mode	70.00
Standard Deviation	27.73

Minimum	0.00
Median	46.00
Maximum	100.00
Range	100.00

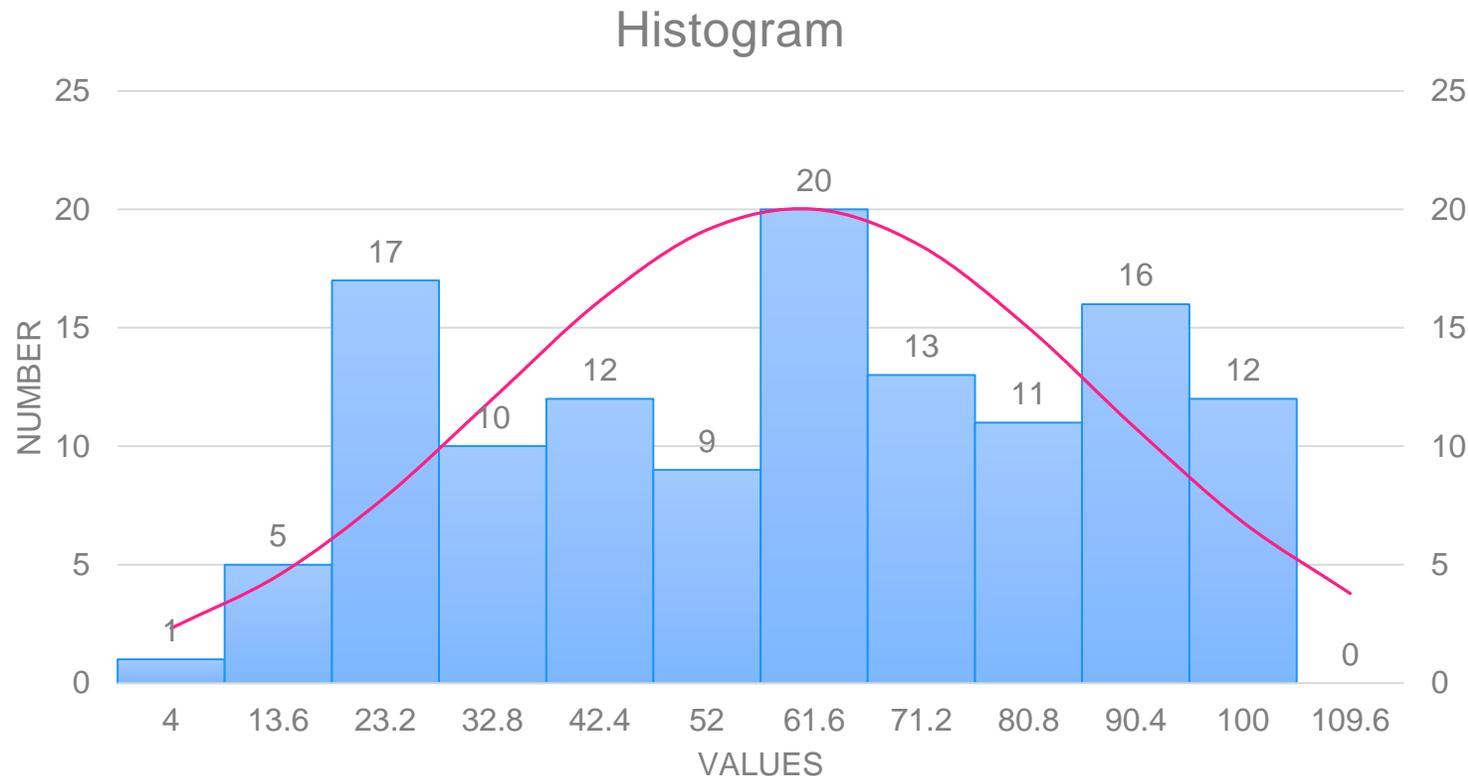


Domain 2- Leadership and Professional Development

2.3 Ethical leadership and commitment to lifelong learning: Demonstrate ethical values, responsibilities, and pursuit of lifelong learning

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.

(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)c



Mean	55.397
Mode	60.000
Standard Deviation	27.072

Minimum	4.000
Median	60.000
Maximum	100.000
Range	96.000

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a Senior high-level Health care Manager. (1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)

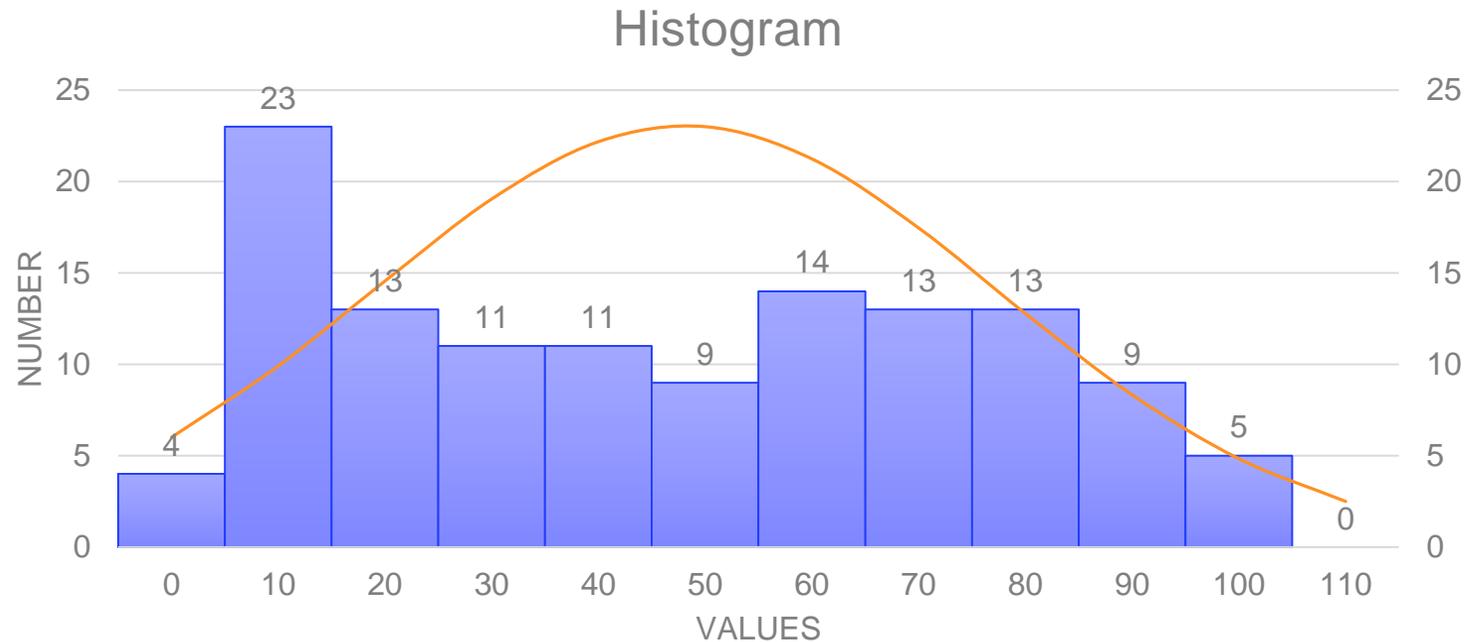
Domain 3 - Management and Business

3.1 Quality improvement and measurement: Determine the importance of quality improvement tools like LEAN, Six Sigma to improve clinical and operational outcomes

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)

Mean	43.14
Mode	20.00
Standard Deviation	29.33

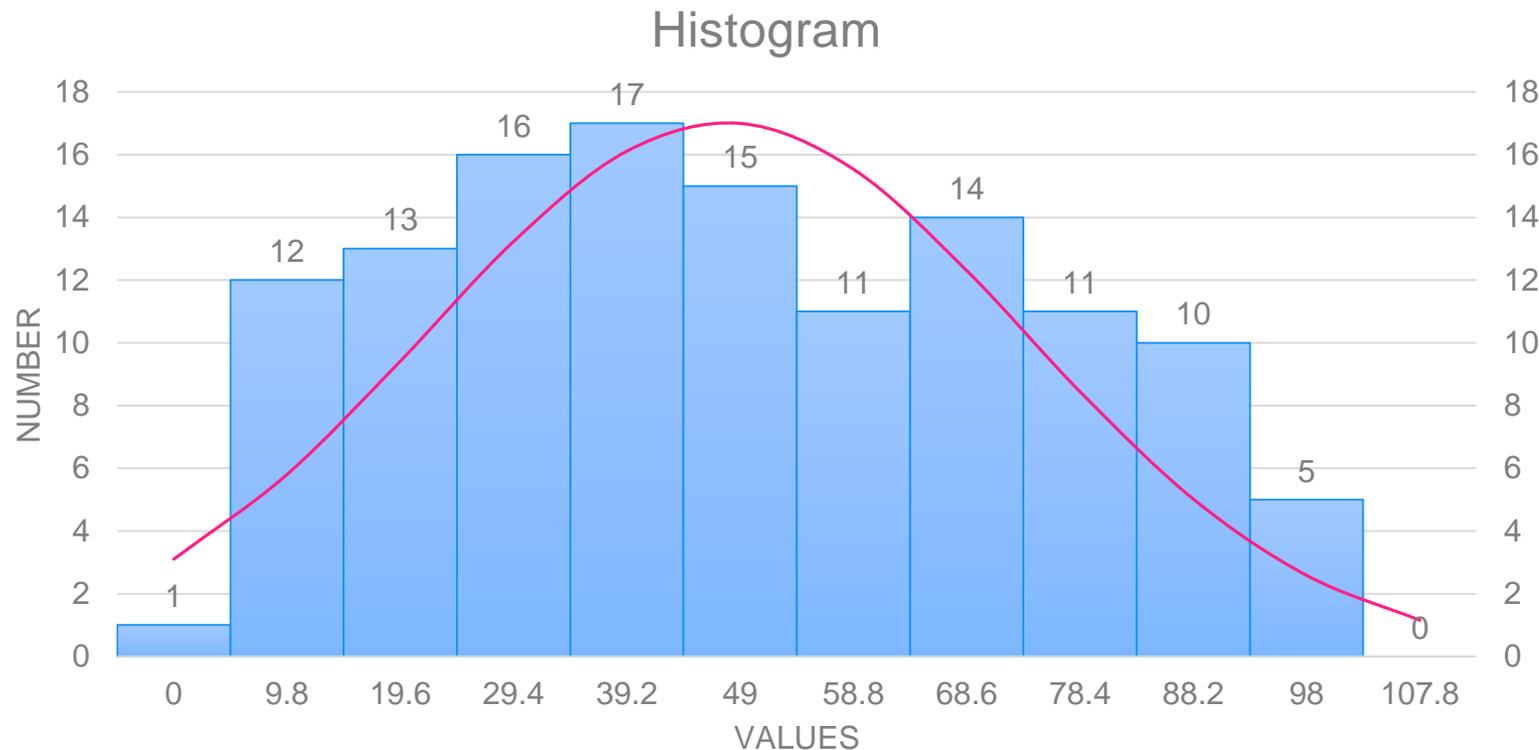
Minimum	0.00
Median	41.00
Maximum	100.00
Range	100.00



Domain 3 - Management and Business

3.2 Financial Analysis and Budgets: Understand and apply the basics of financial management, budgeting, and interpreting different financial matrix to measure organizational performance

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)c



Mean	42.86
Mode	40.00
Standard Deviation	25.88
Minimum	0.00
1st Quartile	20.00
Median	40.00
3rd Quartile	65.00
Maximum	98.00
Range	98.00

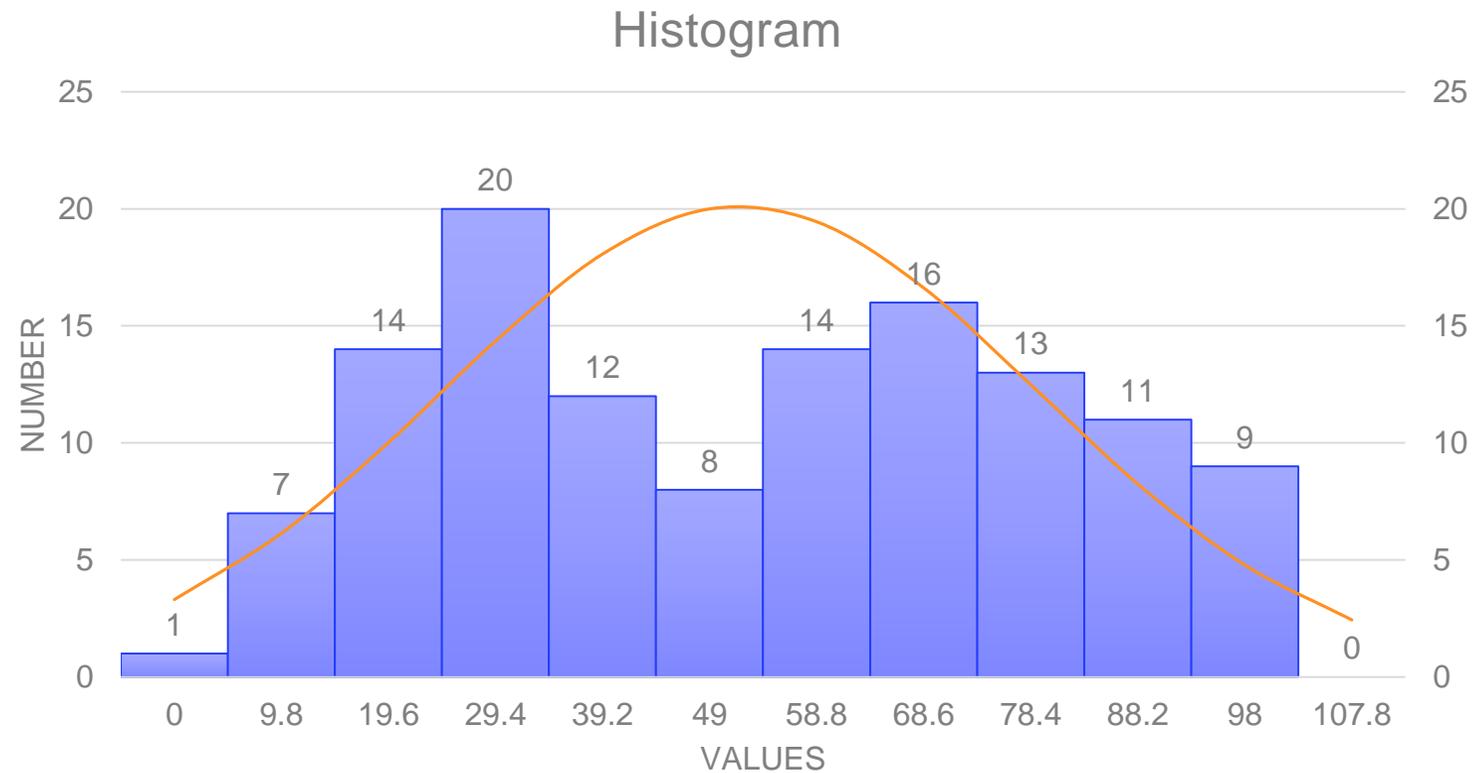
Domain 3 - Management and Business

3.3 Operational Management: Analyze different approaches for healthcare delivery and organization of services

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)

Mean	46.90
Mode	20.000
Standard Deviation	27.26

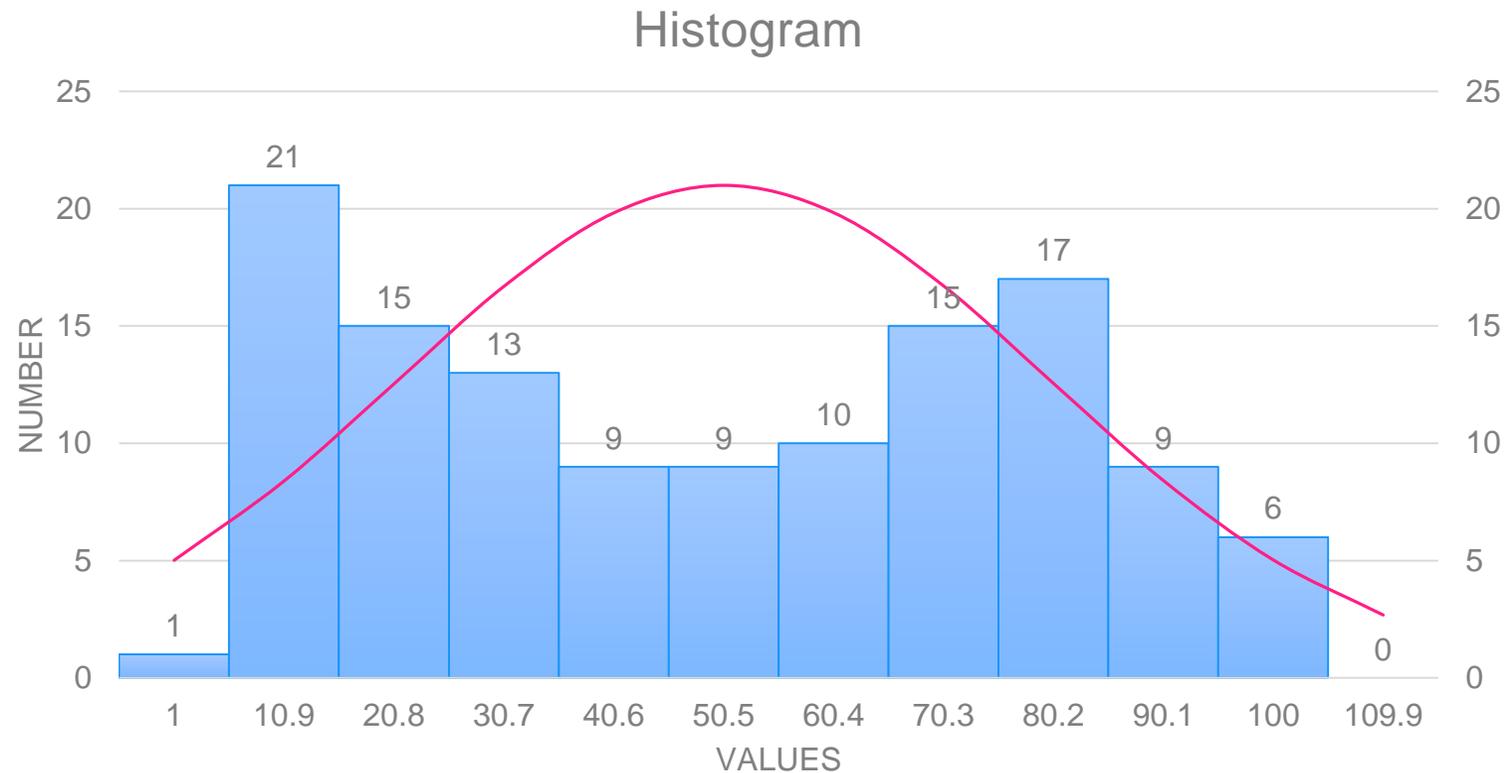
Minimum	0.00
Median	50.00
Maximum	98.00
Range	98.00



Domain 3- Management and Business

3.4 Human Resource Management: Examine various principles of human resource management and regulatory requirements in healthcare

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)



Mean	45.58
Mode	20.00
Standard Deviation	29.26

Minimum	1.00
Median	49.00
Maximum	100.00
Range	99.00

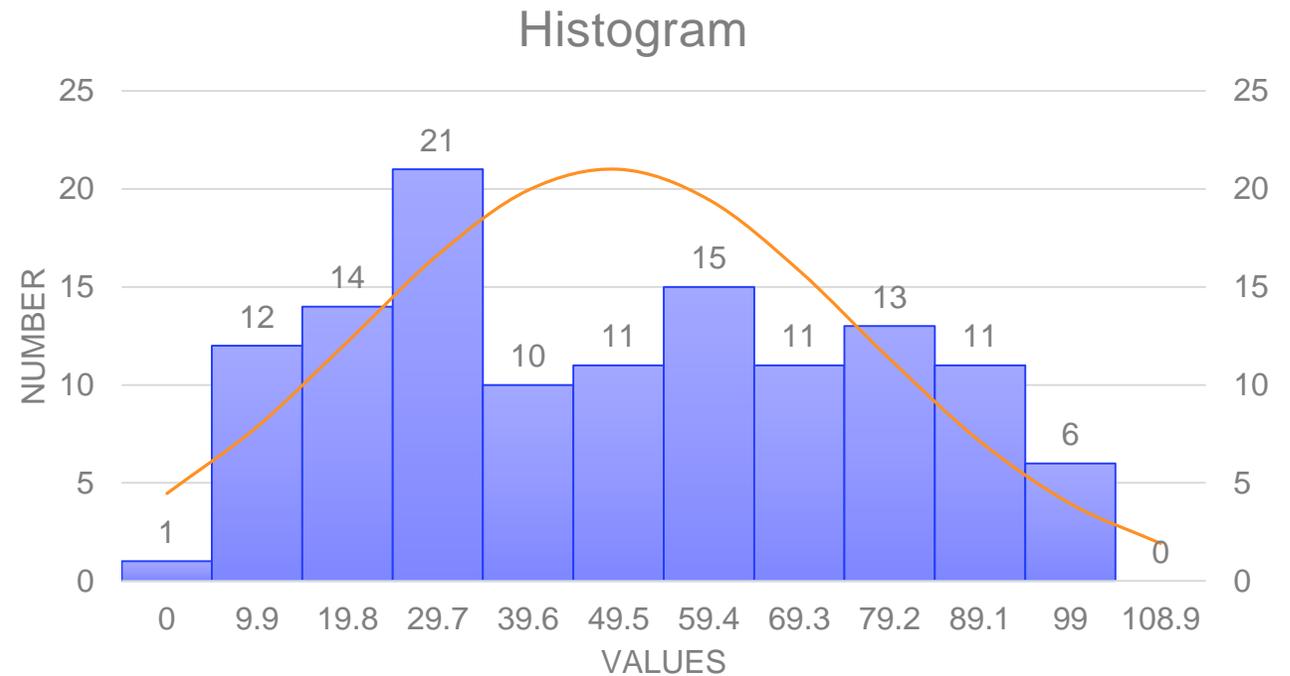
Domain 3 - Management and Business

3.5 Health Information Systems: Demonstrate the role of health information systems for administrative purpose and emerging issues like cyber security and data privacy and security in healthcare

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)

Mean	43.59
Mode	20.00
Standard Deviation	27.58

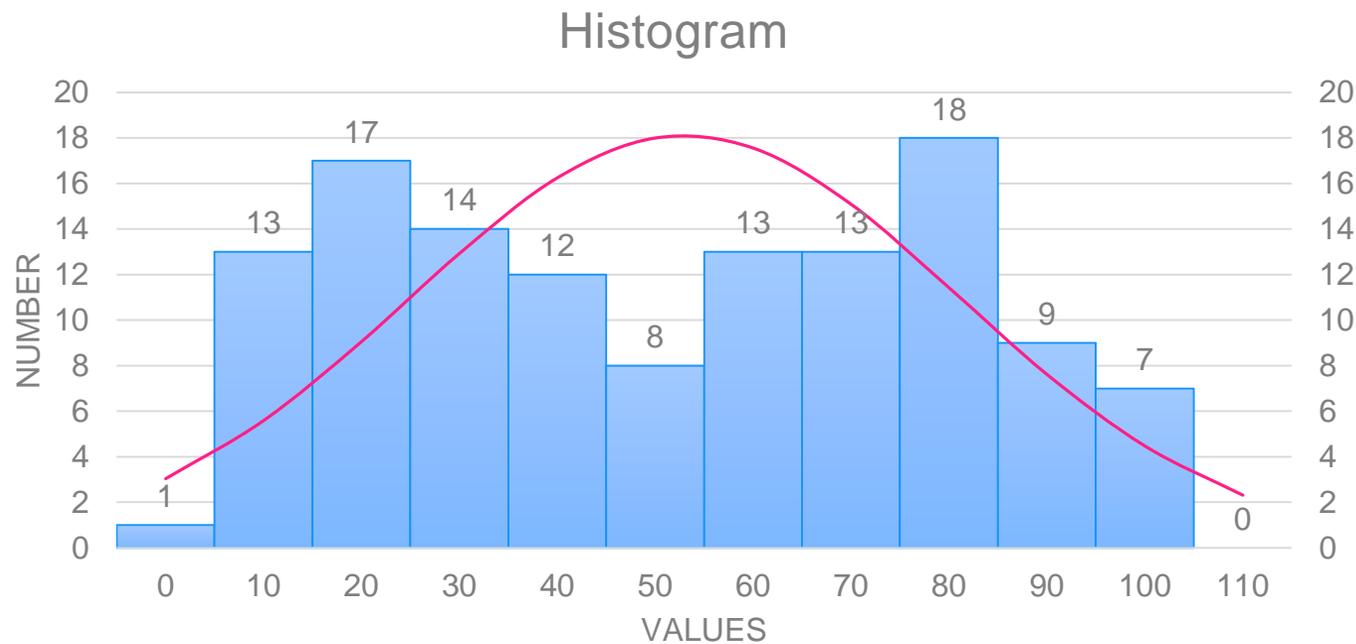
Minimum	0.00
Median	40.00
Maximum	99.00
Range	99.00



Domain 3- Management and Business

3.6 Ethics and Compliance: Assess ethics and regulatory compliance issues in healthcare.

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)



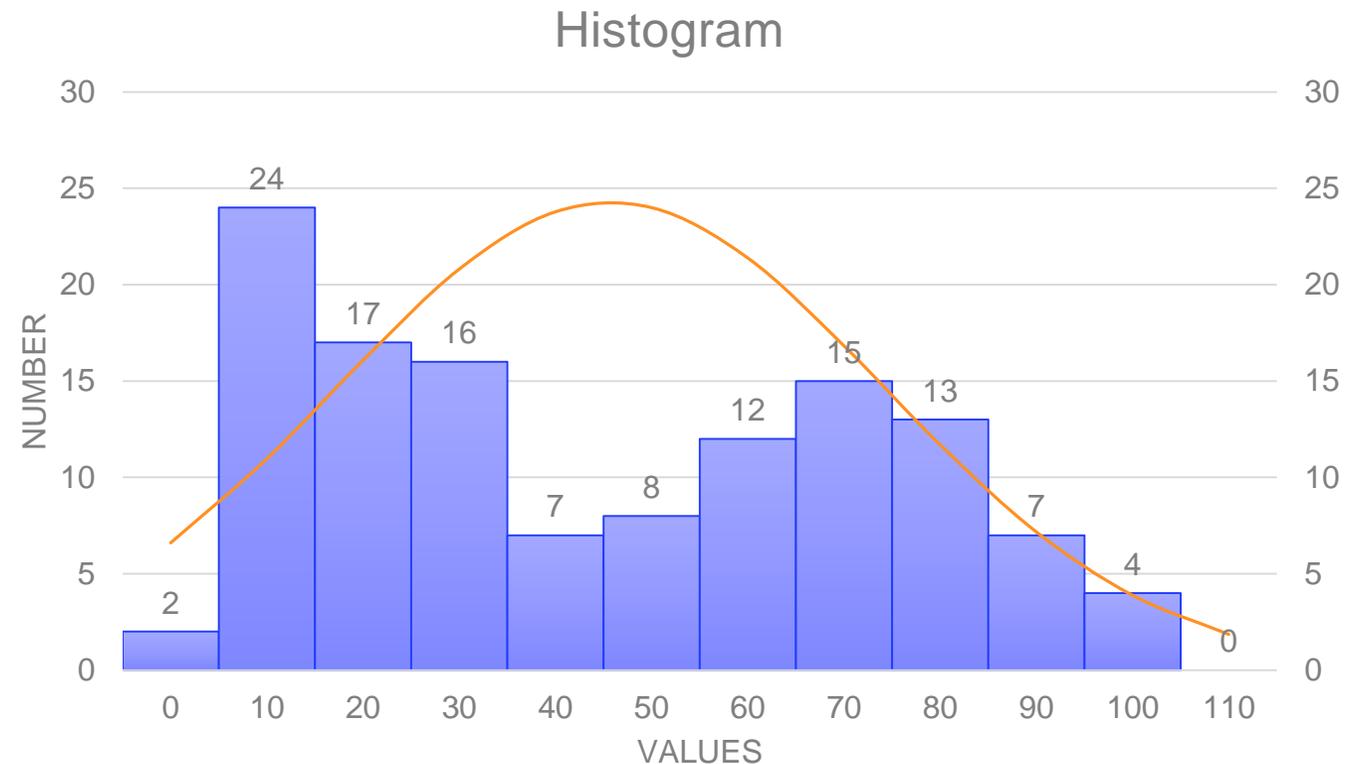
Mean	48.05
Mode	80.20
Standard Deviation	28.09
Minimum	0.00
Median	50.00
Maximum	100.00
Range	100.00

Domain 3 - Management and Business

3.7 Data Analytics: Apply different statistical analysis techniques and the use of data visualization software to healthcare data for benchmarking and business intelligence

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)

Mean	40.73
Mode	10.00
Standard Deviation	28.35
Minimum	0.00
Median	37.00
Maximum	100.00
Range	100.00



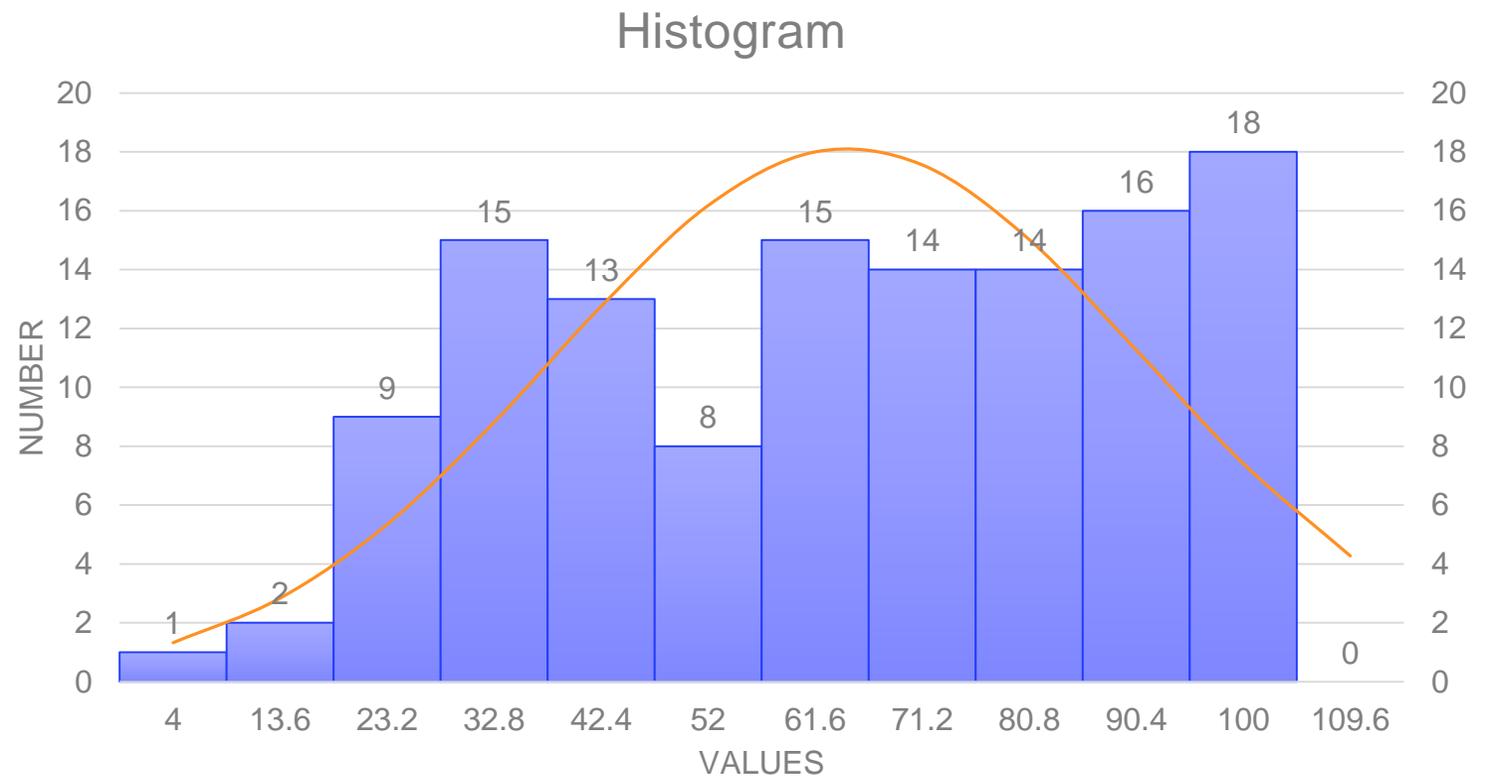
Domain 4 - Communication and Relationship Management

4.2 Oral Communication: Demonstrate effective verbal communication skills, in individual and group settings

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)

Mean	59.79
Mode	60.10
Standard Deviation	26.48

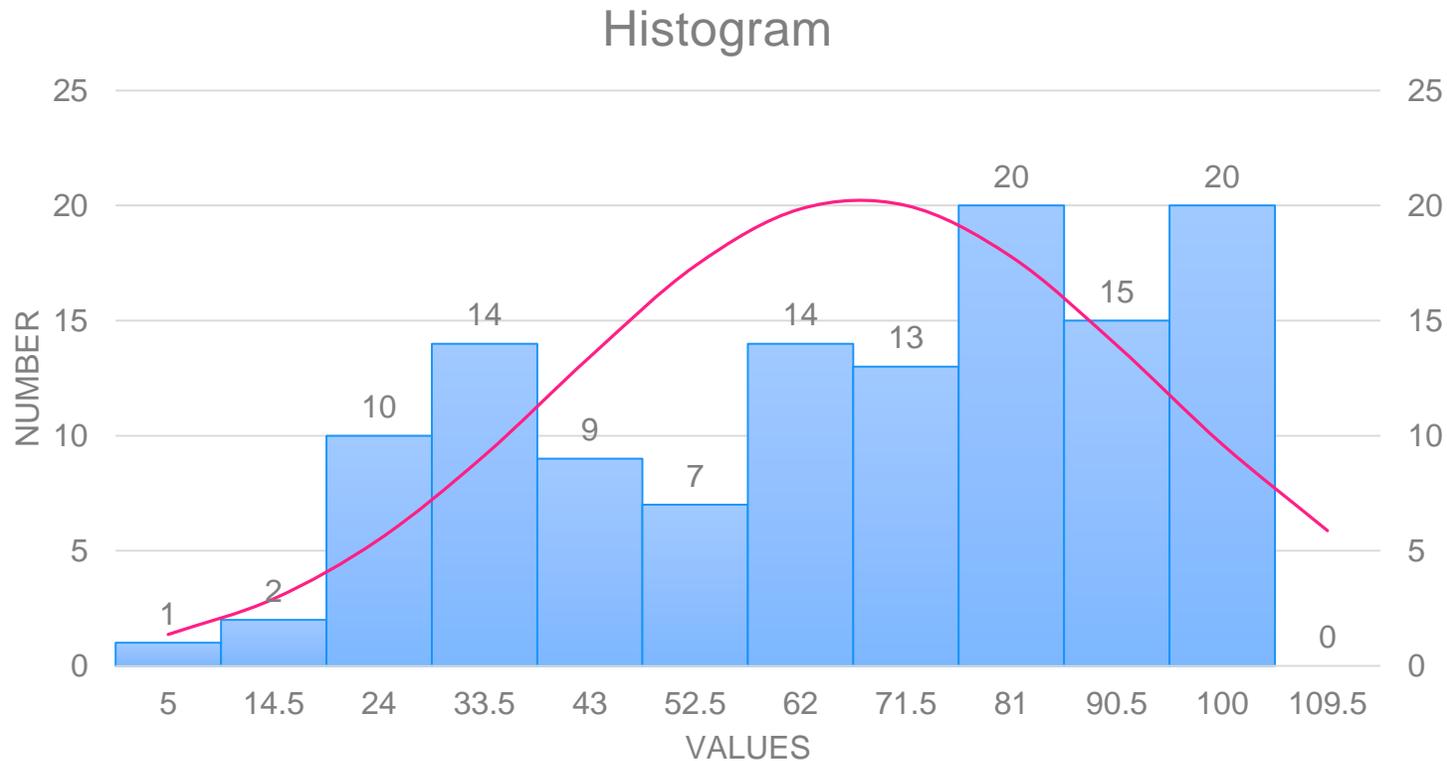
Minimum	4.00
Median	61.00
Maximum	100.00
Range	96.00



Domain 4 - Communication and Relationship Management

4.3 Team Dynamics: Explain the importance of teamwork in a healthcare setting and developing competencies to work effectively in different roles within a team

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)



Mean	62.57
Mode	100.00
Standard Deviation	26.80

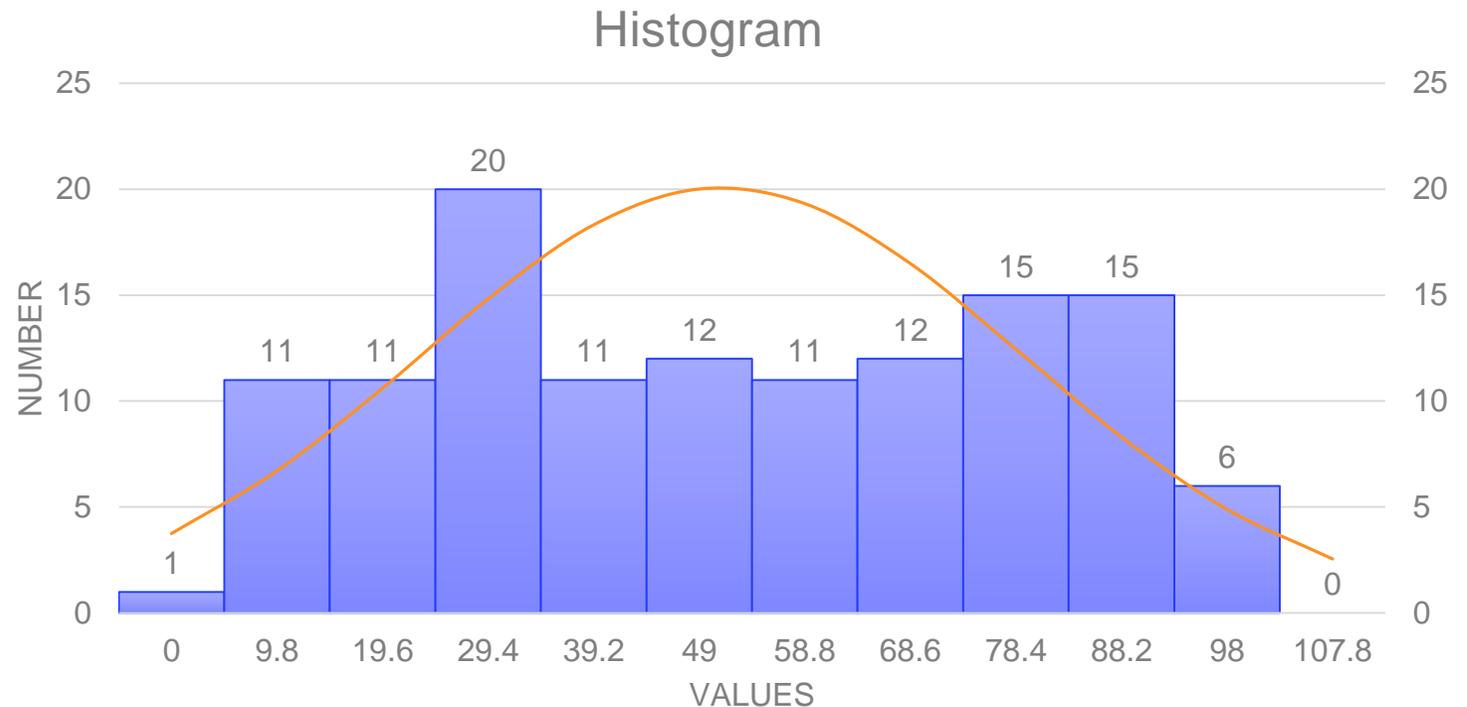
Minimum	5.00
Median	70.00
Maximum	100.00
Range	95.00

Domain 5 - Entrepreneurship and Innovation

5.1 Entrepreneurship and Innovation: Understand the concept and examples of disruptive technologies and applying to the healthcare industry to promote innovation

Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)

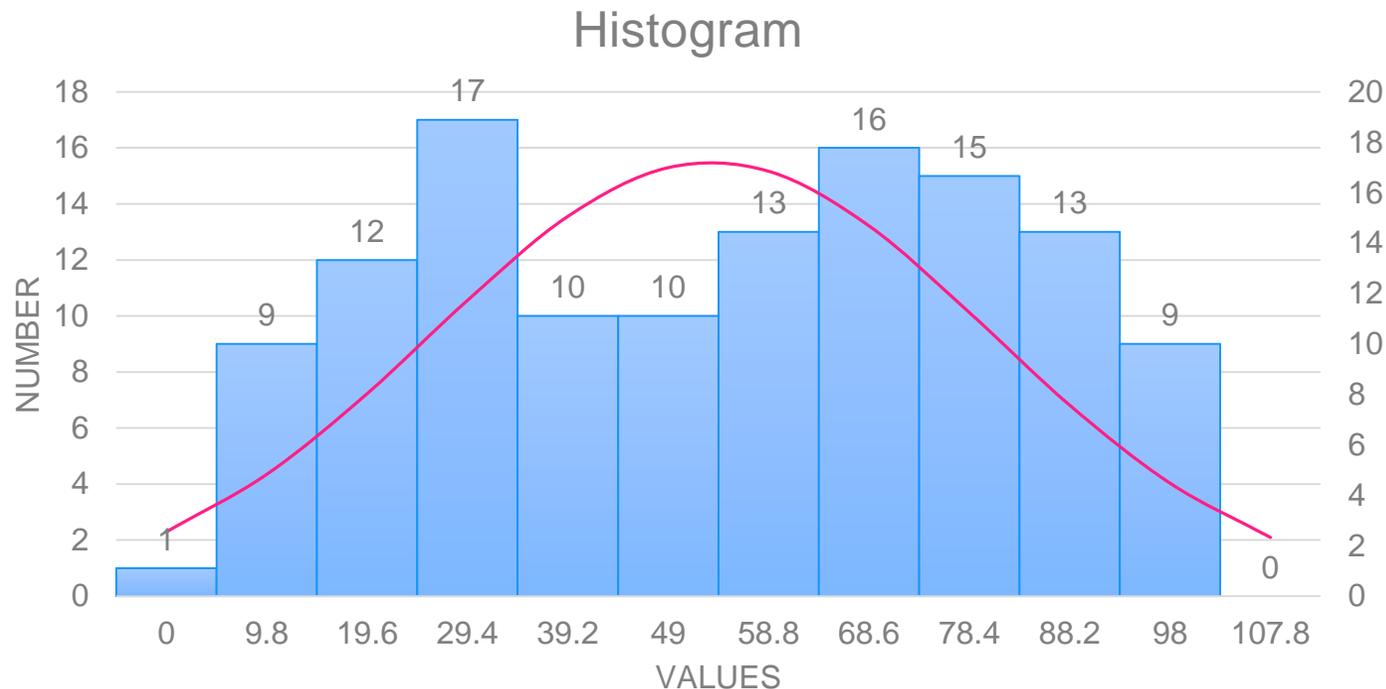
Mean	46.216
Mode	75, 20
Standard Deviation	27.911
Minimum	0.00
Median	45.00
Maximum	98.00
Range	98.00



Domain 5 - Entrepreneurship and Innovation

5.2 Emerging technologies: Examine the role of emerging technologies on the healthcare delivery system and consumer behavior.

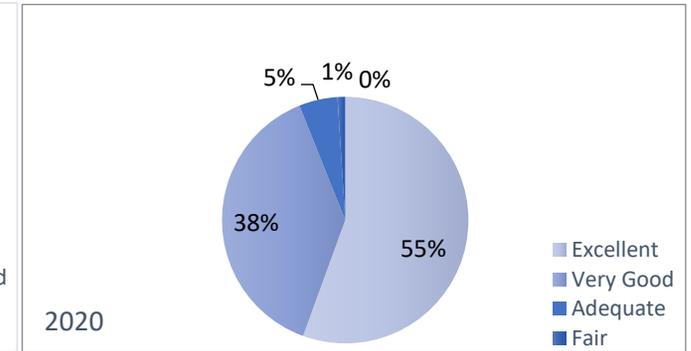
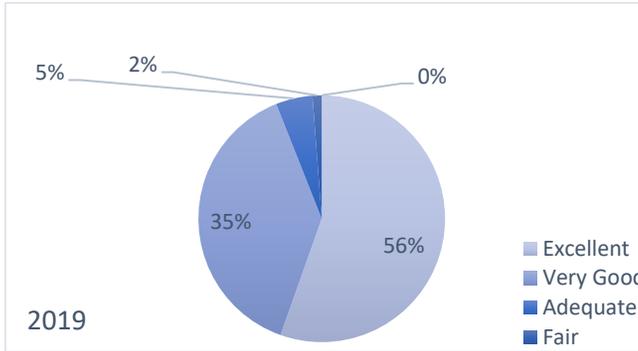
Evaluate where you believe you might rate yourself now on a scale from 1-100, where 80-100 is a senior high-level healthcare manager.
(1-20 – Novice 21/40 – Advanced Beginner 41/60 – Competent 61/80 Proficient 81/100 Expert)



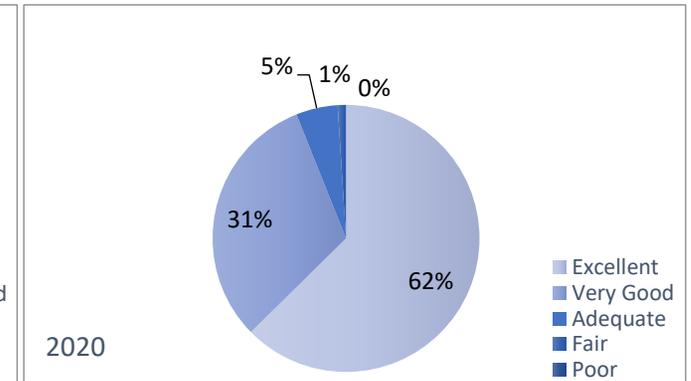
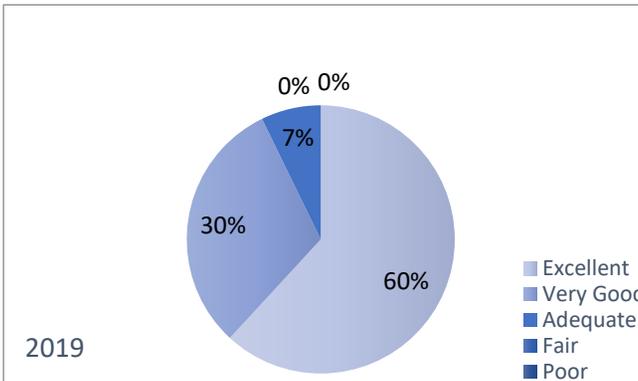
Mean	48.35
Mode	82.00
Standard Deviation	27.27
Minimum	0.00
Median	50.00
Maximum	98.00
Range	98.00

Appendix 3. Student Exit Survey Results - Program Evaluation

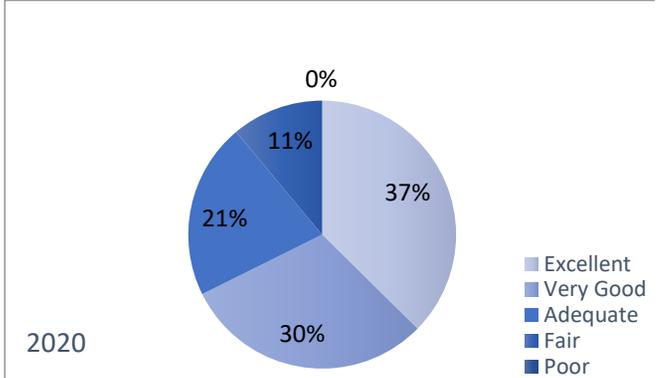
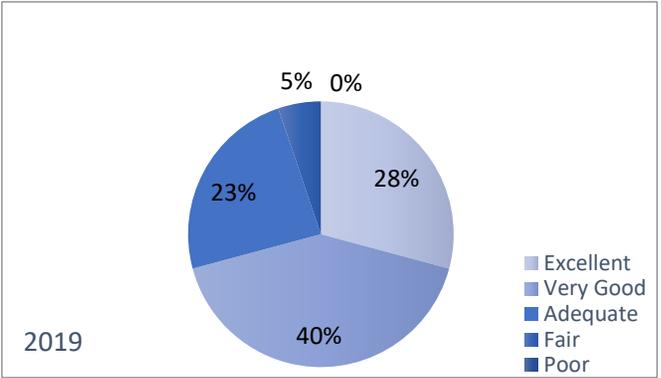
1. Program Eval - Academic standards in my program	2019	2020
Excellent	24	46
Very Good	15	32
Adequate	2	4
Fair	1	1
Poor	0	0
Blank	1	1
Total	43	84
Excellent	56%	55%
Very Good	35%	38%
Adequate	5%	5%
Fair	2%	1%
Poor	0%	0%
Total %	100%	100%



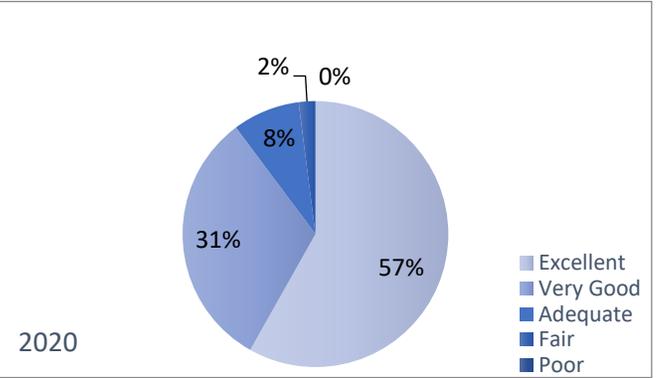
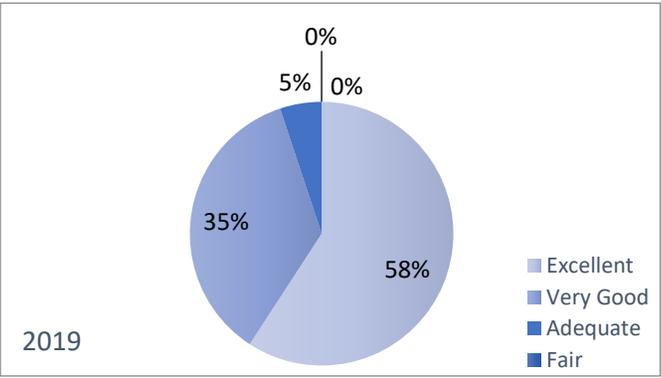
2. Program Eval - Program keeps pace with recent developments in my field	2019	2020
Excellent	26	52
Very Good	13	26
Adequate	3	4
Fair	0	1
Poor	0	0
Blank	1	1
Total	43	84
Excellent	60%	62%
Very Good	30%	31%
Adequate	7%	5%
Fair	0%	1%
Poor	0%	0%
Blank %	2%	1%
Total %	100%	100%



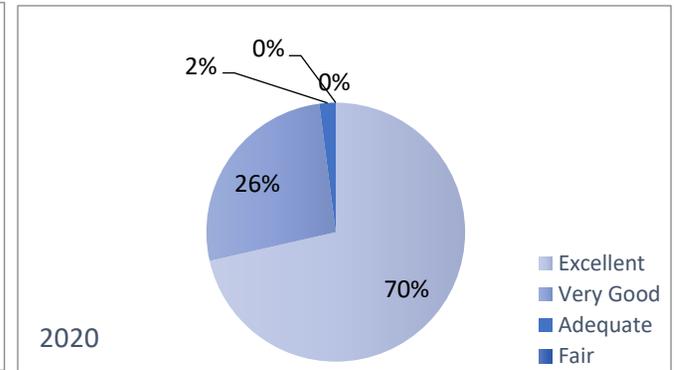
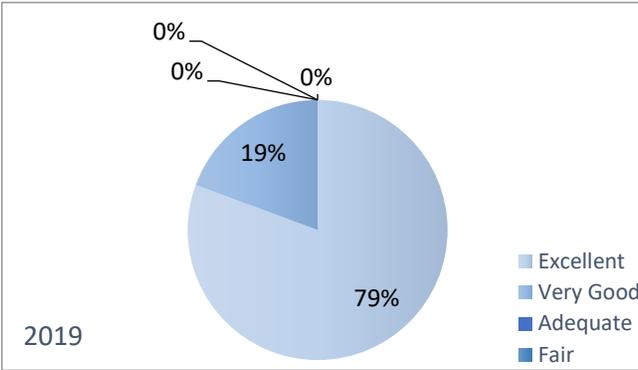
3. Program Eval - Research or professional training opportunities available for students	2019	2020
Excellent	12	31
Very Good	17	25
Adequate	10	18
Fair	2	9
Poor	0	0
Blank	2	1
Total	43	84
Excellent	28%	37%
Very Good	40%	30%
Adequate	23%	21%
Fair	5%	11%
Poor	0%	0%
Blank %	5%	1%
Total %	100%	100%



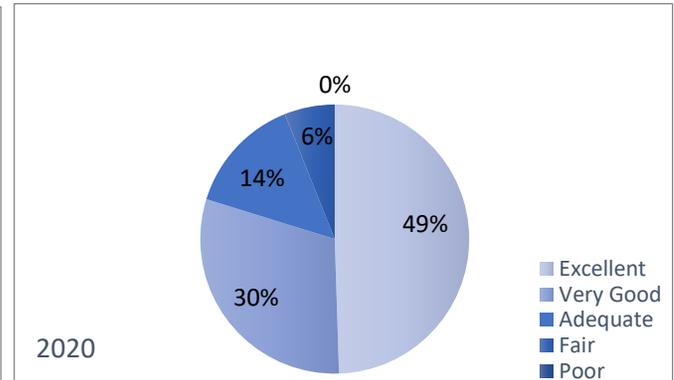
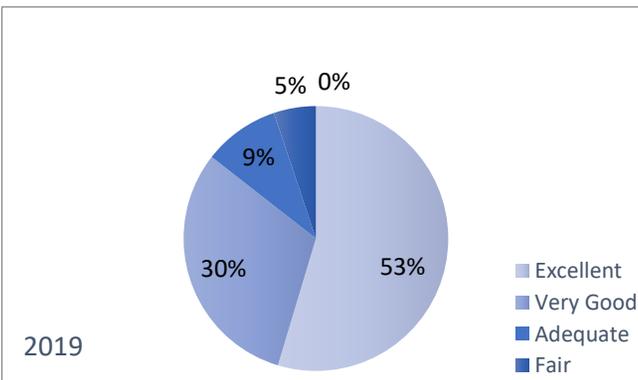
4. Program Eval - Adequate space, facilities, and equipment	2019	2020
Excellent	25	48
Very Good	15	26
Adequate	2	7
Fair	0	2
Poor	0	0
Blank	1	1
Total	43	84
Excellent	58%	57%
Very Good	35%	31%
Adequate	5%	8%
Fair	0%	2%
Poor	0%	0%
Blank %	2%	1%
Total %	100%	100%



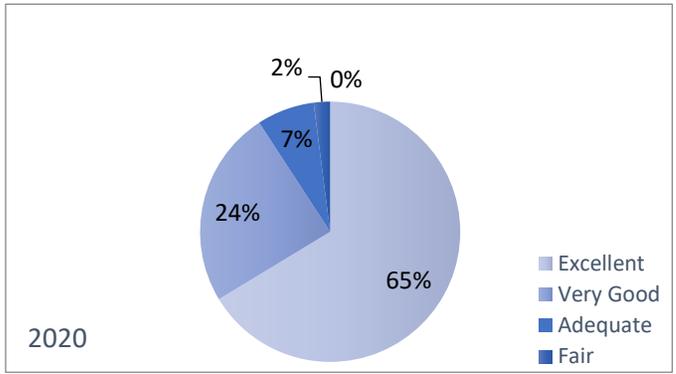
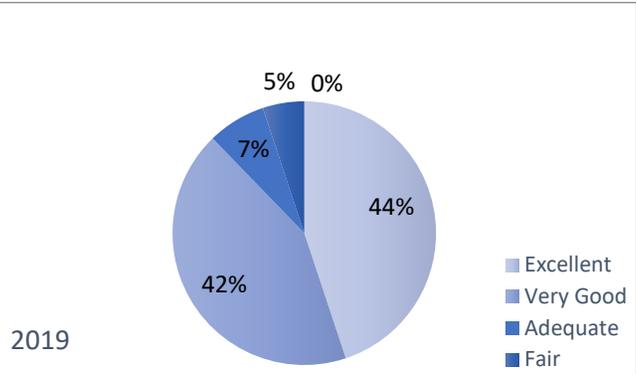
5. Program Eval - Intellectual caliber of faculty in my program	2019	2020
Excellent	34	59
Very Good	8	22
Adequate	0	2
Fair	0	0
Poor	0	0
Blank	1	1
Total	43	84
Excellent	79%	70%
Very Good	19%	26%
Adequate	0%	2%
Fair	0%	0%
Poor	0%	0%
Blank %	2%	1%
Total %	100%	100%



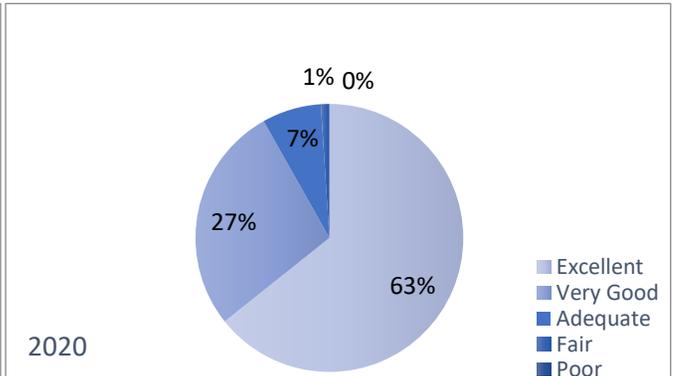
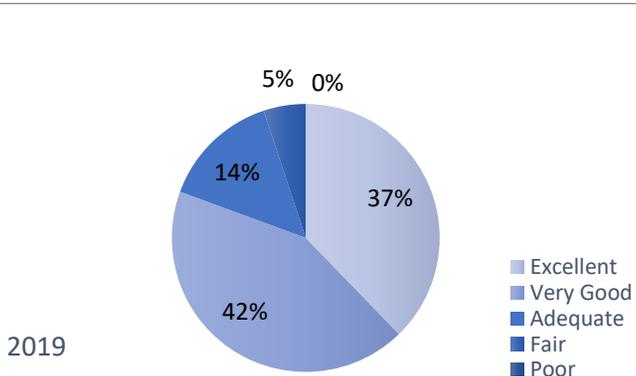
6. Program Eval - Providing me with appropriate academic advising	2019	2020
Excellent	23	41
Very Good	13	25
Adequate	4	12
Fair	2	5
Poor	0	0
Blank	1	1
Total	43	84
Excellent	53%	49%
Very Good	30%	30%
Adequate	9%	14%
Fair	5%	6%
Poor	0%	0%
Blank %	2%	1%
Total %	100%	100%



7. Program Eval - Quality of computer support	2019	2020
Excellent	19	55
Very Good	18	20
Adequate	3	6
Fair	2	2
Poor	0	0
Blank	1	1
Total	43	84
Excellent	44%	65%
Very Good	42%	24%
Adequate	7%	7%
Fair	5%	2%
Poor	0%	0%
Blank %	2%	1%
Total %	100%	100%

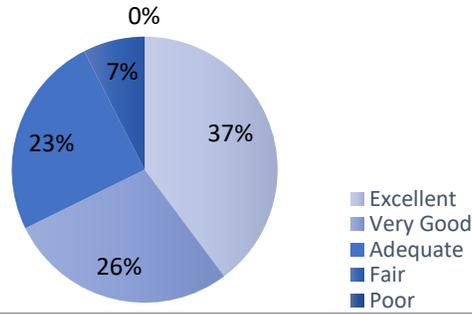


8. Program Eval - Quality of library holdings for research/study	2019	2020
Excellent	16	53
Very Good	18	23
Adequate	6	6
Fair	2	1
Poor	0	0
Blank	1	1
Total	43	84
Excellent	37%	63%
Very Good	42%	27%
Adequate	14%	7%
Fair	5%	1%
Poor	0%	0%
Blank %	2%	1%
Total %	100%	100%

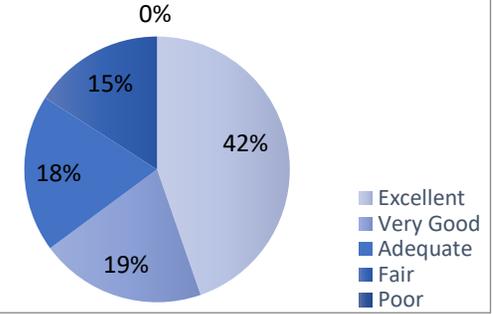


9. Program Eval - Faculty effort in helping me find appropriate employment upon graduation (if applicable)	2019	2020
Excellent	16	35
Very Good	11	16
Adequate	10	15
Fair	3	13
Poor	0	0
Blank	3	5
Total	43	84
Excellent	37%	42%
Very Good	26%	19%
Adequate	23%	18%
Fair	7%	15%
Poor	0%	0%
Blank %	7%	6%
Total %	100%	100%

2019

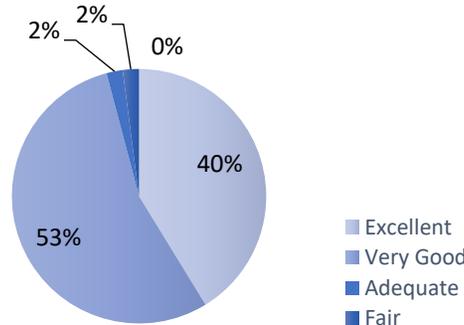


2020

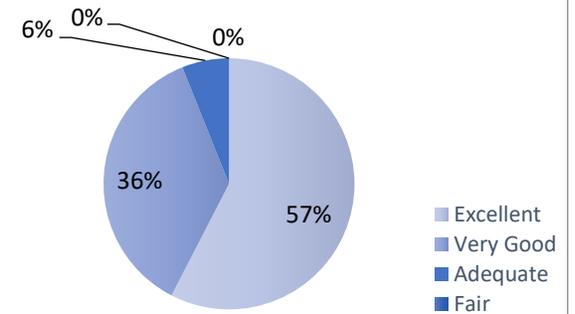


10. Program Eval - Overall, the quality of my degree program	2019	2020
Excellent	17	48
Very Good	23	30
Adequate	1	5
Fair	1	0
Poor	0	0
Blank	1	1
Total	43	84
Excellent	40%	57%
Very Good	53%	36%
Adequate	2%	6%
Fair	2%	0%
Poor	0%	0%
Blank %	2%	1%
Total %	100%	100%

2019

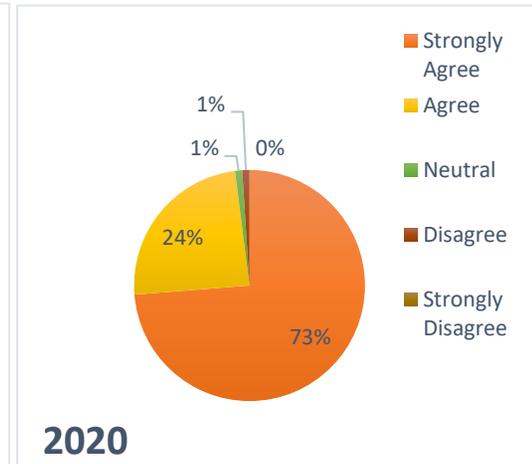
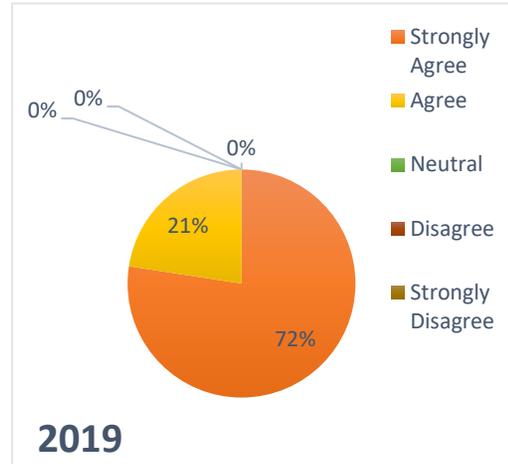


2020

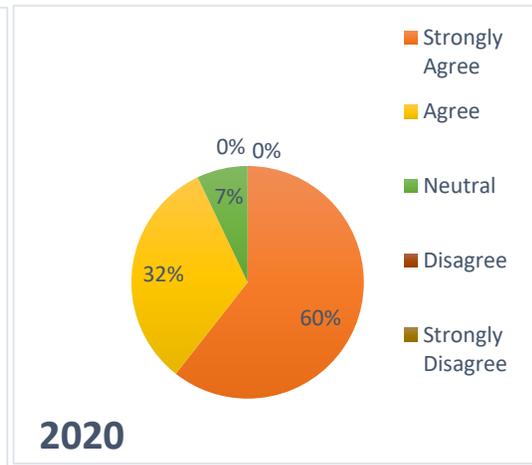
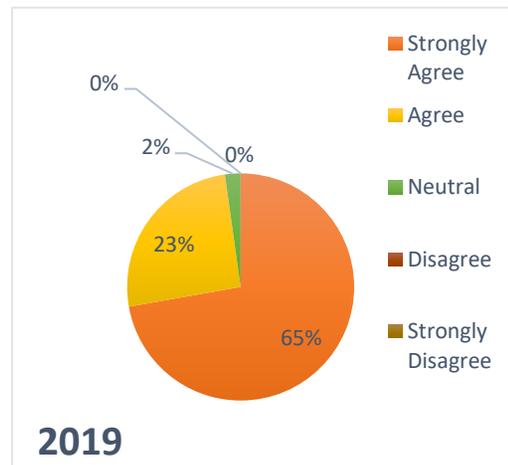


Appendix 4. Student Exit Survey Results – Faculty Mentoring

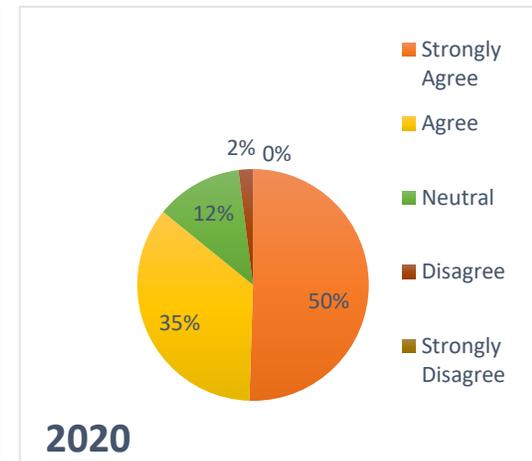
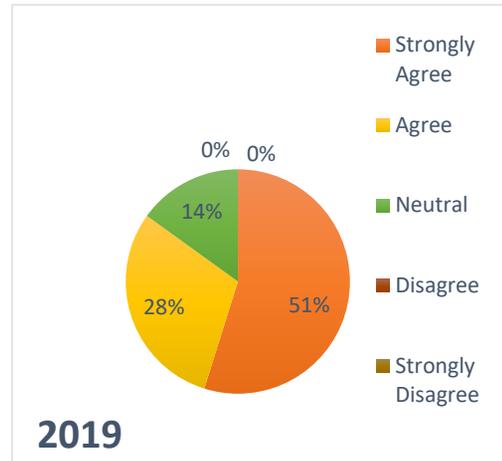
1. Mentoring Eval - Instructors served as good role models	2019	2020
Strongly Agree	31	61
Agree	9	20
Neutral	0	1
Disagree	0	1
Strongly Disagree	0	0
Blank	3	1
Total	43	84
Strongly Agree	72%	73%
Agree	21%	24%
Neutral	0%	1%
Disagree	0%	1%
Strongly Disagree	0%	0%
Blank	7%	1%
Total %	100%	100%



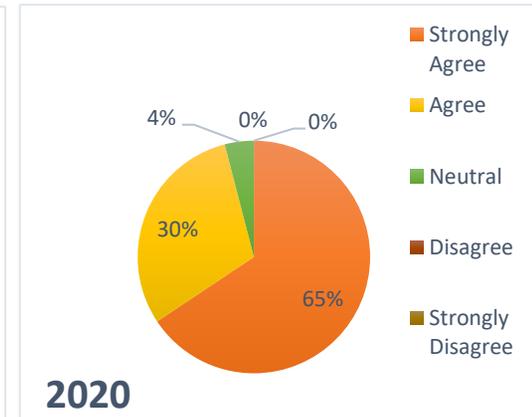
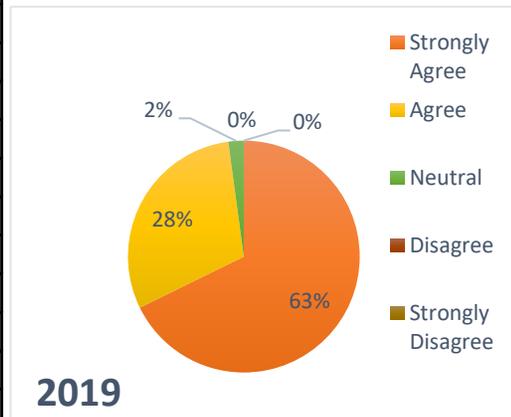
2. Mentoring Eval - Adequate opportunities to interact with faculty	2019	2020
Strongly Agree	28	50
Agree	10	27
Neutral	1	6
Disagree	0	0
Strongly Disagree	0	0
Blank	4	1
Total	43	84
Strongly Agree	65%	60%
Agree	23%	32%
Neutral	2%	7%
Disagree	0%	0%
Strongly Disagree	0%	0%
Blank %	9%	1%
Total %	100%	100%



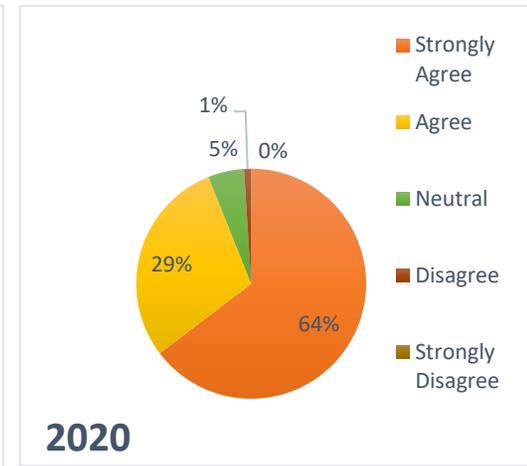
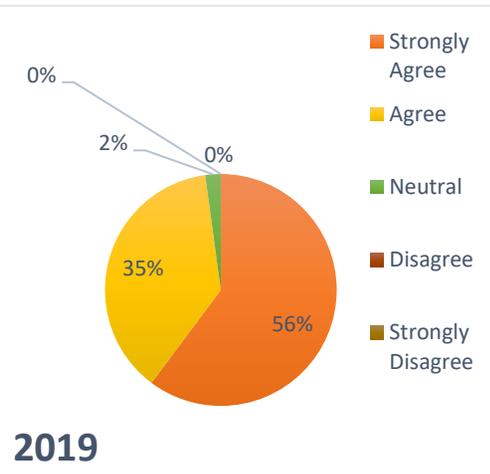
3. Mentoring Eval - Encouraged participation in professional orgs	2019	2020
Strongly Agree	22	42
Agree	12	29
Neutral	6	10
Disagree	0	2
Strongly Disagree	0	0
Blank	3	1
Total	43	84
Strongly Agree	51%	50%
Agree	28%	35%
Neutral	14%	12%
Disagree	0%	2%
Strongly Disagree	0%	0%
Blank %	7%	1%
Total %	100%	100%



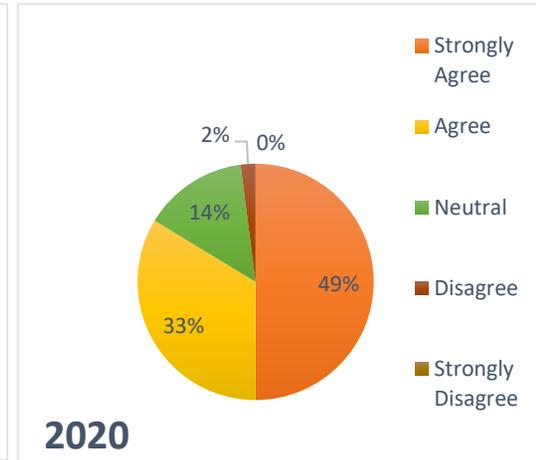
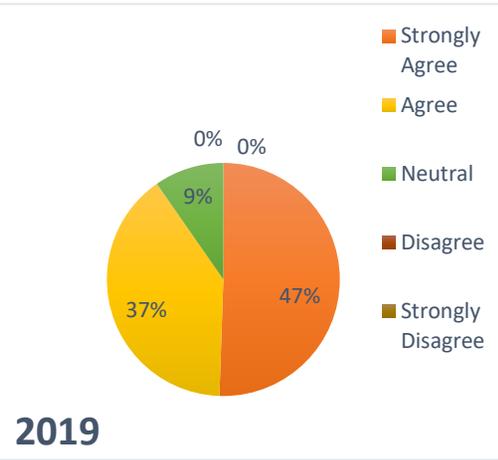
4. Mentoring Eval - Instilled in me a respect for professional ethics	2019	2020
Strongly Agree	27	55
Agree	12	25
Neutral	1	3
Disagree	0	0
Strongly Disagree	0	0
Blank	3	1
Total	43	84
Strongly Agree	63%	65%
Agree	28%	30%
Neutral	2%	4%
Disagree	0%	0%
Strongly Disagree	0%	0%
Blank %	7%	1%
Total %	100%	100%



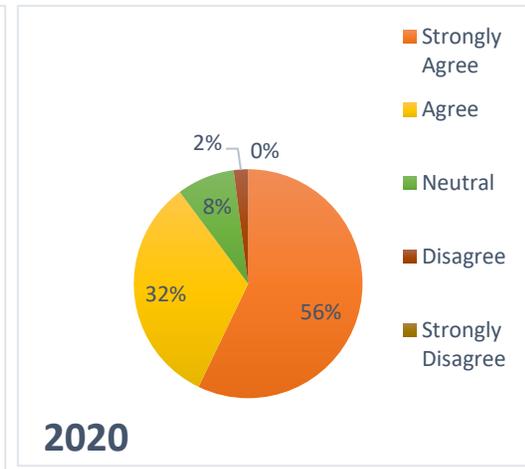
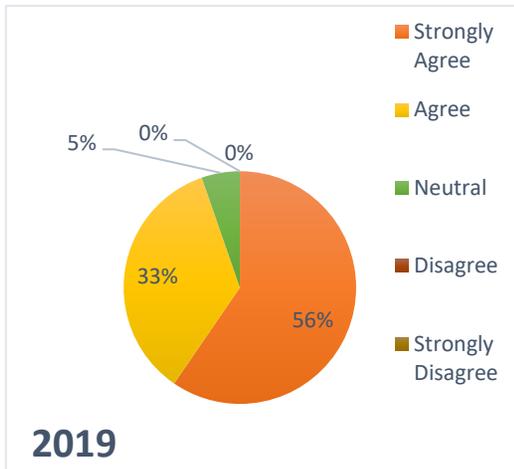
5. Mentoring Eval - Prepared me to read the literature	2019	2020
Strongly Agree	24	54
Agree	15	24
Neutral	1	4
Disagree	0	1
Strongly Disagree	0	0
Blank	3	1
Total	43	84
Strongly Agree	56%	64%
Agree	35%	29%
Neutral	2%	5%
Disagree	0%	1%
Strongly Disagree	0%	0%
Blank %	7%	1%
Total %	100%	100%



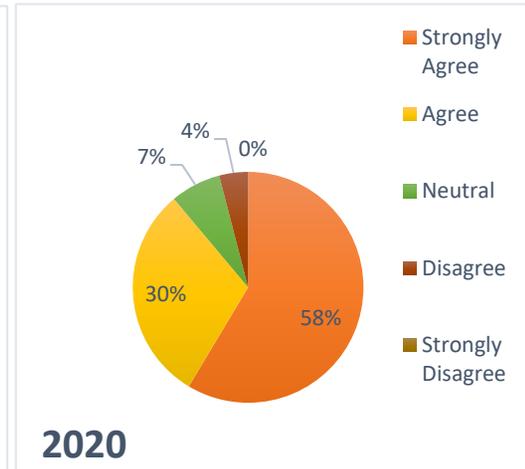
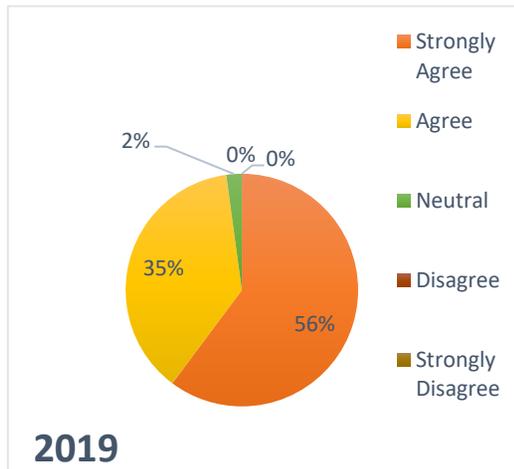
6. Mentoring Eval - Exposed me to a useful research experiences	2019	2020
Strongly Agree	20	41
Agree	16	28
Neutral	4	12
Disagree	0	2
Strongly Disagree	0	0
Blank	3	1
Total	43	84
Strongly Agree	47%	49%
Agree	37%	33%
Neutral	9%	14%
Disagree	0%	2%
Strongly Disagree	0%	0%
Blank %	7%	1%
Total %	100%	100%



7. Mentoring Eval - Faculty are interested in my goals and projects	2019	2020
Strongly Agree	24	47
Agree	14	27
Neutral	2	7
Disagree	0	2
Strongly Disagree	0	0
Blank	3	1
Total	43	84
Strongly Agree	56%	56%
Agree	33%	32%
Neutral	5%	8%
Disagree	0%	2%
Strongly Disagree	0%	0%
Blank %	7%	1%
Total %	100%	100%

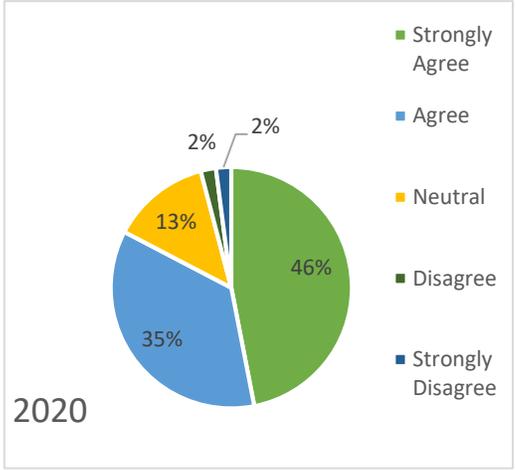
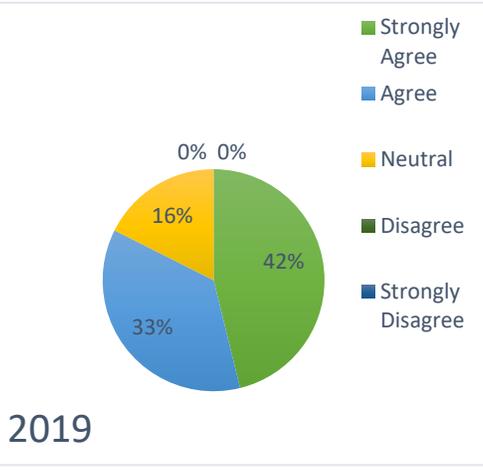


8. Mentoring Eval - Overall, the quality of mentoring was positive	2019	2020
Strongly Agree	24	49
Agree	15	25
Neutral	1	6
Disagree	0	3
Strongly Disagree	0	0
Blank	3	1
Total	43	84
Strongly Agree	56%	58%
Agree	35%	30%
Neutral	2%	7%
Disagree	0%	4%
Strongly Disagree	0%	0%
Blank %	7%	1%
Total %	100%	100%

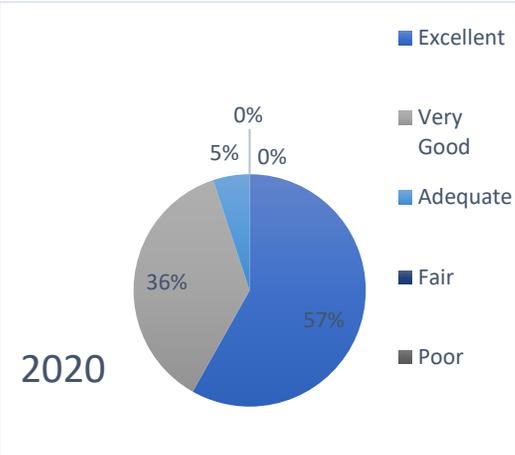
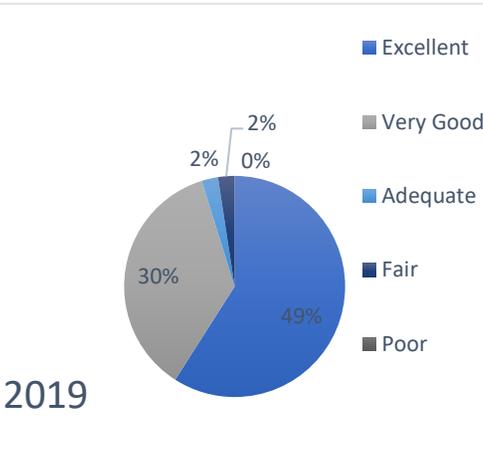


Appendix 5. Student Exit Survey Results - Advising and Course Quality

Advising Eval - Overall, advising is effective	2019	2020
Strongly Agree	18	39
Agree	14	29
Neutral	7	11
Disagree	0	2
Strongly Disagree	0	2
Blank	4	1
Total	43	84
Strongly Agree	42%	46%
Agree	33%	35%
Neutral	16%	13%
Disagree	0%	2%
Strongly Disagree	0%	2%
Blank %	9%	1%
Total %	100%	100%



Coursework Eval - Quality of instruction in my courses	2019	2020
Excellent	21	48
Very Good	13	30
Adequate	1	4
Fair	1	0
Poor	0	0
Blank	7	2
Total	43	84
Excellent	49%	57%
Very Good	30%	36%
Adequate	2%	5%
Fair	2%	0%
Poor	0%	0%
Blank %	16%	2%
Total %	100%	100%



Appendix 6. Preceptor Evaluation Tool

RMHA Preceptor Evaluation

Start of Block: Please fill out the following survey regarding your student intern:

This assessment of your MHA intern is important to help guide the student's growth and provide valuable suggestions to us for program improvement. Please take a few minutes to evaluate your intern as honestly as possible. Your survey results will not be shared with the student directly but will be used to help us in planning for his or her development as a healthcare manager. Many thanks.

1 Preceptor Name:

2 Agency:

3 Student Intern Name:

Q1 Please rate the intern's ability to carry out job responsibilities successfully.

Terrible Poor Average Good Excellent

0 10 20 30 40 50 60 70 80 90 100

Carry out job responsibly ()



Q3

Please rate the student's knowledge of the healthcare system during the internship.

Terrible Poor Average Good Excellent Not
Applicable

0 10 20 30 40 50 60 70 80 90 100



Q2 Please rate the intern's ability to communicate with staff and/or clients.

Terrible Poor Average Good Excellent Not
Applicable

0 10 20 30 40 50 60 70 80 90 100

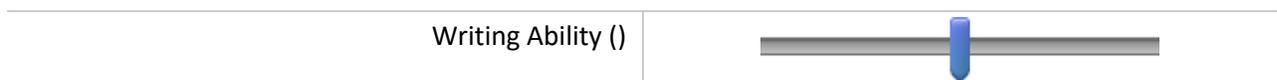


Q10

Please rate the intern's writing ability.

Terrible Poor Average Good Excellent Not
Applicable

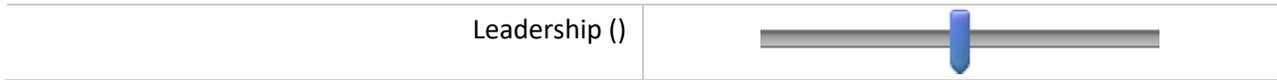
0 10 20 30 40 50 60 70 80 90 100



Q4 Please rate the intern's leadership qualities during their internship.

Terrible Poor Average Good Excellent Not
Applicable

0 10 20 30 40 50 60 70 80 90 100

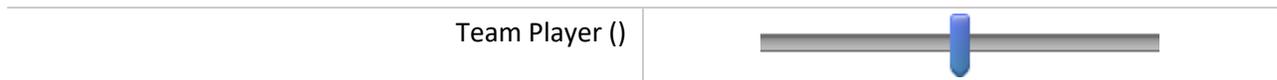


Q8

Please rate the intern as a team player.

Terrible Poor Average Good Excellent Not
Applicable

0 10 20 30 40 50 60 70 80 90 100

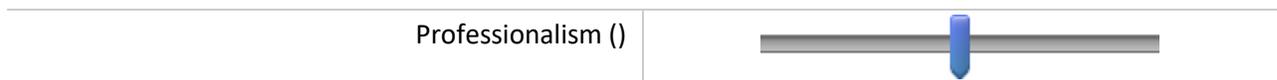


Q6

Please rate the intern's ethical behavior and professionalism in the workplace.

Terrible Poor Average Good Excellent Not
Applicable

0 10 20 30 40 50 60 70 80 90 100

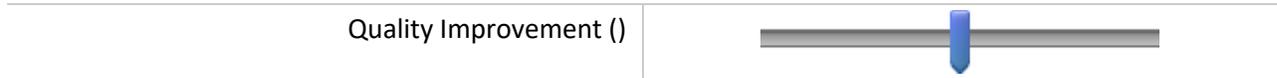


Q5

Please rate the intern's knowledge of quality improvement during the internship

Terrible Poor Average Good Excellent Not
Applicable

0 10 20 30 40 50 60 70 80 90 100



Q7

Please rate the intern's ability to work with budgets and financial reports during the internship.

Terrible Poor Average Good Excellent Not
Applicable

0 10 20 30 40 50 60 70 80 90 100



Q9

Please rate the student's ability to handle operational management during the internship.

Terrible Poor Average Good Excellent Not
Applicable

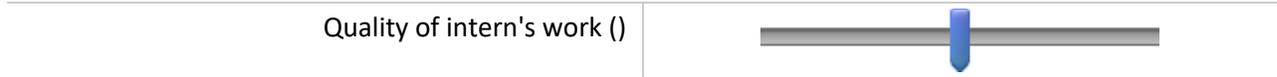
0 10 20 30 40 50 60 70 80 90 100



Q11

Please rate the overall quality of the intern's work.

Terrible Poor Average Good Excellent
0 10 20 30 40 50 60 70 80 90 100



Q13

Would you like to provide future Field Practicum in Health Administration for interested MHA students?

- Yes (1)
- No (2)
- Maybe (3)

Q25 Are there any skills, subjects or competencies that you feel are important for our students to learn prior to starting their practicum.

Q14 Do you have any suggestions to help improve the MHA practicum program?

Q15

Additional Comments:

End of Block: Please fill out the following survey regarding your student intern:

Appendix 7. Presentation Scoring Tool

RMHA Final Presentation Scoring

Please complete this form for each student upon completion of their Practicum Presentation. This information is shared with students in aggregate and also helps us with our overall program evaluations. Thanks so much

* Required

Student Name *

Your answer

Term *

Choose

Reviewer Category *

Choose

Presentation Clarity (1 = Poor 10 = Outstanding) *

1 2 3 4 5 6 7 8 9 10
Poor Outstanding

Project Quality Overall (1 = Poor 10 = Outstanding) *

1 2 3 4 5 6 7 8 9 10
Poor Outstanding

Project Methods (1 = Poor 10 = Outstanding) *

1 2 3 4 5 6 7 8 9 10
Poor Outstanding

Results/Outcomes (1 = Poor 10 = Outstanding) *

1 2 3 4 5 6 7 8 9 10
Poor Outstanding

Conclusion (1 = Poor 10 = Outstanding) *

1 2 3 4 5 6 7 8 9 10
Poor Outstanding

Competencies Demonstrated: Communication

1 2 3 4 5 6 7 8 9 10
Novice Expert

Competencies Demonstrated: Financial Analysis

1 2 3 4 5 6 7 8 9 10
Novice Expert

Competencies Demonstrated: Operational Management

1 2 3 4 5 6 7 8 9 10
Novice Expert

Competencies Demonstrated: Quality Improvement

1 2 3 4 5 6 7 8 9 10
Novice Expert

Competencies Demonstrated: Leadership

1 2 3 4 5 6 7 8 9 10
Novice Expert

Overall Student Rating: Based on a lifetime scale where 1-2 is a new manager and 9/10 a C Suite Senior Manager

Choose

Comments:

Your answer

Submit

Never submit passwords through Google Forms.

This content is neither created nor endorsed by Google. [Report Abuse](#) - [Terms of Service](#) - [Privacy Policy](#)

Appendix 8. Alumni Survey Tool

RMHA Alumni Survey

Start of Block: Default Question Block

Q1 Welcome and thank you for taking a few moments to answer this questionnaire. As part of our continuing process of assessment and improvement, the Edward J. Bloustein School of Planning and Public Policy is currently evaluating its Master in Health Administration program. As a graduate of the program, your experience and insight are invaluable to us as we plan for the future. The survey is confidential. Your name will not be associated with your responses. If you have any questions regarding this survey, please contact Professor Ann Marie Hill (annmariehill@ejb.rutgers.edu). Thank you for your assistance. Please click next to continue...

Page Break

Q2 Name

Q Preferred Name



Q3 MHA program start date



Q4 Expected Graduation date

Q5 Permanent Address

(Please enter your permanent address in the following format- Street address, Address line 1, City, State, Postal/ ZIP code, and Country.)



Q6 Personal Email Address
(Please enter an email address other than Rutgers)



Q7 Personal Cell Number

Page Break

Q8 Are you currently employed?

Yes (1)

No (2)

Skip To: Q11 If Are you currently employed? = No

Display This Question:

If Are you currently employed? = Yes

Q9 What is your current position?

Page Break

Display This Question:

If Are you currently employed? = Yes

Q10 What is your employer's name?

Display This Question:

If Are you currently employed? = Yes

Q What is your current salary?

Page Break

Q11 As you know, the MHA program is [competency](#) based, what competencies were most helpful in your development as a healthcare professional?

- Leadership (1)
- Operations (2)
- Finance (3)
- Marketing (4)
- Law and Ethics (5)
- Information systems (6)
- Oral and Written Communication (7)
- Other (8)

Q12 Please explain your choices.

Page Break

Q13 Are there other health related [competencies](#) that might help you in your career as a healthcare professional that are not currently included in the MHA program?

Yes (1)

No (5)

Skip To: Q15 If Are there other health related competencies that might help you in your career as a healthcare pr... = No

Display This Question:

If Are there other health related competencies that might help you in your career as a healthcare pr... = Yes

Q14 Please explain.

Page Break

Q15 Please share any other suggestions to improve the MHA program overall.

Page Break

Q16 Will you consider supporting the school in any of the following-

Guest lectures (1)

Special events (2)

Mentoring students (3)

Fundraisers (4)

Advisory capacity (5)

Other. Please explain. (6) _____

Page Break

Display This Question:

If Are you currently employed? = Yes

Q17 Are you employed in the healthcare industry now?

Yes (1)

No (2)

Skip To: Q24 If Are you employed in the healthcare industry now? = No

Page Break

Q18 Did the MHA program assist you in securing a job in healthcare?

Yes (30)

No (31)

Skip To: Q20 If Did the MHA program assist you in securing a job in healthcare? = No

Page Break

Display This Question:

If Did the MHA program assist you in securing a job in healthcare? = Yes

Q19 Please explain how the MHA program assisted you in securing a job in healthcare.

Page Break

Display This Question:

If Did the MHA program assist you in securing a job in healthcare? = No

Q20 Please explain.

Page Break

Q21 Did the MHA program assist you in advancing in your current position?

Yes (1)

No (2)

Skip To: Q23 If Did the MHA program assist you in advancing in your current position? = No

Display This Question:

If Did the MHA program assist you in advancing in your current position? = Yes

Q22 Please explain how the MHA program assisted you in advancing in your current position.

Display This Question:

If Did the MHA program assist you in advancing in your current position? = No

Q23 Please explain.

Display This Question:

If Are you employed in the healthcare industry now? = No

Q24 Are you seeking a position in healthcare at this time?

Yes (1)

No (2)

Skip To: Q27 If Are you seeking a position in healthcare at this time? = No

Display This Question:

If Are you seeking a position in healthcare at this time? = Yes

Q25 What are some of the challenges that you are currently facing in finding a job in healthcare?

Display This Question:

If Are you seeking a position in healthcare at this time? = Yes

Q26 How can the MHA program assist you in finding a job in healthcare?

Display This Question:

If Are you seeking a position in healthcare at this time? = No

Q27 If you are not working in healthcare and not seeking a position in healthcare, are you seeking-

- Higher education degree (1)
- Professional Licensure (2)
- Leaving the country (3)
- Other. (Please explain) (4) _____

Page Break

End of Block: Default Question Block

Appendix 8a. Non-Confidential Alumni Survey Results

Q8 - Are you currently employed?

#	Answer	%	Count
1	Yes	84.62%	22
2	No	15.38%	4
	Total	100%	26

Q9 - What is your current position?

What is your current position?

Supervisor

Vice President, Strategy

Client Services Manager

Patient Fin. Srv. Rep.

Patient Access Representative

Observation Unit Medical Director Associate Professor of Emergency Medicine

Network Contract Analyst

Quality assurance associate

Performance Improvement Specialist

Vice President, Strategy Kaufman Hall

Life Clinic Coordinator

Research Assistant

Assistant

Practice Manager for a primary care physicians office, Visiting Physicians Association

Senior Financial Analyst

Program Coordinator for Rutgers Department of Genetics

Internal Communications and Multimedia Specialist, RWJ New Brunswick

Office Coordinator

Senior Consultant

Operations Manager/ Practice Administrator

Population Health Coordinator

Assistant Vice President, Design and Construction at RWJBarnabas Health

Q10 - What is your employer's name?

What is your employer's name?

RWJBarnabas

Kaufman Hall

Bayada Home Health Care

Atlantic Health Systems

Jersey City Medical Center

Rutgers University

UnitedHealth Group

Leading pharma LLC

RWJBH

Kaufman Hall

Life Time

Medical School of Tsinghua University, China

Lansdale family dentistry

Visiting physicians association

Robert Wood Johnson Barnabas Health

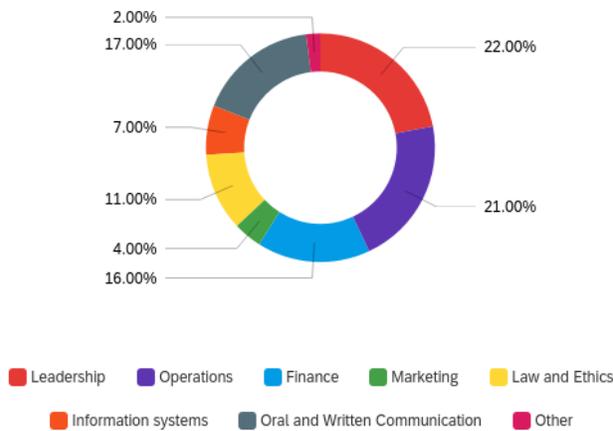
Rutgers University
 Robert Wood Johnson University Hospital, New Brunswick, NJ
 Memorial Sloan Kettering Cancer Center
 Accenture, LLC
 JNT Healthcare Consulting
 RWJBarnabas Health
 RWJBarnabas Health

Q - What is your current salary?

What is your current salary?

\$50000
 \$250,000
 40,000
 Not disclosing
 \$350,000
 13\$/hour
 47,000
 \$200,000
 \$16 an hour
 \$1,500 per month
 \$14 per hour
 80 k plus bonus
 80,000
 55,000.00
 \$70,000
 45,000
 146000
 55,000
 56000
 225,000

Q11 - As you know, the MHA program is competency based, what competencies were most helpful in your development as a healthcare professional?



#	Answer	%	Count
1	Leadership	22.00%	22
2	Operations	21.00%	21

3	Finance	16.00%	16
4	Marketing	4.00%	4
5	Law and Ethics	11.00%	11
6	Information systems	7.00%	7
7	Oral and Written Communication	17.00%	17
8	Other	2.00%	2
	Total	100%	100

Q12 - Please explain your choices.

Please explain your choices.

Working in an academic institution in China, the oral and written communication skill, especially in English, helps me the most in external communication with hospitals and other providers to obtain first-hand medical data. Also, the operation and financing skills learned in MHA courses enables me to manage some real operation projects in a target area, such as I am helping with improving health human resources in one province in China. The competencies gained in MHA program enable me to give precious suggestions and even to manage a sub-project topic.

Working a group dynamic with leaders in the health industry allowed me to develop and enhance my leadership style and skills. Also the emphasis on ethical approaches to health and learning with some of the leaders in medical ethics inspired me to move into a career in law.

Understanding and analyzing the healthcare environment, leadership, management and business, innovation & technology and professional development. Operating as a team. When issues emerge in a organization/department, a leader must be able to communicate with their staff, other departments and patients to understand the full picture of the problem and offer useful solutions. Leaders need to be open to innovation and adapting changes that will allow their organization/department to run more productively. Additionally, a leader must be able to hold themselves accountable to resolve issues and complaints. From a business perspective, healthcare organizations are eager to avoid incurring unnecessary expenses and aim to demonstrate their commitment to providing safe, high-quality patient care.

These were core to developing my skills in interacting with healthcare professionals and understanding the field as it is changing.

These subjects were thoroughly emphasized in the program. I learned a great deal of leadership skills from Professor Vince Joseph. We also learned to improve our public speaking with reports and oral presentations. Professor Steve Jones helped us work with healthcare finance and how to put numbers and data into good use.

These are the skill-sets which I leverage every day in my employment, as well as in life.

The program relies heavily on developing communication and leadership skills and I feel that I've gotten the most and remember the most from these courses.

The professors in those classes brought a lot of real world experience to the room. The assignments were based on both their experience and the theoretical cases from our texts.

My job heavily relies on most of the things I was expose to by the MHA program. I have 20+ employees I manage, and am tasked with making sue two medium size motor groups run smoothly. This includes the financial health of the practices, which the exposer to balance sheets and profit and loss statements come in handy. My only concern is that the information system class was to theoretical, and would have been much more applicable if it was focused on EMR and PM systems. I feel that data analysis should play a heavier role in that class as well

It had a lot of presentations which were helpful.

I found the ability to think strategically and to provide management concepts to solving real world problems, in particular in communicating with candor and understanding how to position based on market forces were most helpful in my development.

I apply everything I learned almost every day in my position.

I am a member of the leadership team, and serve in a mostly operation role. Oral and written communication help in any line of work.

All are important, but I chose these four because they are the most crucial in becoming a healthcare professional. Oral and written communication, ethics, operations, and many other traits, helps create a strong leader.

A year ago, I started as a Access Management Coordinator at RWJUH and today I got a promotion to Supervisor. These competencies allowed me to grow and demonstrate my skills and capabilities and be where I am today.

Q13 - Are there other health related competencies that might help you in your career as a healthcare professional that are not currently included in the MHA program?

#	Answer	%	Count
1	Yes	42.31%	11
5	No	57.69%	15
	Total	100%	26

Q14 - Please explain.

Please explain.

Teamwork, problem solving, mentoring and coaching, data analysis, and planning.

Job Networking.

I think a further emphasis on informatics and patient safety processes would help me in particular, but that is related my my specific interests and may not be relevant to all learners.

Data processing is one competency that is highly required in my career now. As a research assistant, I have to deal with a huge amount of data in some projects. And I am learning some data processing software now like Stata. I do find it is necessary in understanding health care industry and I find a lot of interesting facts in China. I think data processing software is a necessary tool for health care administrator to understand the industry.

Maybe covering gpro, hedis, stars and mips a little more detail. I knew they were quality measures but learned the specifics on the job and that originally was a deterrent to them hiring me but they took me on believing correctly that I was willing to work hard to learn. Also I was fortunate enough to have advanced experience with an EMR system prior to and during my MHA education but know others did not. I think that would be really important to introduce if possible.

Some basic content on medical terminology, clinical basics to be able to fully converse with clinicians

An ability to focus on specific areas such as IT, Finance, HR, Ops as a second year student would be really helpful. Giving more advanced classes for each of the sections.

Learn how to use specific EHR system such as Epic or other popular systems. Make Data analytics more focused, not theoretical. DO analysis of CPT coding and learn what analysis to use when trying to answer certain questions. I.E.

Benchmarking data for coding and collections

Budgeting Project Management

Deeper dive into financials and reimbursement.

Q15 - Please share any other suggestions to improve the MHA program overall.

Please share any other suggestions to improve the MHA program overall.

More exposure, such as: debate, case analysis, and/or role play scenarios.

More alumni events

This isn't necessarily concerning rutgers but there is a need to have administrators interact with clinical staff more fluidly. Therefore, I'd suggest more interaction with clinical students or just more exposure to talking to clinicians in general.I, especially doctors.

Being part of the first class to graduate from the program I can truly say that I have benefited a lot from the teaching and the great professors. I've learned how to be a better leader and it's all because of the materials. I liked the small class setting; we were transparent and felt safe to share our stories and even ask for advice. Our professors were GREAT and knowledgeable. The only thing I would suggest is for those who are new to healthcare or thinking or switching careers having a mentor throughout the program would be a great help. They may be shy to ask but it would certainly be helpful especially after graduation one definitely don't want to be lost out there looking for a job.

Provide more real life examples and situations. Apply material to a real life situation.

Since we were the first group, the MHA advisors realized that job hunting training is critical and have offered more resources to their new group of students.

I was a part of the executive program, and I might suggest that prior to the start there be a 'boot camp' style prep week where some of the basics you learn in traditional programs are covered, in particular finance topics.

include more career building modules such as resume workshop and networking events with companies and the contacts we have from them.

The program should help students secure jobs in the field post graduation.

I would suggest that we do a professional paper that helps us think about our career goals for the next 5-7 years. It helps us identify our strengths, weaknesses, opportunities, and threats. I think our program should have a CAP stone project along with the internship. I think we also need someone to help us with finding internships and jobs.

Improve the job placement after graduation.

More focus on real world scenario

Peer to peer mentorship and career development

More intergration into the university as a whole. This may be specific to the executive program

The biggest suggestion I have is to assign a career advisor right at the beginning. I was assigned mine in the last semester and it was too late. This will help with job placement after graduation.

I would suggest that there are more introductions about health care history in US and health policy.

More internship opportunities

My experience with population health class was lack luster as my professor was not very interactive. I was looking forward to that class as it is of personal interest to me and it was the class I learned the least.

It was clear that some of the courses weren't as structured and prepared the way other courses were. For instance, I had a very bad experience with health economics even though I have a strong background in econ. You could clearly see that it was a work in progress and a lot of mistakes were made during the semester. Also it would be great if we had more exposure to the industry. Being involved with the Graduate Society of Healthcare Leaders helped, though it was clear that that was a work in progress as well.

To be a bit more selective in student selection into the program. Offer a bit more guidance in finding internships. Like the idea of 2 hour classes (can sub the third hour for online work during the week).

AMH has my full thoughts on changes.

More presentations

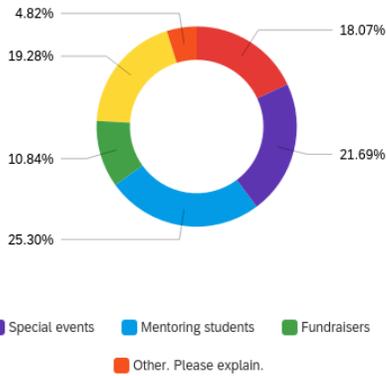
Bring in data analytics and data driven course work as that is where healthcare is moving. More classes in Payer/Pharma would also be good for students who don't want to work on the provider side of healthcare.

It was a very good program. Maybe have less focus on health systems. There was little exposure to Pharma, payers, and private practice

Go more in depth in financial components.

n/a

Q16 - Will you consider supporting the school in any of the following-



#	Answer	%	Count
1	Guest lectures	18.07%	15
2	Special events	21.69%	18
3	Mentoring students	25.30%	21
4	Fundraisers	10.84%	9
5	Advisory capacity	19.28%	16
6	Other. Please explain.	4.82%	4
	Total	100%	83

Q16_6_TEXT - Other. Please explain.

Other. Please explain. - Text

I've already come back as a guest lecture on a few occasions and would love to contribute back in any way I can!

I am a Rutgers faculty member and would love to lecture more.

Happy to offer personal course highlights (topics/exercises covered in class that I found informational/useful during my time in the program).

Whatever I can do to help. Would love to teach in the future

Q17 - Are you employed in the healthcare industry now?

#	Answer	%	Count
1	Yes	95.45%	21
2	No	4.55%	1
	Total	100%	22

Q18 - Did the MHA program assist you in securing a job in healthcare?

#	Answer	%	Count
30	Yes	56.00%	14
31	No	44.00%	11
	Total	100%	25

Q19 - Please explain how the MHA program assisted you in securing a job in healthcare.

Please explain how the MHA program assisted you in securing a job in healthcare.

Once management knew I got the MHA I was automatically taken into consideration for future management positions. The Director of the department constantly kept me posted of upcoming opportunities and allowed me to be part of projects to exposed myself and grow professionally in the department.

Requirement

I believe receiving my MHA helped me get my foot in the door at my current position. I am able to apply the information I learned from the various classes.

While I obviously had a job in healthcare as a physician, the MHA program helped greatly in securing my current position as Observation Medical Director by helping me learn to think strategically and communicate with c-suite level executives on the value we could bring to the unit.

I was able to learn competencies that i could apply to daily work.

Help me create a network that placed me in my position

Gave me confidence to explore additional opportunities

Rutgers reputation and course taken in the program proves the competency required in healthcare.

Provided me insurance knowledge to get my current job

I'm in a mid level management position but in less than a year of working at VPA I have been appointed to two committees as a mentor to my peers. I have also been submitted for a lead practice manager position for my region including 3 offices and 1 new office launching in 2020. I loved my MHA experience and recently brought my finance book to work to help my two fellow practice managers at other sites learn how to read and interpret their p&l statements.

Led to promotion.

They assisted with the internship

It helped me by networking with senior leaders who are teaching and assisting in the program. They were able to open doors at different companies for me to interview with.

Prof. Jane Kaye introduced me to my current employer. She helped me network and was really helpful in career counseling and introducing me to people. Shortly after I secured employment, I was approach by my internship preceptor about a position as well. Prof. Hill paced me in that internship, and it would have led to employment if I hadn't found it prior.

Q20 - Please explain.

Please explain.

After graduation I went on to law school where I am currently enrolled as a full time student.

I was employed prior earning my degree. it did help with a salary increase

I felt more job advising should be required but overall good program in molding us into competent leaders with strong skill sets.

I am currently unemployed and have been seeking a job in the field prior to graduating.

I did not have an in depth experience with a career advisor for job placement post graduation. But I did utilize campus resources for resume improvement and attended a career fair. I found my current position all on my own.

I had the same job all throughout the program though I am actively seeking a new position.

I have been working in an administrative function on NIH grant funded projects for Rutgers Department of Genetics from before my start date in the MHA program. It is not a HC job in a HC setting. I am happy where I am and am not looking at this time to make a job change.

I was already employed in healthcare at the time. It is helping me achieve forward momentum and promotions.

Q21 - Did the MHA program assist you in advancing in your current position?

#	Answer	%	Count
1	Yes	52.00%	13
2	No	48.00%	12
	Total	100%	25

Q22 - Please explain how the MHA program assisted you in advancing in your current position.

Please explain how the MHA program assisted you in advancing in your current position.

Once the supervisor position opened, I was contacted by the department director and offered the position because based on my skills and educational degree I was qualified for this opportunity.

Having a masters elevated me in my applications to law school

Salary increase

See previous.

same as before

The program helped with my competencies and I was able to apply my knowledge to the position

Same as above

I was promoted twice over the course of my time as a graduate student.

Graduate degree led to promotion for retainment by current employer.

I was able to push my new company for a higher title due to my MHA.

Gave me a good foundation going into the field

I am up for a promotion to VP.

Q23 - Please explain.

Please explain.

This is my first full time job, I went to the MHA program right after undergrad.

NA.

I accepted my job after I graduated with my MHA.

My position has been the same from before the MHA program, during, and after completion of program. Unfortunately, my degree isn't recognized for a bump in salary but offers many other desirable benefits that I would not have in most other jobs.

I was not in healthcare before the program,

Q24 - Are you seeking a position in healthcare at this time?

#	Answer	%	Count
1	Yes	0.00%	0
2	No	100.00%	1
	Total	100%	1

Q25 - What are some of the challenges that you are currently facing in finding a job in healthcare? – No responses

Q26 - How can the MHA program assist you in finding a job in healthcare? – No responses

Q27 - If you are not working in healthcare and not seeking a position in healthcare, are you seeking-

#	Answer	%	Count
1	Higher education degree	0.00%	0
2	Professional Licensure	0.00%	0
3	Leaving the country	0.00%	0
4	Other. (Please explain)	100.00%	1
	Total	100%	1

Q27_4_TEXT - Other. (Please explain) – No responses

Appendix 9. Practitioner and Student Focus Group Analysis

MHA Practitioner Focus Group Analysis

Code	References	Coverage	Quotes
Student quality	17	8.10%	<ul style="list-style-type: none"> • And one thing that I've been impressed with, with the Rutgers program is the focus on, um, LEAN, and then, you know, coming from an operational background and looking at operations for the whole health system, um, I really like the fact that Rutgers incorporated the LEAN program into their education. I think our teams at the professional level right now learning at the same time that the Rutgers students are learning. So I actually had a Rutgers student this past semester, unfortunately, just for a short time because COVID kind of got in the way. But he was able to teach many of the concepts or reinforce many of the concepts of LEAN and Six Sigma to our clinical teams. So I think that piece is very important as it pertains to not just reliable processes, but, you know, patient safety. • The biggest benefit that I see, especially from a research perspective, is that our stud-, the students come in, many of them knowing SPSS and have a real appreciation for data which is a challenge on the acute side. Data is not our language and so many of the students come in able to speak and to help us to do some of our data mining. • We've hired a couple of Rutgers's grads but we also have a number of – we've had a number of interns from the program. And I would say the, you know, a couple of other things beyond the skill set is a real spark and sense of curiosity and flexibility and willingness to be nimble. • I do find, and it sets the MHA students apart, um, even those that I decided not to, you know, bring forward in the interview process, they all came in quite well prepared, um, represented themselves very well. And to a person really expressed a great deal of confidence in what their abilities were. Um, and yeah, I mean that's what I would say, they stood apart. • They learned a lot and were able to articulate what it is the program does for them and what they get out of it. And so I credit to the program. I think the curriculum is obviously very strong; otherwise they wouldn't be able to bring it out like that on an interview. • We have MHA students that participate on our committees at, um, the American Congress and what I can say is that they are extremely motivated

			<p>and they just bring so much to the table and I can tell that they really care about the healthcare industry and that's part of it, you know that helps.</p> <ul style="list-style-type: none">• There's a sense of passion about having chosen the field of healthcare that, um, really comes though when you talk to Rutgers grad• I've actually I've seen and been impressed, um, by the fact that they have already seen to know how to get things done. I know that's not like a scientific terminology, but, um, they come with more skills than I remember having at that point in my career• I've had two of MHA residents from two other programs, and, um, I have to say I'm very impressed with the Rutgers students that I've had or even spoken to or even the healthcare competitors that I judge or be a guest speaker, I'm really impressed with the caliber that are coming out of the Rutgers MHA program• I've worked with students from Scranton and from Coldwell and then this past summer I had the experience with Rutgers, and I believe I will stay with Rutgers going forward.• Not only have we hired MHA students but we've had employees go through the MHA program and have, um, you know, immeasurably contributed to our organization, so really high marks from the NJHA side, you know, really good job.• You have great quality students and, um, the experience that they bring, as well as the knowledge, they seem to be hitting the ground running. A lot of what they are getting in school and the classes seem to really be practical information, practical knowledge that they do bring. And they've been able to help us in a bunch of different projects from data collection and data analysis to, um, strategic efforts around program development and finance program evaluation. So it's been a really good, um, opportunity to work with the students and the contributions they made to our program has been immense.• I've had about nine interns, two of them were MHA, um, and the MHA students definitely stand out. Um, we have them working – um, got my fingers in a wide variety of projects so Social Determinants of Health, um, value based contract physician outreach, the insurance programs and, um, I agree they able to get in and be involved in a bunch of different things.
--	--	--	--

			<ul style="list-style-type: none"> • They were team players; they checked in, um, just kind of, you know, those skills like for a good employee like those soft skills that are checking in, they are making sure they are doing a good job. • I haven't had the luxury or opportunity to hire somebody but we've have the opportunity at least to benefit from their expertise, their maturity, the ability to be flexible, um, and I guess the courage to be able to go into the unknown and also contribute. Many of these students come in and have such a good background that they are able to know only work on projects but suggest things. Contribute to programs and keep things as a legacy beyond once their placement is done with us, so I wish I had the opportunity to hire one. I would hire them anytime. • The students that we've had have been skilled or easily trained for the projects that we had them working on.
Student opportunities for improvement	4	3.15%	<ul style="list-style-type: none"> • I've been so impressed with the Rutgers interns that I've had and we have hired some, um, and they're great when they are focused on one thing but I think when they transition to full-time work, um, there is that little bit of a gap, they still need reminders on due dates and things like that. • A lot of students are very nervous when they are presenting, when they're having to stand up in front of peers but the more they practice the more they know, um, what they are talking about, the easier it is. And they will build credibility that way. • I'd like to see them more get involved with the ACHE.
Program opportunities for improvement (general)	11	4.73%	<ul style="list-style-type: none"> • I think when you go into a MHA program thinking about hospitals, you are thinking about insurance, you are thinking about public policy, but one that continues to grow is just management, how to manage an independent practice whether you are solo practitioner, a group practice, or a part of a healthcare organizational practice, that's a little bit of a different skill set. I certainly never learned it and I continue to learn more about managing practices all the time. But that's something that I don't think a lot of these students get exposed to. • Learning a little bit about managing other people and managing relationships up and down, um, you know, the – whether you are in a hierarchy or a matrixed organization, it's important to understand how to

			<p>manage people, how to manage a meeting, how to manage communications.</p> <ul style="list-style-type: none">• Information about long-term care, assisted living, home health because all of that is integral to a functioning healthcare delivery system.• Consider corporate roles as well as, you know, within the healthcare delivery in my previous role where I had my last two interns responsible for market access, I think both of them found it eye opening to understand that there's corporate roles that focus on a deep understanding of how reimbursement works and really making sure that your organization is complement, you understand the rules, you can help patients get access to the products they need.• We are so focused on patients' satisfaction and the patient experience as well as customer experience, um, having students that are able to design and participate in consumer survey's or focus groups who drill down on areas of improvement for the organization or for the process it would be a great asset.• I do love the flexibility that seems like the Rutgers administration supports in them supporting us. You know, if they need to change their project because priorities have changed here, um, I've had a really good experience working with them.• Making sure that the students are kind of plugged in a little bit so they get, you know, why this is happening or, you know, for an example like we're reopening in Phase I or II and how that's going to impact the organization. So just having kind of like a little bit of engagement with the news and kind of knowing what's going on.• They [students] need to be open and flexible to some of that technology, how to incorporate that into work that we do everyday.• I was approached by Professor Jones kind of late because the internship I had for the student just didn't materialize or for whatever reason was able to make the connection. Thinking if there's like a core group of alums or folks that have said interns are, you know, are folks over. There was a way to kind of engage us earlier saying hey we've got, you know, this student who's looking for this type of placement. Um, and if you started before the next semester is there then you could put some of us – sometime I see
--	--	--	---

			<p>things as an alum saying hey we are always looking for interns. But I think if we got like a message from like from you Miss Hill and you said like hey here's what we're looking for. We've got these two students we're looking for. Somebody who wants to do in healthcare policy, um, somebody wants to do, you know, hospital based setting, things like that, we could then kind of be on the lookout and kind of steer things that way and have the lead time to get it in place for the upcoming semester.</p> <ul style="list-style-type: none"> • I completed my MBA at Rutgers and a big difference I see in the programs is that the Rutgers MBA offered – of us, it's like five, six, seven different specialties, our concentrations that you can pick. So that way you can point to yes I have this general MBA, MHA but I'm really an expert and a specialist in this area. Because in talking about, um, creating – in talking about like creating an internship, um, with my employer, they looked at the program and they said they are generalists, like what offer can these students bring to us? And they weren't opposed to hiring our students, but it was – they were more interested in specific skills sets. Or more specialist instead of, um, the generalists. So I think would be what I would be looking for, you know, prove to me that you've done something or show me a project that you've created or how you've already proved value as a student.
Examples of student excellence	10	4.78%	<ul style="list-style-type: none"> • When we had an intern who worked on an advanced care planning toolkit. Um, which was really well received by our membership and it was very hands on, um, very practical toolkit for how to have a conversation about advanced care planning and advanced directives. • I have a student who did an ethnographic study of how nurses spend their time at the bedside. And, um, what was remarkable is that her results are very much in line with what we've seen in the literature which, um, was about 30% of our time actually spent in direct care. And it was very well received and that information we used to sort of revisit and relook at some of our processes in terms of getting the front line people or care teams back to have more engagement with the patients, because at the end of the day, that's what ultimately will drive patient satisfaction versus just look up patient satisfaction saying you have to get your scores up, you have to get your scores up.

			<ul style="list-style-type: none">• In 2018 my intern, she did research on Medicaid in the top 15 states by population. So covering 70% of the population in exactly and how medical nutrition is covered in the alternate site setting. And as a result to that we able to help the practitioners that order our products help their patients secure reimbursement more often. So we saw measurable difference in the work our team was able to do as a result of the documentation that she put together. So it was very well done.• My intern in the summer of 2019 also great value. Her project was to access the effectiveness of a patient navigator process at a physician practice hub, several physician practices in the same building. And she was able to compare very analytically referral patterns prior and the referral patterns after we implemented this patient navigator. At the end of the program her recommendation is that we add additional patient navigators to other practice hubs, which was done. So we have absolutely implemented recommendations from that particular summer project• We had an MHA student, um, who we did hire, I was able to get a part-time, you know, um, and temporary job for her to finish the project that we had started. And I have to say her and actually the others, I was blow away by their integrity. But not just their integrity, they were completely and especially the one that I worked with longer and hold on for a short period of time, completely dedicated to the project and to the result. It didn't seem like it was grades driven, um, it was something that was beneficial to the organization.• The student that we had that we hired, um, I would have to say her greatest skill is bridge. Um, she would literally go into some many different environments that she hadn't been in before whether it was going into the clinics and starting to capture data for a lean process or learning about value based payments, doing hand washing, or hand hygiene projects. I mean no matter where we sent her, she didn't have to have any background in it she just said says put me in there and let me learn. And she set on our taskforce meetings and started contributing right off; right off the bat is outside eyes to some of our projects. So, um, I would have to say she's definitely more brave than I was when I got into healthcare. I felt like every room I was walking into I'd never been in before. And she didn't come
--	--	--	---

			<p>across that way at all. She has a tremendous amount of confidence and courage.</p> <ul style="list-style-type: none">• I had experience with an MHA student that was still going through the program. We brought her in for an internship that was two-fold. One, an area that she wanted to get involved with, with the Cath Lab and helping us with patient through-put which we are still using some of her findings today. And the other piece that she helped us with was very mundane in our plant operations department to track our pumps that we use in various utility systems. She did an extraordinary job, well prepared. Came in with the willingness to go into mechanical spaces or into the Cath Lab and really presented very, very well. And, like I said, we're still benefiting from the efforts that she put forward.• We've had a screening project where one of the students help us improving the screening rates among, um, our populations coming into practice for – sorry – a primary care practice looking at the screening rates of co-rectal and breast, um, really focusing on targeting – looking at that data of targeting, um, which practices, weren't providing the recommendations for screenings or following up with those patients. That was a significant project that we're still using at an organizational level to promote screenings and keep track of – really improve our screening rate. So that's a project that one student worked on and it's a corporate level endeavor that's still going on.• The Social Determinates of Health program. I'll explain a little what that is. This was started in the ground up by an MHA student in our Medicaid clinic, mostly in the Pediatrics area. We had, um, under a grant pilot we had access to a technology platform to collect financial economic information from patients and generate a list of customized report of benefits that they are eligible for like WIC, electricity subsidies, child care subsidies, um, even, um, health insurance, um, I think it's about 10 benefits. Um, we hadn't started it because people like me were doing this on the side of their desk and trying to figure out how to launch it. Um, she created all of the marketing materials, worked without internal marketing team to get them translated into Spanish. Um, worked with the vendor directly to get trained on this tool and how to use it so much that I don't even know how to use it, that's how
--	--	--	---

			<p>much I trusted her and her autonomy to do this. Um, she did the screening in person with the patients, even, you know, using Google translate when needed, um, or any of our clinical staff. The staff got so used to her and so trusting with her when a patient would be brought back in the middle of the screening they would allow here in-between the med staff and before the doctor came in to go with that patient and finish the screening. So at the end of it, um, not only did we generate those benefits for those patients, but like I said, we started talking, we started talking to payers and realized that what they want is those actual social determinates coded. And so working with me and the vendor, you know, this is all brainstormed we automated that. So every time – and she put that process in place, we did a screening. We have a report that’s generated with codeable social determinates that goes to the billers’ and goes on the claim. And so we still use – right before COVID, I still use the data that she collected, present to Horizon and Aetna better health and we’re now getting some payments per Z code that we submit, you know, and we have a dedicated person Aetna offsite to do the screening now. So it was very beneficial.</p> <ul style="list-style-type: none">• I had a project where we were – we transitioned all of our patient scheduling from a call center because in-house to um, for lack of better terms, a virtual call center. And the scheduling protocols that actually teach a scheduler how to appropriately schedule the patient with the specialist and sub-specialists could be so many pages long. They would have nine or 10 pages per physician plus, um, a lot of other supporting documents. And, um, our MHA student that we hired actually was able to take all those protocols and turn them into a single like Excel spreadsheet crosswalk in order to simplify them so that it’s very easy to find the information that you need. None of it is repetitive and it was a lot of work. A lot work to bring in – for some departments there was over 100 pages that were actually condensed into a single page with maybe a couple of back up Excel sheets within each workbook. And it was an incredible body of work that she was able to come up with. And once she showed her what we wanted she just took it and ran with it and was able to work with all the practice managers to get it accomplished.
--	--	--	---

<p>Program opportunities for improvement (curriculum)</p>	<p>24</p>	<p>6.43%</p>	<ul style="list-style-type: none"> • I think some emphasis, I'm sure it's sprinkled in throughout but some emphasis on social determinants of health and population health, um, more of a focus on home and community based care and preventive care, um, would be useful and helpful. • I had a really interesting discussion, virtually, with my class this semester, about the use of artificial intelligence in healthcare decision making for clinicians but also for patients. Um, so this world is changing fairly rapidly and I think, you know, if we start to incorporate some of, um, some of those things just in the courses and competences that already exist, it would be really be very helpful for the students. • I mean the building of culture of liability, I think now is so central, almost every organization, so that would be great. • One of the areas of opportunity is all related to this employee engagement and, um, motivation and, um, this idea that management now is called to be sure that employees are a true asset in terms of how we develop them, what opportunities we offer them to learn in terms of service excellence or, um, that are, for example, ability to be promoted. And managers that are able to work with employees at that level and have a vested interest in employee engagement strategies, employee engagement communications, um, are very well prized. • There's so many disruptors, so many different of organizations coming into healthcare. We've got a lot of joint ventures, a lot of private equity money and just how is that changing healthcare as we're used to one thing, but there's just a lot of different forces now coming into healthcare that will impact how we move forward. How it's financed and what some of those relationships are, so just business development skills. • Along with business development skills, you know, and I guess it goes back to communication a little bit, and I apologize, I had to step off for a moment and multitask while I was off camera there, but, um, is it – are they required to take an advanced Excel course. I remember when I was at Rutgers for my MBA, there was an advanced Excel and Access course that I took to learn how to, you know, be more than just proficient on them. I would be – it's very useful in a business development sense to be able to model the impact
---	-----------	--------------	---

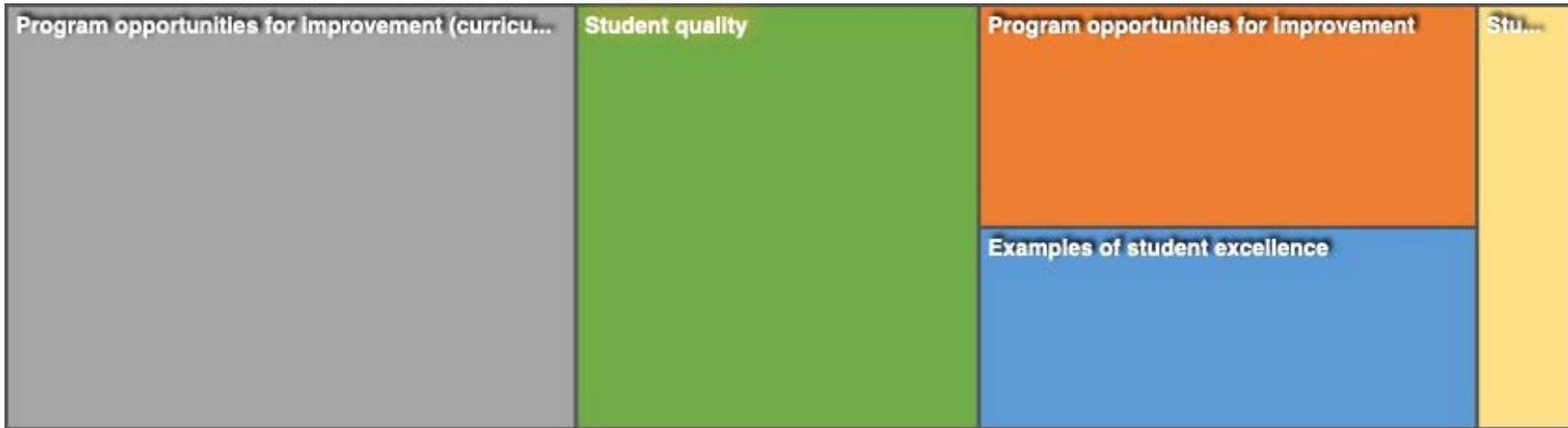
			<p>of the data that you are putting together and you really need a good solid Excel base to do that. And so I think that would be very useful.</p> <ul style="list-style-type: none">• You have to be able to create the messaging that goes along with it, so it comes back to communicating and I would say more than just a be better at communicating, really how to build a message hierarchy to get a point across is part of a proposal is a really important thing to be able to do.• I'm looking forward to formalizing the internship program a little more as the more we work with the student and, um, making sure that it's a really positive experience for them and they are getting out of it what they want.• I have spoken to Ann about this and it's not specific to Rutgers or any, you know, health administration program, it is, um, general familiarity with Excel. Um, just very basic things, you know, I do think it's a great – you have to have, um, a real life experience to apply it to. But if they have a little bit of a better foundation, um, to work with, I think they would feel a little more comfortable. A lot of them come through right away and say I don't know Excel and they are not comfortable with it even it's useful for them, you know, something that they put into a Word document would be so much easier for them if they put it in through Excel. I would say that would be an easy one probably to knock out.• For me it's probably not skills as much as it is, um, availability. Um, having consistent schedule and availably, I had one student who, um, was only available a couple hours a week and it just – it was – didn't get any kind of continuity for her because I had to find things that didn't – where nothing happened from week to week between when she was there in terms of what she was working on. Um, whereas the others would could give me a – I'm going to be here for these days for these hours we could build things around when they were going to be there and that really helped.• We've had some good um, students coming in with strong skill sets. I think the only thing that probably would enhance their ability is process improvements and looking at, um, lean projects, six sigma projects and how to, um, really evaluate processes before implementation or before suggesting, um, without first having to going through the process. So I think that's another area for, um, continue enhancement of the student's experience.
--	--	--	--

			<ul style="list-style-type: none">• I like to endorse what the – my colleague said about Excel and having advanced skills in that process for the analytical piece which they are going to need in healthcare. Making sure that that is the really shored up is very, very important. It's going to be successful to any intern and/or candidate.• I think an area of opportunity is general, um; business as well as develop the opportunity, put together a business plan. In terms of developing a business plan it's – you have to rely on assumptions and some ambiguities and our students had a lot of difficulty with that this past semester. And how to extrapolate one set of details into another to make these - this business case flow, um, that was incredibly difficult for them.• I think that just continuing the case study type work would be beneficial as well.• They do so much work for us, you know, most of mine and I'm glad to hear I'm not the only one that throws them on something and then twists them and now we're working on this, um, and there's hope that keeping up with it. And many of them work over the hours that they actually get signed on for. Um, so I would say that I personally want to know what their deadlines are for their different things that are due, you know, not necessarily memos or I've heard different things, but I have school kids from Bloustein and then MHA and sometimes at the same time. And just, um, as a curiosity to them to make sure that I've given them enough, um, time to condense everything that we're doing.• It would be helpful to have some type of outline such as what the expectations are for that student around timelines as well and what are the core experiences that we need to provide for them as well.• I think we can – if we were able to focus on upcoming technologies I think we could really set our students and the programs apart, um, but things that are really cutting edge. I've heard about Excel, and that's important. But could we teach our students how to leverage block chain or artificial intelligence or robotic process automation because I believe that's the future of healthcare and if our students come out knowing this information they would be invaluable to their future employers.• Virtual care, you know, definitely tell, you know, providing care from a distance. I know that there are some amazing technology companies that
--	--	--	--

			<p>even have in-home healthcare devices that can be used with virtual care. That needs to continue to expand and develop.</p> <ul style="list-style-type: none">• Not just somebody who understands that telehealth world but how, um, the distance gets credentialed for that, you know, in our hospital not a part of the telemedicine network, how we get reimbursed for that. I mean it's a whole department that should be created. Um, I would say that and then yeah, I mean value based care work, um, is huge. It is moving in that direction slower than we think, but, um, anybody who understands that analytics is going to be very valuable.• You could do a whole course on risk management. I touch on it briefly in the Intro course, but there's certainly a branch that you could go into Ann Marie. And, ah, that is certainly one that was going to impact that. Um – you certainly analytics as we mentioned before. And this value based purchasing is here and we really got to educate our team on that and I think that would be an opportunity for an elective.• I think you are also to be applauded regarding your, um, your lean six sigma. And to see folks going through that process that we're going to be selecting candidates to hire, I want to see that they not only can speak well, present well, but what have they done during their curriculum to, you know, to step out and to see programs and presentations and take on the lean six sigma piece? That's an engaged person who wants to work hard.• Patient throughput on that as well would be great, patient satisfaction and patient throughput.• You know, just being aware of how to engage others in the workplace is huge. Um, you know, busy seems to trump engagement all the time and, um, and I'm looking for innovative thinkers in that area, just, you know, because I mean – all I've done is study management and organization and these kind of things, but bringing relational coordination into healthcare and some of those type of things, I think would really add value.• Even though value based care is coming, um, managed care and our network and our contracts and unit costs is not going away. And whether it's the payer side or the provider side, unit cost is where you live or die pretty much, so there are negotiations because you really don't get taught this in school, no one gets taught this. You have to know how to understand
--	--	--	--

			contracts language. You need to know the GRGs basic fee schedule. You need to know players in the market and how things are shifting. You need to narrow in networking there's a ton of strategic planning and people skills that goes into that role as there's just no background for it, you really just kind of get into it and learn as you go.
--	--	--	--

Faculty focus group code tree map



MHA Student Focus Group Analysis

Code	References	Coverage %	Quotes
Program Quality (general)	10	7.14%	<ul style="list-style-type: none"> • I did my undergrad at Rutgers, I graduated with biology, and public health and I started working. And then I reached out to some of current students in the MHA Program. I was actually between Seton Hall and Rutgers. And when it came to the end, financially it was more affordable but the professors and the education that I would receive here. That's what got me to come here. • I was thinking about applying to Seton Hall but looking at the faculty, um, between Seton Hall and here and also looking at the price differences, was a major pull towards Rutgers. • Rutgers its proximity, its price point as well as its reputable status I think that's what kind of led me to pursue this MHA program. • I only applied to Rutgers and Seton Hall. Knowing that – well Seton Hall is currently the only CAHME accredited institution for now. Yes, and then I wanted to make sure I did an onsite program, I wanted to do it on campus, I did not want to do a program on-line. And this Seton Hall and Rutgers offered the opportunity to do it on campus and at night classes which allowed me to work during the day and then go to school at night. • I'm actually from Texas, but I applied to several schools. So it was between University of Colorado in Denver and then Rutgers. And the University of Colorado was like an MBA in healthcare administration with a Master in Science and Finance. But I picked Rutgers because they are a brand name and have a really good reputation and the professors are really credible. • I just think that this like the way the program is setup in terms of like it's small, the classes are small. You can have a one-on-one with your professors like the way that they talk to you is you are an adult in the program like you're here, you're committed to it, but they are not talking down to you, they are talking on the same level despite their experience. I mean I've been here a year. That's two semesters, a few classes and I feel like I've already learned more this year than I did in all four years of undergrad at Rutgers.

			<ul style="list-style-type: none"> • I like that we get a lot of real world experience, too. The professors being, you know, former executives in different healthcare settings is very helpful in getting the real world experience, but also their focus on like soft skills. There's a huge emphasis on presentation and writing skills and just things that I didn't feel like I got enough experience in undergrad and also like seven, eight years ago, um, so – and I feel soft skills like presentation style like being able to have conversations with people is such a big differentiator in the workforce, I am in the workforce. and I see how an inability to communicate effectively really hinders your career trajectory. So I appreciate that they focus on that here. • So really just kind of, um, really helping me grow professionally and just develop myself. I think. has been a huge, um, impact on why I continue HA, um, even with a year off. Um, you know, understanding the importance about business politics or, um, you know, emotional challenges to making sure that you are presenting your best self to the world, is an invaluable experience on top of learning, you know, the actual business of healthcare. • In looking at other MHA programs and reading about MHA programs before applying, I found that many of them were cohort based. And I think not being cohort based is a strength of ours because I've gotten to know so many people outside of just the classes that I have and everything like that, like and I've gotten to know – second years I've gone you should know people that are a different semester than I am and so on, but so I think that's a strength. • I think the program does a really good job of putting those events out there. I think that there's obviously room for improvement to have more but I think that comes from, you know, forces outside of us. But as far as like presenting those opportunities to us and us having our, you know, MHA like student lead organization we're able to kind of help filter and get that information out to as many people as possible.
Program Quality (faculty and staff)	32	23.53%	<ul style="list-style-type: none"> • So outside of the coursework I feel like Cheryl, she's our new, um, internship advisor, she's been the biggest help with finding jobs, finding internships, just talking about career in general. She like proofread my resume, she proofread a bunch of other things, like she's very helpful and I feel like her addition to our program has made it ten times better and successful.

			<ul style="list-style-type: none">• I don't have my degree from this program yet, but I feel way more educated about what I've been studying that I can have this level of conversation with professionals in my field at this point is something like I couldn't even of imagined. Um, so like just the way it's structured and the way that communication goes back and forth with your professors is really amazing.• I think another thing that professors really kind of elaborate on is like kind of like you said, um, being able to focus on something in and outside of the classroom. Not necessarily the knowledge piece, but really the being your own kind of like leader and how you can be able to form your own career path. So one professor in particular that comes to mind, um, Vince Joseph, I credit him literally to just my whole experience of how I got into HA.• Yeah, I've actually – Vince Joseph since I was born. So he's like a – for any of you guys just starting here if you haven't had a chance to interact with him, definitely pop in his office and talk to him, because that man will lead you to where you want to go.• Um, not particular class, but like a particular person, Vince Joseph, um, because like he really inspires me to be someone like him at that professional level. Like the way that these professors set their standard, they set like above – like so that way we can all achieve it. And like I really like Vince Joseph really inspires me to like, you know, want to be emotionally intelligent because that's a key indicator and then to also, um, maintain your integrity and like your character. I think these are really important things that he empathized like, you know how to be a leader in healthcare.• I was going to say, um, principles of health administration with Vince Joseph because that class just it made me feel prepared to take on a lot of things because of how he taught you how to be rather than, I mean he taught me so much book wise which is how he taught me how to be I think was very valuable going forward after I, um, kind of simultaneously at the end of the class, I, um, got a job and just like being able to like go in there and, I don't know, he's a great guy, builds you so much both in the books and out of it.• I think that everything everybody is on the same page that Vince Joseph (laugher) is a great guy. Um, but I do want to shed some light on some other professors and courses, too, um, even outside of the classroom, as well.
--	--	--	--

			<ul style="list-style-type: none">• Professor Dias who teaches HR just as a person, just teaching, I had no idea – and that’s one thing I do like throughout the curriculum, too, about how we kind of separate these competencies because I had no idea that certain kind of, um, like avenues or routes existed in healthcare that I could be interested in or even want to dabble into.• Professor Hill even though she doesn’t necessarily teach, um, my Masters courses, her involvement and support in us as MHA students has been completely, um, like her – my success I give to her because she has literally kind of helped me since my undergraduate days. So really kind of having that support, um, and then we are also just like in our e-boards have an extracurricular activities and really kind of engaging with the students all of those kind of play a part for me.• What I really like about the professors and one of the reasons why I came to the program is the knowledge that they bring from their experience and they always keep current. So we’re still learning that they have all these different networks that we can also utilize. And what I learned in that class helps me and I actually applied it when I did some one-on-one interviews with people during my internship and was able to apply and even utilize it for interviews that I had afterwards.• Steve Jones is another huge name. I actually just met with him like 10 minutes before because I just got a job in the Barnabas system, um, through his help.• I just got a Regional Manager position through his like setting me up with someone to apply with and so these professors not only are they good inside the classroom but as you are getting done and getting ready outside of the classroom they can be some of the best references you can have.• I just want to mention the Sig Sigma Green Belt class with Professor Anderson. I think she’s really good with like helping us organize our projects and like I didn’t ask what people were doing projects with the CDC or like medical school so I’m really looking forward to start.• I took finance with Jane Kaye, not Dr. Krum and I really enjoyed her experience as a CFO and just the way she explained the financial topics that we were learning about, um, because I had never really thought I would go – like enjoy going to finance class which is the way she explained everything
--	--	--	--

			<p>and the way she, um, was so excited about the topics it was just a really great experience that taught me so much and kind of made me enjoy finance.</p> <ul style="list-style-type: none">• I took Dr. Krum for financial accounting and her experience running the ambulatory departments and giving – because I’ve worked in the healthcare currently as well. So being able to relate to the topics but then also appear how she approached things with the information we’re learning I all – I would say that’s my favorite.• I felt one of the professors that kind of pushed me was Professor Lory for finance. He like kind of, um, gave us scenarios and everything I felt like I could like study like everything instead of just like going to the class and just like getting lectured. I felt like he was really good.• The online classes with Professor Pascal. Every – in every single one of those he was very – kind of a disorganized professor. It was very difficult and very-not understanding. And he also lived in Seattle so there was a time difference, so it was very hard to keep in contact with him.• With Student Services with Cheryl coming on board about two, three months ago she has been very helpful. Within the time that she’s been here she’s already created like a – like a e-blast, like a type of newsletter where she provides weekly, different student activities that we can partake in or that the Student DMA Club has been preparing, but also different job postings throughout New Jersey. So we know we’re very diverse and we come from different places in New Jersey, so she offers a lot of different opportunity – and added to what Lois said, she said she already had opportunity to have her review her resume and cover letter. And she stresses students to also attend a different career services opportunities that they have for resume writing, cover letter writing, interviewing and networking open to students and based on everything that I’ve heard from students meeting with her, she’s been very helpful and she’s only been here within like two months.• Yeah, she [Cheryl] just jumped right into it. Like I remember she came on board and everyone was just like give her like a week or two to get adjusted, but like she handled everything that came at her with like grace and dignity. And the fact that she’s so flexible in her schedule because I work 8:30 to
--	--	--	--

			<p>5:00 and that's when people's office hours are, so it's like I'm sorry, can we figure something out. She stayed until like 7:00 o'clock until I could show up and like get things done with her. So the flexibility of like wanting us to succeed is really just – it goes the extra mile knowing that there's somebody there, that's like we'll do whatever it takes along with you.</p> <ul style="list-style-type: none">• Cheryl's super responsive, if you email her at any point in the day she emails you back within like 45 minutes at most, um, she's super responsive, night time also like I had great experiences like contacting her and working with her. It's like over technology in person.• Not only like helping with career wise, but she's [Cheryl] been very helpful collaborating with the graduate society of healthcare leaders which is the only MHA student organization and we've been collaborating on different events and trying to network to try to see what speakers we can bring on board. So she helps students with their career path, but also provide different services here and activities that students can partake.• She [Ann Marie] helped a lot with our internship process and she like – was our internship mentee and she like helped start the process and she finished it with us. So it was just like awesome in that process, because I don't know if she's considered career services but just getting that process started she was a huge help• I think what's also the professors doors are always open, you know, and in terms of career services like just' going to sit with Dr. Kaye or, um, with Professor Joseph and just kind of say like hey, here's what I was thinking about a career path. Is this like okay and just kind of being very vulnerable and getting it out there. And they are like yeah, here's what I'm thinking with that. Or, you know, I've talked with Dr. Kaye about a possible intern opportunity, she's like here's my thoughts and then like I kind of take it from there. So that's always helpful, too, to just be very open and candid about something.• I have Dr. Kaye as my advisor and think she's really good. She really like tells you that, you know, you should take specific classes because she knows what kind of work load it is. So like I really appreciate that she says I would advise you taking these classes together as this may, you know, she also tell what do you do like in terms of outside of work, you know, like do you –
--	--	--	--

			<p>involved, so she takes everything into consideration. And she really like wants you to like succeed in the program.</p> <ul style="list-style-type: none">• I knew Dr. Kaye bring on topics but I never had an issue kind of just shooting email to a professor. So last week I emailed Professor Jones, um, haven't had a class personally yet, but I just to have a conversation and although I work in Pennsylvania he sat up a Zoom meeting. And we were able to talk during lunch on – just to have a conversation on career outlook, you know, relevant topics things like that.• Ann Marie has help with the class and with the internship process and selecting our internship but whoever you have in your leadership course is like the executive, it's supposed to be your mentor as well which I really like.• My advisor is Professor McDonough so yes you get also the guide in which classes you should take, you can pick his brain but he's in one of the regents in the American College of Healthcare Executives and he's the one that encourage me to join during my first semester. And I've been part of ACHE since. So they also guide you and instruct you into four different professional memberships. It's all based on your interest. ACHE has been very helpful and I encourage anyone that's here, if you're no already a part of it to join. They have career opportunity scholarship and different resources and different chapters within New Jersey that you can be a part of.• Ann Marie has always been my advisor both undergrad and grad so I've been stuck with her for the longest. Um, I think also potential – I think since everything is kind of moving to technology and the reason I appreciate Cheryl as much as I do is because everything – I can't always just like get to my phone or get to my email all the time.• I think it's another great thing that all of our professors have such different personalities and such different ways of approaching the topics that they teach and of, um, building us as the people we are – we are the people that we are hoping to become in the future. So I think having those different personalities play a role into shaping us, I think is very helpful.• My leadership professor actually helped me with that, too because they are serving as our mentor. So I've emailed them with what I'm interested in and what I'm looking for because I did – I wasn't able to do it as my current job,
--	--	--	---

			<p>so I did an internship instead of a practicum. So I – and then help me find different places that I could – or gave me contact information for different people that I met with those different people. So like I feel like my leadership professor really shaped my way for my internship as well as Ann Marie Hill helped because she was all cc'd within those emails.</p> <ul style="list-style-type: none"> • I took advice from Vince Joseph who said, when you go to your internship, when you – whenever you want to do make sure you are a sponge and you try to volunteer and try to do as much as you can. And I know – I think I did that and even meeting one-on-one with different healthcare executives and different individuals I learned different paths within healthcare that are available.
Program Quality (curriculum)	12	10.95%	<ul style="list-style-type: none"> • We do a lot of presentations in class and, um, I think the professors, um, really give me constructive feedback. They are not going to let you slack off, or dressing informally and, um, the context that's on the slide and the way you speak in your tone and also, like writing papers as well as I think that's been really great. And, um, also like in both of our classes we do like real world events that are happening now in presenting our articles to which I think really ties into the program because as future leaders have to be real knowledgeable of, you know, what 's going on. • I think my internship really helped also because I did my internship during the summer. And it was in process improvement and strategy and currently – at my current job in process improvement and strategy so like it really helped me grow in my lean six sigma and my green belt because I never knew that was an option in healthcare administration because I never lean six sigma I had no idea what green belt was or like, yellow belt was but then after my first semester I learned what it was. And now like that's something I'm super interested in so I feel like the program, its curriculum really helped me in getting my internship as well as sticking with it. • I just feel like the instructors are pretty transparent with us when it comes to course changes like, um, yellow belt is a thing that we all have to take, but they told us like if you haven't taken it yet, hold off we might be switching to green belt. Like they do tell you like what they suggest and recommend, it's not kind of like you are getting screwed over by taking a

			<p>class too early and then you are kind of like oh no, I missed out on a good opportunity</p> <ul style="list-style-type: none">• Just with like lean six sigma, when we first started it was more economics and then they changed it to take lean now they realize that we need sig sigma could be one class instead of having to take it both semesters. So they take student feedback and professor feedback and try to make that improvement at least in the program. But they are taking feedback to make sure to offer those classes that will benefit us in the long run.• I think operations really taught me life skills because in my – in operations we learned, um, hiring and firing process so we actually simulated the hiring and firing process. We learned emotional intelligence; we learned a bunch of practical ways to apply the operations with doing it with everyone else around you. So I feel like operations is one of the core classes that I feel like if you don't get anything out of the program, that's the one class that you will get 1000% out of it.• To answer your question, operations in HR have been the one, the more influential classes and I'm currently taking green belt too, so really taking that and being able to actually take the test and have a tangible kind of experience to bring with me as I, you know, leave the program has been amazing.• I agree 100% with operations Sig Sigma Green Belt, HR, also the Leadership and Professional Development that I took with Steven Jones because of his vast experience within healthcare.• I'm like interested in working like a practicum. I work at a law firm, so I'm looking to do my practicum in my law firm. Um, and talked to my advisor about it and she's like here's what you need to do, you know, here's the first next step, um, and I found that very helpful. It was like a no right away or it was a yes right away, but it gave me an idea of okay, here's who I need to talk to, I need to prepare an outline for Professor Hill, I need to talk to my Chief Marketing Office at my firm to see if we can all kind of bring this together. And she gave me a timeline and some ideas and I found that – I feel very supportive and optimistic that will be able to make something work with my schedule and my work environment. So that was something that, I will admit was causing me anxiety last semester, because I was
--	--	--	--

			<p>hearing everybody do these fellowships in hospitals and I was like that's not really the direction I want to go in my career. Um, but it seems to be working out fine.</p> <ul style="list-style-type: none"> • What I recommend to students is because you - students look for internship semester before they are doing their internship its look ahead of time. So what I did for mine is I was doing my first semester that I started to think of, like I know I want to do my internship during the summer but I have to start thinking now. And it was through a connection through like where I work that I was able to network with them and I was able to get an opportunity for the summer. So even thinking ahead, if you know, based on my schedule I'll be doing my internship during this semester, maybe even thinking a year ahead because internships are competitive, many of – you are not only competing with MHA students you are competing also with students in the undergrad program that are also doing their internship for their healthcare administration and with all different students throughout the state. So if you think ahead, then it gives you a little bit more broad perspective is this around the area that I want to do it? And maybe I should start networking and connecting with that organization to see any open opportunities, so looking at it early.
Program opportunities for improvement (curriculum - student)	13	10.50%	<ul style="list-style-type: none"> • I feel like we do have like a limited amount of courses. Like for example, like information courses I feel like it was one section like on-line and in person, I felt like it was forced for us to like take it on a Saturday not giving us like another option. • Definitely more of the core courses in the summer. I know everybody likes to take a break in the summer, but I – if some of this – I'm only taking two classes per semester, so having some more core classes available in the summer, um, would just speed things along for me. Or at least make it more comfortable that I accomplished the core courses and I don't have to throw like every hard course into the fall. • I think, um, most variation between sections of classes because I've heard that, um, - for example, finance in health administration, I've heard the financial account managers, professors say that you should take finance in the fall with a certain professor rather than in the spring with another professor. I think that's, um, can of can be a little bit of an issue, but I know

			<p>that's going to be changed with, um, the like merging of syllabi so that they – all the classes are on one syllabus so there's not that variation between, um, sections of classes.</p> <ul style="list-style-type: none">• I feel like the professor was amazing but I feel the curriculum of Population Health could be adjusted a little bit. I feel like we did learn a lot about population health, but the way that – like we had quizzes every week, we had group assignments and like a paper, I feel like the structure of the class could have been completely different to look more about diversities because I don't know the structure was a little off.• I guess the whole having two financial classes confused me, um, when I started because I took both of them in the first semester, I mean, excuse me, my first year. It seems repetitive almost and there wasn't proper – there was overlap of things that he had already learned and then there's obviously a difference in teachers and a difference in section. So I feel like the work – even the book was the same, I feel like I don't think that the same message was translated in both of the classes or there was like a lot of overlap. So it seemed like I was doing the same thing two times.• What I've seen also is, also based on the individual because something that with the program being in the process of improvement now students have to meet with their advisor in order to select their classes. So in the beginning a lot of students were not even meeting their advisor when I started almost two years ago. But now it's a requirement which I really like. And yes you have that advisor but, for example, once you go to your practicum or internship portion whoever teaches your course, serves as a mentor during your internship as well.• I think that something that's still growing in the program but that's the nature of entrepreneurship and innovation, especially in a program this young, but like not to go back to principles every time, but it's still one of the first classes I took. But even in that class we have a guest speaker come in who is still like a fresh graduate from the program and he was really young. I was like whoa, he is out there doing all this crazy cool stuff. And he came in and talked to us about emerging technologies and like AI and all that stuff, so they are doing as much as they can with what's available.
--	--	--	--

			<ul style="list-style-type: none">• One thing that was difficult was like you have – it changed like you have to take a leadership before you can do your internship but you have to take Finance II and, um, Operations I believe. So like as a first year student, like I haven't taken any of those classes but I do my internship this summer. So I had to like ask permission to get into that class. So I think there's other people in like that position that want to do their internship in the summer but it's not possible unless you take these two classes. So you want to end up doing it until your second year.• I remember you [peer participant] telling me this in like orientation to plan ahead like I'm thinking my internship next spring or next summer, like I'm like a year ahead already, and that's very helpful because I ran into the same similar issue where I had to take all these pre-reqs and well four classes and like one semester. It's not going to happen for me. So, yeah, planning ahead and I think knowing the pre-reqs to that and I didn't know there were pre-reqs to the practicum internship would be more helpful. And this may be me seeming very misinformed but I would love like an outline or something to know what we're supposed to accomplish during the practicum, or is that something we can create ourselves? Like I'm not even sure the outcomes and goals and, you know, what's the end result that will help me plan kind of what I want to do, is anybody aware of that• We had something called like a flow chart where, you know, essentially whatever classes you take, you follow that flow chart. That would essentially accomplish all the core requirements that you would be eligible. So maybe create something like that would really be like streamline.• When you are an undergrad you get like a sample schedule of certain pre-reqs, I think just like a template of like two classes or whatever it is. But just so you have a framework so you don't kind of walk in it blind.• So I work for a healthcare corporation and so when I heard about the practicum, I said well I'm not the internship, I already work, so what am I going to do. And I think Kevin cleared this is what will be required to do at your work because my work is very supportive of my career endeavors and being in school but - so when I said I have to do a practicum here, well what do you have to do? Well, I'm not sure yet, but I'll let you know.
--	--	--	---

Program opportunities for improvement (general - students)	4	3.27%	<ul style="list-style-type: none"> • Like two years ago I think it [advising] was something that was like definitely needed to be addressed badly. It was pretty bad. I didn't even know who my advisor was until like six months into the program and then six months in they told us it all switched. So I think that's something I've seen like in the last year has really drastically improved, um, from the beginning stage to this courses. • I know I got an email from my advisor before we even started classes, I got an email like early August from my advisor saying hi, welcome to the program, um, your advisor let's set up a meeting once you get settled all that. So I think that was just to show the improvement, um, because it's a serious improvement from what it sounds like so I appreciate it. • I think one thing like in undergrad here they have what they call the Degree Navigator. And so what that is essentially is it's this page you can log into like WebReg or Rutgers Canvas, and it preloads all your classes that you need for your degree. And it checks it off after you take it. So one thing when I transitioned from undergrad to grad here, I kind of missed that because – and again, is said without like the real advising situation, it was kind of tough to figure out what classes I needed to take when, what needed a pre-req and I think – so they were able to like create like a degree navigator for grad school, I think that would definitely help the future students here. • Having like an options or like you can see where your advisor is in doing some on-line scheduling or setting up a appointments that way or just being more accessible is guess without having it to be person-to-person all the time or just having that option could be helpful for those who just may not know what to do or may not know exactly where to go. So updating kind of like the website to make sure that reflects the most accurate information.
Program Quality (competencies and professional development)	6	5.13%	<ul style="list-style-type: none"> • Finance II taught me the most about strategic planning. He like threw in a project and had to make our own strategic plan. It was from scratch, we had no financial background, it was a random ambulatory care service center, and you have to create it. And then know everything about it and make a strategic plan how it's going to last for years. So I feel like Finance II taught me so much about strategic planning, and that's where I get most of my knowledge from.

			<ul style="list-style-type: none">• That's the thing like the professors tell you like you are going to have to deal with this [communications and relationship management] all the time. You are not going to escape it, so we're not going to like pretend it doesn't exist. Like every single class even classes that you think would involve it's like too bad. You are going to do a team project. Like you are going to do a team paper, presentation, like whatever it takes to get you to that leadership level. And like some people go begrudgingly, I don't want to do, but like it really doesn't pay off in the end.• I mean even in terms of in my career I don't get a lot of like professional development courses, but this has really brought a new level like to the office, even like my colleagues have said like, like you just stood up there and you carried yourself so well kind of a thing. So – and that's – I didn't even take leadership yet, that's just you because of principals, so I guess no, it's not coming out of like any specific class, but it's all of them working together to do it.• You touched on that, the third one team dynamics. I feel whenever we're – it's not like we are presenting by ourselves, although we maybe - you have to present a current event, but the majority of the projects is a team project which we really like because in healthcare we're going to have to work with different individuals, different personalities. So this gets you prepared in that sense to learn how to work as a team and sometimes your ideas might clash, but then you – are the end of the day you have a goal in mind, you have a project to complete and you have to work together to be able to complete it.• It's not necessarily like the program lacking but the field in and of itself of entrepreneurship and innovations with something this young. But I still feel like I'm already – they like they talk about it enough that you're thinking about it or you should be thinking about it.
--	--	--	--

Student focus group code tree map



All codes tree map



Appendix 10. Focus Group Findings for Faculty Retreat

MHA Focus Group 2020 Findings

Prepared for the MHA Faculty Retreat

Amana Kaskazi

Over that past few months we have collected qualitative data from student and community stakeholders about our program and students' experiences and ability to apply the competencies in coursework and internship placements.

Student Focus Group:

Thirteen students at different levels of matriculation participated. The goal of the focus group session was to gather information on student perceptions the program, competency attainment and opportunities for improvement. Participant feedback focused on six themes:

- Participants expressed small class sizes, face-to-face instruction and practice-based course experiences were good preparation for the challenges of health administration
 - *“I don't have my degree from this program yet, but I feel way more educated about what I've been studying that I can have this level of conversation with professionals in my field at this point. The way the program is structured, and the communication goes back and forth with your professors is really amazing.”*
- Students emphasized the importance of leadership, critical thinking and communication skills in courses and in the field.
 - *“I like to attention given to soft skills, like presentation style and being able to have conversations with people. It makes such a big differentiator in the workforce; I am in the workforce and I see how an inability to communicate effectively really hinders your career trajectory. So, I appreciate that they focus on that here.”*
- Participants appreciated the commitment of the program, faculty and staff to help develop their career interests and goals. Students reported they receive good preparation to meet the needs of the health administration field.
 - *“The program leaders take student feedback and professor feedback and try to make improvements. They are listen to us to make sure to offer those classes that will benefit us in the long run”*

- Experiences with the Student and Academic Services Center and MHA Career Management Specialist were highlighted
 - *“Our career management specialist stresses to students to attend different career service opportunities that they offer, including resume writing, cover letter writing, interviewing and networking. All of the resources open to students and based on everything.”*
- Participants value the coverage of competencies and synergy skills throughout the curriculum that aid in the understanding and application of their knowledge skills.
 - Students discussed some courses overlapping too closely rather than building on previous courses
- Students suggested having a sample syllabus that clearly outlines the recommended sequence of courses and an online tool to keep track of progress.

Stakeholder Focus Groups (one spring and one summer)”

Thirteen stakeholders participated, representing internship supervisors, local health professionals, part-time lectures and other community partners.

- Participants noted critical thinking, passion and collaboration were identified as the most valuable skill sets exhibited by current students that have added value to their organizations.
 - *“We’ve hired a couple of Rutgers’s grads but we also have a number of – we’ve had a number of interns from the program. And I would say the, you know, a couple of other things beyond the skill set is a real spark and sense of curiosity and flexibility and willingness to be nimble.”*
 - *“In 2018 my intern, did a project on how medical nutrition is covered in the alternate site setting. And as a result to that we able to help the practitioners that order our products help their patients secure reimbursement more often. So we saw measurable difference in the work our team was able to do as a result of the documentation that she put together. So it was very well done.”*
- Stakeholders were impressed by students’ confidence, ability to demonstrate professional knowledge and skills, and eagerness to tackle difficult tasks.
 - *“I was blow away by their integrity. But not just their integrity, they were completely and especially the one that I worked with longer and hold on for a short period of time, completely dedicated to the project and to the result. It didn’t seem like it was grades driven, um, it was something that was beneficial to the organization.”*
- Participants shared the strengthen of our students are their communication, relationship management and analytic skills.
 - *“You have to be able to create the messaging that goes along with it, so it comes back to communicating and I would say more than just a be better at communicating, really how to build a message hierarchy to get a point across is part of a proposal is a really important thing to be able to do”*

- Stakeholder noted the need for additional curricular content in emerging area in health care management, including liability/risk management, business development and artificial intelligence in healthcare decision.
- One constructive area of growth discussed by the group centered on entrepreneurship and innovation – ways in which the program can incorporate these skills.
 - *“Could we teach our students how to leverage block chain or artificial intelligence or robotic process automation because I believe that’s the future of healthcare and if our students come out knowing this information they would be invaluable to their future employers?”*

Appendix 11. Focus Group Word Analysis

Word counts (All transcripts. Names and conversational words omitted)

Visualization after table

Word	Count	Weighted %	Similar Words
knows	205	1.69	know, knowing, knows
thinking	192	1.59	think, thinking
students	164	1.36	student, students
program	124	1.02	program, programs
help	79	0.65	help, helped, helpful, helping, helps
classes	78	0.64	class, classes
want	77	0.64	want, wanted, wanting, wants
healthcare	69	0.57	healthcare
skills	61	0.50	skill, skilled, skills
experiences	61	0.50	experience, experiences
mha	59	0.49	mha
internship	59	0.49	internship, internships
taking	57	0.47	take, takes, taking
courses	54	0.45	course, courses
rutgers	50	0.41	rutgers
project	50	0.41	project, projects
need	44	0.36	need, needed, needs
good	44	0.36	good
started	43	0.36	start, started, starting
people	43	0.36	people
professor	40	0.33	professor, professors
health	40	0.33	health
great	39	0.32	great
learning	37	0.31	learn, learned, learning
right	36	0.30	right, rights
organize	36	0.30	organization, organizations, organize
talk	35	0.29	talk, talked, talking
management	35	0.29	manage, managed, management, manager, managers, managing
job	33	0.27	job, jobs
terms	32	0.26	term, terms
question	32	0.26	question, questioned, questions
opportunity	31	0.26	opportunities, opportunity
career	31	0.26	career, careers
care	31	0.26	care, careful
interns	30	0.25	intern, internal, interned, interns
hiring	28	0.23	hire, hired, hires, hiring
improving	27	0.22	improve, improved, improvement, improvements, improving
patient	26	0.21	patient, patients
administration	26	0.21	administration, administrations, administrative, administrator
teaching	23	0.19	teach, teaches, teaching
giving	23	0.19	give, gives, giving
focus	23	0.19	focus, focused, focusing

develop	23	0.19	develop, developing, development
team	22	0.18	team, teams
services	22	0.18	service, services
graduate	22	0.18	graduate, graduated, graduates, graduating
current	22	0.18	current, currently
create	22	0.18	create, created, creating
business	22	0.18	business, busy
presenting	21	0.17	present, presentation, presentations, presented, presenting
prepared	21	0.17	prepare, prepared, preparing
networking	21	0.17	network, networking, networks
applied	21	0.17	applied, apply, applying
finance	20	0.17	finance, financed, finances, financing
communications	20	0.17	communicate, communicating, communication, communications
practice	19	0.16	practical, practice, practices
particular	19	0.16	particular, particularly
leadership	19	0.16	leadership
excel	19	0.16	excel, excellence
better	19	0.16	better
understand	17	0.14	understand, understanding, understands
participant	17	0.14	participant, participate, participating, participation
operations	17	0.14	operate, operational, operations
interested	17	0.14	interest, interested, interesting, interests
hospital	17	0.14	hospital, hospitals
planning	16	0.13	plan, planning
build	16	0.13	build, building, builds
value	15	0.12	value, values
schedule	15	0.12	schedule, scheduler, schedules, scheduling
professional	15	0.12	professional, professionally, professionals
marketing	15	0.12	market, marketing
knowledge	15	0.12	knowledge, knowledgeable
interview	15	0.12	interview, interviewing, interviews
analytics	15	0.12	analytical, analytically, analytics
technology	14	0.12	technologies, technology
practicum	14	0.12	practicum
information	14	0.12	informally, information
positions	13	0.11	position, positions, positive
medical	13	0.11	medical
lean	13	0.11	lean
curriculum	13	0.11	curriculum
advisor	13	0.11	advisor
screenings	12	0.10	screen, screening, screenings
role	12	0.10	role, roles
event	12	0.10	event, events
engagement	12	0.10	engage, engaged, engagement, engaging
domain	12	0.10	domain, domains
belt	12	0.10	belt, belts
sigma	11	0.09	sigma
piece	11	0.09	piece, pieces
mentioned	11	0.09	mention, mentioned
long	11	0.09	long
involved	11	0.09	involve, involved, involvement

covering	11	0.09	cover, covered, covering
competencies	11	0.09	competences, competencies, competency, competing
support	10	0.08	support, supporting, supportive, supports
impact	10	0.08	impact, impacting
covid	10	0.08	covid
core	10	0.08	core
conversation	10	0.08	conversation, conversations
accredited	10	0.08	accreditating, accreditation, accredited
access	10	0.08	access, accessible
ability	10	0.08	abilities, ability
structure	9	0.07	structure, structured
introduction	9	0.07	introduction, introductions
innovation	9	0.07	innovation, innovations, innovative
field	9	0.07	field
executive	9	0.07	executive, executives
connection	9	0.07	connect, connected, connecting, connection, connections
comment	9	0.07	comment, comments
challenge	9	0.07	challenge, challenged, challenges
board	9	0.07	board, boards
bloustein	9	0.07	bloustein
benefit	9	0.07	benefit, benefiting, benefits
suggest	8	0.07	suggest, suggested, suggesting, suggestions
study	8	0.07	studies, study, studying
strategic	8	0.07	strategic
specific	8	0.07	specific
show	8	0.07	show, showed, shows
share	8	0.07	share, shared, sharing
result	8	0.07	result, results
recommendations	8	0.07	recommend, recommendation, recommendations
real	8	0.07	real
ready	8	0.07	ready
population	8	0.07	population, populations
placement	8	0.07	placement
outside	8	0.07	outside
open	8	0.07	open, opening
impressed	8	0.07	impressed, impression
happening	8	0.07	happen, happened, happening, happens
grow	8	0.07	grow, growing
free	8	0.07	free
flexibility	8	0.07	flexibility, flexible
elective	8	0.07	elective, electives
college	8	0.07	college, colleges
center	8	0.07	center
big	8	0.07	big
best	8	0.07	best
available	8	0.07	availability, available, availably
advice	8	0.07	advice
trained	7	0.06	train, trained, training
topics	7	0.06	topic, topics
system	7	0.06	system, systems
strengths	7	0.06	strength, strengths

soft	7	0.06	soft
social	7	0.06	social
relate	7	0.06	relate, related, relates, relational
reasons	7	0.06	reason, reasons
public	7	0.06	public
office	7	0.06	office, officer
navigator	7	0.06	navigate, navigator, navigators
mba	7	0.06	mba
listening	7	0.06	listen, listening
grads	7	0.06	grad, grads
financial	7	0.06	financial, financially
familiar	7	0.06	familiar, familiarity, familiarly
employee	7	0.06	employee, employees
determinates	7	0.06	determinants, determinates
candidates	7	0.06	candid, candidate, candidates
cahme	7	0.06	cahme
aspects	7	0.06	aspect, aspects
advising	7	0.06	advise, advising
advanced	7	0.06	advance, advanced
addition	7	0.06	addition, additional
track	6	0.05	track, tracking
stakeholder	6	0.05	stakeholder, stakeholders
speaker	6	0.05	speaker, speakers
situation	6	0.05	situation
session	6	0.05	session
senior	6	0.05	senior
section	6	0.05	section, sections
required	6	0.05	require, required, requirement, requirements
relationship	6	0.05	relationship, relationships
reimbursement	6	0.05	reimbursed, reimbursement
push	6	0.05	push, pushed, pushing
policy	6	0.05	policy
perspective	6	0.05	perspective, perspectives
nursing	6	0.05	nurse, nurses, nursing
number	6	0.05	number, numbers
night	6	0.05	night
lecture	6	0.05	lecture, lectured, lecturer, lectures
leaders	6	0.05	leader, leaders
issue	6	0.05	issue, issues
implemented	6	0.05	implement, implementation, implemented, implementing
hours	6	0.05	hour, hours
hand	6	0.05	hand, hands
goals	6	0.05	goal, goals
flow	6	0.05	flow
faculty	6	0.05	faculty
facets	6	0.05	facets
excited	6	0.05	excited, excitement, exciting
essentially	6	0.05	essentially
enough	6	0.05	enough
enjoy	6	0.05	enjoy, enjoyed
employed	6	0.05	employed, employer, employers

emerging	6	0.05	emerging
efforts	6	0.05	efforts
education	6	0.05	educate, educated, education
economics	6	0.05	economic, economics
document	6	0.05	document, documentation, documents
contribute	6	0.05	contribute, contributed, contributing, contributions
confidence	6	0.05	confidence, confident
clinical	6	0.05	clinic, clinical, clinics
beginning	6	0.05	begin, beginning
basic	6	0.05	basic, basically
ache	6	0.05	ache
workforce	5	0.04	workforce
virtual	5	0.04	virtual, virtually
valuable	5	0.04	valuable
university	5	0.04	university
staff	5	0.04	staff
selecting	5	0.04	select, selecting
satisfaction	5	0.04	satisfaction
resume	5	0.04	resume
responsive	5	0.04	responses, responsible, responsive
research	5	0.04	research
remember	5	0.04	remember
quality	5	0.04	quality
problem	5	0.04	problem
president	5	0.04	president
physician	5	0.04	physician
phone	5	0.04	phone
paper	5	0.04	paper, papers
order	5	0.04	order
option	5	0.04	option, options
necessarily	5	0.04	necessarily
motivated	5	0.04	motivated, motivating, motivation
minutes	5	0.04	minute, minutes
met	5	0.04	met
membership	5	0.04	membership, memberships
intelligence	5	0.04	intelligence, intelligent
integrity	5	0.04	integral, integration, integrity
insurance	5	0.04	insurance
instead	5	0.04	instead
individual	5	0.04	individual, individuals
honest	5	0.04	honest, honestly
generate	5	0.04	generate, generated, generation, generations
feedback	5	0.04	feedback
fact	5	0.04	fact
director	5	0.04	director
degree	5	0.04	degree
credits	5	0.04	credit, credits
contact	5	0.04	contact, contacting
considering	5	0.04	consider, considered, considering
combine	5	0.04	combinations, combine
case	5	0.04	case, cases

awesome	5	0.04	awesome
assistant	5	0.04	assistant, assisted, assisting
assignments	5	0.04	assignment, assignments
assess	5	0.04	assess, assessment, assessments
amazing	5	0.04	amazing
alumni	5	0.04	alumni
allow	5	0.04	allow, allowed, allows
added	5	0.04	added
across	5	0.04	across
workflow	4	0.03	workflow
vice	4	0.03	vice
upcoming	4	0.03	upcoming
turn	4	0.03	turn, turned
towards	4	0.03	towards
touch	4	0.03	touch, touched, touches, touching
totally	4	0.03	total, totally
told	4	0.03	told
tasks	4	0.03	tasks
taken	4	0.03	taken
successful	4	0.03	success, successful
strong	4	0.03	strong
strategy	4	0.03	strategies, strategy
state	4	0.03	state, states
spring	4	0.03	spring
specialist	4	0.03	specialist, specialists
special	4	0.03	special, specialize, specialized
shift	4	0.03	shift, shifting
science	4	0.03	science, sciences
resources	4	0.03	resources
read	4	0.03	read, reading
reached	4	0.03	reached, reaching
raise	4	0.03	raise, raised, raising
priorities	4	0.03	priorities, priority
preceptor	4	0.03	preceptor, preceptors
potential	4	0.03	potential, potentially
possible	4	0.03	possible
pick	4	0.03	pick, picked
perfect	4	0.03	perfect
outcomes	4	0.03	outcome, outcomes
message	4	0.03	message, messaging
matter	4	0.03	matter, matters
live	4	0.03	live, lived, living
lead	4	0.03	lead, leading
knew	4	0.03	knew
key	4	0.03	key
jumped	4	0.03	jump, jumped, jumps
interact	4	0.03	interact, interaction, interactions
guest	4	0.03	guest
gap	4	0.03	gap, gaps
follow	4	0.03	follow, following
fit	4	0.03	fit

finish	4	0.03	finish, finished, finishing
fine	4	0.03	fine
eye	4	0.03	eye, eyes
express	4	0.03	express, expressed
exposed	4	0.03	exposed, exposing
ethics	4	0.03	ethic, ethics
entrepreneurship	4	0.03	entrepreneurship
encourage	4	0.03	encourage, encouraged, encouraging
emphasis	4	0.03	emphasis
emotional	4	0.03	emotional, emotionally
easy	4	0.03	easies, easy
due	4	0.03	due
discussion	4	0.03	discuss, discussed, discussion
decision	4	0.03	decision, decisions
decided	4	0.03	decide, decided
deal	4	0.03	deal, dealing
corporate	4	0.03	corporate, corporation
contracts	4	0.03	contract, contracting, contracts
collaborating	4	0.03	collaborating, collaboration
clear	4	0.03	clear, cleared
classroom	4	0.03	classroom
check	4	0.03	check, checked, checking, checks
bunch	4	0.03	bunch
brought	4	0.03	brought
book	4	0.03	book, books
biology	4	0.03	biological, biology
believe	4	0.03	believe
bad	4	0.03	bad, badly
art	4	0.03	art, arts
approached	4	0.03	approached, approaching
anybody	4	0.03	anybody
answer	4	0.03	answer
amount	4	0.03	amount
ambulatory	4	0.03	ambulatory
activities	4	0.03	active, activities
accomplish	4	0.03	accomplish, accomplished
written	3	0.02	written
word	3	0.02	word
willing	3	0.02	willing
whenever	3	0.02	whenever
visio	3	0.02	visio
utilize	3	0.02	utility, utilize
undergraduate	3	0.02	undergraduate
translated	3	0.02	translate, translated
transitioned	3	0.02	transition, transitioned
top	3	0.02	top
timeline	3	0.02	timeline, timelines
text	3	0.02	text, texted
targeting	3	0.02	targeted, targeting
switched	3	0.02	switched, switching
survey	3	0.02	survey, surveys

style	3	0.02	style
stay	3	0.02	stay, stayed
star	3	0.02	star
stand	3	0.02	stand
spreadsheet	3	0.02	spreadsheet
software	3	0.02	software
similar	3	0.02	similar
signed	3	0.02	sign, signed
shut	3	0.02	shut
several	3	0.02	several
serve	3	0.02	serve, serves, serving
sent	3	0.02	sent
scores	3	0.02	scores
scale	3	0.02	scale
room	3	0.02	room
risk	3	0.02	risk
regions	3	0.02	regional, regions
regent	3	0.02	regent, regents
received	3	0.02	receive, received
realized	3	0.02	realize, realized
rather	3	0.02	rather
rates	3	0.02	rate, rates
purchasing	3	0.02	purchased, purchasing
protocols	3	0.02	protocols
products	3	0.02	productive, products
principles	3	0.02	principles
power	3	0.02	power
post	3	0.02	post, posting, postings
portion	3	0.02	portion
please	3	0.02	please
play	3	0.02	play
passion	3	0.02	passion
parents	3	0.02	parent, parents
outpatient	3	0.02	outpatient
outline	3	0.02	outline
oriented	3	0.02	orientation, oriented
njha	3	0.02	njha
mph	3	0.02	mph
moments	3	0.02	moment, moments
mentor	3	0.02	mentor
medicine	3	0.02	medicine
majority	3	0.02	major, majority
lost	3	0.02	lost
limited	3	0.02	limited
life	3	0.02	life
letter	3	0.02	letter
language	3	0.02	language
independently	3	0.02	independent, independently
incorporate	3	0.02	incorporate, incorporated
gotten	3	0.02	gotten
gained	3	0.02	gain, gained

full	3	0.02	full
fall	3	0.02	fall, falling
fairly	3	0.02	fairly
explained	3	0.02	explain, explained
expertise	3	0.02	expertise
exist	3	0.02	exist, existed
entry	3	0.02	entry
effectively	3	0.02	effectively, effectiveness
easier	3	0.02	easier
early	3	0.02	early
diverse	3	0.02	diverse, diversities, diversity
curiosity	3	0.02	curiosity
cultural	3	0.02	cultural, culture
critical	3	0.02	critical
credibility	3	0.02	credibility, credible
creative	3	0.02	creative
concepts	3	0.02	concepts
complex	3	0.02	complex, complexed, complexity
comfortable	3	0.02	comfortable
collect	3	0.02	collect, collected, collection
code	3	0.02	code, coded
children	3	0.02	children
chain	3	0.02	chain
body	3	0.02	body
beneficial	3	0.02	beneficial
aware	3	0.02	aware
assumptions	3	0.02	assumptions
associate	3	0.02	associate, associated, association
article	3	0.02	article, articles
apart	3	0.02	apart
analysis	3	0.02	analysis
advocacy	3	0.02	advocacy
advantage	3	0.02	advantage
admit	3	0.02	admit
accounting	3	0.02	account, accounting
wise	2	0.02	wise
willingness	2	0.02	willingness
website	2	0.02	website
visual	2	0.02	visual, visualization
video	2	0.02	video
verbal	2	0.02	verbal
vendor	2	0.02	vendor
vast	2	0.02	vast
variety	2	0.02	variety
varies	2	0.02	varies
variation	2	0.02	variation
valley	2	0.02	valley
unit	2	0.02	unit
trusted	2	0.02	trusted, trusting
tricky	2	0.02	tricky
transparent	2	0.02	transparent

tough	2	0.02	tough
toolkit	2	0.02	toolkit
tool	2	0.02	tool, tools
test	2	0.02	test, testing
techniques	2	0.02	techniques
tableau	2	0.02	tableau
table	2	0.02	table
synthesize	2	0.02	synthesize, synthesizing
supply	2	0.02	supply
succeed	2	0.02	succeed
subsidies	2	0.02	subsidies
streamline	2	0.02	streamline, streamlined
spss	2	0.02	spss
specialties	2	0.02	specialties, specialty
spark	2	0.02	spark
space	2	0.02	space, spaces
somewhere	2	0.02	somewhere
solving	2	0.02	solving
significant	2	0.02	significant
scholarship	2	0.02	scholarship, scholarships
scenario	2	0.02	scenario, scenarios
sample	2	0.02	sample
review	2	0.02	review
reputable	2	0.02	reputable, reputation
report	2	0.02	report
repetitive	2	0.02	repetitive
relevant	2	0.02	relevant, relevent
referral	2	0.02	referral
references	2	0.02	references, referring
recognized	2	0.02	recognized, recognizing
proud	2	0.02	proud
proofread	2	0.02	proofread
promote	2	0.02	promote, promoted
price	2	0.02	price
pressure	2	0.02	pressure
precept	2	0.02	precept, precepted
practitioner	2	0.02	practitioner, practitioners
pharmaceutical	2	0.02	pharmaceutical, pharmaceuticals
performance	2	0.02	performance
payments	2	0.02	payments
pay	2	0.02	pay
patterns	2	0.02	patterns
partnership	2	0.02	partnership, partnerships
partnering	2	0.02	partnering, partners
partake	2	0.02	partake
overlap	2	0.02	overlap
outlook	2	0.02	outlook
organizational	2	0.02	organizational
online	2	0.02	online
nutrition	2	0.02	nutrition
notebook	2	0.02	notebook

nervous	2	0.02	nervous
natural	2	0.02	natural, nature
multiple	2	0.02	multiple
mpa	2	0.02	mpa
model	2	0.02	model
mhi	2	0.02	mhi
meridian	2	0.02	meridian
medicaid	2	0.02	medicaid
matrixed	2	0.02	matrixed
materialize	2	0.02	materialize, materials
logical	2	0.02	logical
list	2	0.02	list
liability	2	0.02	liability
leverage	2	0.02	leverage
leave	2	0.02	leave
lack	2	0.02	lack, lacking
lab	2	0.02	lab
invitation	2	0.02	invitation, inviting
invaluable	2	0.02	invaluable
intensity	2	0.02	intensity, intensive
inspires	2	0.02	inspires
incredible	2	0.02	incredible, incredibly
include	2	0.02	include, including
immediately	2	0.02	immediately
human	2	0.02	human
hosting	2	0.02	hosting
hold	2	0.02	hold
highlights	2	0.02	highlights
high	2	0.02	high
hierarchy	2	0.02	hierarchy
guide	2	0.02	guide
ground	2	0.02	ground
generalists	2	0.02	generalists
gears	2	0.02	gears
functional	2	0.02	functional, functioning
form	2	0.02	form
firing	2	0.02	firing
final	2	0.02	final
favorite	2	0.02	favorite, favorites
extremely	2	0.02	extremely
extrapolate	2	0.02	extrapolate, extrapolation
extent	2	0.02	extent
exposure	2	0.02	exposure
experienced	2	0.02	experienced, experiencing
expectations	2	0.02	expectations, expected
evaluate	2	0.02	evaluate, evaluation
enthusiasm	2	0.02	enthusiasm
enhance	2	0.02	enhance, enhancement
endeavor	2	0.02	endeavor, endeavors
eligible	2	0.02	eligible
elaborate	2	0.02	elaborate

driven	2	0.02	driven
difficult	2	0.02	difficult
design	2	0.02	design
delivery	2	0.02	delivery
delighted	2	0.02	delighted
dedicated	2	0.02	dedicated
deans	2	0.02	deans
customer	2	0.02	customer, customized
crisis	2	0.02	crisis
courage	2	0.02	courage
cost	2	0.02	cost, costs
consistent	2	0.02	consistent, consistently
congress	2	0.02	congress
condense	2	0.02	condense, condensed
competitive	2	0.02	competitive
compare	2	0.02	compare, compared
community	2	0.02	community
committees	2	0.02	committees
colleague	2	0.02	colleague, colleagues
cohort	2	0.02	cohort
characteristics	2	0.02	characteristics
chance	2	0.02	chance
campus	2	0.02	campus
broader	2	0.02	broader
break	2	0.02	break
branch	2	0.02	branch
biggest	2	0.02	biggest
automated	2	0.02	automated, automation
asset	2	0.02	asset
applicable	2	0.02	applicable, applications
anxiety	2	0.02	anxiety
analyze	2	0.02	analyze, analyzing
alum	2	0.02	alum, alums
although	2	0.02	although
alternate	2	0.02	alternate, alternative
align	2	0.02	align
aetna	2	0.02	aetna
adjusted	2	0.02	adjusted
addressed	2	0.02	addressed
acquisition	2	0.02	acquisition
achieve	2	0.02	achieve, achievements
autonomy	1	0.01	autonomy
autonomist	1	0.01	autonomist
attractive	1	0.01	attractive
attorney	1	0.01	attorney
attention	1	0.01	attention
attend	1	0.01	attend
artificial	1	0.01	artificial
artifice	1	0.01	artifice
articulate	1	0.01	articulate
approved	1	0.01	approved

