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# GRADUATE DEGREE PROGRAM REDESIGN FOR ACADEMIC SUCCESS, DIFFERENTIATION, AND ACCESS

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## ABSTRACT

Recently, many educational institutions have begun exploring alternative formats for courses, including online accelerated courses and project-based learning. These alternative delivery options position both the students and the degree for better success. Our Master of Health Administration (MHA) degree has been in a constant state of evolution from its inception 2 decades ago. Most recently, we conducted a major redesign of our program, beginning in 2019, to accommodate our growing adult learner population, as well as adopted new student-oriented forms of education delivery to reach that population more effectively. These changes to our program resulted in a major program renovation, including changing the duration of courses from the traditional 16 weeks to an accelerated 7-week format and seeking a third-party peer review of all our courses. We also implemented specialty tracts within the MHA degree, allowing students a more targeted learning approach that better aligned with their career goals. Additionally, we streamlined the application and admissions process into the program and made other substantive changes. In this article, we detail those changes as well as highlight our program's experiences as a means to assist other programs seeking to optimize their content offerings.

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## INTRODUCTION

The Master of Health Administration (MHA) program at our institution was developed in 2000, driven by a need in the region to expand the supply of leaders in all facets of healthcare organizations. Following approval by the state Commission for Higher Education, the first cohort of eight students began in August of 2001, pursuing a hybrid model of delivery geared toward working professionals. The 39-credit hour curriculum was adapted from the Accrediting Commission on Education for Health Services Administration (ACHESA) (now known as the Commission on the Accreditation of Healthcare Management Association or CAHME) and Association of University Programs in Health Administration (AUPHA) standards. Content was delivered online and supplemented by Friday evening and Saturday in-person face-to-face (intensive) meetings once a month. The in-person component of the program was modified in 2009 to an all-day Friday/Saturday intensive format in which students met three times per year. Also in 2009, a January admission period was introduced, allowing for a second cohort to begin the program. In 2011, an online health informatics specialty within the MHA degree was introduced and consisted of four diverse courses within the 39-credit hour curriculum. An additional specialty in post-acute care was launched in 2021 using the same framework. Table 1 illustrates the program's enrollment numbers from 2012–2021.

Table 1: MHA Program Enrollment by Year (Start of Fall Semester)

<b>Year</b>	<b>Enrollment</b>
2012	31
2013	38
2014	41
2015	36
2016	57
2017	64
2018	54
2019	36
2020	53
2021	79

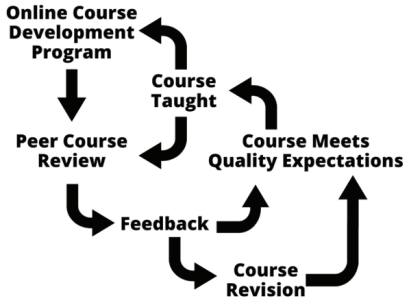
From the program's start, an advisory board was established to guide faculty by supporting the program's strategic planning, curricula, and alumni engagement. The advisory board is comprised of regional healthcare leaders, half of whom are alumni of the MHA program. Two unique additions to the program emerged following an advisory board retreat in 2014: an on-campus accelerated option and a cohort-partnership with a regional healthcare system. Efforts were initiated to begin an on-campus accelerated (4+1) option to the program that was geared toward current institutional undergraduate students of any discipline. These students would complete their undergraduate degree and MHA degree in 5 years. The 4+1 option included a partnership with a cohort of students from a Midwestern historically Black college and university (HBCU) wishing to expand graduate opportunities for their pre-med students. In 2015, a partnership was formed with a regional health system to admit and enroll a preselected cohort of 12 midlevel managers in the MHA program. This cohort pursued the curriculum as a unified group, engaging in all of their courses together online, where content projects focused on the needs of their health system. The first cohort completed the program in 2017 and a second cohort completed the program in 2021.

Despite the 4+1-degree option and health system partnership additions to the MHA program, the online option's admission standards, process, delivery mechanism, and curriculum had not undergone any significant revisions since the program's inception in 2001. As such, the program took advantage of an environmental scan the university conducted to focus on higher education and healthcare trends. What followed was a year-long process to remodel the program, focusing on select major elements. Those elements included the addition of specialization tracts, a re-envisioned approach to online education, an emphasis on project-based learning, and a condensed (or accelerated) learning format. Additionally, all faculty went through a professional development opportunity, offered by the university's Online Learning Department, which focused on teaching excellence in the online environment.

## FRAMEWORK/APPROACH

### *Online Learning*

Online learning continues to be a growing segment of higher education, and courses taught online require instructors to have a distinct and different set of skills than those of courses taught face-to-face (Adnan, 2018; Albrahim, 2020; Ching et al., 2018). In order to ensure that the online courses taught at our institution are effective, instructors are given the opportunity to complete the Online Course Development Program (OCDP) and have their courses certified by Quality Matters (QM), a third-party peer review program for online education (see Figure 1).

**Figure 1:** Flow chart of course development and Quality Matters Process

OCDP is a program devised by the instructional design team in the Online Learning Department at our institution and consists of 10 modules that focus on developing measurable course and module objectives; aligning assessments and course materials to the objectives; developing course calendars and syllabi; using online library resources and ideas related to intellectual property and copyright in education; and best practices in online teaching (Figure 2).

**Figure 2:** Overview of the Online Course Development Program**Module 1: Start Here**

Participants are introduced to OCDP and other participants through an introductory VoiceThread and they review the course guidelines and schedule.

**Module 2: Course Mapping**

Participants develop a course map for their course listing Course Objectives and Module/Weekly Objectives and show alignment for assessments and course materials.

**Module 3: Course Event Calendar & Syllabus**

Participants develop their course calendar and syllabus and review information on how to make these documents accessible to all learners.

**Module 4: Instructional Technologies & Student Friendly Course Navigation**

Participants review tools that they may choose to use in their online course, review best practices in course navigation, and discuss their use of tools and best practices.

**Module 5: Library Resources**

Librarians lead this module with information related to library resources and types of copyright. Participants discuss resources, copyright and fair use, and other questions.

**Module 6: Integrating Learning Objectives**

Participants review content related to integrating their developed learning objectives in their course. Mid-point review occurs this week with live group sessions featuring alumni.

**Module 7: Learner Interactions**

Participants review and discuss ways that they can bring in student-to-student, student-to-content, and student-to-instructor interactions in their courses.

**Module 8: Assignment Descriptions & Rubrics**

Participants review materials related to assignments, developing grading rubrics, and create a short presentation on how they will meet frequently missed QM standards.

**Module 9: Adult Learning Resources**

Participants review information specific to adult or non-traditional learners and share their experiences and strategies in teaching adult learners.

**Module 10: Best Practices in Online Teaching**

Participants review best practices in online teaching and share their key takeaways from the assigned reading.

Offered three times per year, OCDP allows faculty members to complete professional development work and collaborate one on one with an instructional designer to develop their online course for the next semester. Upon completion of their course design and the OCD program, instructors submit their course to QM to be peer reviewed by a team consisting of three members, a subject matter expert, a review chair, and an external reviewer, in order to be certified (Shattuck et al., 2014).

The QM rubric used in the peer review process consists of eight general standards: course overview and introduction, learning objectives, assessment and measurement, instructional materials, learning activities and learner interaction, course technology, learner support, and accessibility and usability. Under the general standards are 42 specific-review standards that are weighted as either essential (3 points), very important (2 points), or important (1 point). In order to meet standards, a course must receive a score of 85 points and meet all 23 essential standards. Courses that have been deemed quality courses by QM have been shown to have enhanced engagement, improved understanding of the purpose and expectations of assignments, were better organized, and offered more opportunities for interaction with peers and instructors (Crews et al., 2017; Hollowell et al., 2017; Sadaf et al., 2019). Other national and statewide evaluation instruments could be used for course review, such as Blackboard's Exemplary Course Program Rubric, California Community Colleges' Online Education Initiative Course Design Rubric, the Open SUNY Course Quality Review Rubric, Illinois Online Network's Quality Course Initiative, and California State University's Quality Online Learning and Teaching (Baldwin et al., 2018). Quality Matters has been a staple on our campus for several years, is more familiar to faculty, and is supported by the Online Learning Department on our campus.

As a part of the MHA curriculum redesign process, a goal was set that each of the courses taught within the program would be successfully certified through QM and that each faculty member would go through the OCDP program at least once during the redesign of their course, a goal that was met between January 2020 and August 2021. Through the curriculum redesign process, each of the courses transitioned from a traditional 16-week course to a new 7-week accelerated format.

### *Traditional Semesters vs. Accelerated Option*

While the transition to online courses has received a lot of attention over the past two decades, whether online courses should be a full-length semester-term or an accelerated term has not been the focus of much research. This section will review the positives and negatives associated with accelerated

online courses. A traditional semester-length course at an institution of higher education is between 15 and 17 weeks. An academic year is made up of full-length fall and spring semesters, with most universities offering shortened (or accelerated) summer or winter sessions. Bi-term or accelerated courses during the fall or spring semester are becoming a more common offering as programs look to attract new students. Accelerated courses come in a variety of lengths (5, 6, 7, or 8 weeks) depending on program curriculum and timing during the semester. Student demographics have led some graduate programs to shift to accelerated course options due to their appeal to adult learners (Wlodkowski, 2003). Adult learners often prefer accelerated courses, with the program accessibility, course length, and program curriculum designed with their lifestyle in mind (Kasworm, 2003). Adult learners come into accelerated courses more motivated and often with previous experience in the area of study (Daniel, 2000; Kasworm, 2003; Wlodkowski, 2003).

The accelerated course option has positives and negatives from the student perspective. Students identified a more focused experience with the course materials as a benefit, while some of the concerns included less time for active learning, concern for the use of group projects (lack of time for collaboration), perception that accelerated courses are easier, student workload outside of class, and the need for good assessment alignment with timeframe and overall program (Daniel, 2000; Lee & Horsfall, 2010; Lutes & Davies, 2013). While there may be potential for a higher student workload with accelerated courses (Walvoord, 2003), well-designed accelerated classes and programs can contribute to adult student persistence and create academic momentum with high rates of retention (Kasworm, 2003). Students have identified faculty presence and caring as helping with their success in online programs (Zajac & Lane, 2021).

While many faculty recognize the need for accelerated courses, they are more conflicted in their views. The main concern for most faculty teaching accelerated courses is the ability to maintain rigor in the shortened timeframe (Lutes & Davies, 2013; Wlodkowski, 2003). Accelerated courses are not specific to any one discipline but come with commonalities due to the teaching methodologies used during the shortened timeframe (Daniel, 2000; Davies, 2006). Some faculty try to keep their full-length and accelerated courses the same, while other faculty change course content or develop innovative methods to better suit the shortened format (Hyun et al., 2006; Kretovics et al., 2005). Even within the shorter time frame of accelerated courses, Swenson (2003) found reflection to be an important part of student interaction with the materials, while Zajac and Lane (2021) have stressed the need for faculty to maintain an online presence in their online course to promote student engagement.

Faculty workload when teaching accelerated courses can be perceived to be higher due to the shortened turnaround time for course preparation (Daniel, 2000) and grading (Kasworm, 2003). In a study of health professions students, Harwood et al. (2018) found no difference on student evaluations or student performance between semester long and intensive courses. Overall, most studies have found overall learning outcomes to be positive or neutral for accelerated courses or programs (Anastasi, 2007; Daniel, 2000; Davies, 2006; Seamon, 2004; Wlodkowski, 2003). In deciding to switch from the traditional 16-week format to an accelerated 7 weeks, we sought feedback from the students, before, during, and after, and found that the students appreciated the shorter courses and being able to focus on one course at a time.

### *Specialization Options of the MHA Degree*

Adult learners are often working full-time, yet they have the desire to further their education with a purposeful, focused degree. A relevant, applicable, and value-based education provides adult, mid-career learners with a targeted, comprehensive education (Withers, 2002). The long-term care industry is rapidly growing, and the market for jobs working with older adults is flourishing. This active job market justifies the cost of adding another specialization within our MHA degree to focus on the growing demand of long-term care administrators, which is referred to as our post-acute care (PAC) concentration.

Research shows that midcareer adults are seeking specialization for a competitive edge to stay viable in today's workplace (Gardner et al., 2022). In an article describing a business degree model, Withers (2002) stated that the pursuit of a niche in a field of study increases the employee's value to that specific industry. The tendency to be promoted from within is quite common in the healthcare industry. Clinicians are promoted to managers, who are promoted to regional directors, who are promoted to corporate positions. However, many times those mid-career clinicians lack the specific long-term care leadership knowledge that this concentration offers to gain the dual attributes of clinician and leader.

The PAC concentration of the MHA program at our institution offers a specialization that potential long-term care leaders may be seeking. The PAC concentration consists of four (3 credit hour) QM-certified courses specific to long-term care: MHA 655 Interdisciplinary Perspectives on Aging, MHA 656 Health Policy & Aging, MHA 657 Regulatory Standards in Post-Acute Care, MHA 658 Finance & Post-Acute Care. This PAC concentration is offered within the MHA program, or as a post-baccalaureate certificate.

The health informatics specialization is currently in the process of revision. The instructors of the health informatics courses will complete the OCDP, and

those courses will also seek QM certification once revised. Future specialty tracts of the MHA degree program will be considered, as appropriate, in order to meet the demands of the ever-changing healthcare management landscape. As such, the program is in a constant state of market evaluation to identify new opportunities for specialty concentrations.

### *Project-Based Learning*

Project-based learning is a form of instruction in which students rely on their autonomy to set goals, collaborate, communicate, and reflect on practical, real-world applications (Kokotsaki et al., 2015). Project-based learning is a long-standing and widely accepted teaching methodology that is used along numerous levels of the education spectrum, ranging from K–12 to higher education (Beckett & Slater, 2018; Blackwell et al., 2014). With respect to higher education, project-based learning is utilized in several settings such as professional education settings and graduate programs (Savery, 2006). Further, project-based learning has proven to be a sufficient means of learning in pre-professional programs and medical schools (Ertmer & Simons, 2006). Prior to the program redesign, students would enroll in a program capstone course toward the conclusion of their course work. In the course, students worked with a faculty mentor on a culminative workplace-based project. Students presented these projects in a face-to-face meeting with their fellow students. Given the constraints of the new 7-week course schedule and with face-to-face cohort meetings eliminated, the faculty were challenged with a new way to infuse project-based learning in the curriculum. Given that students tend to retain knowledge and skills at a higher rate when the knowledge and skills are applied to projects (Hadim & Esche, 2002), a decision was made to include project-based learning in key courses of the program. These course-unique projects were designed to be sequential in nature, with key steps of the final project completed weekly, culminating in a final project in week seven of the course.

For example, in our strategic planning course (MHA 625: Competitive Strategies in Healthcare), weeks one and two of the course are used to introduce basic, foundational strategic concepts to students. Week three of the course introduces students to SWOT (strengths, weaknesses, opportunities, and threats) and PEST (political, economic, social, and technological) analyses, and students conduct each of those analyses within their workplace. Week four focuses on students working on the first four steps of their strategic plan, which is their organization's mission/vision statement, core values, an evaluation of their SWOT and PEST analyses, and strategic goals for their organization. Week five of the course focuses on the successful measuring of



strategy by introducing conceptualizing key performance indicators. Week six focuses on evaluating strategic plans. This work all culminates in week seven, when students post their strategic plan (all six steps) in a VoiceThread discussion and present it to students. Additionally, other projects (and their respective courses are as follows):

**MHA 621** (The Health Service System) – Team Poster Presentation

**MHA 622** (Biostatistics) – Statistical Report

**MHA 623** (Quality Improvement in Healthcare) – Quality Improvement Project Presentation

**MHA 624** (Healthcare Economics) Cost Benefit Analysis

**MHA 626** (Legal and Ethical Issues in Healthcare) – Organizational Ethics Case or Conflict Presentation

**MHA 637** (Healthcare Leadership) Personal Leadership Portfolio

**MHA 642** (Health Informatics) – Data Visualization Dashboard

**MHA 643** (Healthcare Finance) – Healthcare Finance Presentation (based on a case study)

**MHA 655** (Interdisciplinary Perspectives on Aging) – Poster Presentation Related to Opportunities and Challenges of an Aging Population

**MHA 656** (Health Policy and Aging) – Health Policy Proposal

**MHA 658** (Finance and Post-Acute Care) – Strategic Financial Plan

Each of these course projects, in some way, mirrors the steps of the final project for MHA 625, with the major aspect being the longitudinal development of the final project throughout the course. As students complete weekly assignments that build upon the final project, they receive feedback not only from the instructor, but also from their peers. The comprehensive feedback approach to the development of final projects provides students with a strong direction toward their final project. Since embedding cumulative project-based assignments within the courses, student feedback has been overwhelmingly positive.

## CONCLUSION

The MHA program at our institution is excited to implement the revised program with the goal of delivering high-quality online education and improving access for individuals aspiring to undertake managerial and leadership roles in health care. Recent statistics presented by the United States Bureau

of Labor Statistics (USBLS) projected an astonishing 32% growth in the need for health care managers between 2020 to 2030 (USBLS, 2022). This finding further validates our program's decision to shift from a traditional model to an accelerated model to help meet the growing demand.

Overall, four key areas were addressed in the program redesign: (a) condensed length of courses, (b) peer review by an internationally recognized program to standards, (c) project-based pedagogy, and (d) addition of specializations and/or certificates. Reducing the length of courses from a 16-week semester to shorter durations is not a rare phenomenon in graduate education. Even though the variety of course lengths and flexible delivery formats are often seen as advantageous, they pose some challenges regarding standardization in accelerated programs in higher education. However, the QM certifications for courses, the option for PAC students to complete the Administrator in Training (AIT) residency, in-house program evaluation, and plans to offer additional, revised concentrations such as health informatics will ensure student success and ongoing program improvement. The addition of project work in the courses helps students develop strategic problem-solving skills, which are critical in the health care industry (Pettigrew et al., 2015). It also provides students with the opportunity to engage and address real-world concerns that makes learning meaningful and immersive.

Program evaluation will be conducted in this MHA program using a multipronged approach. The two important indicators of positive educational outcomes in the accelerated program will be students' progression to graduation and early identification and interventions for at-risk students (Cipher et al., 2017). The program will administer graduation surveys as well as continue to monitor the student enrollment, which has increased from  $n=29$  in 2011 to  $n=74$  in 2021. Additionally, the Online Learning Department of the university is creating a student survey for accelerated programs, along with the campus-wide course perception survey that provides a good snapshot of student satisfaction and identifies potential areas for improvement. The option of completing AIT residency for PAC students will help them prepare for the nursing home administrator licensure exams, which can serve as another indicator of student success. Furthermore, the QM certifications obtained by all courses in the program demonstrate the program faculty's commitment to excellence in education. In conclusion, the redesigned MHA program at our institution is dedicated to meet the increasing demands of the health administration workforce by providing practical, contemporary, and high-quality graduate education.

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