

# Accreditation Manual

Health Informatics & Health Information Management Education Programs



# **Forward**

The purpose of this manual is to provide program administrators with a practical reference for managing the accreditation process. It offers an outline of the process requirements, policies and procedures for programmatic accreditation of the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM). Accreditation is a tool for continuous program planning and evaluation. The accreditation process is designed to provide a framework for the ongoing collection of data, periodic review, evaluation, and reporting of results.

# **Contents**

1 About CAHIIM 1	5 Accreditation Award Categories 10
Statement of Scope	Determining Accreditation Status
The CAHIIM Vision	Awarding Accreditation
The CAHIIM Mission	Procedural Reconsideration Process
Core Values	CAHIIM Policy–Requests for Reconsideration 12
Public Values	Appeals Procedure
The Organization	Appealing Final Decisions
CAHIIM Recognition	Evaluation of the Accreditation Process
CAHIIM Staff	Voluntary Withdrawal of Accreditation (Closing an Accredited Program)
2 The Accreditation Process 4	Guidelines for Advertising Accreditation Status 14
The Sponsoring Institution	Inactive Programs
The Self-Assessment Process	AHIMA Certification Eligibility
CAHIIM Processing and Maintenance Fees	Published List of Accredited Programs
0	AHIMA Certification Eligibility
3 The Site Visit Process 6	Substantive Change Processes
Site Visit Team and Selection	Program Complaints
Recommended Site Visit Itinerary for 2-Day Site Visit 8	Complaint Process
4 The Annual Program Assessment Report (APAR) 9	
Online Process Description	
APAR Resources and Process Description	

# 1 About CAHIIM



# **Statement of Scope**

CAHIIM, a 501(c)(3), non-profit organization accredits associate and baccalaureate degree programs in health information management, and masters' degree programs in the health informatics and health information management professions in the United States and Puerto Rico.

When a program is accredited by CAHIIM, it means that it has voluntarily undergone a rigorous review process and has been determined to meet or exceed the Standards set by the Board of Directors.

### The CAHIIM Vision

CAHIIM is the globally recognized and trusted accreditation organization for Health Informatics and Health Information Management education programs to ensure the development of a workforce that meets the challenge of an information-intensive environment and its impact on global health.

### The CAHIIM Mission

CAHIIM serves the public interest in advancing the value of health informatics and health information management through quality education by:

- Establishing and enforcing accreditation Standards
- Recognizing programs that meet the Standards
- · Assessing student achievement
- Respecting educational innovation and diversity
- Recognizing academic institutions' autonomy
- Emphasizing the principle of volunteerism and peer review
- Embracing a culture of continuous quality improvement

### **Core Values**

In fulfillment of its mission, CAHIIM's processes, actions, and strategies are guided by these core values:

- Executing all of its duties in a trustworthy manner
- Embracing a culture of continuous improvement to maximize service, productivity and effectiveness
- Practicing inclusive decision making that relies on a variety of information sources and viewpoints from the public being served
- Exhibiting integrity and professionalism in conducting all of its operations
- Committing to a philosophy of a learning organization where volunteers and staff continually expand their capacity to achieve the best possible outcomes

### **Public Value**

By stating that a program has met established academic standards, CAHIIM accreditation provides the following values.

#### For Students

Allows applicant and prospective students to identify institutions and programs that meet established standards for professional career entry.

#### For Academic Institutions

- Provides a structured framework for ensuring sound educational practices, which involve faculty and staff in a comprehensive evaluation plan for the academic program;
- Stimulates self-improvement by providing nationally acceptable standards against which the program can self evaluate to meet the needs of students, the profession, and the public;
- Provides a frame of reference for the program to identify resources that may be needed to maintain or enhance the curriculum;
- Provides consultative feedback on possible areas of concern and where excellence is achieved.

#### For the Community and the Public

- Provides outcomes information about the academic program by a peer review organization whose function is to assess quality and content of the educational experience with entrylevel competencies for the profession and the public;
- Supports the process of professional certification by providing reasonable assurance of quality educational preparation and learning outcomes;
- Provides an implied level of assurance of a quality health care workforce dedicated to the safety and protection of health information through quality educational preparation.

#### For Employers

Provides assurance that graduates of a program accredited by CAHIIM have achieved an acceptable level of quality.

# The Organization

#### **Board of Directors**

The Board of Directors is the independent decision-making body of CAHIIM charged with making formal accreditation awards through program review of degree-granting educational programs. The Board is the strategic-making body for the organization.

The Board is composed of eight voting members selected by the Members of CAHIIM to serve four-year, staggered terms representing the following positions:

- 3 Health Informatics Representatives
- 4 Health Information Management Representatives
- 1 Public Member
- CAHIIM Executive Director/Ex-Officio

#### **Accreditation Councils**

Established by the Board to review programmatic accreditation information and recommend accreditation status to the CAHIIM Board of Directors. Coordinates with staff on policy and operational procedures to ensure assessment of program quality and program improvement.

The Health Informatics Accreditation Council

5 council members including 1 council member nominated by AMIA and 4 additional council members appointed by the Board of Directors.

# The Health Information Management Accreditation Council

7 council members, including 3 council members nominated by AHIMA, and 4 additional council members appointed by the Board of Directors.

#### **Panel of Accreditation Reviewers**

The Panel of Accreditation Reviewers serve as the profession's representatives in evaluating new and continuing academic programs, either by means of evaluation of periodic annual reports, or through Site Visits. Both processes identify areas where further investigation may be necessary. When required, they visit the program's campus and interview program officials, members of the communities of interest, and students. All information is communicated to the Accreditation Councils, who use the information gathered by panel members to make an accreditation award recommendation to the Board of Directors.

# **CAHIIM Recognition**

Council for Higher Education and Accreditation (CHEA)

A national advocate and institutional voice for self-regulation of academic quality through accreditation, CHEA is an association of 3,000 degree-granting colleges and universities and recognizes 60 institutional and programmatic accrediting organizations.

CHEA

One Dupont Circle NW, Suite 510, Washington, DC 20036 (tel) 202-955-6126, (fax) 202-955-6129 chea@chea.org

#### Recognition Statement—September 28, 2012

At its meeting on September 24-25, 2012, the CHEA Board of Directors reviewed the recommendation of the CHEA Committee on Recognition regarding the recognition application submitted by the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM). The board of directors accepted the committee's recommendation and granted recognition to CAHIIM.

### **CAHIIM Staff**

The Executive Director and Accreditation Staff provide programmatic support to academic faculties, administrators and to the public in several ways. They assist programs by answering questions, and providing consultation about Accreditation Standards and the accreditation process for developing and continuing programs. They counsel prospective and current students on issues related to accredited programs and curriculum and accreditation expectations.

Staff reserves the right to make final administrative decisions in regards to a program's CAHIIM accreditation maintenance and application status.

Staff

Executive Director Claire Dixon-Lee

PhD, RHIA, FAHIMA, CPH

Accreditation Operations Manager George Payan

Senior Education Quality Officer Linde Tesch
MS, RHIA, CAE

Accreditation Business Manager Benjamin Reed

Contacting CAHIIM Staff

E-mail info@cahiim.org.

U.S. or Express Mail CAHIIM

233 N. Michigan Ave.

21st Floor

Chicago, IL 60601-5800

Phone 312.233.1100

Fax 312.233.1948

# The Accreditation Process



### **The Accreditation Process**

Accreditation by CAHIIM is a status that Health Informatics and Health Information Management (HIM) educational programs choose to apply for voluntarily.

Accreditation is a confirmation that the program is in compliance with the CAHIIM Standards and Interpretations:

- Health Informatics (HI) Masters Degree Program (adopted 2010)
- HIM Masters Degree Program (adopted 2008)
- HIM Baccalaureate Degree Program (adopted 2005; revised 2012)
- HIM Associate Degree Program (adopted 2005; revised 2012)

The Standards must be applied to all programs uniformly for consistency in the accreditation process, fairness and to avoid self-serving purposes. As a result there cannot be exceptions to the application of the Standards for Accreditation. This allows CAHIIM to effectively and fairly assess all programs for compliance.

# The Sponsoring Institution

When a specific campus confers the academic degree, the program will be recognized individually for CAHIIM programmatic accreditation. If accredited, each campus must complete the following process requirements: separate Self-Assessment, Site Visit, Annual Report and submit the Annual Accreditation Fee.

The steps for accreditation fall into two major categories: Initial Accreditation and Continuing Accreditation. The accreditation program review process is required for intent to open a program on another campus.

## **The Self-Assessment Process**

The Self-Assessment process is an essential part of the accreditation process and is designed to help the educational institution improve program effectiveness by identifying its strengths and weaknesses. The objective of the Self-Assessment process is to provide qualitative as well as quantitative assessments of the program.

Careful review of the current program and evaluation of its goals and objectives, content, policies, administration, educational resources, and general effectiveness of faculty, administrative staff, advisory committee, and students is the best means of securing lasting educational improvements within any institution or program.

The Self-Assessment process serves the following functions:

- Demonstrates incorporation of the Standards into the Self-Assessment process
- Provides an opportunity for evaluation of the program, its goals, objectives and outcomes

A primary goal of the accreditation process (initial and continuing) is the development of a thorough understanding by an institution of its existing program and the needs of the community of interest, including potential students and employers. The results of such an analysis may be a reconfirmation of the present curriculum or recognition of the need to make changes, as well as provision of documentation of the current characteristics of the program.

The failure of a program to carry through this process and to develop a thorough Self-Assessment Document may result in rejection of a request for accreditation or the postponement of the Site Visit until an acceptable Self-Assessment Document is prepared for the Site Visit Team.

#### **Self-Assessment Committee**

The Self-Assessment committee is of paramount importance in program evaluation and improvement. This interaction provides an opportunity for all those concerned with the program to participate in the evaluation process. The committee should be appointed by the Dean of the administrative unit in cooperation with the Program Director. CAHIIM recommends that the committee include representatives of the administrative staff, faculty, students, external program advisory committee, and from the professional practice experience sites. It should be chaired by the qualified Program Director. A Self-Assessment can be an effective instrument for change only if it is conscientiously conducted by responsible committee members with the full support of the administration, faculty, and students of the educational institution. The Self-Assessment committee meets initially to plan how the self-evaluation will be conducted and to assign individuals to gather all required information requested to be uploaded for specific questions. The program director must assemble and author the Self-Assessment.

The Self-Assessment describes, in logical Standard sequence, the educational program as it exists, indicates the program's strengths and weaknesses, develops strategies for correcting the weaknesses, and projects plans for future development of the program. The committee should ensure that information requested is accurate, substantive, and of high quality.

The educational program must meet the stated requirements of the Standards and should be written so that those unfamiliar with the program will gain the following:

- Understanding of the philosophy, mission, goals, and objectives of the educational institution and its program.
- Understanding of the environment in which the program campus operates, the learning resources available, and the learning experiences provided.
- Sufficient information about the curriculum to appraise it fairly in relation to its published description in the college or university catalog or bulletin, the stated program goals and objectives, and current educational Standards.

# **CAHIIM Processing and Maintenance Fees**

All current program fees for each programmatic level can be found on the CAHIIM website.

- 1. All Fee invoice payments are made payable to CAHIIM.
- 2. The review of the program may not continue until payment is received. Continuing programs may be placed on Administrative Probation.
- 3. The Site Visit Fee

This fee is inclusive of the following expenses related to the review and site visit for a three-member team: lodging, ground transportation, parking, rental car, airfares, and meals with the exception of the lunch the first day at the institution. For total of airfares beyond \$1,500 or reschedule of the site visit, the program will be invoiced the difference after notification and approval. We always try for the lowest airfare without inconveniencing the site visitor and they are required to get our approval prior to booking. The fee is non-refundable in the event of cancellation of the site visit. The program will be invoiced in advance of the site visit with payment due within 30 days or the process may be delayed.

# Set.

# 3 The Site Visit Process

### The Site Visit Process

Site Visits are conducted to assure the accrediting organization that the documented educational program complies with the accreditation Standards for academic programs.

The Site Visit can provide the opportunity for faculty to consult with educational specialists; assist the institution in its continuing Self-Assessment process and improvement of the quality of instruction; and promote exchange of ideas between educators and practitioners of the profession.

The Site Visit process provides the opportunity to validate or clarify the contents of the Self-Assessment Document and to determine the extent to which a program complies with the Standards. The Site Visit is predicated on the Self-Assessment review process results prior to the Site Visit. The Site Visit Team is responsible for evaluating additional documentation provided to them during the Site Visit that substantiates their assessment and evaluation.

The Site Visit Team representing CAHIIM will make an in depth analysis of the program in order to discuss the program with appropriate administrative officials and faculty members. The team will visit classrooms, practice laboratories, library resources, and review online technical applications. In addition, the site visitors will have focused discussions with students enrolled in the program, advisory committee members, and other individuals associated with the program. Information to be reviewed onsite include: agreements, advisory committee minutes, faculty handbook, examinations and course related materials (such as textbooks, laboratory projects, research reports), and student files maintained by the Program Director.

The Site Visit Team or CAHIIM staff member may request additional information to be provided onsite.

Site Visit Team Members attempt to gain an appreciation, philosophy, mission and objectives of the educational institution and the program. The Team endeavors to obtain sufficient information to understand the total educational program and to compare the program's stated philosophy, goals, and objectives with the established CAHIIM Standards.

The Site Visit is only one part of the review process and the Site Visit Team will make no assumption regarding the final outcome (accreditation status) of the program. Official notification of accreditation is the purview of the CAHIIM Board of Directors.

### **Site Visit Team and Selection**

The Site Visit Team is composed of up 3 members representing CAHIIM. These individuals are qualified through education, experience and training in the process. A CAHIIM representative will be included.

The team composition is selected based on availability and confirmation of no conflicts. After site visitors are assigned, CAHIIM Staff notifies the program director to ensure no possible conflicts with the institution. Every effort is made to avoid any conflict of interests in the assignment of a Site Visit Team. However, if a conflict exists, please notify the Accreditation Operations Manager immediately. Once a site visit date is identified for a program applicant, the date will be posted on the CAHIIM website.

#### **Hotel And Travel Information for Site Visitors**

CAHIIM requests that all local hotel room reservations be made by the program for single occupancy and guaranteed for late arrival. Check in will be the day prior to the Site Visit, with checkout on the second day of the site visit. Written or e-mailed hotel confirmations must be provided no later than 30 days before the site visit or as directed by CAHIIM staff.

Final hotel expenses will be paid by the assigned CAHIIM staff person at check out.

#### For the Site Visit Team Observer (if applicable)

A CAHIIM board member observer may on occasion be assigned as a full participating member on the site visit for training purposes. The program is not responsible for any of the observer's site visit expenses.

#### Air Travel Arrangement

Site visitors are responsible for making their own air travel arrangements through the CAHIIM-designated travel service.

#### Car Rental and Local Information

The Site Visit Team will rent a car at the airport. If a shuttle is available to and from the designated hotel please provide this information to the Site Visit Team. If there is a campus map, information about the city, restaurant guide, etc., or any other useful information please forward to the assigned CAHIIM staff member.

#### Hotel Reservations for all Site Visitors

Single room reservations must be made by the sponsor educational institution.

Hotel reservations must be guaranteed for late arrival for the day prior to the site visit, with checkout on the second day of the site visit. Written or e-mailed hotel confirmations must be provided to the Site Visit Team as directed by CAHIIM staff.

#### **Local Ground Transportation**

For local ground transportation, a rental car will be secured for the site visitors, if necessary. If a shuttle is available to and from the airport please provide this information to your Site Visit Team.

If there is a campus map and/or other information about the city (e.g., city map, restaurant guide, etc.), or any other information you think the site visitors/observer might find useful, please forward copies of this to all Site Visit Team members.

#### The Site Visit Fee

This fee is inclusive of the following expenses related to the review and site visit for a three-member team: lodging, ground transportation, parking, rental car, airfares, and meals with the exception of the lunch the first day at the institution. For total of airfares beyond \$1,500 or reschedule of the site visit, the program will be invoiced the difference after notification and approval. We always try for the lowest airfare without inconveniencing the site visitor and they are required to get our approval prior to booking. The fee is non-refundable in the event of cancellation of the site visit. The program will be invoiced in advance of the site visit with payment due within 30 days or the process may be delayed

# **Site Visit Itinerary for 2-Day Site Visit**

	Duration	Event	Description
Day 1	30 min	Introductory meeting	A welcome meeting with the appropriate dean, program director and other administrators (budget and advising) who are responsible for the educational program. Typically the first scheduled meeting begins approximately at 8:30 AM.
	2–3 hrs	Meeting with the program director and HIM faculty	• Discuss and review information received in the Self-Assessment Document; clarify responses and process issues.
			• Review student records and program files as requested by the site visitors.
			• Discuss the professional course content of the HIM curriculum.
			• Conduct interviews with the program faculty and other faculty teaching the HIM professional course content.
			<ul> <li>Course materials, textbooks, tests, projects and other resources should be made available.*</li> </ul>
	1 hr	Site Visit Team business lunch	A working lunch for site visit team members.
	1 hr	Site Visit Team interviews with HIM students	Separate 30-minute interviews should be scheduled for the first year students and second year students.** Program officials are not present at the time.
	1 hr	Site Visit Team meets with program advisory committee	Professional practice supervisors and employers may be included. Program officials are not present at the time.
	30 min	Site Visit Team tours program facilities	Review learning resources such as the library, student laboratories, classrooms, media center, computer labs, and HIM technology applications. Depending on the situation, team members may be assigned to tour one or more facilities separately.
	30 min–1 hr	Site Visit Team discretionary meeting	A meeting to complete or clarify discussions remaining from Day 1 with program faculty and the program director as determined by the Site Visit Team leader.
	1 hr	Site Visit Team meeting	A working conference for the Site Visit Team. Program officials are not present at this time.
End of Day 1			
Day 2	30 min	Meeting with program director	Discuss the site visit team's preliminary assessments with the program director respect to the Standards.
	2 hrs	Site Visit Team meeting	Site Visit Team only.
	30 min	Break	Site Visit Team break.
	30–45 min	Results meeting	A meeting with the all persons present at the introductory meeting. The dean and the program director must be present. The scheduled time of the this meeting may be subject to change by the Site visit team based on their progress with the site visit
	Provide name	s of individuals on the itinerary.	

<sup>\*</sup> Online courses will require password access for site visitors and time allocated to review online content, resources and evaluation methods.

<sup>\*\*</sup> Evening or distance education students may be interviewed via conference calls or speakerphone, or the site visit itinerary extended so that they may attend an evening offering.

# The Annual Program Assessment Report

# Annual Program Assessment Report (APAR)

All accredited programs at each level must complete the documentation of their program and student outcomes and assessment process. The Annual Program Assessment Report (APAR) is required by the CAHIIM Standards for Maintenance of Accreditation.

Evidence of academic program outcomes is an important dimension of accreditation review. The higher education community, policy makers, and students are seeking information about what students achieve as part of the consideration of the quality of accredited programs and institutions. Accrediting organizations around the country are responsible for establishing clear expectations that institutions and programs will routinely develop, collect, interpret, and use evidence of student learning outcomes. CAHIIM has based the Standards for Accreditation of Health Informatics and Health Information Management Programs on the premise of outcomes-based assessments. The APAR is designed to capture this information as outcomes-based evidence in several major categories, identified in the APAR System.

# **Online Process Description**

Programs must submit the completed APAR information files online, using the web-based APAR System during the "Open Status" data collection period as determined by CAHIIM Staff.

Program Directors are requested to complete all sections and must complete a separate APAR for each accredited program level and campus with its own Education Program Code (EPC) as determined by CAHIIM. Continuing programs undergoing the Comprehensive Program Review process must still complete the annual reporting process every year.

Once all data has been completed and submitted, the data will be stored, allowing for benchmarking among academic programs, and the addition of future reporting years. Historical program data and reports will be available for program/institution access throughout the year.

# **APAR Resources and Process Description**

Instructions and development information for each reporting cycle is made available on the CAHIIM website. All participating programs are notified through e-mail notifications and online announcements on the CAHIIM website. Failure to submit this annual information will place the program on Administrative Probationary Accreditation until satisfactorily submitted.

# 5 Accreditation Award Categories

# Accreditation Award Categories

The following categories of accreditation are used by CAHIIM to confer a program's compliance level with the Standards:

- Accreditation (Initial and Continuing)
- Probationary Accreditation
- Administrative Probationary Accreditation
- · Accreditation Withheld
- Accreditation Withdrawn

CAHIIM determines awards after the institution has been given an opportunity to respond to the findings and results of their site visit. If necessary, the sponsoring institution of an educational program may withdraw its Application for Candidacy or submit a request for Voluntary Withdrawal (Continuing Programs only) at any time before the Board of Commissioner's final action.

# **Determining Accreditation Status**

When the CAHIIM Board meets to determine the Accreditation Status of any program, they reach their decision based upon an internal Rating Scale that is used to achieve process consistency. Each Standard has been allocated a validated number of points

based upon whether the standard compliance has been Not Met or Partially Met. These points are added up to determine the program's accreditation status.

# **Awarding Accreditation**

Initial or Continuing Accreditation may be awarded when the accreditation review process confirms that the program is in compliance with the Standards. Graduates are not allowed to apply for the AHIMA RHIA or RHIT certification exam until the program has received the official letter awarding Initial Accreditation from CAHIIM. It is the responsibility of the program to inform the graduates of the accreditation status of the program.

CAHIIM Accreditation is not time limited. Once achieving accreditation, the program's accreditation continues until there is cause to change its status. The program will submit the APAR annually.

Accreditation is based upon whether the Standards are in compliance.

CAHIIM determines accreditation after the institution has been given an opportunity to respond to the findings and results of their site visit.

## **The Progress Report Process**

A satisfactory Progress Report may be required to be sent to CAHIIM by the required due date. The Progress Report must be submitted using the CAHIIM Accreditation System (CAS) including all items of evidence that substantiates the corrective action. The purpose of the Progress Report is to give the program an opportunity to demonstrate resolution of deficiencies before its next comprehensive review. Programs should note that if a satisfactory, 'Second Progress Report" is not submitted within the requested time period, as determined by CAHIIM, the program may be assigned a Site Visit in the next academic year.

#### **Focused Review**

A focused review of the program may be requested at anytime as a result of the APAR information submitted. The review may or may not include a site visit of the program, when concerns are raised regarding a pattern of less than expected or established threshold, programmatic outcomes as determined by CAHIIM.

#### **Probationary Accreditation**

This category is not applicable to initial applicant programs. Probationary Accreditation is awarded when the program is not in compliance with the Standards and the deficiencies are so serious that the capability of the program to provide an acceptable educational experience for the students appears to be threatened. Probationary Accreditation is limited to a one year period.

When the CAHIIM recommends Probationary Accreditation, the sponsoring institution's chief executive officer is notified. The CAHIIM accreditation award letter contains a clear statement of each deficiency deemed to be in non-compliance with the Standards. Before awarding Probationary Accreditation, CAHIIM provides the sponsoring institution with an opportunity to respond to all cited Standard deficiencies. During a period of Probationary Accreditation, programs are recognized and listed as accredited.

CAHIIM awards of Probationary Accreditation are final and not subject to appeal. Failure to correct the deficiencies may result in Withdrawing Accreditation. Currently enrolled students and those seeking admission should be advised that the program is under Probationary Accreditation. However, enrolled students completing the program under Probationary Accreditation are considered graduates of a CAHIIM accredited program.

#### **Administrative Probationary Accreditation**

Administrative Probationary Accreditation will be awarded when a program does not comply with one of the following administrative requirements for maintaining accreditation as required by the Standards:

- Submitting the CAHIIM Annual Program Assessment Report (APAR) and other required reports by the determined CAHIIM date.
- Participating in a designated periodic site visit of the accredited program.
- Informing CAHIIM of any adverse changes in the institution affecting the program's accreditation including changes in program officials (Chief Executive Officer, Dean, and Program Director), within 30 days of the effective date. Please contact CAHIIM Staff with any questions.
- For Program Director changes, notification must include; official date of official appointment, name and credentials, a copy of the person's current curriculum vitae, and confirmation of all contact information: mailing address, phone, fax, e-mail.
- Payment of all CAHIIM administrative fees.

Administrative Probationary Accreditation may be as short as thirty (30) days, but may not exceed six months. Exceeding six months will result in a recommendation of accreditation withdrawn. CAHIIM awards of Administrative Probationary Accreditation are not subject to appeal. During a period of Administrative Probationary Accreditation, programs are recognized and listed as being accredited.

#### **Accreditation Withheld**

A program seeking Initial Accreditation may be recommended for Accreditation Withheld if the accreditation review process confirms that the program is not in compliance with the Standards. The program is provided with a clear statement of each Standard deficiency. When the CAHIIM recommends Accreditation Withheld, the chief executive officer is notified by express mail.

#### **Accreditation Withdrawn**

Accreditation may be involuntarily withdrawn from a program as a result of Administrative Probationary Accreditation or Probationary Accreditation, if, at the conclusion of the specified probationary period, the accreditation review process confirms that the program is not in compliance with the administrative requirements for maintaining accreditation or is not in compliance with the Standards. When the CAHIIM recommends Accreditation Withdrawn, the Chief Executive Officer of the sponsoring institution is notified by express mail.

Graduates enrolled in the program at the time the sponsoring institution is notified that their accreditation has been withdrawn will be considered graduates of a CAHIIM accredited program.

# **Procedural Reconsideration Process**

Probationary Accreditation, Accreditation Withheld, and Accreditation Withdrawn

Prior to the final decision, CAHIIM provides an opportunity for the institution to request CAHIIM Procedural Reconsideration of its recommendation to the program. The letter informing the CEO of the accreditation recommendation describes the Reconsideration Process. The sponsoring institution may withdraw its Application for Candidacy at any time.

# **CAHIIM Policy—Requests for Reconsideration**

- If CAHIIM denies initial accreditation or continuing accreditation for a program (accreditation withheld), places a program on probationary accreditation or withdraws accreditation, the program may request reconsideration of the decision by CAHIIM.
- 2. The program must submit the request in writing postmarked within 30 calendar days of the date of receipt of the notice of that decision, as documented by return receipt of certified mail. If such a request is not submitted and postmarked within this 30 day period, all rights to reconsideration will be considered to be waived and the decision will be final. The program will be notified of the final decision.
- 3. If a written request for reconsideration is received from the program which qualifies for reconsideration within 30 days following the date of the program's receipt of the notice, there will be no change in the accreditation status of the program until the reconsideration process has been completed.
- 4. The written request for reconsideration must include a concise statement of the reasons for contesting CAHIIM's decision. On reconsideration, CAHIIM will not consider any information regarding modifications to the program made subsequent to the determination of the original decision.
- 5. Upon receiving a written request for reconsideration, CAHIIM will provide the program the opportunity to appear before (if an onsite meeting) or at a virtual meeting before the Commission at its next regularly scheduled meeting to clarify the information available to CAHIIM at the time of the original decision. The program, at its own expense, may participate in the meeting either in person or by teleconference and may bring administrators and legal counsel. Legal counsel is limited to providing advice to the program.

- 6. On reconsideration, CAHIIM may decide to a) sustain the original decision or b) rescind the original decision and refer the matter to a review team for additional evaluation and/or site visit. If a site visit is conducted, the program will be responsible for the cost of the visit.
- 7. After reconsideration of the original decision, CAHIIM will notify the program by certified mail of the action taken within 30 days of the meeting at which the request is considered. Other administrative officers currently on file with CAHIIM will receive a copy of the letter by first-class mail. The notification will include a statement of specific findings.
- 8. Following reconsideration, if the original decision to place the program on probation is sustained by CAHIIM, the decision will be considered final. If the original decision to withhold or withdraw accreditation is sustained by CAHIIM, the program may file an appeal.

## **Appeals Procedure**

An institution may only appeal final decisions of withholding or withdrawing of accreditation. The CEO must initiate this process by written request to CAHIIM to request information regarding the Appeals Process and the applicable processing fee.

## **Appealing Final Decisions**

- To file an appeal the program must notify the Executive Director of CAHIIM in writing, by certified mail, return receipt requested, that the program appeals the decision. The written appeal must be postmarked within 30 calendar days of the date of receipt of the notice of the reconsideration decision, as documented by return receipt of certified mail. If such a request is not submitted and postmarked within this 30 day period, all rights to appeal will be considered to be waived and the decision will be final. The program will be notified of the final decision.
- 2. The written appeal must include pertinent facts in support of the appellant's position and must be signed by the program director and an administrator from the sponsoring institution. The appeals fee must be submitted with the written appeal. The appeals fee is based on the partial cost of convening an Accreditation Hearing Committee. The appeals fee is posted on the CAHIIM website.
- 3. The CAHIIM Chair-Elect shall appoint a three member Accreditation Hearing Committee and shall designate one member of the Hearing Committee to be Chair.

- 4. The Hearing Committee functions as an independent body for the purposes of review of materials and hearing verbal presentations from the program and CAHIIM relative to the decision under appeal.
- 5. Hearing Committee members may be former Commission members or former or current Panel of Accreditation Reviewers, with at least one having been a former CAHIIM public member. The following individuals are ineligible to serve on the Hearing Committee: members of CAHIIM and CAHIIM Review Panel members who were involved in the review of the program leading to the decision under appeal and CAHIIM staff.
- 6. The appeal hearing will take place in Chicago no later than 45 days following confirmation of appointment of the Hearing Committee. CAHIIM staff in consultation with the program and the Hearing Committee Chair will determine a date and time for the hearing. CAHIIM staff will make all arrangements for the hearing after discussion with the Hearing Committee Chair.
- 7. The appellant may bring program faculty, administrators, and legal counsel to the appeal hearing at its own expense. CAHIIM and its legal counsel may attend and participate in the appeal hearing at its own expense. Because the nature of the hearing is investigative rather than adversarial, participation of legal counsel is limited to providing advice to the appellant or CAHIIM. At least one CAHIIM staff member will be present at the hearing to act as a technical advisor to the Hearing Committee.
- 8. The purpose of the appeal hearing is not to reevaluate the program anew, but to determine a) whether established policies and procedures were not followed in making the decision and/or b) that the decision was not supported by substantial evidence. The Hearing Committee will consider the documents reviewed by CAHIIM, the record of CAHIIM's action, materials submitted in support of the appellant's position at the time the appeal was requested, and any oral and written presentations to the Hearing Committee. The Hearing Committee will not consider any changes in the program or descriptions of the program that were made after CAHIIM's original decision.
- 9. The appellant will bear the burden of persuasion that a) there is not substantial, credible and relevant evidence to support the action taken by CAHIIM, and/or b) there has not been substantial compliance with the policies and procedures governing the process resulting in the action taken by CAHIIM.
- 10. At the appeal hearing, the appellant and CAHIIM will have an opportunity to present oral testimony. The Hearing Committee will determine specific time limitations before the hearing in an effort to confine the hearing to a reasonable period. A list of individuals, including legal counsel who

- will be present at the hearing must be submitted to the Hearing Committee at least two weeks prior to the hearing. No individuals who are not specifically identified by the deadline may participate in the hearing, with the exception of substitutes for participants who become ill or otherwise incapacitated. The hearing is the final opportunity for the participants to present their positions.
- 11. The Hearing Committee will deliberate in executive session following adjournment of the appeal hearing. The Hearing Committee Chair will coordinate development of the Hearing Committee's written summary of findings, its recommendation, and the rationale for the recommendation. The Hearing Committee may decide to affirm or remand the decision being appealed back to CAHIIM. The Hearing Committee shall provide a written summary of its findings and rationale in a recommendation to CAHIIM for a final decision.
- 12. The decision of CAHIIM will be final and there will be no further appeal of these issues. CAHIIM will notify the appellant by certified mail of the final decision within 30 days of the meeting at which the Hearing Committee's recommendation is considered. Other administrative officers currently on file with CAHIIM will receive a copy of the letter by first class mail.

# **Evaluation of the Accreditation Process**

CAHIIM continuously evaluates the effectiveness of the accreditation review process for educational programs. To assist in these evaluation efforts, an Accreditation Process Evaluation form is used to solicit information on the following:

- The arrangements for the Site Visit;
- The performance of the Site Visit Team;
- The participation of institutional personnel in conducting the analytical self-evaluation and preparing the Self-Assessment Document;
- Suggestions for improving the overall program review process.

The form will be sent to the Program Director and should return the evaluation to the Accreditation Manager. Results of this evaluation are reported in aggregate.

# Voluntary Withdrawal of Accreditation (Closing an Accredited Program)

A college or university that establishes a program incurs an obligation to the students to conduct the program as planned. If circumstances require program closure, advanced notice is required to CAHIIM. Programs may not request voluntary withdrawal of accreditation until all students in the program have graduated. Until then, the institution must continue to pay the CAHIIM Annual Accreditation Fee.

Notification of Program withdrawal must be submitted in writing by the chief executive officer to include:

- Reasons for program closure
- The date of the last graduating class

Program teach out plans should be provided.

## Guidelines for Advertising Accreditation Status

CAHIIM requires that all institutions sponsoring CAHIIM Accredited programs to follow the guidelines listed below to assure accuracy in public advertising and announcing of the program's accreditation status. Statements should not be made about a possible future accreditation status not yet confirmed by the CAHIIM. Statements concerning accreditation should not be the focal point in an advertisement. CAHIIM must be named as the accrediting organization.

The following statement, or similar statement, may be used in catalog announcements, descriptive or promotional information, and advertising:

The HIM/HI (degree level) program is accredited by the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM).

The following is an example of a statement for new programs in Candidacy Status:

The HIM/HI (degree level) program is in Candidacy Status, pending accreditation review by the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM).

Please contact <u>CAHIIM Staff</u> with any questions regarding publishing the program's accreditation status.

## **Inactive Programs**

The sponsoring institution may request inactive status for up to two (2) years and may not accept a new class of students. The program must continue to pay the CAHIIM Annual Accreditation Fee. After being inactive for two years and the program does not admit a new class of students, the program will be considered discontinued and accreditation may be withdrawn. The program must notify CAHIIM Staff immediately upon reactivation.

# **AHIMA Certification Eligibility**

When the program is awarded accreditation, graduates will be eligible to apply and take the national certification exam for Registered Health Information Administrator (RHIA) or Registered Health Information Technician (RHIT). Published policies regarding exam(s) eligibility should not be included within the CAHIIM accreditation statement.

Please contact the AHIMA Commission on Certification (CCHIIM) at 312.233.1100 if you have any questions or are in need of certification information or past reports for your program.

# Published List of Accredited Programs

The <u>CAHIIM Accredited Programs Directory</u> is the official list of accredited programs.

## **Substantive Change Processes**

CAHIIM must be notified within 30 days for the following changes:

• Institutional Sponsorship Changes

A letter must be submitted when a program has a change with the sponsoring institution, which may include a change in ownership, transfer of sponsorship, mergers, or institutional legal status affecting the program or students. Upon review, the program may be assigned a Focused Review and a Site Visit within one year to review the new entity.

Changes in Program Delivery

A letter must be submitted to CAHIIM when the complete land-base program is offered through distance delivery, which describes the change and any impact to the curriculum or students.

A program must notify CAHIIM when there is a change to inactivate the program (i.e., not accepting a new class of students).

Changes in Program Officials

A written letter on the institution's letterhead from the Dean informing CAHIIM Staff must be submitted with all contact information including mailing address, phone, fax and e-mail.

Dean or President: Submit complete contact information to CAHIIM staff. Included must be the effective date of the change.

Program Director: A current curriculum vitae must be submitted to CAHIIM Staff that documents the official appointment date, credentials, title, and academic degree in respect to the Standards.

## **Program Complaints**

Accredited programs are subject to complaints from students and other public stakeholders. CAHIIM will initiate the required process for investigating these concerns if they target noncompliance issues related to the Standards. Complaints must not be anonymous and must show evidence that steps to reach a resolution at the sponsoring institution have been exhausted. Please review the steps for initiating the CAHIIM Complaint Process. Please contact CAHIIM Staff in order to discuss this process before submission.

# **Complaint Process**

- 1. To receive formal consideration, all complaints must be submitted to the Chair of the Commission in writing and signed. The complainant must also demonstrate that reasonable efforts have been made to resolve the complaint or those efforts were unavailing.
- 2. On receipt of a written complaint, the Commission staff sends a letter of acknowledgment to the complainant advising of the referral to the Commission.
- 3. Following consultation with the Commission staff, the Chair determines whether the complaint relates to the manner in which the program complies with the Standards or follows established accreditation policies.
- 4. If the complaint does not relate to the Standards or to established policies, the person initiating the complaint shall be notified accordingly by the Chair within 20 working days of receipt of the complaint.

- 5. If the complaint does relate to the Standards, the complainant shall be notified accordingly by the Chair within 20 working days and provided with the Staff prepared processes for handling such complaints. The following shall also occur:
- 6. The confidentiality of the complaining party shall be protected unless the complainant authorizes disclosure of his/her identity.
- 7. The Chair shall notify the program director and the chief executive officer of the sponsoring institution of the substance of the complaint and shall request a preliminary investigation and report on the findings within 30 days of the sponsoring institution's receipt of the letter of notice.
- 8. The Chair may request further information or material relative to the complaint from the complaining party, the institution, or other relevant sources. On receipt of the responses, the Commission shall consider all the information and formulate the appropriate action according to the following guidelines:

If the complaint is unsubstantiated or not related to the Standards, all parties shall be notified within 10 days.

If the complaint reveals that the program is found not to be in substantial compliance with the Standards, one of two approaches shall be taken:

- The program may submit a satisfactory Report within 30 days demonstrating compliance. If the Commission accepts the report as satisfactory, then all parties are notified of this action and the program's accreditation status is unchanged
- Should the program's responses not be satisfactory and is in continued substantial noncompliance, the Commission may request a site visit of the program. The site visit must occur as soon as possible but not more than 30 days following the investigation. The cost shall be borne by the program.

