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Accreditation Standards-Completion Example Health Information Management (HIM) Programs in Canada

Example for facility use. The facility will complete using **Compliant** (providing a <u>hyperlink</u> to the supporting documentation), **Partially compliant** (providing details or a <u>hyperlink</u> to the supporting documentation, or **Non Compliant**. When appropriate, further information can be added to explain. When there are different requirements within the standard for the Diploma and Degree levels, the standard is divided into two parts, indicating the requirements for each.

Standard 1: Sponsorship and setting		compliance Level
The program is established in a formal educational institution deemed eligible by the governmental educational authority to grant diploma and/or degrees. Universities must be accredited through the Association of Universities and Colleges of Canada.	Compliant	Supporting documentation

Feedback example from CCHIM. Upon review, the Accreditation Team will highlight their response to the rating based on their findings to what was submitted as follows: **Compliant**, **Partially Compliant**, **Non Compliant** and will include comments to support their rating, if deemed necessary. The returned document might show as follows.

Standard 1: Sponsorship and setting		Compliance Level Partially Compliant Non Compliant
The program is established in a formal educational institution deemed eligible by the governmental educational authority to grant diploma and/or degrees. Universities must be accredited through the Association of Universities and Colleges of Canada.	Compliant	Supporting documentation

Accreditation Standards Health Information Management (HIM) Programs in Canada

Stand	dard 1: Sponsorship and setting	Compliance Level Compliant Partially Compliant Non Compliant
i.	The program is established in a formal educational institution deemed eligible by the governmental educational authority to grant diploma and/or degrees. Universities must be accredited through the Association of Universities and Colleges of Canada.	
ii.	Accessibility to and availability of affiliations for practicum shall be established and documented.	
iii.	The program must demonstrate how it facilitates students' access to the resources and experiences necessary to support the learning process. If the program is offered online, student access to resources must be clearly defined.	
iv.	The sponsoring educational institution must assure that governance and lines of authority are clearly defined. • The sponsoring educational institution must clarify the lines of authority and administrative governance of the health information management program within the framework of the sponsoring institution.	

	dard 2: Program mission, philosophy, goals, assessment of omes	Compliance Level Compliant Partially Compliant Non Compliant
i.	Program Mission The program's mission and goals must form the basis for program planning, implementation, and be compatible with the mission of the sponsoring educational institution. • The health information management (HIM) diploma/degree program is designed in concert with the institutional mission and the goals of the college/university division or department in which it is located. Each program will define its own mission and goals which derive from the purposes of its sponsoring educational institution, its communities of interest, faculty expertise, and program initiatives. The program's mission and goals must be outcome-focused and consistent with the overall mission and goals of CHIMA.	
ii.	Program Evaluation The program must have an assessment plan for systematic evaluation of mission, goals, and objectives. • The program must be involved in an ongoing effort to determine its effectiveness, which constitutes a quality improvement cycle.	
iii.	Program Goals Goals must be stated in terms of educational outcomes to be achieved; must be established annually; must be measurable; must reflect the principles and ethics of the health information management field; and fit within the mission of the sponsoring educational institution. • At a minimum, the program goals and measurable outcomes must incorporate goals related to curriculum, faculty development, students and graduates, communities of interest, and the program advisory	

	board.	
iv.	Students and Graduates The program must provide assurance that the educational needs of students are met and that graduates demonstrate at least the CCHIM entry-level curriculum competencies. • The program must assess through goals and target outcomes that student learning outcomes are examined and demonstrate progress toward achievement of entry-level competencies. These assessments must demonstrate that graduates meet entry-level competencies.	
V.	Articulation Agreements The program has established articulation agreement(s) with post-secondary degree granting institutions to support and promote student progression towards an Undergraduate degree or Masters degree.	
vi.	Communities of Interest The program must indicate how it assesses the needs of its communities of interest and how it interprets these needs into educating a competent workforce. • Interpret, monitor and/or otherwise demonstrate responsiveness to the needs of the various communities including how the program serves as a source of continuing education for its communities of interest.	
vii.	Program Advisory Committee (PAC) Requirement The program must have an advisory committee representative of its communities of interest. The program must request a representative from CCHIM to participate as an initial and ongoing Advisory Committee representative. The committee responsibilities include assisting program faculty and sponsoring educational institution personnel with the development and revision of program goals and curriculum, monitoring program needs and	

	expectations, and ensuring program responsiveness to change.	
	The advisory committee must meet at a minimum, annually. It is	
	anticipated that the advisory committee will meet at more frequent	
	intervals when warranted to review program goals, curricula, etc.	
	CCHIM emphasizes the importance of a strong advisory committee	
	comprised of individuals external to the academic institution - such as	
	the accrediting body, employers (including a variety of different health	
	arenas), graduates, healthcare executives (e.g., CEO, CFO, CIO),	
	government agencies (e.g. MoH, eHealth), current and/or past students,	
	and others representative of the communities of interest (e.g., vendors).	
	Differing levels of authority should be represented on the committee –	
	students, staff, program coordinator, senior leadership, and policy levels.	
	There should be a mix of certified HIM professionals and non-HIM key	
	stakeholders; however, at least 50% of the PAC should be certified HIM	
	professionals. Input from individuals in practice is very valuable in terms	
	of curriculum assessment and program alignment with current practices.	
viii.	Annual Program Report	
	The program must annually assess its program goals and outcomes as required	
	by the designated CCHIM annual report template.	
	The program must at least annually assess and document its	
	effectiveness in achieving its stated goals and outcomes. At a minimum,	
	this assessment must include performance metrics such as graduate	
	placement rates, graduate and employer satisfaction rates, yearly	
	attrition, national certification scores, and program completion rates.	
ix.	Monitor Assessment Results	
	Results of the program annual report must be monitored and reflected in an	
	action plan and reviewed by the program's advisory committee (PAC).	
	 Programs must conduct a qualitative and quantitative assessment of 	
	how the program achieves its mission, goals and target objectives for	
	continual improvement, including a candid assessment of strengths and	

	weaknesses in terms of the program's performance against the accreditation established thresholds.	
X.	Action Plan Implementation Implementation of the action plan must be documented and the results measured by ongoing assessment. • The program uses the results of assessment to document and implement program improvements. CCHIM will seek evidence that there is documentation of changes made in the program. Program officials and faculty are required to compare program performance with the goals and identify ways in which the program can improve. These may include curriculum revisions, improvements in student services, and faculty development activities. An institutional effectiveness survey or other institutional level evaluation data is not sufficient to replace the program's own evaluation plan.	

Stan	dard 3: Facilities, equipment, and supplies	Compliance Level Compliant Partially Compliant Non Compliant
i.	 Learning Resources The sponsoring educational institution must provide appropriate resources to support the learning experiences and achieve the program's goals and outcomes. • The methods of demonstrating adequate resources must reflect the types of resources available to support the learning experiences of students and be adequately sufficient to accommodate all students enrolled in the program. These include, but are not limited to, student access to current technology, dedicated computer/HIM lab and relevant software, practice and practicum resources, and other materials. 	
ii.	Financial Support Resources to support the program's goals and outcomes must include evidence of financial support for the program. • The sponsoring educational institution must provide adequate financial support to allow the program to achieve its goals and outcomes, and provide resources and support for faculty development.	
iii.	Student Access to Resources Students must have adequate access to program resources. • The program must demonstrate how it facilitates students' access to the resources and experiences necessary to support the learning process. There must be an adequate supply of current books, journals, and/or databases. If the program is offered online, student access to resources must be clearly defined.	

The C	dard 4: Fair Practices CHIM Council on Education and Professional Practice expects the program and consoring institution to comply with the following Fair Practice Standards.	Compliance Level Compliant Partially Compliant Non Compliant
i.	 Publications and Disclosures All published program information must accurately reflect the program offered and must be known to all applicants and students. The sponsoring educational institution, programmatic accreditation status and curriculum Admissions policies and procedures Policies on advanced placement, transfer of credits, and credits for experiential learning Number of credits required for completion of the program Tuition/fees and other costs required to complete the program Policies and procedures for withdrawal and for refunds of tuition/fees Academic calendar Program length (weeks/hours) Student grievance/appeal procedure Criteria for successful completion of each segment of the curriculum and graduation Information about student/graduate achievement that includes the results of one or more of the outcomes assessments as reported in the Annual Program Report 	
ii.	Lawful and Non-Discriminatory Practices All activities associated with the program, including student and faculty recruitment, student admission, and faculty employment practices, must be non-discriminatory and in accordance with federal and provincial statutes, rules, and regulations. Student Records	

Documentation must be maintained for student admission, advisement, counseling, and evaluation. Records of student evaluations must be maintained in sufficient detail to document learning progress and achievements. Grades and credits for courses must be recorded on the student transcript and permanently maintained by the sponsoring educational institution in a safe and accessible location.

• Program officials must maintain student records that reflect evidence of student evaluation on all levels, and progression toward achievement of program requirements.

Stan	dard 5: Admission requirements	Compliance Level Compliant Partially Compliant Non Compliant
i.	Admission requirements – Fair Practice The minimum educational requirements for admission to the program shall be clearly stated.	
ii.	Admission – Minimum Requirements The minimum educational requirements for admission will include graduation from a high school/secondary program with mathematics, English, computer literacy, and at least one of: biology, physics, or chemistry. English language assessment and cut scores (e.g., TOEFL) must be clearly stated. Special admission criteria must be clearly stated including such items as cut scores for Accuplacer® or equivalent testing. • There shall be evidence of adherence to the stated admission requirements	
iii.	Admission – Prior Learning and Transfer Credit The institution's policy and procedure for awarding advanced standing or recognition of Prior Learning Assessment or transfer of credit from another academic institution or academic courses shall be clearly documented.	

Stand	dard 6: Program length-Diploma and Degree Requirements	Compliance Level Compliant Partially Compliant Non Compliant
i.	Program Length – Diploma level minimum Diploma programs shall be of sufficient length to meet the learning outcomes	Diploma
	established by CCHIM (approx. 60 weeks and 2000 hours in total).	
	 The practical experience component of the program may be in addition to the academic year. 	
	Program Length – Degree level minimum	Degree
	Undergraduate Degree programs will be a minimum of the equivalent of a four year program of study.	
	Graduate Degree programs will be of sufficient length to include, at a	
	minimum, all HIM curriculum content as required in Standard 9 at the Masters level.	
	The practical experience component of the program may be in addition to the academic year.	

Standard 7: Program Coordinator-Diploma and Degree Requirements		Compliance Level Compliant Partially Compliant Non Compliant
i.	Program Coordinator There must be a program coordinator that is a full time position of the sponsoring institution. They must have full employee status, rights, responsibilities, and privileges.	
ii.	Program Coordinator Qualifications - Diploma level minimum The Health Information Management professional and must have at minimum, a baccalaureate degree, preferably in the HIM or a related field of study. Although not required, it is desirable for the program coordinator to have a graduate degree in an area of study related to HIM or Education. • It is expected that only HIM professionals with a CHIM credential and a minimum of a baccalaureate degree would possess the necessary knowledge and background to effectively manage the HIM program. • The program coordinator will have experience as a practicing HIM professional with a minimum of 3 years' experience in a senior HIM position. • There will be no exceptions to the required credentials.	Diploma

	Program Coordinator Qualifications - Degree level minimum	Degree
	The Health Information Management program coordinator must be a certified Health Information Management professional or be in the process of acquiring CHIM certification. Although a minimum of a Master's degree is required, additional education requirements may be required as per the educational institution.	
	 It is expected that only HIM professionals with a CHIM credential and solid work experience would possess the necessary knowledge and background to effectively manage the HIM program. Ideally, the program coordinator will have experience as a practicing HIM professional with a minimum of 3 years' experience in a senior HIM position. If the program coordinator is in the process of obtaining CHIM certification, an experienced HIM professional will be contracted to provide input regarding HIM content and other relevant advice. There will be no exceptions to the required CHIM credentials. 	
iii.	Program Coordinator Responsibilities The program coordinator of the educational program must be responsible for the organization, administration, continuous program review, planning, development, maintenance of accreditation standards (including overseeing the delivery of learning content in Standard 9), and general effectiveness of the program. The coordinator must have a role in the budget development process of the program. • The program coordinator must be given adequate release time to devote to curriculum development and evaluation, counseling of students, program management, and administrative duties within the institution. It is recommended that the program coordinator carry no more than a 60% total teaching load.	

iv. **Professional Development**

The program coordinator must demonstrate continuing professional development related to the curriculum content to which they are assigned.

- Professional development may be considered continuing education in program management (if applicable), curriculum content areas, teaching techniques, or other areas related to the program coordinator's responsibilities and/or teaching assignments, as well as professional activities at the local, provincial, and national levels.
- Support by the sponsoring educational institution will be provided for the program coordinator to participate at the annual in-person CCHIM Program Coordinator Meeting.

equ	uirements	Compliant Partially Compliant Non Compliant
i.		Diploma
	Program Faculty Degree programs are required to have a minimum of two full-time HIM certified individuals, one of which may be the program coordinator. • Faculty must provide students with adequate attention, instruction, and supervised practice to acquire the knowledge and competence needed for entry-level practice. Consideration for additional faculty beyond this requirement must include the number and variety of courses taught, the employment status of faculty, the number of students enrolled, and the method of course delivery. There must be faculty and instructional staff to advise and mentor students, and provide instruction and supervision on a regular planned basis.	Degree

ii	Faculty Qualifications	
ii.	Faculty Qualifications The program faculty must be qualified through professional preparation and experience, scholarship and/or teaching competencies, and practice experience. Faculty who teach the core HIM content areas must be certified with CCHIM. For the diploma level programs; it is desirable for the HIM core faculty to have an undergraduate degree in an area of study related to Health Information Management or Education. • The program must have faculty with clearly defined responsibilities, educational preparation, research and/or teaching competence, practice experience, and are able to completely support the program's teaching,	
	scholarship, and service goals. Faculty must be sufficient in number to provide students with adequate attention, instruction, and supervised practice to acquire the knowledge and competence needed for entrylevel practice.	
iii.	Professional Development The faculty must demonstrate continuing professional development related to the curriculum content to which they are assigned. Professional development may be considered continuing education in program management (if applicable), curriculum content areas, teaching techniques, or other areas related to the faculty's responsibilities and/or teaching assignments. • HIM faculty is expected to participate in professional activities at the local, provincial, and national levels.	
iv.	Faculty Development Goal The program must provide a plan for faculty that establishes or assesses the knowledge, skills, qualifications, and experience pertinent to the professional curriculum content that they are assigned to teach. • The program must assure through annual goals, that faculty development planning is targeted to improve faculty knowledge and	

	expertise in the areas in which they teach. This includes efforts to keep current in health information management and/or other relevant professional content and practice, as well as other components of advanced formal education.	
V.	Support Staff The program must have clerical, technical, and administrative staff to adequately support achievement of the program's goals and outcomes.	

Stand	dard 9: Curriculum	Compliance Level Compliant Partially Compliant Non Compliant
i.	Curriculum Goal The program must assess the appropriateness and effectiveness of the curriculum, with the results of the program assessment used as the basis for ongoing planning and program improvement. • An annual assessment of the curriculum is required to determine where and when improvements are needed. Assessment is conducted using feedback from students, faculty, graduates, advisory committee, employers, and other relevant sources. At least one target outcome must be related to curriculum content or competency improvements, and/or effectiveness in approach to curriculum content.	
ii.	Curriculum – Content The program must demonstrate that the curriculum meets or exceeds the professional course content as published in the CCHIM entry-level curriculum competencies and learning content items for diploma or degree programs, as appropriate for the institution. • The curriculum syllabi and course content must ensure concise and adequate coverage of the CCHIM Learning Outcomes in Health Information Management (LOHIM) HIM entry-level curriculum competencies and learning content items for diploma, undergraduate or graduate level program, as appropriate for the institution. Each course syllabus must be evaluated against the required competency and learning content items, and demonstrate learning progression to achieve the stated entry-level curriculum competencies. (See learning content self-assessment document.)	

iii.	Curriculum – Sequence Instruction must be delivered in an appropriate sequence of didactic, laboratory, and professional practice activities. • Course content must be logical and coherent with didactic instruction and related activities organized in each course. Courses must be sequenced appropriately, which means that knowledge and experience must be carefully analyzed and prerequisites appropriately identified and placed. (For example, biomedical science, computer literacy, and health record content courses must be placed early in the curriculum sequence, as they contain skills and knowledge that the student will apply to later courses.) Institutions must have policies regarding the allocation of credit to courses, particularly with respect to the credit value of laboratory and professional practice experience courses.	
iv.	Curriculum – Syllabi and Competencies Instruction must be based on clearly written course syllabi describing entry-level competencies, course objectives, and evaluation methods. • Students must know at the outset of each course, what is required for successful completion, what they are expected to learn, what activities they will experience, and how and when they will be evaluated. The CHIMA HIM entry-level curriculum competencies must be made known to students at program admission, and related competencies included in each HIM professional course syllabus.	
V.	Curriculum – Evaluation Evaluation of students must be conducted frequently enough to provide both the students and program faculty with valid and timely indications of the students' progress toward and achievement of the competencies stated in the curriculum.	

- Student evaluation methodologies (e.g., tests, exams, projects, assignments) may vary in type and construction, must be conducted frequently, and must be able to test the different cognitive levels.
- Programs must show that students are being taught and tested at a variety of taxonomic levels, with emphasis placed on the use of application to meet the CCHIM learning content level for each learning content item. The analysis of situations in professional contexts and problem-based assessment must be emphasized.

vi. **Professional Practice Experiences**

Professional practice experiences (PPE) must be designed and supervised to reinforce didactic instruction and must include program coordinated experience at professional practice site(s).

- The program must describe how PPE (clinical practicum, directed practice experience) are designed, supervised, and evaluated, and the objectives to be achieved in each PPE course. The program must provide the practicum sites with stated goals and objectives for the students' practical experience. The program shall provide the practicum sites with guidelines for evaluating students in their practical component of the program.
- Simulation activities designed to replicate PPE are permitted but cannot totally replace all on-site PPE. The program must describe how simulation activities are designed, supervised, and evaluated and the objectives to be achieved by using simulation activities. PPE, whether on-site or through simulations, must relate to higher level competencies and result in a learning experience for the student and/or a deliverable to a practice site. The PPE must provide the student with the opportunity to reinforce competencies and skill sets. It is expected that HIM students will not be substituted for paid staff. The PPE does not prohibit a paid internship.
- Diploma programs must have a minimum of one professional practice experience in each year of the program. During the first year of the program, the practical experience should focus on strengthening hands

vii.	on experience in the foundational aspects of HIM. During year two or three of the program, the practicum focus will be on project work and must be at the level appropriate for an entry-level HIM professional. Laboratory resources and technology Laboratory resources, software and technology shall reflect current requirements consistent with the needs of practice. It is recommended that HIM programs have dedicated simulation labs.	
viii.	Health and Safety The health and safety of patients, students, and faculty associated with educational activities must be adequately safeguarded according to the health and safety practices of both the sponsoring educational institution and the professional practice site. • The responsibilities of the college/university, PPE site, and student(s) must be documented for internships, co-op, or professional practice experiences. Either a formal contract or a simple memorandum of understanding (MOU) will suffice, if in accordance with institutional practice. Health, safety, or security policies and requirements must be outlined in the agreement or MOU, and students must be informed of these in advance of the PPE.	

Stanc	lard 10: Administrative Requirements for Maintaining Accreditation	Compliance Level Compliant Partially Compliant Non Compliant
i.	The program must report proposed substantive change(s) as described in the CCHIM Candidacy and Maintenance of Accreditation Manual in a timely manner or as otherwise specified. Substantive change discussions with CCHIM should take place during the proposal period to ensure CCHIM Accreditation Standards are not compromised. • Inform CCHIM of any adverse changes in the institution affecting the program's accreditation. Include changes in program officials (Dean, Program Coordinator, certified HIM instructors) within 30 days of the effective date. For changes specific to core HIM curricula or mode of delivery, proposed changes must be submitted during the consideration period to allow time for CCHIM to review for compliance with CCHIM learning content standard requirements.	
ii.	Administrative Requirements for Maintaining Accreditation Each program must submit the CCHIM Annual Program Report to ginette.bolt@echima.ca and any other required reports by September 30 th of each year.	
iii.	Payment of all CCHIM administrative fees Each program must submit the CCHIM annual program fee to wendy.guilfoyle@echima.ca-no later than September 30 th of each year.	
iv.	Maintenance of Accreditation Each program must participate in the ongoing Maintenance of Accreditation cycle in order to maintain Accreditation Status.	