



Directions for Structuring a Self-Assessment Document: **Due May 1st**

The Self-Assessment Document consists of two sections: Sections I & 2 are described below.

1. **Section I:** The Self-Assessment Document must be typed into the form provided and include all information requested in this **Program's Narrative** response.

Section II: The Appendices must be included here, and must be bound separately from Section 1 and be clearly identified. **Both documents must be bound, paginated, and contain appropriate tabs outlining sections (i.e. Parts A, B, C, D, E, F, G).**

Binders are acceptable. **If the Appendices are too large when collating, they may be separated into additional volumes as long as each volume is clearly identified.**

2. **CAHIIM Copies:** Three (3) copies of the completed Self-Assessment Document must be produced for submission to CAHIIM by the due date, as well as an adequate number of copies of the Self-Assessment Document for internal distribution;

Site Visitor Copies: Three (3) additional copies of the completed Self-Assessment Document must be retained and sent directly to the Site Visit Team upon written confirmation of the team from CAHIIM.

Section I

1. **Cover Page**
Cover page bearing the name, address of the Institution and the program level.
2. **Table of Contents for Section I**
3. **Needs Analysis and Supporting Data**
Describe the process used to determine need for the HIM program at this institution and append any substantiating documentation.
4. **Program Data**
Include all requested information in these sections.
5. **Standards Assessment**
Complete the Self-Assessment Document by inserting the required narrative information into the template provided. **Narrative information must be typed for all Standard questions or criteria.** It is recommended that page reference numbers should be inserted into the appropriate locations in the Narrative to reference Appendices, as appropriate during collation. The right column of the template delineates those items that must be included in each Appendix.

Developing the Standards Assessment Section

The self-assessment document includes not only the **Standards** required of all Health Information Management education programs, but also the evidence and method required by CAHIIM in order to demonstrate compliance with those *Standards*.

Under each *Standard*, there will be requested items of evidence requested to document compliance with the *Standard*. An institution must provide all types of evidence listed under each *Standard* to ensure compliance.

Standards Criteria for Evaluation:

Narrative- Brief description in paragraph form that addresses each of the criteria in the *Standard*. **This information should be provided directly below the description of the narrative requested.**

Appendices- The appropriate page reference to the List in the Appendix should be made where indicated.

Section 2 – Appendices

- 1. Table of Contents for Section 2 - Appendices**
Completed Table of Contents with page numbers added for appropriate references to documents within Appendices.
- 2. Appendices**
Culmination of requested documents identified in the right column of the Self-Assessment Document. The program must **submit only those materials that are requested.** Required tables and forms are provided as part of this document.

Standards Assessment: Descriptions for Program Evaluation Plan Template.

Programs are expected to complete all relevant sections where information is available.

Program Goals	<p><u>Program goals</u> describe over-all outcomes that a program wishes to achieve. Each goal will have one or more target outcomes to demonstrate successful achievement of the goal. Goals must address at least the four major areas required in the <i>Standards for Accreditation</i>:</p> <ul style="list-style-type: none">▪ Curriculum (II.A.1.)▪ Faculty (II.A.2.)▪ Students and Graduates (II.A.3.)▪ Communities of Interest (II.A.4.) <p>Additional goals specific to the HIM program are appropriate to include. The program evaluation plan should represent a comprehensive plan for ongoing program assessment and improvement.</p>
Target Outcomes	<p><u>Target outcomes</u> are the <u>levels of successful performance</u> set by the program. They are the outcomes the program would like to see usually expressed in a metric or percent (%), as a measurement of successful achievement toward a goal. A goal will have one (1) or more target outcomes.</p>
Steps to Achieve the Outcome	<p><u>The Steps to Achieve the Outcome</u> expresses the activities that the program <u>has been</u> doing or <u>will do</u> to try to achieve the target outcome. It is a common error to confuse steps with target outcomes (the target outcome is the desired end result).</p>
Results	<p><u>The Results</u> show the actual <u>results, measurements or outcome</u> of the Plan toward achievement of the desired target outcome. For example, “9 of 10 graduates passed the certification exam” or “75%” of employers rated graduates of the program as “above average” or “excellent” on the employer survey.”</p>
Analysis and Action Plan	<p>The <u>Analysis and Action Plan</u> describes what the program will do after reviewing the results and if the target outcome has NOT been met. If it has been met, then no further action is needed. If it has not, then the program needs to formulate some corrective action plan(s) for the future. (These corrective actions then become the “steps” on the next program evaluation.)</p>
Person Responsible	<p>This is the <u>person responsible</u> for carrying out the action plan. This could be, for example, the program director, the clinical coordinator, the advisory committee or a specified faculty member.</p>
Time Frame	<p>The <u>time frame</u> reflects the frequency of administering the plan, steps or activity. A plan, step or activity should at least be performed annually. However, in some instances, certain steps or activities may be performed more frequently.</p>