

# CA<sup>+</sup>HME

Commission on Accreditation  
of Healthcare Management Education

**TO:** STANDARDS COUNCIL  
**FROM:** ADHOC COMMITTEE ON ONLINE INSTRUCTION  
**SUBJECT:** REPORT TRANSMISSION (REVISED)  
**DATE:** 5/5/2008

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The Ad Hoc Committee on Online Instruction was appointed by the Standards Council with the committee charge to define “on-line,” the number of full-time, ongoing faculty and the resources needed for a program, the proportion of on-campus versus on-line interaction in teaching/learning that is desirable and appropriate for professional socialization. The committee’s recommendations to the Standards Council should include ways to anticipate any adaptation of criteria needed for CAHME review and accreditation.

Attached is the full report from the committee. The report summarizes all of the work undertaken by the committee including the survey fielded, subsequent follow-up with online programs, our review of current accreditation criteria, teleconference discussions and input from the preliminary progress report with the Standards Council on December 11, 2007. Based on the work, the final recommendations to the Standards Council are as follows:

1. The course work of an online program must include at least 120 hours face to face instructional time. Location does not need to be a university setting, as long as students are synchronously learning course material under the supervision of and in learning sessions that are facilitated by program faculty.
2. Class sizes should be appropriate to facilitate faculty/student interaction. Guidelines should specify that any classes with over 30 students should explain what resources are used or accommodations are made to assist faculty in handling the additional workload.
3. Regarding faculty/student interaction (rather than use of TAs for online learning) add a new requirement to criterion IVA1 to address the use of qualified faculty course content experts that have responsibility for the majority of instructional time. Guidance should note that for online programs this would include both face to face and online instruction.
4. Other accrediting organizations promulgate principles for good practice for online education. Attached to the report is an adaptation of these guidelines for healthcare management education that are submitted for the Standards Council consideration. The

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final recommendation of the committee is that the Council consider adopting these guidelines for online programs.

In addition, the committee recommends adding guidance to the Self-Study Handbook to assist in the clarification of existing criteria as applied to online Programs. Suggestions regarding this guidance are in the Accreditation Criteria Assessment section of the report.



## **Report of the CAHME Ad Hoc Committee on Online Instruction January 2008**

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## Introduction

The Ad Hoc Committee on Online Instruction was appointed by the Standards Council with the committee charge to define “on-line,” the number of full-time, ongoing faculty and the resources needed for a program, the proportion of on-campus versus on-line interaction in teaching/learning that is desirable and appropriate for professional socialization. The committee was convened in July 2007. The committee set forth a working definition of “online” and determined that a survey of accredited programs was needed to address the other aspects of their work. Following is the definition:

**The term “online instruction” broadly encompasses what in the past was referred to as “distance education” and also includes e-learning and blended instruction (where part of a program is delivered traditionally - on campus, face-to-face- and the balance is done online).**

**For the purposes of the Ad Hoc Committee on Online Instruction, “online” will refer to asynchronous or synchronous, web-based and otherwise electronically transmitted formats of instruction.**

Once the definition was agreed upon, the committee decided to create a survey to identify aspects of the issues of socialization into the profession of Health Management and the resource requirements of a graduate program that the Committee would need to accomplish the charge. Following are a summary of the results of the survey, issues that emerged from the survey that the Committee grappled with, and subsequent follow-up with programs with substantive (greater than 50%) online participation.

Part of the committee’s charge was to make recommendations to the Standards Council that should include ways to anticipate any adaptation of criteria needed for CAHME review and accreditation.

## Method/ Survey Summary

The survey was fielded online September 21 through October 5, 2007. Survey Monkey was used which calculated frequencies. Two subcommittees (Professional Socialization and Resources) analyzed responses in respect to their areas. Conference calls were held Oct. 30 for Resources (questions 8, 9, 19 -39) and Professional Socialization on Oct. 31 (questions 2 – 18). The first question was the program identification. The entire Ad Hoc committee conferenced again on Nov. 5, 2007 to discuss results of issues that surfaced from the survey results. These are summarized in the next sections of this report.

The overall response rate to the survey was 60.9%. Forty-eight of the 67 respondents reported having some part of their curricula online. Of these, 79.2% reported less than 25% of their curricula online, and 16.7% reported greater than 50% online. BlackBoard and

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WebCT/Vista (being absorbed by BlackBoard) are used by 76.9% of respondents. The remainder of the survey was completed by those programs with a substantial online component (more than half of the educational activities are completed online).

### **Professional Socialization**

Leadership of organizations comprised of teams of other professionals requires substantial interpersonal skill. Recognizing this, the committee spent considerable time determining the importance of ensuring adequate socialization to the profession when a major portion of the professional education in some programs is online. The degree to which this can be taught or interpersonal skills assessed without face to face interaction and personal observation is an area that the survey attempted to capture with a series of questions.

#### 1. Metric for the proportion of instruction online vs. face to face

The first question asked regarding professional/socialization was whether or not a program had a metric for determining the proportion of on-campus (face to face) to online time for the curricula. Half of the programs responded that they had no formal metric. The remainder of responses varied and ranged from state-required on-campus equivalency formulas to those determined by course faculty. Through discussion, the committee concluded that just because there may be a metric for determining a proportion does not mean that the result is the appropriate number of hours that should be face to face.

Long discussions ensued about whether and how to determine contact hours for a substantially online program. Two possible suggestions were made to judge participation and interaction of faculty and students. The first was a review of participation of students and faculty using an archive. This was discounted as many systems allow the capability of working offline to read and formulate responses and later upload which would not reflect time or full participation. The second suggestion was to establish a minimum threshold of course work in the entire program that needs to be face to face. It was decided that a subsequent poll of the responding programs would be done to determine a range of face to face contact to perhaps determine a minimum that might be desirable.

The experience of the members of the Ad Hoc committee was discussed and there was a consensus that students were much more effective interacting and communicating online if they have met each other prior to an online session. There is a 'cohort' effect that is tangible to those who have taught blended courses as opposed to fully online courses. Individual affect (such as demonstrated by use of humor online) is communicated better and there is a lower chance of misunderstanding if an individual's "voice" comes through the asynchronous written words. This can only occur when students have previously met and conversed so they "hear" the tone and inflection when reading. For older programs the amount of time spent on campus has declined as technology has improved and more could be transmitted electronically.

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Subsequent follow-up on the amount of actual face to face instruction contact hours was sought from the online programs that responded to the initial survey. The range of hours from five of the programs was 198 hours to 464 hours. Some of the variability reflects those programs that are a combination of online with weekends/evening meetings to those that meet once a semester on campus. The committee discussed this at length in the final teleconference. All were in agreement that a minimum number of hours of face to face instruction take place with faculty and students. A concern was noted that programs may just aim at a minimum rather than really determining what interaction would be best to facilitate interaction and learning. Consensus was reached that the minimum we could recommend would be 120 hours. This is less than the range given as all were aware that with technological changes and improvements that more could be done online than had been the case even over the last decade.

### 2. Class size

Related to the discussion of face to face versus online instruction is the critical interaction between the faculty and students. If faculty –student interaction is viewed as crucial in professional graduate education, the number of students in a class is an issue. Responses to the survey indicate that the majority (53%) had a maximum class size of 25 or less, yet 47% reported their maximum as 30 or above.

Two alternative approaches were discussed regarding establishing a maximum class size. First was to say at minimum there should be no larger class size online than the university allows for a section of a traditional (face-to-face) graduate class. Another suggestion was to set an optimal class size and if more are enrolled that the onus would be on the program to demonstrate how it accommodates the larger class, for example through a reduced faculty workload, extra pay to faculty, use of teaching assistants, count as more than one course, etc.

To discern an optimal class size, Ko and Rossen (2004) note “You can’t have a high level of individual student-instructor interaction in an online class of 40 or more students.” (pg. 203) Further guidance given indicates an optimum online class is between 15-30 students, and suggested that perhaps there should be “one TA for every 20 to 25 students if a class exceeds 40 students.” (pg. 203)

### 3. Programs reporting no face to face requirement

Two programs reported in a subsequent question that their students did not meet on campus (face to face). On cross-validation with the two programs, one was an undergraduate program. The other offers courses alternately on campus and online. Although it might be theoretically possible to do the program fully online, it would exceed university limits for graduate studies completion. Accreditation site visitors would need to be sensitive to this possibility given that one *might* be able to complete a program fully online.

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### 4. Experience on admission vs experience requirement

Over half (54%) of the online programs responding to the survey require health care experience prior to admission to the graduate program. Of these, 38.5% require only one year or less, though 31% require 5 or more years of experience. Of concern is that 46 % of programs do not require any previous experience. In addition, 61.5% report no requirement for students in the substantially online program to be employed in the health care field. It will be important for a site visit team to discern how students gain field experience if they do not have any on admission and are not employed in the field. It is imperative to understand how socialization to the profession is accomplished if students do not have previous healthcare experience. Integrative experience criteria should be tracked more closely in this instance. As with traditional, on-campus traditional programs this would exclude attendance at professional meetings which may enhance networking, but does not replace formal coursework.

### Resource Requirements

### 5. Faculty to student ratios

Reported faculty to student ratios are in the range of 1:15 to 1:30 for a given course section. This is reasonable in online education and relates directly back to the prior discussion of class size. Ko and Rossen (2004) note that "...the cut-point for the "average" class served by one instructor should be lower for a completely online class than for an on-campus version....From the experience of those who have taught in both formats, it appears that one instructor can comfortably handle a class of 30 to 50 alone, whereas the equivalent online is closer to 15 to 30 students, with the latter number dependent on the level of instructor-student interaction desired in the class." (pg. 203)

### 6. Use of Teaching Assistants

The availability and use of teaching assistants is dependent on the size of the program, University policy and perhaps related to class size. In a graduate professional program students should expect access to the course faculty director. The concept of TAs beckons to large, oversized undergraduate courses that receive a faculty lecture then attend sessions run by a TA to answer questions and help clarify content for learning. The question was raised whether or not limits should be set on the use of TAs doing online discussion sessions rather than the instructor of record. This should be no different from an accreditation review vantage of TAs presenting the lectures, as the discussion boards are the substitute in the online class.

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### 7. Archiving materials

All programs reported that a minimum of one year of archives are kept. Electronic storage capacity is no longer the issue it used to be. At the very minimum the self-study year should have a full archive of asynchronous work. It is not unreasonable for synchronous sample(s) to be available for site visitors, even though site visitors do not sit in on regular classes.

### 8. Critical role of the Program Director

Survey responses underscored the pivotal role of an online Program Director not only in the training of faculty, but in monitoring and oversight of courses. There should be a requirement that a Program Director is loaded into all course shells for oversight and accountability due to the variable structure of online programs.

### **Summary Comments on the Survey**

A large proportion of traditional programs reported utilizing online techniques to supplement or enhance oncampus offerings. Though beyond the charge of this Ad Hoc Committee, there are implications for review of these components of curricula especially when full courses may be offered online. The accreditation council should be cognizant of the trend as more didactic learning is possible with technologic advancements.

The number of CAHME accredited online programs is relatively small. Although some of the programs have existed nearly two decades, they are still relatively young, and the technology continues to change.

The survey was limited in the data collected. As programs that are substantially online are reviewed for accreditation, an inventory of these programs would help in the future to respond to a number of the issues raised and the concerns that were the impetus for creating this Ad Hoc Committee. Trends over time and across accredited programs may be more enlightening for example about the balance of onsite and online content exposition that may be desirable in a graduate professional program.

### **Accreditation Criteria Assessment in respect of Online Instruction**

Given the above review of online programs, there are specific CAHME accreditation criteria that might benefit by expanding the self-study guidelines for additional reporting requirements, or at least would benefit by noting where online courses may also be required to assure compliance. These will need to be vetted by the Accreditation Council if the Standards Council deems them appropriate. Consideration should be given to whether or not they apply not only to substantially online programs but also to courses offered fully online in traditional programs.

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Following are specific criteria where qualification for online programs and courses may be warranted. The qualifications follow the specified criteria, and these suggestions should be considered by the Standards Council for inclusion in the Self-Study Handbook that can guide online programs in preparation of their self-study, and guide site visitors in their evaluation of online programs.

1. **IB3 – The Program will ensure that facilities, equipment, and supplies are sufficient to support Program quality and achieve the Program’s mission, goals and objectives. This will include:**
  - a) **Library and/or access to information resources;**
  - b) **Computing technology and the appropriate management software; and**
  - c) **Classroom and other learning space, and physical facilities for students, faculty, and staff as appropriate to the method of course/program delivery.**

Although all programs must meet this criterion, an online Program should be able to demonstrate library “access” for print materials, tech support if not 24/7 at least part of every day, and availability of space for face-to-face meetings.

2. **IIA3 – The Program will have a process that regularly evaluates the extent to which students attain the competencies that form the basis for the program’s curriculum.**

An online Program should be able to demonstrate how online students are measured for attaining the competencies, particularly as applied to interpersonal skills. This would include demonstrating how the Program knows that enrolled students are turning in their own work.

3. **IIA4 – The Program will ensure that students are provided appropriate support services, and that these services are evaluated regularly as a basis for ongoing improvement.**

Descriptions of student support services should include assistance in the online environment, how online students are advised (career, academic) and how is this documented, and what is done for students identified as “in trouble” academically.

4. **IIA7 – The Program will have a process for handling formal student complaints and use these complaints, where appropriate, for program evaluation and improvement.**

An online Program should be able to demonstrate how complaints are handled for online classes, instructors, and group members.

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5. **IIIA2 – The Program will structure its curriculum so that students achieve levels of competency appropriate to graduate education.**

How does a program ensure that online students maintain the correct course sequencing, and complete the program within the statutory time frame of the university for graduate students?

6. **IIIA5 – The Program will provide opportunities at appropriate points in the curriculum for students to gain an understanding of and to interact with professionals across the broad range of health professions.**

An online Program should be able to demonstrate how interdisciplinary exposure is achieved in the online or onsite environment of the program.

7. **IIIC1 – The Program will ensure that students demonstrate critical thinking and problem solving skills as well as management competencies in applied, experiential settings.**

An online Program should be able to demonstrate how critical thinking is elicited in the online environment.

8. **IIIC2 – The Program curricula will include integrative experiences that require students to draw upon, apply and synthesize knowledge and skills covered throughout the program of study.**

What are appropriate online integrative experiences?

9. **IIIC3 – The Program will provide, throughout the curriculum, opportunities for students to participate in team-based activities.**

An online Program should be able to demonstrate how team-based activities are organized, implemented and evaluated.

10. **IVA1 – Program and University leadership will ensure that the complement, involvement and qualifications of Program faculty are sufficient to accomplish the mission of the program.**

An online Program should be able to demonstrate how faculty complement and qualifications, and faculty workload are appropriate to the mode of delivery.

11. **IVA3 – The Program faculty will have responsibility for: making recommendations regarding admission of students, specifying health care**

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**management competencies, evaluating student performance, and awarding degrees.**

Either add the word “instruction” to the criterion to specify faculty responsibility for instruction (as opposed to delegating online sessions to TAs or others), or create a new criterion under IVC (Teaching) to ensure the majority of instructional time be with the faculty of record. See potential wording in recommendation section that follows.

### **12. IVC1 – The Program faculty will incorporate a range of teaching and assessment methods aligned with the Program’s defined competencies.**

An online Program should be able to demonstrate how sensory, motor, intellectual, behavioral and social skills are taught and assessed.

### **Recommendations (as revised by the Standards Council May 1, 2008)**

In addition to adding guidance to the Self-Study Handbook noted in the preceding section of this report, the committee formulated the following specific recommendations to be considered by the Standards Council:

1. The course work of an online program must include at least 120 hours face to face instructional time. Location does not need to be a university setting, as long as students are synchronously learning course material under the supervision of and in learning sessions that are facilitated by program faculty.
2. Class sizes should be appropriate to facilitate faculty/student interaction. Guidelines should specify that any classes with over 30 students should explain what resources are used or accommodations are made to assist faculty in handling the additional workload.
3. Regarding faculty/student interaction (rather than use of TAs for online learning) add a new requirement to criterion IVA1 to address the use of qualified faculty course content experts that have responsibility for the majority of instructional time. Guidance should note that for online programs this would include both face to face and online instruction.
4. Other accrediting organizations promulgate principles for good practice for online education. Attached is an adaptation of these guidelines for healthcare management education that are submitted for the Standards Council consideration. The final recommendation of the committee is that the Council consider adopting these guidelines for online programs.

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### References

Council for Higher Education Accreditation (2002), "Specialized Accreditation and Assuring Quality in Distance Learning," CHEA Monograph Series 2002, Number 2.

Ko, Susan and Steve Rossen (2004). *Teaching Online: A Practical Guide*. Second edition. New York, NY: Houghton-Mifflin.

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[http://www.neasc.org/cihe/best\\_practices\\_electronically\\_offered\\_degree.htm](http://www.neasc.org/cihe/best_practices_electronically_offered_degree.htm)



## **Principles of Good Practice for Online Instruction in Healthcare Management Education**

These principles for Good Practice for Online Instruction in Healthcare Management Education were developed to guide program faculty in the design, development, delivery and assessment of courses delivered via online instruction methods. For CAHME purposes, the term **online instruction** broadly encompasses what in the past was referred to as “distance education” and also includes e-learning and blended instruction (where part of a program is delivered traditionally – on campus, face-to-face – and the balance is done online). The term **online** will refer to asynchronous or synchronous, web-based and otherwise electronically transmitted formats of instruction.

### **Underlying Assumptions**

Several assumptions are central to these principles:

1. Programs offering online instruction must meet current CAHME Criteria for Accreditation.
2. It is the Program’s responsibility to review curricula and courses provided online and ensure continued compliance with these principles.
3. Online instruction differs from traditional on-site learning in substantive ways, e.g., pedagogy, assessment.
4. Sensory, motor, intellectual, behavioral and social skills need to be taught and assessed differently depending on the mode of delivery.
5. Students taking multiple courses through online instruction benefit from consistency in course design, communication, technology and assessment.

### **Instruction and Courses**

Programs and courses taught online must:

1. Be part of a comprehensive curriculum plan that demonstrates effective integration between instructional components offered on campus and online.
2. Result in learning appropriate to the rigor and breadth of the professional graduate degree in healthcare management.

## **PRINCIPLES OF GOOD PRACTICE FOR ONLINE INSTRUCTION IN HEALTHCARE MANAGEMENT EDUCATION**

3. Provide for appropriate participation and interaction between and among faculty and students.
4. Be taught by qualified faculty.
5. Include evaluative components to assess student performance appropriate to the method of delivery.
6. Meet academic standards for all programs or courses delivered at the institution where the programs originate.
7. Result in student outcomes of the same quality as other programs or courses offered on campus.
8. Include appropriate pedagogy to match the mode of delivery, the content and level of student.
9. Include syllabi and course materials that are complete and appropriate to the mode of delivery.
10. Include clear documentation in written course materials of the methods of teaching and assessment in the cognitive, affective and technical domains appropriate to the course objectives and content.
11. Take whatever steps necessary to ensure that the student enrolled in the course is the student actually completing the work. As appropriate, verifications may include proctored examinations with careful checking of identification, individual presentation of projects or other means of ensuring integrity of the Program.

### **Professional Socialization**

1. The program and courses should be effectively designed with appropriate interaction between instructor/faculty and students and among students.
2. Individual course design results in faculty and students to be present, active and engaged in learning.
3. Completion of the Program results in appropriate socialization to a profession in healthcare management.
4. The program evaluates attainment of technical skills required for the profession – sensory, motor, intellectual, behavioral and social.

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### **Student Services**

1. The program or course provides students with clear, complete and timely information on the curriculum, competencies, course and degree requirements, nature of faculty/student interaction, prerequisite technology competencies and skills, technical equipment requirements, availability of academic support services, financial aid resources, and costs and payment policies.
2. Enrolled students have adequate access to the range of student services and resources appropriate to support their learning. Among the resources available are academic and career advising services, admissions, registration and course scheduling and information about student financial aid.
3. The program has admission/acceptance criteria in place to assess whether the student has the background, knowledge, and technical skills required for undertaking the program.
4. Advertising, recruiting, and admissions materials clearly and accurately represent the Program and the services available.

### **Institutional Support**

1. The institution and program demonstrate a commitment to ongoing financial and technical support for online offerings.
2. The institution and program will support faculty development in instructional and technological strategies for teaching online.
3. The institution and program will recognize the implications of development and implementation of online instruction on faculty workload and adjust workload as appropriate.
4. The institution and program will support student orientation to and training for participation in online courses.
5. The institution and program will support adequate access to library, electronic media and other learning resources.
6. Faculty, administration and students will be aware of institutional policies regarding intellectual property and copyright, and will adhere to all related federal regulations.
7. Where possible, institutions will continue to support programs or courses for a period sufficient for students to complete the accredited program.

## **PRINCIPLES OF GOOD PRACTICE FOR ONLINE INSTRUCTION IN HEALTHCARE MANAGEMENT EDUCATION**

### **Evaluation and Assessment**

The program routinely evaluates the outcomes of its online instruction offerings with other course and curricular reviews. Criteria for evaluation include the following:

1. The program and course effectiveness, including assessments of student learning and student and faculty satisfaction.
2. The assessment and documentation of student achievement in each course and at the completion of the program.
3. The accuracy of the program or course announcements and electronic catalog entries, if applicable.
4. The levels of resources available to students.
5. The academic standards of online courses as compared to those same classes offered through traditional delivery methods.
6. An appropriate interaction between faculty and students and among students.
7. The provision of reasonable levels of student services, including advisement, admission, registration and scheduling and information regarding financial aid.

CAHME accredited programs will cooperate in these and other efforts essential to maintaining the integrity of courses and programs offered online.