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- Faculty appreciated the flexibility and the encouragement to be innovative in their teaching.
- Some faculty are using innovative methods and incorporating research into their teaching.
- Faculty appropriately use case study approaches, many guest speakers from local health care organizations and encouraging student participation in local case competitions.
- Faculty feel supported and spoke highly of the resources for preparing and teaching courses. In particular, FAU's Center for E-Learning was frequently cited as beneficial resource.
- The majority of the faculty were dedicated to ensuring that students had a good experience.
- Adjuncts bring a wealth of "broad-based and real world" experiences to the classroom.
- Adjuncts feel included in the program and were pleased with the opportunities to participate in the Provost Coffee Hour, Faculty Senate, as well as various professional development events.

Students:

- For the most part, students were very excited about the program and the support they have received from certain full-time faculty and adjuncts. The programs were described as having a "supportive not punitive" culture.
- FAU has the most diverse student population in Florida. All stakeholders were energized by the diversity in the student population. In particular, the BHS comprises a diverse student population (e.g., traditional and nontraditional students, first generational students, and ethnicity).

- There appears to be very little, if any, networking across academic departments in the College of Business in general and among the programs in Health Administration in particular.
- There was an emphasis on faculty participating in securing external funding (“grants”). Some faculty, however, expressed concerns about not being equipped to write grants and not being recognized for the scholarship associated with grant-funded work (unless it is published in a narrow set of journals).
- There is perceived competition for undergraduate students between the BHS and the new Health Sciences degree. There is some validity to this concern, as there has been a decline in BHS enrollment since the establishment of the Health Sciences program.

Faculty:

- The programs may not have the right number and mix of faculty. There are 653 students

- The curriculum is not mapped to larger framework, competency model or goals.
- All stated objectives for both the BHS and MHA are at the “Apply” level of Bloom’s Taxonomy.
- Student outcomes (learning or career) are unknown to faculty.
- It was unclear how students find their practicum location (there is no single person in charge of internships or the practicum experience).
- All TMHA courses meet in the evenings, which makes engagement sometimes hard because both students and faculty are tired after working all day.
- The MHA programs are not CAHME-accredited (this was mentioned by student stakeholders). There is considerable competition in the Florida MHA/MBA market, including growth in CAHME accredited programs. Current CAHME-accredited programs in Florida include: AdventHealth, FAMU, FIU, Jacksonville, UCF, UF, Miami, UNF, and USF.
- Not many BHS students are aware of various minor options.
- Other program weaknesses: Internship may be too short; Poor in-person attendance in classes that are recorded; Students were unclear about course evaluations, and if they were getting the correct survey questions.

RECOMMENDATIONS

1. Curriculum:

The current curriculum (course content and sequence) may not reflect what is relevant to students or to the needs of employers today or tomorrow. Students select degree programs and universities to gain knowledge and skills required to achieve their personal and career goals.

Recommendation 1a: Curricular Redesign

The BHS and TMHA curricula need an immediate review and updating in order to reflect current and future health care industry and competencies required for career success. We recommend creating a Curriculum Review Committee composed of full-time faculty and adjuncts (and potentially students and other stakeholders). This committee would review at least three BHA and MHA undergraduate and graduate programs from other institutions and provide suggestions on how best to restructure the current programs.

In addition, to broaden each program’s appeal and allow for maximum flexibility, a set of common core courses should be required for students enrolled in the TMHA and XMHA. hgtSie i and other stak

Recommendation 1b: Engage the Field of Practice in the Curricula

opportunity to create economies of scale for infrastructure needs, but - more importantly, to create a single, more cohesive group of individuals committed to the mission.

We specifically recommend:

- Create a single point of contact for TMHA students (staff) who does legwork for practicum course. This person could draw on alumni of all programs as first contact for placements (maintaining database of alumni and friends for other purposes). This role could also support the Advisory Board described in Recommendation 1b.
- Create more transparency by scheduling routine meetings for HA Executive Dire 00.0000092 0 612 9 reV

Typically, each club has a faculty advisor to guide the students. These are often student chapters of the professional organizations that the students will join post-graduation. Opportunities include student chapters of ACHE, ACHCA, HIMSS, and IHI. IHI and HIMSS hold national meetings in Orlando, and frequently provide student scholarships, volunteer and networking opportunities.

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faculty to local health systems and health sectors firms to conduct joint projects that may yield pilot data for future fundable work.

Recommendation 3c: I

continuous improvement and external stakeholder engagement that would enhance and improve FAU programs moving forward.

Recommendation 4b: Enhance FAU-Student Awareness and Recruitment

There appears to be very little being done to recruit students to the BHS and TMHA programs. There are multiple student recruitment opportunities within FAU including:

- The College of Science hosts a Pre-Professional Week Program. This could be expanded to be a university-wide initiative, and the HA programs should be involved to increase awareness of programs and student HA clubs.
- Alternatively, the HA programs could host its own “business of health” Week and do similar outreach to FAU undergraduates.
- Enhance the process for sophomores to get connected to the major and the college. Invite students to the newly established HA student clubs/activities and encourage them to interact with faculty.
- An engaging 1000 or 2000 level elective in healthcare administration could attract undergraduate students into the program. One faculty member described a course he teaches that is open to all majors. Perhaps consider more targeted recruiting for majors within this course.
- Develop a process by which adjunct and full-time faculty will be able to recommend talented undergraduate students to the TMHA program (Recommendation 2a also addresses this).
- Increase awareness of the MHA program to undergraduate students in specific situations. For example, students we interviewed suggested that TMHA is a good program for Bio and Pre-med students – for “gap years” and would help them in medical school. They also mentioned that it is great for international students.
- After/during the curricula review, pursue a 4+1 HA program (undergrad to grad in HA) and potential other 4+1 options for BHS students (and for other undergraduate majors with TMHA).

Recommendation 4c Expand Externally-Focused Student Recruitment Opportunities:

- Identify the top local high schools and community/technical colleges, especially those with Health Care programs and develop a partnership to recruit talented candidates into the BHS program.
- Develop messaging/marketing materials that adjunnBT/ 612 ETQg2.024JTJy litwith Health Ca5.13 Tm0

2. *Our program is in the College of Business. Often, the metrics used to evaluate departments and units in College of Businesses do not apply to healthcare administration units, which tend to be in health-related colleges. What are some of the strategies that you have used in your institution to improve ranking and visibility?*

Many strategies to improve rankings and visibility have been recommended already, including seeking CAHME Accreditation (MHA), as FAU is not eligible for US News Rankings without it. Other strategies include:

- Consistent, active engagement in AUPHA forum discussions, meeting presentations and committees. This work must be financially supported by the COB and recognized in annual performance reviews and Tenure and Promotion processes.
- Publication in journals that other Health Administration and health services research faculty read and respect, including but not limited to *Health Affairs*, *Health Care Management Review*, *Health Services Research*, *Inquiry*, *Medical Care Research and Review*, *Medical Care*, *Journal of Health Administration Education*, *Journal of Healthcare Management*, and *Milbank Quarterly*. In addition, content experts may have additional prominent journals in their area, such as *American Journal of Public Health*, or the *Journal of the American Medical Informatics Association*, *Managed Care*, *Journal of General Internal Medicine*, etc.
- Encourage and support (and recognize as valued) faculty presentations at ACHE, HIMSS and other practice-facing conferences.
- Encourage and support student activity in national case competitions (note: some of these are limited to CAHME-accredited programs). There are now numerous case competitions available for undergraduate and graduate students. In addition to paying for students to attend, the program and COB must recognize and reward faculty time to coach and mentor teams.

3. *What are some of the strategies that you have used in your institution to improve student performance in quantitative methods without increasing the number of courses?*

We recommend that faculty use more problem sets and quantitative methods in all courses (not just statistic or research courses). Above all, the programs may be enhanced in this area if the curriculum review (Recommendation 1a) includes the use of a competency model (or other overarching framework) that infuses analytics as a core skill set for those seeking BHS or MHA degree. This will help identify how students learn basic “quantitative” skills in some courses and then move up to moderate and become experts in later courses. Right now, it does not appear that this progression has been identified in a systematic fashion.

4. *What are some of the strategies that you have used in your institution to generate revenue for your units?*

This is addressed partially in Recommendations 3b and 3c.

Another important source of revenue is through endowment and development funds that can be used to support faculty and student projects and activities. The program could seek funds to support health care as a business work - training and development, consulting activities that help

local industry and help identify FAU as “best” for this. This type of funding could also be used to offer some of the “concierge” services to TMHA students. This is also a way to continue to

