

**The University of North Carolina at Greensboro
The Bryan School of Business and Economics
Department of Business Administration**

**MBA 695C-41D (1.5 credits): EXECUTIVE DECISION IN HEALTH CARE
and
MBA 695D-71D (1.5 credits): HEALTHCARE DECISIONS: SKILLS AND TECHNIQUES
collectively
MBA 695F-31D (3 credits): HEALTHCARE DECISION: THEORY AND APPLICATIONS**

Semester:	Summer 2010
Session 1 (May 17 – June 25):	MBA 695C-41D Executive Decision in Healthcare
Session 2 (June 28 – August 9):	MBA 695D-71D Healthcare Decisions: Skills and Techniques
Session (May 19 – August 9):	MBA 695F-31D Healthcare Decisions: Theory and Applicaitons
Course type:	Web-based
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Office Hours:	Upon request
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Email:	ewford@uncg.edu

COURSE DESCRIPTION

The course will focus on learning and applying both qualitative and quantitative techniques. In addition, methods for implementing decisions and identifying evidence-based materials will be covered. Although the course will make extensive use of health care examples, the methodologies and tools are applicable to any managerial setting.

CATALOG DESCRIPTION

MBA 695 Special Topics in Business Administration (1.5-3)

Specific course title identified each semester by the topical extension to the basic title: e.g., Special Topics in Business Law; Organizational Theory. May be repeated for credit when topic varies.

COURSE REQUIREMENTS

MBA 695C-41D class will include online video lectures, discussions, and analysis assignments.

PREREQUISITES – There no prerequisites.

ACADEMIC INTEGRITY

You are responsible for knowing and following the academic integrity policy of UNCG. Any breaches of academic integrity policy will result in the sanctions recommended under the policies. We will discuss this policy briefly in class, but you are responsible for knowing all parts of the policy, which can be found at <http://academicintegrity.uncg.edu>.

In addition to many other things, being bound by the UNCG academic integrity policy means that you have not copied from anyone or anywhere without attributing the copied materials to that person or place. We will discuss citations in class. Please come talk with me if you have any questions about academic integrity.

SPECIAL NEEDS AND CONSIDERATIONS

Please let me know at the beginning of the semester if you have a physical or learning disability that may need accommodation. We will make reasonable accommodations for persons with documented disabilities. Students should also notify Student Services of any special needs.

COURSE GOALS AND EDUCATIONAL OBJECTIVES

The primary purpose of this course is to develop both an understanding of how evidence is created through the use of evaluation methods as well as a more generic understanding of how decisions are made.

More specifically, students completing this course should be able to:

1. Discuss and describe the contextual issues of evaluation and its use in decision making of health services;
2. Describe the characteristics of and appropriate settings for the various evaluation strategies, including monitoring, time series analysis, appropriate operations research techniques, and cost benefit and cost effectiveness analysis;
3. Understand and apply selected analytical procedures to the evaluation problem;
4. Develop the ability to identify, synthesize, and employ evidence-based learning in both clinical and administrative roles.

This course will involve the use of statistics and may, for those who are less prepared, require that you seek help beyond the texts. I have identified one such resource – Against All Odds – a statistics video series that I will make available online to you.

Specific Course Objectives: Upon successful completion of this course, students will be able to:

1. To assist in developing awareness in the understanding of relationships among creative/innovative thinking, critical thinking, and problem solving/decision making processes;
2. Develop the ability to critique various designs to access the strength and limitation of different evaluation approaches;
3. Frame evaluation questions in order to examine specific decision making in health service organizations;

4. Be familiar with the tools and skills needed to develop their own proposed evaluation of a specific program, policy or change in institutional behavior.

INSTRUCTION MATERIALS

Text:

There is no required text. However, should you desire one, the recommended textbook for the course will be: Veney, J. E. and Kaluzny, A. D. (1998). *Evaluation and Decision Making for Health Services*, Health Administration Press, 3rd edition.

Additional assigned readings will be distributed via UNCG Blackboard (blackboard.uncg.edu).

PERFORMANCE EVALUATION, GRADING SCALE, AND GRADING RUBRIC

Performance evaluation will consist of the following components:

Module 1 – *This module represents the entirety of MBA 695C-41D*

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| 1. Quantitative assignments (3) | 30 points |
| 2. Qualitative assignments (2) | 20 points |
| 3. Knowledgebase: Test questions co-creation | 20 points |
| 4. Exam | 30 points |

Module 2 – *This module represents the entirety of MBA 695D-71D*

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| 1. Visual paper (HIT Applications and Meaningful Use) | 35 points |
| 2. Evaluation of others' visual papers | 15 points |
| 3. Knowledgebase: Test questions co-creation | 20 points |
| 4. Exam | 30 points |

Course grade is based upon the percent of total points, according to the following grade scale:

Points	Grade	Points	Grade
94-100%	A	77-79%	C+
90-93%	A-	73-76%	C
87-89%	B+	70-72%	C-
83-86%	B	< 70%	F
80-82%	B-		

The Assignment Grading Rubric provides the criteria that faculty use in evaluating student work.

Quantitative assignments will be graded based on detailed explanations of methodology and computations, and correctness of the answer.

Qualitative assignments, such as short essays on complex issues, sensitive topics or life experiences, will be graded based on the depth of discussion, evidence and concepts presented in the literature, and quality of writing.

Both quantitative and qualitative assignments are subject to the following rubric:

100%	Content is insightful. It addresses the assignment in a way that indicates comprehension and control over the assignment as well as an understanding of the underlying issues. Major concepts as present in the literature are addressed. Message
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	is communicated clearly, concisely, and directly with occasional faculty assistance. There is a confidence in the presented evidence. Meets deadline.
80%	Content meets and, at times, exceeds the basic requirement of the assignment. It addresses the assignment in a way that indicates comprehension of the assignment and a basic understanding of the underlying issues. Some of the major concepts present in the literature are missing. Message, for the most part, is communicated clearly, concisely, and directly. Frequent faculty assistance required. There is confidence in the presented evidence. Meets deadline.
60%	Content offers little insight into the greater issues of the assignment, meeting only the very basic requirements. Major concepts in the literature are missing. Message, for the most part, is communicated clearly, concisely, and directly. Constant/continued faculty assistance required. There is doubt about the presented evidence. Fails to meet deadline by greater than 72 hours.
40%	Content offers no insight into the greater issues of the assignment, only partially meeting the very basic requirements. Major concepts in the literature are missing. Additional revision required to clearly communicate the message. Constant/continued faculty assistance required. Student fails to initiate or maintain contact with faculty. There is doubt about the presented evidence. Fails to meet deadline by greater than one week.
Less than 40%	Content offers no insight into the greater issues of the assignment. Basic requirements are not met. Major concepts in the literature are missing. The message is not communicated clearly, concisely, or directly. Constant/continued faculty assistance required. Student fails to initiate or maintain contact with faculty. There is doubt about the presented evidence. Fails to meet deadline by greater than one week.

Knowledgebase: Test question co-creation

Co-creation is a process that involves students in the creation of the assessments for the course. In these kind of assignments, students submit questions in specified format, based on the readings and in-class assignments. Each student will submit a set of **three** questions for each lecture unit. The set must consist of **one** multiple choice question, **one** fill-in-blank question, and **one** short essay question (with specified correct answers).

Co-creation questions need to be formatted in Respondus software. Please download it from www.respondus.com and register your copy using this information:

- Enter the institution name exactly as shown below with a space on each side of the dash:
University of North Carolina – Greensboro
- Enter the contact information as:
Contact the ITC in your academic unit
- Enter the installation password as:
ZR021382662-517814163

To familiarize yourself with Respondus, please watch two short training presentations:

"Creating and Formatting Questions with Respondus" at

<http://www.respondus.com/movies/Edit/Creating%20and%20Formatting%20Questions%20with%20the%20Edit%20Menu.html>

"Importing questions with Respondus" at

<http://www.respondus.com/movies/Importing/Importing%20Questions%20with%20Respondus.html>

Exams

The exams will consist of the submitted co-creation questions and I reserve the right to author up to 20% of the exam.

CLASS SCHEDULE**Module 1**

Web Session	Subject	Assignment
Unit 1: Decision Making	Course Introduction A. How to Decide: The Making of a Decision	http://chierdata.ba.ttu.edu/Reports/ecosc-high/EcoSC-L1/EcoSC-L1.html http://chierdata.ba.ttu.edu/Reports/ecosc-high/EcoSC-L2/EcoSC-L2.html http://chierdata.ba.ttu.edu/Reports/ecosc-high/EcoSC-L3/EcoSC-L3.html http://chierdata.ba.ttu.edu/Reports/ecosc-high/EcoSC-L4/EcoSC-L4.html
	B. Deciding to Decide: Who Makes Decisions and When to Make Them	http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/1B1/M2L1.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/1B2/M2L2.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/1B3/M2L3.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/1B4/M2L4.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/1B5/M2L5.html
	C. Heuristics	http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/1C1/M4L1.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/1C2/M4L2.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/1C3/M4L3.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/1C4/M4L4.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/1C5/M4L5.html <i>(the presentation describes homework assignment)</i> Reading: Hammond et. al 1998 Assignment: Exercise – Even Swaps
	D. Decisions in Healthcare	No video lectures Reading: Text chapter 7 & 8 Assignment: Scale Construction
Unit 2: Evidence-Based Medicine and Evidence-Based Management	A. Evidence-Based Medicine and Evidence-Based Management	http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/4C1/M10L1.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/4C2/M10L2.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/4C3/M10L3.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/4C4/M10L4.html
Unit 3: Measurement, Evaluation and Data	A. Monitoring as an Evaluation Strategy	http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2A1/M3L1.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2A2/M3L2.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2A3/M3L3.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2A4/M3L4.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2A5/M3L5.html <i>(This talks of Gantt, Pareto chart, CPM, Control chart, Flow chart)</i> Reading: Ecker, 1991; Garvin & Roberto, 2001; Meaney, 1999 Assignment: Memo – Decision Timing
	B. Trends Analysis / Forecasting	http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2B1/M5L1.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2B2/M5L2.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2B3/M5L3.html

	C. Utility Measures	http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2C1/M7L1.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2C2/M7L2.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2C3/M7L3.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2C4/M7L4.html
	D. Group Decision Making	http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2D1/M8L1.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2D2/M8L2.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2D3/M8L3.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/2D4/M8L5(2).html
	F. Cost Benefit/Cost Effectiveness Analyses	http://chierdata.ba.ttu.edu/Reports/EconEvalPub/EconEval1/index.htm http://chierdata.ba.ttu.edu/Reports/EconEvalPub/EconEval2/index.htm http://chierdata.ba.ttu.edu/Reports/EconEvalPub/EconEval3/index.htm http://chierdata.ba.ttu.edu/Reports/EconEvalPub/EconEval4/SCORM.htm
Unit 4: An introduction to LEAN/Six Sigma	A. Reviewing LEAN/Six Sigma	<<<Huerta's Lean-six Sigma>>> Reading: Text chapters 3 & 4 Assignment: Quantitative Monitoring
Unit 5: Social Issues in Decision Making	A. Social Behavior: Biases and Preconceptions	http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/4A1/M6L1.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/4A2/M6L2.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/4A3/M6L3.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/4A4/M6L4.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/4A5/M6L5.html Reading: Hayshi 2001, Brokensha 2002, Andre et. al 2002, Dawson 1993 Assignment: Memo – Rule of Thumb
	B. Building Consensus	http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/4B1/Chapter%209.html http://chierdata.ba.ttu.edu/~calculon/ISQS_Videos/4B2/Chapter%2010.html
Unit 6: Operations Research Techniques	A. Operations Research Techniques	Need to add lectures here Reading: Text chapters 9, 10 Assignment: Exercise – Trend Analysis

The video lectures can also be viewed at and downloaded from
http://chierdata.ba.ttu.edu/HOMISQS/HOMISQS/ISQS_5230.html

Module 2

Web Session	Subject	Assignment
Unit 1: Health Information Technology and the Discourse	Course Introduction A. Health Information Technology: Here, Now and Tomorrow (a view from 2005)	Video: http://www.kaisernetwork.org/health_cast/hcast_index.cfm?display=detail&hc=1510
	B. Health Information Technology and Its Future: More Than the Money	http://www.kaisernetwork.org/health_cast/hcast_index.cfm?display=detail&hc=2827 http://www.kaisernetwork.org/health_cast/hcast_index.cfm?display=detail&hc=1462 http://www.kaisernetwork.org/health_cast/hcast_index.cfm?display=detail&hc=2594 http://www.kaisernetwork.org/health_cast/hcast_index.cfm?display=detail&hc=1936
	C. Connecting Americans to Their Health Care: Empowered Consumers, Personal Health Records and Emerging Technologies	http://www.kaisernetwork.org/health_cast/hcast_index.cfm?display=detail&hc=1533
Unit 2: Health Information Technology: a two-step link exploration		http://healthit.hhs.gov http://www.youtube.com/watch?v=Qx9IEDs2XjE&feature=player_embedded
Unit 3: Privacy in Healthcare	A. HIPAA Compliance Assistance	http://www.hhs.gov/ocr/privacy/hipaa/understanding/summary/privacysummary.pdf

	B. Briefing: Health Information Technology and Privacy: Is There a Path to Consensus?	http://www.kaisernetwork.org/health_cast/hcast_index.cfm?display=detail&hc=2525
Unit 4: The Electronic Health Record – The Focus of Healthcare IT	A. Interoperability	http://chierdata.ba.ttu.edu/HOMISQS/HOMISQS/ISQS_5231_files/CCHIT%20Interoperability%20White%20Paper%20April%205%202009.pdf
	B. Systems typology	http://www.ncrr.nih.gov/publications/informatics/EHR.pdf
	C. E-HIM	http://www.ahima.org/e-him/