University of Minnesota

Master of Healthcare Administration Program

NCHL-Based Competency Model

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CEPH Knowledge Domains

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Background: The Master of Healthcare Administration (MHA) Program at the University of Minnesota is a competency-based, professional degree program that seeks to develop leaders of high-performance organizations in a value-focused health system. The MHA program first adopted the National Center for Healthcare Leadership (NCHL) competency model in the mid-2000s after having served as a pilot organization for the creation of the initial version. The MHA Program utilizes a competency-based approach to learning per accreditation requirements specified by the Commission on the Accreditation of Healthcare Management Education (CAHME).

In 2018, the NCHL version 3.0 model was released. This provided an opportune time for the MHA program to re-evaluate its use of the NCHL competency model. Following discussions with faculty, NCHL leadership, and analyses of a survey of a convenience sample of alumni practitioners at various stages in their careers, we revised our model to more closely align with competencies that we believe our students can realistically develop while they are pursuing a graduate education.

During academic year 2020-2021, the MHA Program, in coordination with students, faculty, staff and alumni, has undertaken significant investments with respect to diversity, equity, and inclusion (DEI), including a review of our existing competency framework. Efforts also have been made to examine what is currently covered in required coursework and to identify areas of opportunity for expanding students' knowledge and skills related to the following: 1) causes and consequences of healthcare and health disparities; 2) skills to effectively measure healthcare and health disparities in a population; 3) understanding of the development, implementation and evaluation of interventions to improve health equity from provider and payer perspectives; and 4) facilitation of skill development and values formation to successfully promote inclusive workplace practices and serve diverse populations.
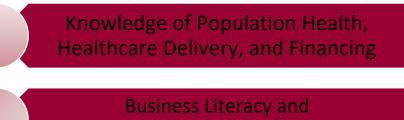
Furthermore, since the MHA program is situated in a School of Public Health, we are subject to accreditation requirements of the Council on Education for Public Health (CEPH). As a professional, non-MPH degree program, we are subject to a limited set of requirements. Our required curriculum must cover foundations of public health equivalent to 3 credits and the content that is delivered must cover and provide assessment of the 12 CEPH Knowledge Areas pertaining to the Profession and Science of Public Health as well as Factors Related to Human Health.[1]

We have assembled this document to provide MHA program faculty and students with a deeper understanding of the competency model and knowledge domains as well as guidance about what is required of faculty with respect to competency and knowledge

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[1] https://media.ceph.org/documents/2016.Criteria.pdf

domain mapping on course syllabi. Should instructors have questions or concerns, please do not hesitate to reach out to the program director or other members of the leadership team for assistance.

Five Domains of the NCHL-Based Competency Model

Knowledge of Population Health, Healthcare Delivery, and Financing

Business Literacy and Analytical Thinking

Managing and Leading in Complex Organizations and Environments

Healthcare Transformation

Professionalism

The following pages list each competency associated with a given domain, competency descriptions, expectation of the program regarding the level of competency development at the conclusion of the program, and the set of required MHA courses for which students' competency development will be assessed (including primary and secondary courses specified for development). Additionally, we have included some guidance instructors may wish to use as they specify course learning objectives to align with expected levels of competency development.

Levels of Competency Development: Each MHA competency is targeted for development at one of four levels: 1) Emerging, 2) Progressing, 3) Proficient, and 4) Advanced. We expect competencies to continue to develop as graduates advance in their professional career trajectories. Below is a definition of each level as well as corresponding language from Bloom's taxonomy and suggested verbiage for instructors to consider as they specify course learning objectives.

Competency Level	Attainment Definition	Bloom's Taxonomy Language	Examples of learning objective verbiage aligned to levels
Level 1: Emerging	Students are able to demonstrate this competency in specific situations with significant practice and guidance from experts.	Demonstrating an understanding of concepts, facts and ideas by organizing, comparing, translating, interpreting, describing, and stating main ideas	Define, List, Explain, Interpret, Compare and Contrast, Show, Summarize
Level 2: Progressing	Students recognize what is required to meet this competency and are able to perform it with minimal support or practice in familiar contexts. *Most students are expected to reach Level 2 for most competencies by the beginning of their second year of study in the degree program.*	Solving problems in new situations by applying acquired knowledge, facts, techniques and rules in a different way. Examining and breaking information into parts by identifying motives or causes. Make inferences and find evidence to support generalizations.	Apply, Build, Develop, Model, Organize, Plan, Solve, Analyze, Examine, Test for
Level 3: Proficient	Students can articulate steps for implementing the competency, including where to locate valid, evidence-based information to support action. Students can apply the competency consistently in	Present and defend opinions by making judgments about information, validity of ideas, or quality of work.	Assess, Determine, Estimate, Adapt, Build, Choose, Create, Design, Invent, Plan, Predict, Solve

	new or unfamiliar contexts. *Most students are expected to reach Level 3 for most competencies by the conclusion of the degree program.*	Combine information together in different ways by combining elements in a new pattern or proposing alternative solutions.	
Level 4: Advanced	Students are able to integrate knowledge and skills of this competency in a variety of situations, and can do so consistently and independently. *Depending on the competency and students' prior experience, advanced status may or may not be achieved.*		Invent, Solve, Plan, Design

Domain #1: Knowledge of Population Health, Healthcare Delivery, and Financing

Competency	Description	Level by End of Program
Healthcare delivery, financing, and public policy knowledge	Demonstrate comprehensive understanding of the U.S. healthcare delivery and financing system and the role of public policy in shaping the system. (NCHL-inspired)	Proficient
Population health measurement and management	Understand the social and political ecologies that contribute to health and disease, including built systems that perpetuate health disparities and the marginalization of communities; Apply frameworks and strategies to measure and manage population health for the benefit of communities.	Proficient
Foundations of a value-based healthcare system	Demonstrate comprehensive understanding of clinical quality, patient experience, and resource use measurement, trends, and drivers.	Proficient
Patient- and Community Orientation	Ability to assess and remain responsive to the specific needs and values of communities being served, grounded in the capacity to practice critical self-reflection as a means to empathize with patients' and communities' lived experiences inside and outside of clinical settings.	Progressing

Domain #2: Business Literacy and Analytical Thinking

Competencies	Language	Level by End of Program
Quantitative analysis and performance measurement	Ability to analyze and interpret statistical and financial data to set goals and measure clinical as well as organizational performance. (NCHL)	Proficient
Economic analysis and application	Ability to apply economic theory to practice (consumer behavior, provider behavior, insurer behavior) in order to support decision-making.	Proficient
Financial management	Ability to understand and explain financial and accounting information, prepare and manage budgets, and make sound long-term investment decisions for the good of the organization and the community it serves. (Adapted from NCHL)	Proficient
Process Improvement, Quality Improvement, and Operations Management	Ability to analyze and design or improve an organizational process, including incorporating the principles of high reliability, continuous quality improvement, user-centered design, and equitable patient experience. (Adapted from NCHL)	Proficient

	Ability to develop, implement, and evaluate information systems strategies that improve operations and patient care, taking steps to mitigate bias in the development and use of informatics tools.	
Information Management		Progressing

Domain #3: Managing and Leading in Complex Organizations and Environments

Competencies	Language	Level by End of Program
Organizational Awareness and Accountability	Ability to learn and understand the formal and informal decision-making structures, culture, and power relationships in an organization or industry. Demonstrate approaches that actively promote more inclusive and community-responsive practices. (NCHL-inspired)	Progressing (R) Proficient (E)
Collaboration	Ability to work cooperatively and inclusively with other individuals and/or teams they do not formally lead; Demonstrate active listening and thoughtful inquiry as tools for facilitation. (NCHL-inspired)	Proficient
Leading and managing people	Articulate an awareness of the responsibility and accountability of individuals in positions of power and	Progressing (R) Proficient (E)

Competencies	Language	Level by End of Program
	as stewards of change. Understand and apply principles and tools of effective human resource management. (NCHL-inspired)	
Project management	Ability to plan, execute, and oversee projects within/for an organization. (NCHL)	Progressing
Working in and Leading Teams	Create, participate in, and lead teams (including inter-professional ones) that promote diverse perspectives and creative thinking; Demonstrate strategies that promote safe spaces and inclusion for workers at all levels of the organization.	Proficient

Domain #4: Healthcare Transformation

Competencies	Language	Level by End of Program
Problem solving	Ability to define and scope a specific problem within health care, to identify root causes and alternative solutions, and to effectively communicate and gain acceptance of a comprehensive plan of action, including recommendations and an implementation plan in collaboration with a diverse set of stakeholders.	Proficient

Innovation	Ability to understand and address the most challenging problems in healthcare and community well-being in new and breakthrough ways that include understanding diverse stakeholder views, developing key insights, creating and implementing new solutions or adapting the current state in promising new ways.	Proficient
Strategic orientation	Ability to develop and align an organization's mission, vision, values with appropriate strategies, tactics, goals, and business practices; Maintain awareness of policy and regulatory trends to improve the long-term success and viability of an organization, its employees, and community health. (NCHL-inspired)	Proficient
Change Leadership	The ability to engage and amplify diverse stakeholder views, while implementing and sustaining equity-driven changes in approaches, processes, and strategies. (NCHL-inspired)	Progressing

Domain #5: Professionalism

Competencies	Language	Level by End of Program
Self and Interpersonal Awareness	Ability to have an accurate view of one's own strengths and development needs, including the impact one's power or privilege has on others. A willingness to address development needs through reflective, self-directed learning and by trying new approaches. (NCHL-inspired)	Proficient
Professional and Social Responsibility	Demonstration of ethics, sound professional practices, social accountability, and community stewardship. Acting in ways that demonstrate continuous learning and are consistent with one's values and what one says is important. (NCHL-inspired)	Proficient
Addressing Inequities and Promoting Inclusion	Articulate the importance of valuing individuals and groups with diverse backgrounds within an organization; demonstrate a commitment to change systems that perpetuate bias and inequity within an organization.	Progressing
Written communication	The ability to use written communications in formal and informal situations to convey meaning, build shared understanding, and productively move agendas forward. (NCHL- Communications #1)	Proficient

Public speaking	Use effective verbal communication strategies in formal and informal situations to convey meaning, build shared understanding, and productively move agendas forward. (NCHL-inspired)	Proficient

CEPH Knowledge Domains

1. Explain public health history, philosophy, and values.

2. Identify the core functions of public health and 10 Essential Services[2].

3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health.

4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program.

5. Discuss the science of primary, secondary, and tertiary prevention in population health, including health promotion and screening.

6. Explain the critical importance of evidence in advancing public health knowledge.

7. Explain effects of environmental factors on a population's health

8. Explain biological and genetic factors that affect a population's health.

9. Explain behavioral and psychological factors that affect a population's health.

10. Explain the social, political, and economic determinants of health to population health and health inequities.

11. Explain how globalization affects global burdens of disease.

12. Explain an ecological perspective on the connections among human health, animal health, and ecosystem health (e.g., 1Health).

The CEPH domains tend to be more concentrated within a subset of our required courses, including Population Health, Health & Health Systems, and Health Economics. We are required to cover and assess each of these domains in order to be compliant. We also need to be able to justify that the amount of overall content that is covered is equivalent to 3 credits.

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[2] See https://www.cdc.gov/stltpublichealth/publichealthservices/essentialhealthservices.html for more detail.

Teaching and Learning Methods Utilized in the MHA Program

The MHA Program utilizes a range of teaching and learning methods in course delivery across the residential and executive tracks.

Teaching Methods: We use both lower- and higher-level instructional methods across our courses. All courses utilize readings, lectures, and discussions at a minimum. The vast majority of our courses also utilize cases, team projects, and presentations.

- Readings (lower)
- Lectures with media (lower)
- Guest speakers (lower)
- Discussions (synchronous and asynchronous) (lower)
- In-class presentations (higher)
- Cases (higher)
- Team activities and projects (higher)
- Simulation exercises (higher)
- Field experiences (higher)
- Strategic/Consulting projects (higher)
- Reflective learning (higher)

Assessment Methods: We use both lower- and higher-level instructional methods across our courses. The principal assessment methods used include the following:

- Knowledge-based exams (lower)
- Analysis-based exams (higher)
- Papers and assignments (lower)
- Project review and feedback (higher)
- Case review and feedback (higher)
- Reflective modeling (higher)
- Team effectiveness assessment (higher)
- Class participation (higher)
- Strategic or consulting projects (higher)

Mapping Competencies and Knowledge Domains on Course Syllabi: Per accreditation requirements for CAHME and CEPH, all MHA program course syllabi for the residential and executive tracks of the MHA Program must utilize the approved syllabus template available for download at www.isph.umn.edu under Instructor Resources. Within the syllabus template, instructors must map each of their course learning objectives to applicable competencies and knowledge domains. Additionally, for each course learning objective and competency, faculty are asked to indicate their method of assessment (e.g., exam, assignment, report, case analysis, project, oral presentation, etc.) Below is a picture of the template to be completed.   The syllabi template contains these grids on the final page. Instructors should add rows to each as needed.

CEPH KNOWLEDGE DOMAINS

Knowledge Domain	Course Learning Objectives	Assessment Strategies

NCHL HEALTHCARE LEADERSHIP COMPETENCIES FOR CAHME ACCREDITATION PURPOSES

Competency	Course Learning Objectives	Assessment Strategies