2016-2017

DEPARTMENT OF
HEALTH SERVICES POLICY AND MANAGEMENT

Graduate Student Handbook

Revised June 2016

UNIVERSITY OF
SOUTH CAROLINA
Arnold School of Public Health

HEALTH SERVICES POLICY AND MANAGEMENT GRADUATE STUDENT
HANDBOOK: 2016-2017

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HEALTH SERVICES POLICY AND MANAGEMENT
Arnold School of Public Health

UNIVERSITY OF
SOUTH CAROLINA

I.   The Arnold School of Public Health

The Arnold School of Public Health, of the University of South Carolina, was established in 1974 in response to a mandate from the South Carolina Legislature. The first students were admitted in late 1974. The growing number of students necessitated a reorganization of the School and the permanent formation of a full-time faculty, in July 1977. In 2000, we became the Arnold School of Public Health, in honor of a generous donation to the School by Norman J. Arnold. Presently, the School has a faculty of about 132 members and over 700 graduate students.

Since 1979, the School has been accredited by the Council on Education for Public Health (CEPH), the accrediting body for schools of public health in the United States. The mission of the Arnold School of Public Health is to expand, disseminate, and apply the body of knowledge regarding the following: prevention of disease, disability and environmental degradation, promoting health and wellbeing in diverse populations; and providing effective, efficient and equitable health services.

Principal responsibilities of the Arnold School of Public Health are: (1) educational preparation of undergraduate and post-baccalaureate students for academic and professional careers within public health and health services organizations; (2) research on significant public health problems and/or issues; and (3) development and delivery of continuing professional education for health services personnel outside the immediate university community.

There are six departments within the Arnold School of Public Health: Health Services Policy and Management; Health Promotion, Education, and Behavior; Environmental Health Sciences; Epidemiology and Biostatistics; Exercise Science; and Communication Sciences and Disorders.

II. The Department of Health Services Policy and Management

A. Mission, Vision, Goals, and Objectives

Mission

The mission of the Department of Health Services Policy and Management is to advance the provision of effective, efficient and equitable health services by preparing individuals for positions in health services management, policy, public health programs, research, and education. The Department serves South Carolina while attracting students from throughout the United States and other countries.

Revised and approved, November 2009

Vision

The Department of Health Services Policy and Management will be a resource for excellence in graduate education and research in South Carolina and in distinct international markets. Through its masters and doctoral programs, it will produce well trained graduates ready to assume or progress to leadership positions in health services, public health, and research/academic organizations. The Department will serve as a networking/integrating resource for alumni, providers and leaders in health services in South Carolina and beyond. The Department will offer programs that continually seek to improve through new ideas and new technology, and by responding to the changing needs of the dynamic healthcare environment. Through research, teaching, service and consulting, faculty will create a Department on the leading edge of health services management, policy, and research.

Revised and approved November, 2009

Goals and Objectives

The Department will implement its vision by providing students in the Master of Health Administration, Master of Public Health, Doctoral programs, and other degree programs with the highest quality graduate education based on excellence in teaching, research, and service. The Department serves South Carolina while attracting students from throughout the United States and other countries.

B. Educational Goals

1. MHA

The overall educational goal of the Department is to prepare healthcare managers who have both the competencies required to manage effectively in a market–driven healthcare system and an understanding of approaches to address the social and population health responsibilities of healthcare organizations. We will equip MHA students with the theory, competencies, and applications to prepare: (1) individuals without previous health services management experience for entry level managerial positions and facilitate their advancement into senior management; and (2) experienced health service professionals for promotion and further career advancement.

Upon completion of the program, MHA graduates will be able to:

a. Identify and apply appropriate techniques and applications of quantitative and qualitative methods to the management of healthcare and allied organizations and programs. Curriculum: HSPM712, HSPM716, HSPM718, HSPM775, HSPM776

b. Demonstrate a working knowledge of the concepts and application of health information systems to management and decision-making in healthcare and allied organizations and programs. Curriculum: HSPM713, HSPM768, HSPM776

c. Apply economic concepts and analysis to health services management and decision making.
    i. Curriculum: HSPM712, HSPM732

d. Apply appropriate financial analysis and financial management tools and techniques in healthcare and allied organizations and programs. Curriculum: HSPM712, HSPM733, HSPM731, HSPM768, HSPM770, HSPM732

e. Identify the relevant methods of and how to apply market analysis, research, and assessment to the management of healthcare and allied organizations and programs. Curriculum: HSPM712, HSPM714, HSPM733, HSPM716, HSPM718, HSPM768, HSPM732, HSPM776

f. Identify the relevant considerations, processes, and application of strategic management for survival and growth of healthcare and allied organizations in a competitive environment. Curriculum: HSPM733, HSPM718, HSPM769, HSPM766, HSPM768, HSPM770, HSPM732, HSPM776

g. Identify and apply appropriate concepts and techniques of quality assessment and improvement in healthcare and allied organizations. Curriculum: HSPM714, HSPM718, HSPM769, HSPM766, HSPM768, HSPM770, HSPM774, HSPM775

h. Identify the concepts and applications of relevant legal principles and regulations to the management of healthcare and allied organizations. Curriculum: HSPM718, HSPM724, HSPM766, HSPM732, HSPM776

i. Demonstrate knowledge of the principles, practice, and application of ethics in business- and clinical decision-making. Curriculum: HSPM714, HSPM718, HSPM 732, HSPM724, HSPM766, HSPM768, HSPM770, HSPM774

j. Apply a public/population health perspective to health services management. Curriculum: HSPM714, HSPM775, PUBH700

k. Demonstrate effective written, verbal, and interpersonal communication skills. Curriculum: HSPM765, HSPM714, HSPM718, HSPM731, HSPM766, HSPM768, HSPM 769, HSPM770, HSPM732, HSPM774, HSPM775

l. Demonstrate understanding of the processes and how to exercise effective leadership – visioning, change management and team development in healthcare and allied organizations and programs. Curriculum: HSPM765, HSPM718, HSPM769, HSPM766, HSPM768, HSPM 770, HSPM774, HSPM776

m. Demonstrate understanding of the concepts of and processes of human resources management, governance and the governing body including its relationship to the executive leadership in healthcare and allied organizations and programs. Curriculum: HSPM765, HSPM 714, HSPM718, HSPM724, HSPM766, HSPM768, HSPM776

2. MPH

The educational goal of the MPH program is to prepare students for public health management and leadership positions in government, non-profit health care organizations, and the private sector by providing them with applied theory, competencies, and skills. The curriculum qualifies individuals with no previous public health or health services management experience for entry-level managerial positions and facilitates their advancement into senior management. The curriculum prepares experienced public health or health service professionals for promotion and career advancement in public and private organizations.

Upon completion of the MPH in health services policy and management, students will be able to:

a.   Understand the general application of management in health care. (HSPM 700)

b.   Apply a broad public health perspective and knowledge base to management in health care: epidemiology, biostatistics, health education and environmental health science. (EPID 700, BIOS 700, HPEB 700, ENHS660)

c.   Apply an overview of health care policy and perspectives to the understanding of management in health care organizations. (HSPM 711/ HSPM 718/ HSPM 769/ HSPM 791: Public Health Policy)

d.   Apply quantitative analysis to health services management and evaluation. (EPID 700, BIOS 700, HSPM 716).

e.   Understand health care finance based on the principles of finance, economics, and current public and private payment policies. (HSPM 712, HSPM 700, HSPM 730)

f.   Understand the ethical and moral issues confronting health care organizations and the individuals that work therein. HSPM 700, HSPM 713, HSPM 726)

g.   Demonstrate proficiency in verbal, written, and oral presentation and communication skills. (All courses)

h.   Demonstrate the ability to integrate theory with practice via case studies, student projects, and residency placement. (HSPM 718/HSPM 769/HSPM 791/HSPM 711, HSPM 798)

3. JD/MHA program:

The dual degree in health administration and law is designed for students who wish to pursue study in law as applied to health care settings. The dual degree leads to a Juris Doctor degree and Master of Health Administration through an integrated curriculum to be completed over a four year period. Under the JD/MHA program, HSPM 724 Health Law is replaced by a related course taught in the Law School covering legal aspects of health care. Appropriate JD program courses count as MHA electives. Otherwise, the objectives and required courses of the MHA section are identical to the standalone MHA program. The completion of this dual degree will allow graduates to compete successfully for positions in this complex field health administration and law. Applicants must apply to each program separately (see MHA program description and requirements) and satisfy the requirements for each program to be accepted into each program in order to matriculate into the JD/MHA program.

4. *MSW/MPH* program:

The dual degree in social work and public health seeks to prepare graduates with the competencies of two complementary professions. With the rapidly changing needs, expectations, and awareness of the inseparable links between social and health disparities, there is need for public health and social work trained professionals to address these issues with multi-pronged approaches for service development and provision needs. The MSW/MPH dual degree aims to prepare professionals for these challenges. The objectives and curriculum of the MPH section of this program are the same as the standalone MPH program. Some courses, however, meet requirements in both portions of the dual degree program, allowing the degrees to be obtained with fewer semester hours than pursuing the two degrees separately. The practical field experience, the public health residency is integrated with the required field experience of the MSW program, allowing these credit hours to count for both programs.

5. Doctor of Philosophy (PhD):

The educational goal of the PhD programs is to prepare students to assume positions in teaching and/or research in universities, public or private research institutes, or government.

Upon completion of the degree program, students will be able to:

a. Demonstrate proficiency in conducting one or more of the major approaches to health services research (survey research, qualitative research, experimental design, and quantitative research) and the ability to assess and evaluate alternative research approaches.

b. Demonstrate the statistical and cognitive ability to analyze and interpret data.

c. Be knowledgeable about major issues in health services delivery and health services research through critical review of current literature.

d. Demonstrate the ability to conduct original research by completing a successful doctoral dissertation.

e. Demonstrate the ability to teach university level courses by successfully completing teaching requirements of the program.

f. Demonstrate the ability to apply research methodologies and empirical approaches to address specific research questions by collaborating with faculty research initiatives.

6. Doctor of Public Health (DrPH) [Currently not being offered]:

The educational goal of the DrPH program is to prepare students to assume senior positions in teaching, policy, and/or management in public or private research institutes or government.

Upon completion of the degree program, students will be able to:

a. Demonstrate knowledge of the major approaches used in health services research (survey research, qualitative research, experimental design research) and the appropriateness of various applications for problem solving.

b. Demonstrate the ability to analyze and interpret quantitative and qualitative data.

c. Be familiar with major issues in health services delivery and health services research through the critical review of current literature.

d. Demonstrate the ability to conduct original research by completing a successful doctoral project.

e. Demonstrate knowledge and application of health policy analysis.

Research Goals

To develop educational and research excellence and to assist in the promotion of effective, efficient and equitable health services, HSPM faculty will be continually engaged in policy and health service related research.   The following steps will help attain Departmental research goals:

a. The Department will maintain (and continually improve) an environment that is conducive to faculty research and will strive to promote collaborations with other Departments within the Arnold School, relevant Schools and Colleges throughout the University of South Carolina, foster partnerships with relevant community-based organizations, and with other institutions in the US and abroad.

b. Faculty will contribute to the development of new knowledge by conducting and participating in health services and policy research, and by disseminating research findings via publications in peer reviewed journals and presentations for professional audiences. Towards this goal, faculty will strive to obtain external funding to develop and maintain a sustained program of research.

c. HSPM faculty will integrate research findings and methodology into teaching in all degree programs.

d. HSPM faculty will contribute to the advancement of health policy and health services management through communication and consultation with health services organizations, advocacy groups, local, state and federal legislators, and other agencies to improve the quality of health and health services in the US and globally.

Community and Service Goals

To disseminate knowledge about the department's educational programs as well as health services research, HSPM faculty will engage with and provide appropriate professional assistance to health service and public health organizations, and professional, scholarly, and funding organizations. In addition the department faculty will be engaged with the governance and advancement of the University and School mission through active participation in the larger University of South Carolina community:
Service activities include the following

a. Participating in department, school and university-wide committees.

b. Serving on advisory committees and boards to local, state, and national health care organizations.

c. Serving as guest speakers at the invitation of local, state, and national organizations.

To provide service to South Carolina health care providers and organizations and to expand student educational and career opportunities, faculty will:

a. Provide professional consultation and evaluation.

b. Utilize and provide guest speakers.

c. Utilize health care resources for student residency and integrated learning experiences.

d. Seek graduate assistantships for student placement in practice settings.

e. Seek input from practicing administrators to identify relevant issues and managerial skill needs.

III. Student Responsibilities and Code of Ethics

Students enrolled in any educational program within the Department of Health Services Policy and Management are required to demonstrate the highest ethical standards. These requirements pertain to both academic and professional behavior.

A.   *Acceptable Academic Performance*

The Department sets a high standard of performance for students in all of our master and doctoral programs. Students earning a grade less than "B" in one or more courses in any given semester will be asked to reduce their graduate assistantship hours, if any, to increase their focus on course work during the following semester. All MPH students must earn a grade of C or better in all public health (PH) core courses. If the grade in any of the PH core courses is less than C, the course must be repeated and for graduation the grades in repeated courses must be B or better. In the doctoral program, students must earn a minimum GPA of 3.0 (or B average) in the core courses (including the core courses defined for concentration area) to be eligible to appear in the qualifying examination and continuing in the doctoral program. For all graduate students in the department, a minimum GPA of 3.0 is required for graduation. <u>Any student who earns an average grade of less than "B" in three courses will be under departmental academic probation requiring development of a written plan by the student, academic advisor and the graduate director to overcome the academic challenges and improve the GPA. If the student earns a grade of less than "B" in one additional course she/he will be immediately terminated from the program.</u> This rule applies equally to all master's and doctoral programs within the Department.

B.   *Academic Integrity*

Students   are   expected   to   adhere   to   all   requirements   of   the   Carolinian   Creed (www.sa.sc.edu/creed/). <u>Please especially note: you are held accountable to this Creed even if you violate it inadvertently.</u> Any episode of dishonesty, cheating, or plagiarism in any form is cause for failure of an assignment, an examination, or a course. In addition, the department will report the case to the Office of Academic Integrity of the University. Students may want to refresh their understanding of the appropriate use of citations when drafting papers and other assignments to prevent inadvertent plagiarism stemming from lack of information. A second episode of violation of academic honesty is grounds for dismissal from the program.

C.   *Professional Responsibility*

Graduate assistantships and residencies are intended to serve as an extension of the teaching mission of the Department of Health Services Policy and Management, by giving students work experience in the public health, health services, or research environments in which they will eventually pursue careers. While serving in on- or off-campus graduate assistantships or residencies, students are representatives of the Department. As such, they will comport themselves with total professionalism at all times.

Students participating in assistantships or residencies will follow the dress standards of their work environment. All students will comply with the work hours associated with their assistantship or residency. While at work, all students will ensure that their level of effort, deportment, and contribution to the work environment meet and, preferably, exceed sponsor expectations.

All students must follow professional code of conduct at all times, in or outside the classroom.

IV. Master's Degree Programs

The Department offers two degrees at the master's level, the Master of Public Health (MPH) and the Master of Health Administration (MHA). Each degree has a distinct focus and prepares students for a distinct career path. Students are encouraged to review the goals and curriculum associated with each degree program to select the degree that best matches their personal goals.

The **MPH** degree program provides students with the competencies needed to manage public health programs and to direct population-based health improvement. In addition to the public health core elements of administration, biostatistics, epidemiology, health promotion and environmental health, the 45-hour MPH curriculum provides training in health services policy, public health finance, public health law, and program planning and evaluation. The MPH program prepares students primarily for management in the public health sector and community health programs, but some of our graduates do work in the private sector.

The **MHA** program prepares students for a career in the management of health services organizations in the private and public sectors, ranging from direct service providers (clinics, hospitals, long term care settings) through the ancillary industries (insurers, quality review organizations). In addition to the core public health principles, the 58-hour MHA provides training in management and leadership, accounting, finance, information technology, quantitative methods, operations and quality management, and strategic planning in health care organizations.

The MHA program is more business and organization-management oriented, while the MPH program is more public health agency/program/community health program oriented in its content. Applicants should consider their preferences and aptitudes for managerial roles in organizations prior to selecting between the MHA and MPH program. Volunteering at a local hospital or large physician practice (or other care setting) or interviewing managers of different departments at a local hospital can help applicants to understand the role of healthcare managers and decide if it offers a good fit for individual career and role preferences.

The MHA and MPH are offered in a full-time format for regular students. Working professionals can enroll and take MPH courses on a part-time basis or through the distance learning option.

Admission Criteria and Application Requirements

All applications for the MHA or MPH programs must be submitted through SOPHAS. The link to SOPHAS is http://www.sophas.org/. The Department is not allowed to make any exceptions. Applicants with a terminal degree (MD or JD or PhD) can be considered for waiver of GRE/GMAT scores on a case by case basis.

- A Bachelor's degree is required before students can enroll in any of the Master level degree programs of the Department. An official transcript of undergraduate work is required. Applicants with graduate level degree should submit their graduate transcripts as well. Applicants who are in the process of completing a Bachelor's degree or a graduate degree should submit an official transcript of all coursework taken. WES certification of any international degree is required.

- Official Graduate Record Examination (GRE) (or GMAT) scores must be submitted.

- Foreign applicants whose native language is not English must submit test scores for the Test of English as a Foreign Language (TOEFL) or International English Language Testing System (IELTS). If prior academic experience in the U.S. illustrates proficiency in English, this requirement may be waived, with the concurrence of the Graduate School.

- Two letters of recommendations must be submitted from persons who can reflect upon the applicant's prior academic and/or professional performance.
- The applicant must provide a career goal statement and a current resume.
- Prior internships or full-time work experience in a healthcare organization is a strong plus for MHA applicants.

Expected academic standard

It is expected that applicants should have a minimum undergraduate GPA of 3.0, and combined verbal and quantitative GRE scores of at least 295 (or the equivalent GMAT score). However we use a portfolio approach to evaluate applicants and the portfolio consists of reference letters, previous professional experience, goal statement, grade point average in undergraduate and previous graduate work (if applicable), and standardized test scores. Within the undergraduate GPA, we review upper division versus lower division GPA and GPA in course work relevant to the MHA program or to the MPH program versus the general education part of undergraduate work. The portfolio approach allows us to balance a somewhat lower GRE or GMAT score with a much higher GPA (or vice versa), when there is evidence of experience in or motivation for a healthcare career, and strong letters of recommendation.

International applicants

International applications are encouraged to apply to all of our degree programs. The department values the interactions between US and international students to strengthen teaching and learning in the classroom and to foster academic advancement in a multi-cultural, multi-ethnic environment. International students often bring their own unique perspectives on how to address population health concerns and such perspectives are extremely useful for understanding the health concerns of populations in the USA and globally.

International applicants interested in the MHA program should contact the MHA Director for further information *before* applying through the SOPHAS.

Graduate Assistantships

Many of our full-time MHA and MPH students work in the local health care organizations as Graduate Assistants (GA-ship) after enrollment in the program. Due to the highly competency-oriented nature of the MHA curriculum, placement of MHA students in health services organizations is given priority when the department is faced with a limited number of GA positions relative to the number of master's students in the department. In general, the department strives to identify the maximum number of assistantship opportunities in healthcare organizations in the greater Columbia area for students to interview. These are compensated graduate assistantship positions (10-20 hours a week). Historically, in most years almost all full time MHA students have been placed as graduate assistants beginning with their first semester. However, applicants (MHA or MPH) should note that GA placements are not guaranteed and it depends on the needs of sponsoring organizations, student's educational background and work experience, and student's initiative and enthusiasm displayed during the interview. Interviews and placements may not be completed until the middle of the first semester (or beyond depending on the above factors). To maximize chances of being placed in a healthcare or allied organization, MHA applicants are encouraged to volunteer at a healthcare organization if they do not have prior work or internship experience in health service organizations.

Graduate assistantships provide a small stipend, usually ranging from $1,200-2,000 per semester for 10-hours a week prorated to the hours worked up to a maximum of 20 hours a week. In addition, out-of-state students who have graduate assistantships receive partial tuition waiver to reduce

the tuition rate from out-of-state to in-state level. All applicants should be aware that the graduate assistantship will cover only a portion of the tuition and fees.

Conditional Admission to the MPH and MHA Programs

In certain circumstances, students may be offered conditional admission if they had below par GPA or GRE/GMAT scores at admission. A general condition of a conditional admission requires the student to achieve or exceed a GPA of 3.0 in their first semester in order to continue in the program. In addition, students may also be asked to take an English writing course, and for international students with significant difficulties in spoken English, English language courses. All these conditions are clearly spelled out in the conditional admission letter. Students with a conditional admission are asked to undertake no more than 10-hours a week of graduate assistantship work in the first semester in order to maximize their success in meeting the conditions. A subsequent increase in the graduate assistantship time commitment is permitted subject to satisfactory academic performance, i.e., no grade less than a "B" in courses completed in the first semester.

A. MASTER OF PUBLIC HEALTH IN HEALTH SERVICES POLICY AND MANAGEMENT (MPH)

The MPH is a 45-semester-hour program. The curriculum is as follows:

1. Public Health Core (biostatistics, epidemiology, environmental health sciences, administration and health promotion, education, and behavior) ....15 hours

    (PH Core courses are: HSPM 700, BIOS 700, EPID 700, HPEB 700 and ENHS 660)

2. Public Health Management ....12 hours

    (12hours to be selected from the following courses: HSPM 708, HSPM 712, HSPM 713, HSPM 716, HSPM 730, HSPM 769, HSPM 774. Other management courses can be selected in consultation with the academic advisor of the student)

3. Planning, Public Health Law and Health Policy ....9 hours

    (HSPM 711, HSPM 718, HSPM 726, HSPM 791-Policy course)

4. Community Assessment/Delivery of Health Care Services (HSPM 715) ....3 hours

5. Public Health Residency..6 hours

Upon entering the Department of Health Services Policy and Management, each student is assigned an academic advisor. This advisor will work with the student throughout the program of study. Students are advised about appropriate courses, sequencing of courses, independent studies, management residency and any additional work appropriate for preparing the student to meet his/her career objectives. The chair or MPH director may, at the request of either faculty member or advisee, assign a new advisor to the student.

The student is expected to arrange a meeting with the assigned faculty advisor prior to registration each semester. Advisement is necessary each semester prior to registration for courses, during the advisement appointment, both the student and adviser sign the advisement form which is then submitted to the Arnold School of Public Health Office of Student Services Students cannot register (in Self Service Carolina) for courses without turning in faculty-signed advisement forms to the Student Services office. Prior to advisement, students should inform their academic advisor of their GPA and alert the advisor if their GPA falls below a 3.0, if they earned a 'C' grade in a course, or if they failed a course so that this

can be taken into account during advisement. Faculty advisors will verify good academic standing of advisees before signing off on the course advisement forms for the following semester. Academic advisers often serve as the residency adviser for their advisees, however this is not a requirement.

Please see the suggested course sequence for full-time students listed below. Part-time, distance, and dual degree (MPH/MSW) students should work out their schedules with their advisors.

During the first semester, each student should work with his or her advisor to complete a draft Masters Program of Study (MPOS) form. On this form, the student lists all courses that have been taken and will be taken for the MPH program. This draft will guide course selection for the additional semesters. The draft should be submitted to the MPH Program Director for review. Prior to the beginning of the student's last semester, the student and adviser should review and revise the MPOS form as needed. This copy is signed by the students and adviser and submitted to the MPH Program Director for review. The MPH Program Director then submits the form for signing by the Department's graduate director and by the Dean of the Graduate School. Once all signatures are in place, this constitutes an agreement between the student and the University, guaranteeing that the student will receive the degree if the listed courses are completed satisfactorily. For this reason, the form *must* be completed well in advance of graduation, otherwise graduation may be delayed. The form is available at http://gradschool.sc.edu/forms/.

Suggested Course Sequence for Full-Time MPH Students

FALL SEMESTER* (Year 1)
BIOS 700	Introduction to Biostatistics	3 hours
HSPM 700	Approaches and Concepts for Health Administration	3 hours
HPEB 700	Concepts and Methods in Health Promotion	3 hours
HSPM 726	Public Health Law	3 hours

* If the student takes 9 credit hours in the first semester, the course not taken must be taken during Fall of second year.

SPRING SEMESTER*
HSPM 718	Health Planning or HSPM 791 Policy course	3 hours
EPID 700	Introduction to Epidemiology	3 hours
ENHS 660	Concepts of Environmental Health Science	3 hours
One management course (HSPM 708, 712, 716 or 730)		3 hours

* If the student takes 9 credit hours in the spring semester, the course not taken must be taken during Spring of second year.

SUMMER SESSIONS
HSPM 715	Community Assessment and Delivery of Health Care Services	3 hours
Another management course (HSPM 774, HSPM 770, etc.)		3 hours

FALL SEMESTER (Year 2)
One management related course	3 hours
Planning or policy area course	3 hours
Course not taken in the Fall semester of Year 1	3 hours

SPRING SEMESTER
Management course	3 hours
Public Health Residency	6 hours
MPH Program Total	45 hours

Professional Development Seminar – Participation strongly encouraged for first year MPH students

In addition to the course requirements listed above, MPH students are strongly encouraged to participate in the Professional Development Seminar Series (non-credit bearing) in the first year of the program. The Professional Development Seminar was launched in the spring of 2016 to enable HSPM MPH students to utilize the professional development and career development resources offered by the USC Career Center This Seminar is non- credit bearing, and is offered to students without charge. The specific topics may differ from year to year.

B. *MASTER OF HEALTH ADMINISTRATION (MHA)*

The Master of Health Administration (MHA) provides training in planning, management, accounting, finance, quantitative methods and evaluation for students intending careers in health care organizations. Being located in the Arnold School of Public Health, the MHA program additionally addresses the core public health competencies: epidemiology, biostatistics, health promotion and environmental health. The MHA program prepares students for a management career in the full range of healthcare organizations (hospitals and ambulatory care settings, post-acute [e.g. skilled nursing], long-term, and managed care facilities) and allied industries (health insurance, quality review organizations, risk management, etc.) in the private, not-for-profit, and public sectors. The MHA is offered in a full-time format for regular students. Efforts are underway to restart its part-time format MHA program for working professionals shortly.

In October 1991 the MHA program received full accreditation by the Accrediting Commission on Education for Health Services Administration (now called Commission on Accreditation of Healthcare Management Education, CAHME). Most recently, the MHA program was re-accredited by CAHME in 2015.

International applicants

Although the department admits international students in the MHA program, international applicants should be aware that it has become increasingly challenging to place international students in graduate assistantships in off-campus settings. We assist students to interview for graduate assistant positions but students cannot be placed before formally enrolling in the program. A graduate assistantship that compensates students at the minimum level prescribed by the Graduate School enables student tuition to be reduced to the in-state level. We highly encourage potential international applicants to contact the Program Director before submitting their application through SOPHAS.

The MHA program is a 58-semester-hour program. The curriculum is as follows:

Management ....31 hours
Accounting and Finance ....9 hours
Quantitative Methods ....3 hours
Public Health PUBH 700..3 hours
Managerial Epidemiology and Statistics for Healthcare .... 3 hours
Health Planning..3 hours
Approved Elective ....3 hours
Management Residency...3 hours

Prior to enrollment, all MHA-admitted students should have completed an undergraduate accounting course or acquired competency in basic undergraduate accounting through private study of a textbook.

Academic advisement and maintaining academic standing

Upon entering the Department of Health Services Policy and Management, either as a degree candidate or in non-degree status, each student is assigned an academic faculty advisor who will advise the student throughout the program of study. Students are advised about appropriate courses, graduate assistantship opportunities, performance feedback from their graduate assistantship preceptor (as available), sequencing of courses, independent studies, management residency and any additional work appropriate for preparing the student to meet his/her career objectives.

Students who are working full-time are highly encouraged to enroll as a part-time student (6-7 credit hours maximum per regular semester and 3 credit hours per summer session) to maximize learning and acquisition of competencies. While full-time employment does not automatically bar the student from carrying a full course load, evidence of less than optimum academic performance (e.g. one or more courses with a grade of "C+" or worse during the semester, or majority of the semester or prior courses at the "B" level) will trigger a reduction in the permitted course load to less than full-load, in consultation with the academic advisor/ MHA program director.

All students are required to attend scheduled group advisement meetings for the class to ensure proper sequencing of courses and to obtain clarification on elective courses offered outside the department. In addition, the student is expected to arrange to meet with the assigned faculty advisor prior to registration each semester, to get the advisement forms signed and discuss academic progress, other clarifications, GA-ship performance, etc. Students cannot register (in VIP) for courses without turning in faculty-signed advisement forms to the Student Services office. Prior to advisement, students should inform their academic advisor of their GPA and alert the advisor if their GPA falls below a 3.0, if they earned a 'C' grade in a course, or if they failed a course so that this can be taken into account during advisement. Faculty advisors will verify good academic standing of advisees before signing off on the course advisement forms for the following semester. The chair or MHA director may, at the request of either faculty member or advisee, assign a new advisor to the student. The faculty advisor for the residency project (in the last semester) is typically but not necessarily the same as the academic advisor.

At the spring group advisement session (in late spring), students must complete and submit a Master's Program of Study form. On this form, the student lists all courses that have been and will be taken for completing the MHA. The student signs the form and submits it to the advisor, who verifies that the listed courses do fulfill the requirements for the degree. The advisor signs the form, and submits it to the Department's graduate director and there onwards to the Dean of the Graduate School. Once all signatures are in place, this constitutes an agreement between the student and the University, guaranteeing that the student will receive the degree if the listed courses are completed satisfactorily. For this reason, the form *must* be completed well in advance of graduation, otherwise graduation may be delayed. The form is available at the Departmental web site,
http://www.sph.sc.edu/hspm/currentstudents.htm.

Periodic competency acquisition assessments

All MHA students are required to complete periodic self-assessments of their competencies during the program as part of the program's continuous quality improvement process. For this, "Course sections" will be set up in Blackboard for each cohort and students alerted at appropriate times to complete the posted competency assessment surveys. Only aggregate scores based on these self-assessments are used, monitoring students' progression, on average, on the targeted competencies in the respective semesters to verify that the curriculum and teaching methods are adequate to ensure achievement of the stated competencies in the MHA program competency model. Results are used to make the necessary changes.

Professional Development Seminar – Participation required for first year MHA students

In addition to the course requirements listed above, all MHA students are required to participate in the Professional Development Seminar Series (non-credit bearing) in the first year of the program.

The Professional Development Seminar was launched in the fall of 2005 in response to feedback from preceptors, alumni, and health care leaders, and to enable HSPM students to utilize the professional development and career development resources offered by the USC Career Center. This Seminar is non-credit bearing, and is offered to students without charge. An overview of a prior offering of the seminar is provided below. The specific topics may differ from year to year.

General Overview of Professional Development Seminar

This seminar series is designed to help students enhance their professional communication skills and behaviors, and to gain insight into how they come across to other professionals. These skills will help the students to succeed in making the best of our programs, succeed in graduate assistantships, in residencies, and in their future managerial careers. In most sessions, in addition to the topics mentioned below, a senior, mid-career or recent alumnus of the program provides an informal lecture and interactive session on their career experiences, tips for a successful career, and on how students should maximize learning opportunities in their curricular and graduate assistantship experience.

1. Session 1 *"On becoming an effective healthcare manager"* : A prominent health care leader provides an overview of professional self-development and habits to be practiced during the program and behavioral abilities to be pursued in order to be successful in health management career.

2. Session 2 *Workshop: How sharp are your Tools?* Learn how to improve the resume writing, interviewing and professional skills of students.

3. Session 3 *Individual Resume Review and One-on-One Feedback*: Get individualized feedback on improving resume in a personal session with a Career Center professional.

4. Session 4 *Individual, practice interview:* Participate in a practice interview with a Career Center staff person and receive feedback.

5. Session 5 *Business Dining and Related Etiquette*: Learn dining and business etiquette: View a video of an "Etiquette Dinner;" to understand dos and don'ts during business dining.

6. Session 6 *Workshop: Effective Business Communication*: Two part workshop on written communication, and oral presentation skills

7. Session 7 *Workshop: Job Search Savvy*: Developing an effective job search plan and utilizing university and other resources to maximize success.

Recommended Course Sequence for Full-Time MHA Students

The course sequence is designed to enable students to progressively build on the knowledge and skills essential for subsequent courses. Thus, courses are to be taken in the indicated sequence. Students entering the program other than during fall semester, or opting out of required courses in the recommended sequence, may require more than two years to complete the program. The sequence for part-time students also takes into account the knowledge needs for successive sets of courses.

Year 1
FALL SEMESTER
HSPM 775 Managerial Epidemiology   3 hours
HSPM 733 Health Care Accounting   3 hours
HSPM 714 Perspectives in Community Health Organizations   3 hours
HSPM 765 Leadership in Health Care Organizations   1 hour
HSPM 769 Organizational Behavior   3 hours
Required courses = 13 hours

SPRING SEMESTER
HSPM 712 Health Economics   3 hours
HSPM 716 Quantitative Methods for Health Administration   3 hours
HSPM 718 Health Planning   3 hours
HSPM 731 Health Care Finance-I   3 hours
*Possible PUBH700 or elective = 3 hours

MAY SESSION
*Possible Elective 3 hours

SUMMER SESSION I
HSPM 713 Information Systems in Health Administration   3 hours
HSPM 766 Health Services Administration I   3 hours

SUMMER SESSION II
HSPM 776 Physician Practice Management   3 hours
*Possible Elective = 3 hours

Year 2
FALL SEMESTER
HSPM 724 Health Law   3 hours
HSPM 768 Health Services Administration II   3 hours
HSPM 770 Health Care Decision Making   3 hours
HSPM 732 Health Care Finance II   3 hours
HSPM 774 Applied Quality Management in Health Care   3 hours

SPRING SEMESTER
HSPM 797 Management Residency   3 hours
* Possible PUBH700 = 3 hours
* The elective must be a graduate level course. Three hours of electives required for graduation
MHA Program Total   **58 hours**

Students with strong health care management experience in an area may opt to take elective courses in lieu of up to two of the following courses: (1) Strategic Planning, HSPM 718; (2) Health Law, HSPM 724; (3) Information Systems, HSPM 713; (4) Health Finance, HSPM 731; and (5) HealthCare Accounting, HSPM 733. The MHA director will review each request on a case by case basis, and make the final determination on waiver of required courses. To be considered, students are required to submit a letter from their manager documenting specified professional experience in the management area for which course work waiver is being requested.

C. *MHA PROFESSIONAL FORMAT (currently not being offered)*

The MHA Professional Format is designed for working health professionals who wish to earn an MHA with minimum impact on their work schedules. Currently this program is on hold and no applications for this program are being accepted until further notice. The professional format allows students to complete coursework through state-of-the-art distance technology and web-based interactive learning, while minimizing on-campus time. The live classroom lectures delivered for the regular MHA students are provided to the MHA Professional Format students via asynchronous web-based instructions using Blackboard. Students attend sessions on campus for one day per course at the end of each semester. The Program begins with a one day orientation on the Columbia campus for new students to register, complete a distance communication workshop, tour the campus and library, meet faculty and other students, and have the introductory sessions for the courses of the first semester.

To be eligible for the MHA Professional Format, the student should have several years of work experience in a health care or allied organization, and also fulfill the academic requirements for admission.

Participants in this program also requires completion of 58 hours of course work (including 3 hours of a residency project), with the same curriculum content as regular MHA students. The MHA Professional Format students may complete the program on a full-time or part-time basis, on a schedule that best meets their personal needs. As indicated earlier, this program is on hold until further notice and no applications are being accepted for this program.

D. DUAL DEGREES (MSW/MPH, JD/MHA)

The Health Services Policy and Management Department in coordination with College of Social Work, and School of Law, respectively, offer dual degree programs MSW/MPH and JD/MHA. The requirements for the MPH or MHA portion of each dual degree are the same as the stand-alone degree programs discussed above. The requirements for MSW and JD portions of the dual degree programs are determined by the College of Social Work and School of Law respectively. Some courses do fulfill requirements for both portions of the dual degree. A dual degree program thus requires fewer semester hours in total than if the two programs were taken separately. The details of each program are available through the respective links on the Department's webpage at http://www.sph.sc.edu/hspm/grad.htm.

E. GERONTOLOGY CERTIFICATE PROGRAM

The Certificate of Graduate Study in Gerontology Program addresses the educational needs of students who will be engaged in planning, administration, and provision of services for older adults. The Certificate Program offers specialized preparation for a career in the expanding fields of gerontology and geriatrics. Given the increasing number of older citizens in our society, human service professionals need specialized knowledge on biological, health, psychosocial, economic, administrative, service delivery and social policy aspects of aging.

The Gerontology Certificate Program is administered by the College of Social Work of the University of South Carolina and is planned by the University's Interdisciplinary Academic Committee on Gerontology. With a commitment to excellence, the Certificate of Graduate Study in Gerontology Program has been developed in relation to standards and guidelines established by the Association for Gerontology in Higher Education.

The Gerontology Certificate Program provides graduate students with rich opportunities to learn from gerontology educators within several academic units of the University of South Carolina. The interdisciplinary certificate is granted upon completion of a structured program of 21 credit hours of graduate level courses. Each student's program must include at least 12 credit hours of required courses and 9 credit hours of electives. All students are assigned an academic advisor who provides assistance in constructing an individualized program of study.

The Core Curriculum (12 credit-hours of required courses) for the certificate program is listed below:

- PSYC 700 (or SOWK 77l) Psychosocial Approaches to Gerontology (3 credits): Introduction to gerontology covering the fields of demography, biology, psychology, sociology, social welfare, economics, and law.
- MEDI 700 Health Aspects of Aging (3 credits): The aging process and its implications for health.
- SOWK 772 Programs and Services for the Elderly (3 credits): An examination of the policy/planning issues relating to the elderly, including current trends in services, bases for social service development, and the evaluation of services for the elderly.
- Practicum/Field Instruction or Supervised Research (3 credits): Fulfilled by HSPM 797 Management Residency (for MHA's) or HSPM 798 (for MPH's).

The Director of the Gerontology Program must approve the entire plan of study, and the student's advisor must approve the nine credit-hours of electives. At least three credit-hours of electives must be outside the Arnold School of Public Health. Students apply to the Gerontology Certificate Program after being admitted to the Health Services Policy and Management MPH or MHA program. For further information, please see: http://www.sph.sc.edu/hspm/geront.htm

V. Residency for Master's Degree Programs
(Required for MHA and MPH students)

The residency is the culmination of the master degree programs of the department, requiring a student to apply the theories, skills and knowledge acquired in the academic setting. Practical application of skills and knowledge is an essential part of professional degree programs, offering learning opportunities not available in classrooms. The residency is a planned and supervised learning experience, gained through first-hand planning and execution of a supervised project in a health services organization or in a public health setting. In addition to gaining some breadth of experience within the host organization, students must identify a deliverable outcome and execute planned activities to produce the outcome. Examples of deliverables include: a solution of a specific management problem or policy issue, preparing a business plan, evaluation of a program, etc.

The best residencies prepare students for employment in health administration or, in the case of those employed in some managerial capacity in the health field, for advancement. The residency should have all of the following characteristics:

1. students are challenged to carry out a quasi-independent management project with a defined management or policy objective and deliverables in a practice setting, explore appropriate solutions, plan the methodology and roadmap, gather data and analyze the data as appropriate, and provide management/policy recommendations;
2. In case of the MHA program the residency should satisfy the requirements laid out in residency syllabus and students should specify the MHA program competencies to be demonstrated or strengthened over the course of the residency in consultation with the site preceptor and faculty advisor;
3. In case of the MPH program, the residency project proposal is submitted and approved through MySPH. Students specific the MPH competencies to be demonstrated or strengthened over the course of the residency in consultation with the site preceptor and residency adviser.
4. preceptors provide students guidance throughout the project phases, project identification, objectives/deliverables, methods to achieve the objectives, and provide supervision by assessing progress and offering professional insight at frequent intervals;
5. host institutions benefit from relevant and professionally-executed residency projects;
6. faculty gets validation of student mastery of the MHA or MPH program competencies that are addressed/ demonstrated in the residency. Student achievement/ demonstration of these competencies will be evaluated by the student (self-assessment) and preceptor at the end of the residency using the MHA or MPH residency evaluation forms; For MPH students, these forms are completed in MySPH.

In addition, preceptors are encouraged to facilitate students to:

1. develop management skills and improve self-confidence by participating in other smaller projects and tasks as assigned;
2. gain functional exposure to senior management activities through participation in planning and decision-making meetings as possible;

Requirements for the Management Residency (HSPM 797) and the Public Health Residency (HSPM 798) are similar in most respects. Students are required to demonstrate an ability to apply theory to practice in a health care setting, and to document it by preparing a major project report that addresses a management need or policy problem of the host organization including a strong literature review component.

A. Management Residency (HSPM 797, MHA residency project, 3 credit hours)

Master of Health Administration students taking HSPM 797 provide a minimum work effort of 32 hours/week (4 full working days) to the host facility over a Fall or Spring Semester (4 months), or 40 hours/week (all days of the week) if the residency is completed in a summer session (three summer months). The total effort should be, at a minimum, 48 working days. Students employed full-time can, with faculty approval, complete the residency on a 16 hour/per week basis, over two semesters (fall and spring). Students may complete a 12-month residency or fellowship in lieu of a one-semester residency with faculty permission. The HSPM 797 syllabus provides the details of the MHA residency content and report preparation.

Additional details on the MHA residency in response to Frequently Asked Questions

Purpose of a MHA residency project

The residency project is similar to a master's thesis, with the MHA project focusing on a practice-based project in health care administration. Students are expected to plan and execute an independent health administration project under the guidance of the site preceptor and produce a residency project report. Students should demonstrate and utilize their expertise in the topic, and demonstrate the competencies of analytical and critical thinking, finance and planning, oral and written communication, and teamwork. Your residency report is a valuable marketing tool to launch your career.

How are residencies obtained?

We encourage and expect 2nd year MHA students to secure residencies through exploring options available through opportunities provided through the program, including: (1) your graduate assistantship preceptor; (2) other professionals met at your graduate assistantship site; (3) course guest speakers, adjunct faculty; (4) recent alumni, particularly MHA students who graduated the previous year; (5) your classmates; and (6) HSPM faculty. This process will help to obtain a residency that is a closer fit with your professional interests. Networking is a critical skill for healthcare administrators, and the Department's philosophy is to facilitate development of your initiative and networking skills.

Are there exceptions to the usual process of obtaining a residency? Yes.

· HSPM faculty members are a "professional safety net." If a student cannot obtain a residency, or arrangements fall through for some reason, HSPM faculty will arrange a residency placement so that the academic requirement can be met. However, it is possible that in such situations the residency will be uncompensated.

· If a student has not performed satisfactorily in a graduate assistantship, has quit an assistantship position without consulting their faculty advisor, or has repeatedly turned down assistantship opportunities identified by faculty in previous semesters, HSPM faculty may not be available to assist the student with obtaining a residency position.

How do we ensure timely acquisition of a project and progress of the residency?

The MHA director schedules a minimum of 3 residency meetings for all students. Attendance is mandatory for all students. The first meeting is held in the last month of the second fall semester, and the remaining two meetings are conducted during the spring semester of Year 2. All HSPM faculty who advise MHA residency students are invited to participate in these meetings. In addition students are expected to schedule individual meetings with the faculty advisor, at the minimum, one meeting before finalizing their residency idea and proposal, and two meetings during the residency semester to share and receive individual performance-related suggestions and reviews. All spring and summer residency

students are required to attend these meetings. The first meeting is an informational, planning and placement-related session. The second meeting conducted about 4 weeks into the spring, is held to review student progress and ensure that all students have a firm project plan and are on track to complete their project on time. By this meeting all students should have submitted their project concept paper. At this meeting, each student briefly presents a summary of their proposed project along with a summary literature review. The third meeting is conducted about 4-6 weeks later, by which time all students should have submitted a draft full proposal to their respective faculty advisor for review. At this meeting each student presents a status report that verifies that all students are on track to complete the residency project and report by the end of the semester.

What are MHA students usually compensated for their residency?

Compensation varies considerably and is at the discretion of the sponsoring organization. We request preceptors to compensate at least at a 20-hour per week graduate assistantship level, $4,000. Organizations may pay higher or lower than the requested amount. Some students negotiate higher payments. While the GA contract is limited to 20-hours a week, the additional hours put in are required to get semester hours credit. It is possible, however, that on occasion (though rarely), a student may have to complete a residency project without compensation, particularly if they carry out a project for an organization at which they have not worked earlier as a graduate assistant or if organizations experience paucity of funds to support a compensated residency.

What are students' responsibilities regarding residency "paperwork?

Usually the same USC contract mechanism as the graduate assistantship is used. Alternatively, students may be hired directly by the health care organization; however, this does not result in a tuition reduction for out-of-state students. Because most students are typically registered only for 3 semester hours of the residency in the final spring semester, special paperwork to request Z-status must be completed to receive permission to hold a graduate assistantship. The paperwork can be completed with the assistance of the MHA program manager.

How do students select a HSPM faculty advisor?

The HSPM faculty advisor is usually your academic advisor. If a different faculty advisor is desired, the MHA director/program manager will identify a faculty advisor within the HSPM department before the residency process begins. A second reader will be identified by the MHA director/faculty advisor.

B. Public Health Residency (HSPM 798, 6 credit hours)

Master of Public Health students taking HSPM 798, the Public Health Residency, spend a minimum 250 hours, or approximately 20 hours a week for a semester in the facility or agency. Students employed full-time can, with adviser and preceptor approval, may complete the residency on a 15 hours/week basis over two semesters. Students may also complete the residency or fellowship over a 12 month period.

C. Finding a Management Residency or Public Health Residency Location

The residency is the culminating experience for students in health administration. *Planning for it should begin as early as possible for all students.* To begin with, entering students have a general idea of why they are interested in becoming a health administrator. As students progress through the program, work in GA-ships, and interact with classmates in other GA-ships, ideas become refined or change due to better understanding of what the management of health services organizations is all about.

The master's program manager helps with this process. Students should explore a range of options, visit sites, and talk with graduates and managers in health systems organizations to identify options. Again, faculty advisors can frequently assist students, although student initiative is critical as with the entire residency experience.

Numerous state and federal departments and agencies, as well as private hospitals and private health care organizations, have locations in the Columbia area or within South Carolina; these have provided excellent residency opportunities. In most cases the GA-ship site also becomes the residency site as the student and preceptor identify a project while the student progresses through the program. Students planning a residency outside the state of South Carolina must take the initiative to develop opportunities through communication and meetings with potential sites.

D. Residency Advisors and Preceptors: Their Responsibilities

In both the MPH and MHA programs, the residency advisor is typically the HSPM academic advisor. However, faculty who are not holding full-time appointments in the Department must be approved by the Chair. The residency advisor is responsible for supervision of the residency chosen by the student. In addition, the faculty advisor will identify a second reader for the residency.

1. The Faculty Advisor's responsibilities include:

    a. helping advisees clarify and understand the objectives of the residency;

    b. helping the advisee to develop specific learning objectives and MHA/MPH program competency objectives that will be addressed/ demonstrated/ used ;

    c. approving the project(s) to be undertaken in the residency and signing the proposal approval form based on the preliminary project proposal;

    d. responding to advisee inquiries/requests for advice during the residency;

    e. collaborating with preceptors to ensure an effective experience;

    f. evaluating the student's draft papers, providing feedback, evaluating the final report and the oral presentation using the appropriate rubrics (available online at the MHA program webpage or from the MPH Program Director) to evaluate student performance on the residency;

    g. recommending reference sources etc., as appropriate to the setting and the problem under study;

    h. ensuring that students register the project at MySPH with assistance if needed from the master's program manager;

    i. providing a written assessment of the student's residency report and presentation using the MHA/MPH Residency Report and PowerPoint Assessment Rubric and the Team/Individual Presentation Rubric to the student and a copy to the MHA director or MPH director
    .

2. The preceptor's responsibilities include:

    a. understanding the residency requirements and ensuring the feasibility of meet the requirements;

    b. identifying suitable projects and problem statements;

    c. providing the student an overall orientation to the site, to making the student feel welcome;

d. discussing and involving the student in meetings with governance and management structures relevant to the residency project;

e. facilitating the required meetings, data access, etc. as required to accomplish the project objectives;

f. having weekly to fortnightly meetings with the student during the residency to discuss progress, issues and resources needed by the student for timely completion of the residency;

g. contacting or responding to the faculty advisor in designing or adjusting the experience as needed;

h. evaluating the student, reviewing the evaluation with the student, and sending a copy of the evaluation to the faculty advisor;

i. if possible, providing a written assessment of the student's residency report and presentation using the MHA/MPH Residency Report and PowerPoint Assessment Rubric to the student.

3. **Both** Faculty Advisor and Preceptor must approve the scope and content of the residency project. Both should sign the Residency Proposal Agreement Sheet no later than four weeks into the residency semester. MPH students are required to submit their proposals in MySPH. A copy of the project proposal approval sheet should be affixed to the final copy of the proposal. A copy of the final report will be kept in the department.

4. Copies of the final approved residency report will be given to the faculty advisor, the faculty second reader, and the preceptor. Also, one copy must be given to the Graduate Director for the Department's archives. The archive copy must be delivered before the candidate can be cleared for graduation.

5. The residency for those in the Gerontology Certificate program further includes a requirement to focus on the elderly or aging process and to receive approval from the Gerontology Certificate Program Director.

6. It is the responsibility of the student to obtain faculty and preceptor signatures on both the proposal and the final report. It is also the student's responsibility to ensure that a copy of both the preceptor's student evaluation and the student's evaluation of the residency are submitted to the faculty advisor. A grade will not be assigned for the Residency **and thus the student cannot graduate** until the final report and residency evaluation forms have been turned in. The required forms are at the end of this handbook.

E. FAQs for Residency Site Preceptors
(Students should share this note along with the preceptor's responsibility list above to potential residency preceptors.)

Summary of GA-ship

The GA-ship is essentially a process of professional learning (earn-while-you-learn deal for students). The student learns about how health organizations work while contributing work effort as required by the sponsoring organization. Typically, GA-ship consists of tasks and short-term responsibilities assigned by the preceptor, but these tasks do not have to culminate in specific deliverables under a planned project for the organization as required in a residency project.

How a residency is different from a GA-ship?

Apart from the compensation aspect which may differ due to longer work hours, the residency is a semester-

long period when the student's work is focused on specific objectives with specified deliverables (such as planning or implementing a new system or procedure, evaluating a system, developing a business plan, exploring opportunities for initiating a new program or service). There must be a specific outcome and deliverables established in advance. Sometimes the residency can be an uncompensated project completed on a volunteer basis.

What is the purpose of a residency experience?

The academic objective of a residency project is for the student to gain hands-on experience of applying management techniques and concepts in the real world, under the guidance of an experienced health administrator. The student gets academic credit for the management residency (3 credits for the MHA residency and 6 credits for the MPH residency).

How does a residency process work?

The student and the sponsoring preceptor will jointly configure a project which can be accomplished within a semester. The project is expected to be useful for the sponsor in addition to satisfying the academic requirements. The student, in collaboration with the preceptor and faculty advisor will develop specific project objectives and the outline of a methodology and roadmap with timeline to accomplish the objectives. The preceptor will review and approve the methodology, and facilitate data collection and other support as needed, such as contacting other department officials from whom information is needed to accomplish the project. The student will apply their theoretical knowledge and findings from the literature review in developing the methodology.

Residency Compensation

Residency project sponsors may pay a higher hourly rate of compensation than a typical GA-ship because of the specific project needs of the organization. However, many MHA residency sponsors limit compensation to the typical $3,000-4,000 per semester paid for 20-hours per week GA-ship and the student puts in the remaining 12 hours per week for MHA residencies to receive academic credit. The GA-ship paperwork can be for no more than 20-hours per week per Graduate School guidelines. At this time, few of the MPH residency sponsors offer compensation.

F. **Residency Proposal and Report**
(The description below supplements the requirements spelt out in the HSPM 797 syllabus for the MHA residency.)

The Residency is expected to help prepare students for employment upon graduation. In particular, the student should gain skills required to manage effectively and solve management problems in health care organizations. The problem/process selected for study/problem-solving should be identified in collaboration with the preceptor. The project and expected deliverables should be identified prior to the start of the residency semester but occasionally it may be identified early on in the residency semester. The written draft proposal should be submitted to the preceptor for approval, and the approved version submitted to the faculty advisor for approval within four weeks of the start of the residency semester. The summary of the proposal will also be informally presented at the first residency group meeting during the residency semester (within first six weeks of the semester start date). Prior to this meeting the students should have met one-on-one with their respective faculty advisors to review the proposal.

1. **Residency Proposal Should Consist Of:**

a. Problem Statement: The proposal should start with a clear statement of the organizational

problem or need to be addressed and a brief rationale for the study or project. It should be followed by a clear statement of the student learning objectives, performance objectives including project deliverables for the host organization, and the MHA or MPH program competency objectives to be addressed/ demonstrated.

An example project deliverable might be: "This project will provide recommendations on the number of additional work stations/OR suites/additional personnel needed, based on clinical and fiscal data and professional input and preferences of key providers and management".

b. Literature Review: The purpose of a review of relevant literature is to use information from relevant data sources such as case studies, published empirical research, and/or experts in the field. Note that a good review will not only save time but also improve the quality of the problem statement, methodology, and results. Students should be aware that some HSPM faculty prefers a written initial literature review at the proposal stage (about 2-3 pages and 4-6 references) while others may require a full proposal with full literature review at the proposal stage. Your literature search to supplement your preliminary review will continue throughout your residency semester. A complete literature review in the final report should consist of at least 10 pages with a minimum of 15 references, at least 10 of these from peer-reviewed journals. Use of verbatim quotes (even with attribution to the source) is strongly discouraged, no more than an occasional quote is permitted. You must synthesize information from your sources to make the case for your project and cite the reference. All information taken from any source should be referenced and the full reference provided in the list of references per standard format. (Information used from other sources without citing amounts to plagiarism which would have grave consequences including the possibility of termination from the program without graduation.) Web-based references should be sparingly (if at all) used, unless the website is hosted by government agencies or professional organizations. An important source of literature for management and business-related topics is the Moore School of Business library, apart from the Thomas Cooper Library, American College of Healthcare Executives newsletter or site, American Hospital Association journal or website, the Institute for Healthcare Improvement site, Modern Healthcare, MGMA journal/newsletter, etc. Students must confirm literature review expectations with their faculty advisor before they begin their proposal. Your literature review must make the case for why your project is important, document the experience or findings of similar or allied efforts in the past, methods used and the advantages and pitfalls, and implications of prior work for your chosen project area. Thus your literature review must inform your project design and methods if such literature is available. Your literature review could cover topics such as competitor analysis, environment analysis, market analysis, review of regulations, quality improvement techniques (e.g. Six Sigma) to give a few examples. .

c. Method(s): The methodology section of the proposal should outline the approach to be used and the complete roadmap to achieve the residency objectives. Typically a combination of methods is used which may include data collection (primary or secondary data), interviews, case study development, financial data, observation of work processes or patient flows, etc. To the extent available you will use support from the literature for your chosen methods. If you plan to conduct interviews, in person or over the telephone, you should develop draft surveys or lists of questions to be asked before starting the work (include the surveys as appendices in the final report), and state the approximate number of subjects you plan to interview/survey. Finally your methods section should state how the various data will be analyzed and findings synthesized to produce the project deliverables.

d. The residency proposal must be approved by the faculty advisor and the preceptor. A residency approval form is provided at the end of the handbook. MPH students are required to submit residency proposals in MySPH.

2. <u>Final Report:</u>

A residency culminates in a professionally formatted report that follows the format specified below. The residency requires an oral presentation, usually on campus to faculty, students and others interested in the topic. Preceptors are strongly encouraged to attend the oral presentation. (You may schedule additional presentations at the host organization for their internal stakeholders.) Oral presentations will not be scheduled without signature of the faculty advisor on the **Final Approval of Written Report** (form provided at the end of this handbook). One week prior to the oral presentation the student should post announcements of their presentation in the Department and School. The announcement should state the student's name, MHA/MPH candidacy, title of presentation, date, time, and location. **Final approval of the written report rests with the Faculty advisor, the second Departmental reader, and the preceptor.**

The report should have a cover page with showing the following information:

- Title of Project
- Residency Site
- Date
- Student's Name
- Preceptor
- Faculty Preceptor
- Faculty Second Reader

PLEASE NOTE that both the faculty advisor and the second reader must approve the written report before the oral portion of this requirement. To enable this, **it is highly recommended that students submit their final report for review by the preceptor and faculty advisor at least two weeks prior to the oral presentation. Please note that all candidates must submit a bound copy of the final, accepted paper to the Department, and one bound copy each to the faculty advisor, the second reader, and the preceptor. Specific rubrics will be used by the faculty advisor and preceptor to evaluate the report and the presentation, available online at the MHA program webpage or from the MPH Program Director. Students should review the rubrics to ensure that their report and presentation (both the Power Point content and verbal presentation) conform to the criteria stated against the best scores on each dimension in the respective rubrics.**

References should be formatted in a standard style, such as American Psychological Association, JAMA or a similar standard journal in healthcare. The Final Report must meet style and format standards indicated below. The text should be double spaced with one (1) inch margins on all sides, no additional indents or spacing, and use12 point font.

The Health Management Residency Approval Form should be signed by site and faculty preceptor and second reader and should be the first page in the report (the form is reproduced in the annex of this handbook). The Executive Summary should be the second page. The Executive Summary (written last, after the full report is written) should be a 1-2 page, single-spaced summary of the problem, methods, results and recommendations.

REPORT FORMAT

        Health Administration Residency Approval Form
        Executive Summary
        Title of Report
        Table of Contents
        List of Illustrations or Figures
        List of Tables
        I.   Introduction
                a.   Statement of the Problem
                b.   Major Objectives and deliverables for the organization
                c.   Student learning objectives and competency objectives
                d.   Review of the Literature
        II.   Methods
        III.   Results
        IV.   Discussion
                a.   Summary
                b.   Conclusions
                c.   Recommendations relative to the project deliverables
                d.   Residency strengths and areas of improvement.
        Appendices (e.g. surveys used, supplementary information)
        Bibliography

Throughout the residency semester, students are highly encouraged to document their activities, findings and steps completed at the end of each week in a journal. They should review their accomplishments against the methods roadmap and deliverables to keep track of timeliness and the details that may be otherwise overlooked when documenting the Methods and Results sections in the final report.

Reference citation and plagiarism

It is essential that students give proper credit to the sources of information. This applies whether the information is from a source on the Internet, professional journal, peer reviewed journal, etc. Material taken verbatim (word for word) from a reference must appear in quotes, followed by a citation. (However this should be sued very sparingly, if at all used.) Anytime you use more than three consecutive words verbatim from a reference, it should be in quotes. <u>Residency reports that have many verbatim quotes are not acceptable. Plagiarism, whether it is intentional or not, is a serious offence: it is grounds for failure for an assignment, failure in the course, suspension or expulsion.</u> Students who do not give appropriate credit to their references will receive a grade of U for the residency, and will be required to repeat the residency experience for a different project in a different organization.

Guidelines for preparing a professional report:

· The residency report must look professional, with use of consistent font types and formats, be free from typographical or grammatical errors, and well organized. Examples of MHA residency reports should be reviewed before writing up your report.

· Keep in mind that you are writing a technical consulting report, not a class paper. The report should be a minimum of 40 pages excluding references and could extend to 80 pages or more depending on

the type of project.

- Use a professional looking header or footer. Avoid anything "gimmicky" or "cute." Make full use of white space. Avoid unnecessary indents or line spacing that result in sparse content in each page.

- Use main titles (logical dividers such as introduction, problem statement) and sub titles to organize your material for logical structure and flow. Distinguish between your main titles and sub titles by font type, e.g., bold headers, bold and italicize sub headers. Organize the text into concise paragraphs, generally not to exceed three quarters of a page. Use bullets to organize material as appropriate.

- When you use tables, graphs or pictures, you must refer to them in the text and state the major "take home" findings conveyed by the table.

- The executive summary is written last. Your executive summary should summarize precisely the main project objective, methods, results and conclusions-recommendations relative to the deliverables in 1-2 pages of single spaced text.

- Put in page numbers on the proposal and final report.

- All material must be carefully proofread prior to submission, i.e., spell checked, and reviewed for grammar and correct uses of words that do not get flagged by the spell check. Please take your final draft to the Writing Center for a final review before submitting it to your preceptor and faculty advisor. Please make your appointment well ahead of time while you complete writing your report.

F. Residency Conditions and Requirements for MHA and MPH Candidates

1. All students due to commence the residency are required to attend a residency planning meeting to be organized towards the end of the preceding semester. At this meeting, students will confirm their residency plans if they have finalized their site/project, and those who have not, will notify the respective Program Directors, so that potential opportunities can be identified with their help. For MHA students 2 additional group meetings will be held during the residency semester.

2. All Management Residency students (MPH and MHA) are required to schedule at least two residency meetings with their faculty advisors during the residency semester. The first meeting will be scheduled by the student with their faculty advisor within 4-6 weeks of the start of the semester. At this meeting, all students will make an informal presentation of their project proposal and discuss the residency experience with their advisor.

3. At the second meeting with their faculty advisors, held about 8-10 weeks from the start of the semester, each student will present their project progress to date, problems and learning experiences.

4. At the completion of the residency, the student will submit a residency evaluation form which includes a description of the experience gained, the administrative skills developed, appraisal of the applicability of classroom learning to practice, and the strengths and weaknesses of the residency (form provided at the end of the handbook).

5. Also at the conclusion of the public health residency, the student will ask the preceptor to complete an evaluation of the student's performance during the residency, emphasizing student progress in dealing with the specific management problem(s) undertaken (form provided at the end of the handbook) on MySPH. The student and adviser will also complete residency evaluations on MySPH. Students are also required to complete the school of Public Health Exit Questionnaire, without which the student cannot be cleared for graduation.

MHA students are assigned a grade of satisfactory (S) or unsatisfactory (U) for the residency credits. MPH Students receive letter grades for the residency.

The forms and evaluations required for the management residency of the MHA program are listed below:

i)   Residency Proposal and Report Approval form (signed by preceptor, faculty advisor and second reader)
ii)   MHA competency self-assessment (at the End of the program)
iii)   Preceptor evaluation of the residency – completed by preceptor (from Graduate Handbook)
iv)   Student evaluation of the residency (from Graduate Handbook)
v)   Residency Report Assessment Rubric - 2 Forms completed by Preceptor and Advisor. Additional by Second reader if they are available (form at MHA program webpage)
vi)   Presentation Assessment Rubric – 2 forms (faculty advisor and preceptor (form at MHA program webpage)
vii)   Arnold School of Public Health Exit Interview – Complete it online (the link to exit interview will be sent at the end of the semester). Print out the acknowledgment webpage.

Finally, you should provide one bound copy of your residency report to the department for departmental records.

H. Checklist of the "nuts and bolts" of the MHA residency project and report

a. Is my section on Project Objectives focused on: What is the purpose of the project, what are the specific objectives, and what are the deliverables, and what are my learning objectives?
b. Am I journaling my residency activities as I am executing them daily/weekly?
c. Does the Objectives section state the competencies out of our MHA program competency model that my project will address? (i.e., competency areas in which you will improve by executing the project).
d. Does my literature review make a case for why my project should be done, the benefits as documented or speculated in the literature, and why it should be done the way I propose it. Is it organized to flow logically and read well, ending with a final closing statement paragraph that justifies my project/methods?
e. Have I made every attempt to make sure that my work is building upon the best lessons of work already done by others, and my methods are grounded in sound theoretical and pragmatic considerations that are documented by others who have trodden on this path in the past? (In other words, it guards against a "winging it" approach which would reduce the credibility and respect for your product.)
f. Does my methods section present a clear action plan or road map with statements of what will be done, with whom, how many individuals or case studies, from which department, what type of information/documents will be/were reviewed to create the database, etc.? (Document your activities as far as possible as you execute them, say at the end of every week. Do not wait until the last month of the semester to document.)
g. Is the report professional, error-free, and complies with the report requirements?
h. Have I reviewed the residency report rubric online to ensure my report is in compliance?

Please check off the above items one by one after verifying compliance with each BEFORE submitting your draft proposal or draft residency report to your preceptor and faculty advisor.

J. Exemptions from the Residency

Exemption is permitted for highly experienced health care managers currently employed at senior levels in a health services organization. Such individuals may take 3 hours of prescribed doctoral course work in either a research or policy track. The student must obtain written prior approval of exemption from their faculty advisor and the Director of the MHA program. On completion of the substitute course work, the student is required to complete a structured study/research project in the field and submit a Final Report fulfilling all the requirements outlined for the MHA Residency report. A grade will be assigned by the course instructor.

On exceptional occasions, an exemption from the requirement may be permitted for MPH candidates. These are made on a case-by-case basis, depending on career goals and desired course work in lieu of the residency. Students seeking exemption should prepare a letter addressed to the chair of the department justifying the request. The chair will bring the student's request to a meeting of the department faculty who make a recommendation where they so elect. The Dean of the Arnold School of Public Health has final authority in all cases respecting MPH exemptions.

MHA Residency Alternative for Experienced Managers

Occasionally, MHA students enter the Program from health care institutions or agencies in which they currently hold top level or senior level management positions. The needs of these individuals for an academic experience and a final integrative educational experience are different from those of students preparing for entry-level positions.

Experienced administrators may wish to pursue an integrative academic experience appropriate to their long-term career goals. Such an experience may be achieved through advanced course work and research opportunities that may be more useful to their intellectual and professional development. To meet the needs of these students, the HSPM faculty offers, with permission granted on a case-by-case basis, the opportunity for qualified students to complete **one course in either** of the following two doctoral level tracks in lieu of the administrative residency. Each of these tracks involves writing a paper of scope similar to a Management Residency report. However, neither requires on-site Residency work.

Track 1: HEALTH SERVICES RESEARCH
HSPM 719: Health Services Research Method II.
HSPM 719 and completion of a research-based proposal. This will be accepted as the residency major paper.

or

Track 2: POLICY ISSUES IN HEALTH ADMINISTRATION
HSPM 845: Advanced Topics in Health Policy and Management I or HSPM 846: Advanced Topics in Health Policy and Management II.
For Track 2, the student will complete a major paper and oral presentation in a format identical to that required as part of the MHA residency. (See the Residency section for the format of the proposal and final report.) Students will be assigned a grade by the course instructor.

To request one of these options

Requests to pursue a residency alternative should be made after completing the first year of course work. The student should comply with the following guidelines:

a. Prepare a carefully considered rationale clearly documenting the basis for the request. Students should include a description of the managerial position currently held and a current professional resume;

and

b. Review this rationale with faculty advisor who will submit on the student's behalf the rationale statement, accompanying information, and the advisor recommendation, to the MHA Program Committee and to the full-time faculty of the Department for consideration and approval.

NOTE: A student must be currently employed as a mid or senior level manager in a healthcare or allied organization full-time to qualify for any of these two options.

VI. Doctoral Programs

The Department of Health Services Policy and Management offers two doctoral programs: Doctor of Philosophy (PhD) in Health Services Policy and Management and Doctor of Public Health (DrPH) in Health Services Policy and Management. Both the doctoral degree programs have some common requirements. These requirements are explained in this section.

Degree Requirements

Students in the PhD program must complete 60 graduate credit hours. With approval of the Graduate Director, eighteen (18) hours of graduate credit from a previous degree may be used to address this requirement, for a net of 42 program hours. To be acceptable as transfer credit, previous graduate work must be recent (within 10 years of anticipated date of doctoral graduation), relevant to the student's doctoral plan of study. The DrPH program requires 61 credit hours and with approval of the Graduate Director, twelve (12) hours of graduate credit from a previous degree may be used to address this requirement, for a net of 49 program hours.

All students should complete the four core courses within the first year of study. These courses are essential for passing the first part of qualifying examination. Registration for all courses requires the approval of the Academic Supervisor of the student and/or Graduate Director of the Department.

Time Limits

Doctoral students must complete their studies within 10 years of matriculation or risk having to repeat course work. Transferred credits must be within the 10-year period as well.

Students who do not enroll in at least one course for 12 consecutive months must apply for readmission to the Graduate School. If a student is accepted after applying for readmission, the academic rules and standards in effect at the time of readmission will supersede those in effect at the time of initial admission.

Qualifying Examination

A written qualifying examination may be taken following the completion of program course requirements (excluding doctoral seminars). Students must complete the four core courses (HSPM 717, 719, 846, 845) with a grade of C or better to be eligible to sit for the first part of qualifying examination. The doctoral qualifying is a cumulative exam that tests students on three areas: Health services Policy and Management (based on the courses HSPM 845 and HSPM 846), research methods (based on HSPM 717 and HSPM 719), and competencies related to concentration area. Except for concentration area examination, all other sections will be administered in four hour blocks on the examination day. Concentration area section is a take-home examination given after the completion of concentration area courses. Students must complete a minimum of 24 credit hours before taking the qualifying examination related to the concentration area. Students must pass all sections to be admitted to doctoral candidacy and permitted to enroll for dissertation credit hours.

The first part qualifying examination is offered twice per year, in early spring and early fall. Specific dates within these periods will be selected each year and the students will be notified at least 30 days prior to the actual dates. The second part of qualifying examination (concentration area) is arranged in consultation with the major professor of the concentration area, Doctoral Program Director and the Graduate Director of the Department.

The first part of qualifying examination is taken in the Department of Health Services Policy and Management and is closed book, unless indicated otherwise for a specific section. The examination must be completed on a school or departmental computer in Word but statistical software may also be used

for the analyses of data. The questions are graded by faculty members writing the questions. Students will be notified of their grades in writing within four weeks of taking the examination. Examination results will be reported as Pass or Fail. Students must pass the first part qualifying examinations before signing up for the concentration area qualifying examination.

A student may request re-evaluation of their grades in any or all of the sections of qualifying examination in writing (to Graduate Director of the department) within two weeks after the reporting of the grades. Once the re-evaluation request is received, the examination section(s) being contested will be sent to second examiner(s) and if the grade assigned by the second examiner matches (Pass or Fail) the grade assigned by the first examiner, the original grade will be considered final. If the grades assigned by two examiners of the same section are different, a third examiner will be assigned and the final grade will be the grade assigned by the majority of three examiners evaluating the specific section of the examination. The Graduate Director of the Department will notify the student(s) in writing the final grades for each of the sections after the re-evaluations. All the re-evaluations will be completed within three weeks of receipt of formal request for re-evaluation.

Comprehensive Examination

Successful development and oral defense of a dissertation research proposal constitutes the doctoral comprehensive examination. Steps in this process include development of a dissertation concept paper, appointment of a doctoral committee, submission of the dissertation proposal, and defense of the dissertation proposal. Details on the requirements for a doctoral dissertation in the Department of Health Services Policy and Management are provided in Section C, below.

The Director of the Doctoral programs will consult with the student about the dissertation topic and assist in the selection of a dissertation advisor, who will chair the dissertation committee. The student must prepare a 5-10 page concept paper outlining his or her intended research project. The concept paper is then submitted to a faculty member within the Department of Health Services Policy and Management, with the request that the faculty member serve as the dissertation committee chair. The dissertation committee chair, who must be a tenured or tenure-track faculty member of the University affiliated with the Department of Health Services Policy and Management, will guide the student in selecting three or four additional committee members. The committee must consist of at least 50% members from Health Services Policy and Management and at least one member from another academic department of the University. Selection of the outside faculty member(s) must be consistent with the Graduate School policy on academic qualifications for committee membership.

It is the student's responsibility to consult with the dissertation advisor in selecting the remaining committee members and requesting them to serve on the dissertation committee. Once the members have informally agreed to serve, the Department will notify the Graduate School of their recommendations. The Graduate School will then formally appoint the committee.

Thirty days prior to the scheduled comprehensive exam, the dissertation proposal must be given to each member of the committee. The dissertation proposal has three chapters: an introduction, which briefly outlines the importance of the topic and the questions to be examined, a detailed literature review, and a detailed specification of the methods to be used in testing the research hypotheses. After reviewing the proposal and determining that the proposal is ready to be presented, the comprehensive exam may proceed. The student should be prepared to give a 30 minute presentation of the proposal to the committee. After the initial presentation, the faculty will examine the student orally on the proposal, as well as any other areas related to the student's studies at the University. The exam generally takes two hours.

The student will be notified of the examination outcome after the oral portion of the exam. The student may receive a "pass" on the exam, which allows the student to pursue the dissertation research as

a doctoral candidate; a "qualified pass" which results in the student being given some additional remedial work to complete that is supervised by the committee chair before being allowed to pursue the dissertation research; or a "fail". If the student fails the exam, he or she must start the comprehensive exam process over. The dissertation advisor, Director of the Doctoral Programs, and other committee members will determine if a new committee is to be formed and whether a new dissertation topic must be selected or if the current topic needs major revision. A student may only take the comprehensive examination twice. Failure in this exam twice will result in termination from the program.

The chair of the committee will notify the Graduate Director of the date and time of the oral comprehensive examination at least 10 working days prior to the defense. The comprehensive examination defense announcement will then be posted on notice boards and/or on departmental website. The dissertation proposal defense is open to all (students, faculty and community members), although the doctoral committee members will deliberate in private to evaluate the performance of the student and to decide whether to give go-ahead to the student to start his/her dissertation research.

Dissertation Defense

Doctoral candidates are required to prepare and successfully defend a dissertation based on original research. When the research is completed, the student and committee members meet and the dissertation is defended. The dissertation and its defense must be approved by majority of committee members. The process of arranging dissertation defense is similar to the process of organizing the prospectus defense. Dissertation defense is also open to all students, faculty and community members. After the oral presentation of the dissertation there will be a question and answer session. Committee members will ask questions first and then the floor will be open to others in the audience. At the end of the Q&A session, the chair of the doctoral committee will excuse others to meet as a committee and evaluate the student's performance. At this stage the committee can choose one of the following four options: (a) Dissertation accepted as drafted without any changes (b) Dissertation accepted with minor changes (c) Dissertation to be accepted with major changes (d) Dissertation not accepted as submitted. If the dissertation is accepted with major changes, all committee members should be provided a revised version of dissertation and the committee may decide whether to accept the revised version with or without another defense. The chairperson of the committee will notify the student and the Graduate School in writing of the outcome of the dissertation defense. The dissertation defense must be completed at least 30 days prior to graduation.

Doctoral Residency Requirement

The granting of a doctoral degree by the University of South Carolina presupposes a minimum of three full years of graduate study. At least one year of full-time study (or the equivalent) must be spent in residence at the University of South Carolina in Columbia. The doctoral residence requirement may be satisfied only after admission to a doctoral degree program. The year of residence on the Columbia campus can be fulfilled by successful completion of two consecutive semesters of 9 or more graduate credits per semester, or three consecutive semesters of six or more graduate credits per semester. Enrollment in a summer term (both sessions) may be counted as equivalent to a semester, but enrollment in summer is not required to maintain continuity. Dissertation preparation (899), independent study, or directed readings may not be used to satisfy the doctoral residence requirement.

The intent of the residency requirement is to ensure that doctoral students benefit from and contribute to the complete spectrum of educational and professional opportunities provided on the campus of a comprehensive university. When establishing residency, the student should interact with faculty and peers by regularly attending courses, conferences, and seminars, and utilize the library and laboratory facilities provided for graduate education.

A. DOCTOR OF PHILOSOPHY IN HEALTH SERVICES POLICY AND MANAGEMENT

Program Description

The PhD program in Health Services Policy and Management is structured to prepare students to conduct health services research and/or teach at a university level. Emphasis in the program is in research methods, statistics, and advanced concepts in health policy and management. Upon completion of the PhD program, students will be able to:

a. Use scientific evidence, knowledge, and theories to promote individual and population health, improve quality of healthcare services, and translate knowledge into practice.
b. Understand health care policy development and implementation and its relationship to management of health care organizations.
c. Understand the numerous strategies for reimbursement and financing of various health care services.
d. Demonstrate skills in the application of statistical techniques to health services research data.
e. Demonstrate the ability to design and conduct original health services research.
f. Demonstrate professional written communication and oral presentation skills.
g. Develop the cognitive and theoretical foundation for subsequent on-the-job learning and competency development throughout the rest of their careers, drawing from their knowledge and educational experiences acquired during the program.
h. Demonstrate ability to teach in institutions of higher education and demonstrate ability to conduct academic research using state-of-the-art research methods and design.

Admission Criteria and Application Requirements

1. Students should have a Master's degree in Health Administration, Business Administration, Public Health, Public Administration or a related discipline. Previous graduate-level course work should include public health courses including introduction to biostatistics/ statistics, and epidemiology. Students with deficiencies may not be able to waive all the 18 credit hours that is allowed in the PhD program. At the minimum, applicants without a health-related master's degree will be required to complete the Public Health core of the doctoral program. Students not familiar with US health care system should take health administration core course (HSPM 700) prior to enrolling into doctoral core courses, HSPM 845/ HSPM 846. Courses taken to make up deficiencies do not count towards the doctoral program course requirements. An academically exceptional student may be admitted with only a Bachelor's degree**.**

2. An applicant must have earned at least a 3.0 grade point average (based on a 4.0 scale) in previous graduate course work.

3. Graduate Record Examination (GRE) scores should be submitted (GMAT scores may be substituted for GRE). The GRE/GMAT requirement may be waived for applicants with professional degrees (MD, MBBS, etc.) on a case by case basis. The department, however, uses GRE/GMAT scores in allocating limited amount of financial assistance available and if an applicant wishes to be considered for financial assistance, GRE/GMAT scores must be submitted.

4. Foreign applicants whose native language is not English must submit the results of the Test of English as a Foreign Language (TOEFL) scores or other equivalent English language test. If prior academic

experience in the U.S. illustrates that the student is proficient in English, this requirement may be waived, with the concurrence of the Graduate School.

5. Three letters of recommendation must be submitted from persons who can reflect upon the applicant's prior academic and professional performance.

6. The applicant must provide a career goal statement with a focus on the applicant's research interests and how the USC program melds with these interests and a current curriculum vita with the application.

7. All short-listed applicants are interviewed by departmental faculty members as part of the admission process. Interview reports are used in admission decisions by the committee.

8. The applicant may submit copies of her/his peer-reviewed publications, if any.

Advisement

Students who are working full-time are highly encouraged to enroll as a part-time student (6-7 credit hours maximum per regular semester and if desired, 3 credit hours per summer session) to maximize learning and acquisition of competencies. While full-time employment does not automatically bar the student from carrying a full course load, poor academic performance (one or more grade of less than B) will require the student to enroll for no more than six credit hours per regular semester.

PhD Curriculum

PhD in Health Services Policy and Management requires completion of 60 hours of post-baccalaureate course work, including 12 hours of dissertation preparation. With the exception of MPH core courses (EPID 700, BIOS 700, HPEB 700, ENHS 660, HSPM 700 or their equivalents), up to 18 hours may be transferred from previous graduate coursework, with the approval of the student's advisor and the Graduate Director. Therefore, students in the PhD program must complete a minimum of 42 semester credit hours at USC (including the dissertation research hours). The students should complete the departmental core as well as the courses in a concentration area within the first two years of study. The departmental core requirements are essential for passing the qualifying examination. All courses require the approval of academic advisor of the student.

The required Ph.D. curriculum is:

Public Health Core: 6 hours (students with an MPH may transfer credit hours to waive one or both of the courses, subject to the maximum of 18 hours of credit transfers)

Perspectives in Public Health (PUBH 700)	3 hours
Concepts and methods of Epidemiology (EPID 700/701)	3 hours

Departmental Core: 16 hours

Advanced Topics in Health Policy & Management I & II (HSPM 845 & 846)	6 hours
Health Services Research Methods I (HSPM 717)	3 hours
Health Services Research Methods II (HSPM 719)	3 hours
Doctoral Seminar (HSPM 800, one credit hour each)	4 hours
Concentration (designed by student):	9 hours
Health Services Policy and Management related electives:	17 hours
Dissertation:	12 hours
Total credit hours	60 hours

The Director of Doctoral programs and the Graduate Director of the department has general oversight over the academic aspects of all students and candidates. At matriculation, the director of doctoral program advises all the incoming doctoral students unless the student requests another faculty member to be her/his academic advisor. After the first semester, students may select faculty advisors based on their research interests. Following the successful completion of qualifying examination a Dissertation Committee Chair should be selected by the student.

It is strongly recommended that students begin their studies in the fall semester although admissions in spring and summer will be considered on a case by case basis. Students applying for admission in the spring or summer should be aware that they may not be considered for financial assistance (available financial assistantships are given out to students admitted in the fall semester).

All graduate students must maintain a GPA of 3.0 or better during the whole duration of graduate studies. Students facing academic difficulties are strongly advised to discuss their issues with academic advisors. If necessary, students may take leave of absence for one or two semesters before taking additional courses. A student will be placed under academic probation if the overall GPA becomes less than 3.0 in any semester. In addition, graduate students in the department of Health Services Policy and Management are expected to maintain a grade of B or better in all graded courses. If a student receives less than B in three courses, the student will be placed under academic probation. A fourth grade of less than B will mean automatic termination from the program.

Teaching requirements for PhD program

All doctoral students in the PhD program are required to participate in teaching activities of the department. The students are expected to complete the teaching related requirements without compensation. The requirements must be completed between the time of matriculation and the dissertation proposal. The minimum requirements are: (a) Complete TA training organized by Center for Teaching Excellence (CTE), (b) Successfully complete the future faculty training at CTE, (c) Work as an instructional assistant for a course in the department and (d) offer at least one one-hour lecture in a class session (graduate or undergraduate course) under the supervision of the faculty in charge of the course. These requirements related to teaching must be satisfied before the student can request a date for comprehensive examination. Student should submit a letter indicating that the requirements have been completed with documentation to the Graduate Director.

Research experience requirement

PhD students are required to work for at least two semesters at 10 hours per week or one semester at 20 hours a week as research assistants in research projects of departmental faculty members. Since not all research initiatives of faculty members are funded, students may not be compensated for the work. This requirement should be completed prior to the comprehensive examination date. The student must submit a letter from the faculty mentor to indicate successful completion of research involvement requirement. For part-time students, this requirement may be completed by working on a specific research project in collaboration with a faculty member of the department.

A. DOCTOR OF PUBLIC HEALTH IN HEALTH SERVICES POLICY AND MANAGEMENT
   (Currently not being offered)

The DrPH program in the Department of Health Services Policy and Management is intended to prepare students for a career in public health leadership and/or public health research. Upon completion of the DrPH program, students will be able to:

a. Lead the process of creating an organization's vision, mission and goal-setting for the organization, guide decision-making, influence and advise others in a way that benefits the organization, and build capacity to successfully carry out the mission of the organization.

b. Influence policy and opinions on health issues and, by using effective communication strategies, be able to persuasively argue for policies that improve the health of the public.

c. Develop and implement formative, process, impact and outcome evaluations for the performance of a specific program or of the organization in relation to its vision and mission.

d. Conduct various types of research studies, interpret and communicate study results, synthesize information from multiple studies, assess the merits of research done elsewhere, and determine how research results can be applied to the organization.

e. Demonstrate integration of the DrPH core competencies and expertise in health services policy and management areas through the Doctoral Public Health Practicum.

f. Provide leadership in the development, evaluation, and analysis of public health policies and other healthcare related regulatory efforts.

g. Independently assess the efficacy and effectiveness of public health and healthcare services through applied research and evaluation methods.

h. Formulate strategies for addressing public health or healthcare issues at agency/organization, community, and society levels through policy development, and the application of systems theories and strategic planning techniques.

i. Demonstrate the ability to conduct original research by completion of a successful doctoral project.

j. Provide executive-level management and leadership to public health agencies, health care organizations, and health policymaking entities.

Admission Criteria and Application Requirements

1. Applicants are required to have a Master's degree in Health Administration, Business Administration, Public Health, or Public Administration. Applicants without an MPH must make up any deficit in the MPH core. Applicants with Master's degree in disciplines not listed above may petition the faculty for admission. Approval is dependent upon a majority vote of the faculty. All successful applicants must have worked in a health-related, mid-level management or policy position for a minimum of four years. Previous graduate-level course work should include health finance, statistics, and organizational behavior or the applicant will have to make up deficiencies. Applicants with three or more deficiency areas will be given conditional admission, contingent upon making up the deficiencies. Courses taken to make up deficiencies do not count towards the degree program.

2. An applicant must have earned a 3.0 grade point average (based on a 4.0 scale) in previous graduate course work.
3. The applicant must submit transcripts of all prior undergraduate and graduate studies.
4. Graduate Record Examination (GRE) scores must be submitted. (GMAT scores may be substituted).
   A GRE score of 301 or more is preferred (quantitative plus verbal, 1100 or more in old scale). Note that GRE score is not the only criterion used in making the admission decisions. The department carefully evaluates the applicant's academic performance and qualifications, personal statement/essay, research experiences, academic publications, recommendation letters, etc. The GRE or GMAT requirement can be waived on a case by case basis for candidates holding a terminal degree, e.g., MD, JD, or PhD in a different discipline.
5. International applicants whose native language is not English must submit the results of the Test of English as a Foreign Language (TOEFL) or International English Language Testing System (IELTS) scores. Students must satisfy the Graduate School requirement of the minimum score. If prior academic experience in the U.S. illustrates that the student is proficient in English, the TOEFL or IELTS requirement may be waived with the concurrence of the Graduate School. It is highly recommended that international applicants schedule a phone interview with program faculty.
6. Three letters of recommendation must be submitted from persons who can reflect upon the applicant's prior academic and professional performance.
7. The applicant must provide a career goal statement and current curriculum vitae with the application.
8. The applicant may submit copies of publications, if any.

DrPH Curriculum

Students in the DrPH program must complete the credit hours in four categories: DrPH core, HSPM doctoral core, concentration coursework, and a research dissertation. The DrPH core represent competencies deemed essential for all doctoral students and are consistent across departments in the Arnold School of Public Health. In addition to coursework, completion of the DrPH core involves a Public Health Practicum, which is described later in this section. The hours must be completed in the following areas:

Doctor of Public Health Core (18 hours):

Advocacy and Policy for Public Health (HPEB 820)	3 hours
Public Health Leadership (HSPM 820)	3 hours
Advanced Evaluation (HSPM 818)	3 hours
Research Methods (HSPM719)	3 hours
Public Health Practicum (HSPM 898)	6 hours

HSPM doctoral core (16 hours):

Advanced Topics in Health Policy & Management (HSPM 845 & 846)	6 hours
Public Health History and Politics (HSPM 711)	3 hours
Additional Statistics and Research Methods course (HSPM 717)	3 hours
Doctoral Seminar (HSPM 800)	4 hours

Additional courses & requirements (27 hours)

Concentration (designed by student)	15 hours
Dissertation	12 hours
Total	61 hours

The student must complete at least 24 hours of HSPM doctoral core course as specified under the PhD program description prior to taking the qualifying examination. All courses require the approval of the Director of the Doctoral Program, who also functions as each student's academic advisor until the student passes the qualifying examination and selects his/her Program of Study Committee members, Public Health Practicum Advisor, and a dissertation advisor.

The Director of Doctoral Programs has general oversight over the academic aspects of all students and candidates. The Director of Doctoral Programs will advise all doctoral students until the completion of their qualifying examinations. Following successful completion of these examinations Public Health Practicum and Dissertation Advisors are appointed after consulting with the student and the prospective Advisors.

Public Health Practicum

Students pursuing a DrPH degree must complete a Public Health Practicum totaling 6 credit hours representing 300 contact hours within a single academic semester, or two summer sessions. The practicum may be initiated after completing the DrPH core coursework, successfully passing all components of the comprehensive examination, and receiving approval from the Public Health Practicum Advisor. An eligible practicum preceptor is someone who holds a terminal degree (e.g., DrPH, PhD, MD, or JD), and/or holds an executive-level position within an appropriate health organization (e.g., CEO, COO, President, or Program Director). Examples of appropriate health organizations include:

- Federal or state public health agencies (e.g., CDC or DHEC)
- Healthcare settings (e.g., hospitals, nursing homes, health clinics)
- Non-profits with health-oriented missions (e.g., SC Office of Rural Health or Primary Care Association)
- Insurance organizations (e.g., Medicaid, Blue Cross Blue Shield)
- Professional associations (e.g., SC Hospital Association)
- Data management organizations (e.g., State Vital Records)
- Health-oriented research organizations

Students are required to conduct applied public health methods and strategies as a part of their practicum experience. Examples of practicum activities include, but are not limited to the development, implementation, or evaluation of the following:

- public health interventions
- public health or healthcare policies
- organizational development initiatives
- organizational leadership development
- healthcare regulatory activities

The DrPH candidate will produce as evidence of their practicum (1) a written report, (2) an abstract or poster of the activity at a public health or scholarly conference, and (3) a presentation of their experience. The written report should be framed similarly to a research manuscript. The sections should include a background/introduction that describes the problem or issue; a rationale and framework for the experience; methods; results; and implications for public health practice. Appendices should include copies of any products that were developed as a part of the practicum. In cases where preceptors require a written report (e.g., white paper for the General Assembly), such deliverables will be accepted, upon approval of the Practicum Advisor, in lieu of a practicum report. DrPH candidates will prepare abstracts

for presentations or posters at state or national conferences such as American Public Health Association or Academy Health. The practicum experience will culminate with a presentation to the Practicum Advisor, preceptor, and precepting organization.

Suggested Order of DrPH Course Work

HSPM denotes HSPM Core Requirements   DRPH denotes DrPH Core Requirements

YEAR 1

Fall Semester

HSPM 711[HSPM]	Public Health History and Politics	3 hours
HSPM 717[HSPM]	Health Services Research Method I	3 hours
HSPM 845[HSPM]	Topics in Health Policy & Management I	3 hours
HSPM 800 [HSPM]	Doctoral Seminar	1 hour
		10 hours

Spring Semester

HSPM 820[DRPH]	Public Health Leadership	3 hours
HSPM 846[HSPM]	Topics in Health Policy & Management II	3 hours
HSPM 719[DRPH]	Health Services Research Method II	3 hours
HSPM 800 [HSPM]	Doctoral Seminar	1 hour
		10 hours

YEAR 2

Fall Semester

HSPM 818[DRPH]	Economic Evaluation & Policy Analysis	3 hours
Concentration Elective		3 hours
Concentration Elective		3 hours
HSPM 800 [HSPM]	Doctoral Seminar	1 hour
		10 hours

Spring Semester

HPEB 820[DRPH]	Advocacy and Policy for Public Health	3 hours
Concentration Elective		3 hours
Concentration Elective		3 hours
Concentration Elective		3 hours
		12 hours

ELIGIBLE TO TAKE QUALIFIERS DUE TO COMPLETION OF HSPM CORE

YEAR 3

Fall Semester

HSPM 899	Dissertation	3 hours
HSPM 800	Doctoral Seminar	1 hours
		4 hours

Spring Semester

HSPM 899	Dissertation	3 hours
HSPM 898 [DRPH]	Public Health Practicum	6 hours
		9 hours

YEAR 4

Fall Semester

HSPM 899	Dissertation	6 hours

Students may expedite their curriculum completion by taking practicum, dissertation or elective hours during the summer sessions.

B. THE DOCTORAL DISSERTATION

Definition of a HSPM Doctoral Dissertation

As the culminating experience in a doctoral program, a successful dissertation is the report of an *original* and *significant contribution* to health services research and/or public health practice as initially judged by the candidate's doctoral dissertation committee. Clarification of these terms as they apply to HSPM PhD and DrPH students:

1. "Original" means that, although the candidate will have made use of the contributions of others' research, the research question addressed, body of work undertaken and intellectual contribution made are clearly the candidate's own. Thus, candidates may not employ other individuals to create sections of the dissertation, regardless of whether the candidate supervises the work.

2. "Significant contribution" means that the end result of the research advances knowledge of a demonstrably important aspect of health services research or public health practice as judged by peer scholars. The contribution may stem from new research, new analysis of secondary data, or in the case of the DrPH program, evaluation of a public health program. One criterion of worthiness is that the research and its results are deemed by the committee to have sufficient merit warranting serious consideration for publication in one or more peer-reviewed journals.

3. It is expected that doctoral candidates will demonstrate competent application of research methods and statistical tools relevant to the research undertaken. As noted, the services of others may not be hired for this purpose.

4. Dissertation proposals will be approved if the committee members judge the proposed research to be original, clearly capable of being a significant contribution to research or public health, and feasible.

5. All dissertation proposals, questionnaires, and related documents, must comply with ethics review guidelines current at the time of review. With the advice of the dissertation advisor, each student is responsible for submitting all required documentation in the manner requested. <u>The dissertation proposal will present clear evidence of formal approval from Institutional Review Board BEFORE any research is undertaken.</u>

Concept Paper and Committee Recruitment

To expedite effective proposal development and review, candidates are advised to use the following structured guide when developing the concept paper for their proposals:

1. <u>Importance of Research Proposed:</u> Explain how the proposed research meets the requirements for originality in producing what is expected to be a significant contribution to health services research.

2. <u>Objective(s):</u> Describe the general nature of expected or possible outcomes in measurable terms.

3. <u>Setting/Participants:</u> Describe site(s) of research with all relevant detail. Then identify the subjects and other participants who are the object of the research, likely to be affected by its outcome, or connected with it.

4. <u>Research Design, Statistical Applications, & Main Outcome Measures:</u> Explain the relevance of the research design and statistical applications and packages to the conduct of the research. Then identify the proposed outcome measure with an appropriate rationale.

5. <u>Ethical Procedures Approval, Institutional Review Board (IRB):</u> While it is not appropriate to have obtained IRB clearance before final approval of the research proposal, students should indicate knowledge of ethical issues that may affect their planned research (subject protection, data protection, etc.) at the concept stage.

Dissertation Formats

HSPM dissertations may take one of two formats, the traditional dissertation monograph or a series of related publication-ready manuscripts. The choice of format lies with the student and his or her dissertation advisor. <u>All students must prepare the first three chapters in the outline below</u>; this content forms the basis for the oral comprehensive examination. Following the completion of the proposed research, the student will either complete the remainder of the monograph or prepare the agreed-upon manuscripts.

Dissertation monograph:

The dissertation monograph submitted by HSPM students has a five-chapter format:

Chapter One: Introduction. A brief statement of the topic to be examined and its importance.

Chapter Two: Literature Review. A thorough review of all literature pertinent to the topic in question. The literature should be focused on developing the specific hypotheses to be tested through the student's research, and the chapter should end by stating those hypotheses in testable form. For students pursuing the DrPH. degree, hypotheses may pertain to a public health program being evaluated.

Chapter Three: Methods. A complete outline of all methods to be used in carrying out the proposed research including study design and data sources. At a minimum, variables must be defined and analytic techniques specified for each hypothesis. Students pursuing the DrPH. degree must specify methods appropriate for program evaluation.

Chapter Four: Results. A presentation of the results of the research. Ideally, this presentation is organized by hypothesis.

Chapter Five: Conclusions and Recommendations. A summary of the implications of the research, and recommendations for continuation of the research by future investigators. Students pursuing the DrPH. must state the implications of their findings for public health practice.

Publication option:

Ph.D. students are encouraged, with the concurrence of their advisor, to choose the publication option. As noted, students choosing this option will be required to complete the first three chapters of the dissertation, required as part of the research presentation for the Comprehensive Examination. When submitting the final draft, the usual concluding chapters ("Results" and "Conclusions and Recommendations") will be replaced by two or more manuscripts. Following Graduate School guidelines for a manuscript format dissertation, a final chapter (Chapter Six) will be added that ties together the findings and implications of the two papers. Manuscript topics will have been agreed upon as part of the dissertation proposal. All materials must be reviewed and approved by the student's Dissertation Committee and the Dissertation Chair, as with a formally structured dissertation.

VII. Academic Standards

The University requires that graduate students maintain academic standards as outlined in the Graduate School Bulletin. Graduate students must average at least B (3.0 on a 4 point system) over all graduate courses attempted. As noted in Section III, Student Responsibilities and Code of Ethics, the Department maintains a high standard for its students. Graduate students who accumulate nine hours of grades less than "B" in graduate course work must develop a remediation plan for improving the grades, and those earning a grade of "C" or below in a fourth course will be terminated from the program.

The University's definition of a full-time graduate student is one who is enrolled in nine or more hours during a fall or spring semester and six hours during the summer session. However, students enrolled full time in fall and spring semesters need not be enrolled in the summer sessions. For master's students some courses are offered in the summer and are not typically offered during the fall or spring, requiring summer enrollment in order to graduate. A part-time student normally takes a minimum of three credit hours during the academic year. Normally full-time progression through the MHA requires 12-15 hours per semester for three semesters plus two six-hour summer sessions and a 3-credit hour residency semester. Normally, full-time progression through the MPH program requires 12 hours per semester for three semesters plus two 6-hours of courses during summer sessions. With Graduate Assistantship (GA) the standard for full-time enrollment is lower than the credit hours mentioned here.

For part-time students, Master's programs should be completed within six years. Otherwise, courses more than six years old must be revalidated, which may require additional student work, and the student becomes subject to changes in degree requirements adopted up to a date six years prior to graduation.

Students who do not enroll in at least one course for 12 consecutive months must apply for readmission to the Graduate School. If a student is accepted after applying for readmission, the academic rules and standards in effect at the time of readmission will supersede those in effect at the time of initial admission.

VIII. Computer Facilities and Web Site

Students in Health Services Policy and Management have access to Arnold School's computer lab on the 4th floor of the Discovery building (915 Greene Street). Few additional computers will be available for the use of HSPM students in a small computer lab set up and maintained by the department. Students must have departmental login name and password to be able to use the HSPM computers. Students should get their departmental account name and password from the computer lab manager.

The Arnold School's computer Lab offers current versions of leading software for word processing, spreadsheets, presentation graphics, and data analysis. The computers in the departmental lab are connected with laser printers for fast and convenient printing. Workstations in the School and departmental labs have Internet access, as well as access to MedLine, the University's library catalog, and other bibliographic services. The University provides each registered student with free e-mail account.

The Health Services Policy and Management Department's web site, http://www.sph.sc.edu/hspm/, has program information, including details on curriculum requirements and the administrative or public health residency. Course material on the web site includes current syllabi for several courses, as well as on-line instructional material. Fellowship information is available, too. There is a web page for alumni news. From that page, alumni can access a database of current alumni work addresses.

IX. Graduate Assistantships And Financial Assistance

A. Graduate Assistantships

All full-time MHA and MPH students are encouraged to work as graduate assistants in health service organizations in the community to acquire work experience and enrich the learning process through on-the-job application of concepts and techniques learned in the classroom. The Graduate Assistantships for MHA and MPH programs are described in the Master Degree program section above.

Full-time doctoral students are also encouraged to work as graduate assistants. Depending on each student's specific interest areas, this may entail work in a health care organization or work on campus with faculty mentors. The student and his/her advisor will review available options and determine which assistantships best meet the student's career objectives.

To qualify for assistantship, a student must be fully admitted to a degree program, be enrolled as a full-time student and maintain a 3.0 GPA. For details on Graduate Assistantships in the University please refer to the following policy document: http://www.sc.edu/policies/acaf400.html

Summer Graduate Assistantship for students in the Masters Programs

The HSPM Department, in view of the summer course loads in the MHA and MPH programs (12 credit hours over Summer I and II) recommends students to evaluate their time commitments with regard to satisfactory performance as a graduate assistant concurrent with the academic obligations.

Graduate Assistantship: Additional Details in Response to Frequently Asked Questions

What is the purpose of a graduate assistantship?

The purpose of a graduate assistantship is to provide students with "real world" experience in a health care organization, and an opportunity to network among professionals. Responsibilities typically include both routine office work (e.g., answering phones, copying, data entry), and completion of special projects.

How are graduate assistantships obtained?

The Graduate Director, MPH/MHA Director and Masters' Programs Manager identify opportunities for all doctoral and master level students to interview for at least one graduate assistantship position. Students should submit their resumes to program leadership and they will email suitable resumes to potential employers/researchers in line with the researcher's/preceptors' work needs. Preceptors or the program leaders will contact students to schedule an interview. Selection is at the discretion of the preceptor/employer, depending on their needs. Especially for the MHA and MPH students, these are just like "job" interviews. Displaying energy, initiative, and enthusiasm to perform in order to provide value to the organization will encourage the preceptor to hire a student. For new MPH and MHA students, it can take up to two months to get hired. Occasionally a student with little experience or suitable background relative to a sponsor's needs, may have to volunteer for a semester or two to demonstrate abilities before getting hired for pay. This experience is valuable for career building. Most doctoral students find GA-ships in various research projects on-campus. Research projects often need help with data collection and analysis (using standard statistical software packages like SAS, SPSS, and STATA), literature review, etc. These skills are important in getting placed in research related GA positions.

To maintain ongoing paid GA-ships, students are encouraged to network as much as possible. The network includes advanced level doctoral students, research centers and institutes in the University, 2nd year MHA students, adjunct faculty, preceptors, alumni, and HSPM guest speakers. Students should take every opportunity to network, and identify opportunities for work. For the MHA students it is especially important to demonstrate increasing initiative in obtaining a GA-ship over the course of the program. Developing these skills will help MHA students succeed in their management and administration career. It should be noted that the Department will strive to secure GA-ship performance evaluations from preceptors. Students who are evaluated as poor or mediocre performers by preceptors will not be canvassed to potential sponsors in subsequent semesters by the program leadership unless they are convinced that the evaluation may not have been fair. Because student performance impacts our ability to maintain GA-ships for future students and semesters, poor performance or professionalism will result in the student being on their own to find GA-ship positions in later semesters.

The following paragraphs are specific instructions for MHA students in GA-ships.

What are my responsibilities regarding graduate assistantship "paperwork?

After a GA-ship has been identified, each MHA student is required to work with the sponsor to get signed GA contracts sent by email to the HSPM administrative assistant/academic programs manager for entry into the USC system. Students must complete additional USC payroll paperwork at the Department office. If a GA-ship sponsor requires additional security checks, or credit checks or health status clearances, the student is responsible to get those completed to the satisfaction of the sponsor and for the financial costs of tests and checks involved. The sponsor will provide guidance on how and where these should be completed. For out-of-state students to get tuition remission to in-state rates, their GA-ship contracts must be filed within 30 days of the semester start date.

How long does it take to process the GA-ship contract?

Typically, it takes 2 to 3 weeks to fully process the contract. USC has over 6,000 graduate students. Most obtain a graduate assistantship. Therefore the university must process a large number of contracts in a relatively short period of time. Also, the contract goes through several offices, HSPM, the Dean's office in the Arnold School of Public Health, the Graduate School, and the Contracts office in the office of Sponsored Research. For international students it also goes through the International programs Office. We do everything we can to expedite this process but delays may occur.

When can I expect my first paycheck?

It typically takes a month from the time you submit your signed GA-ship contracts until you will receive your first paycheck. Paychecks will be received twice a month. You will receive the entire contracted amount allocated for your time-effort.

What should I do to prepare for my GA-ship interview?

You should treat the interview as you would one for a regular job. Importantly, you are representing our MHA program and USC. Do your homework on the organization; be prepared with thoughtful questions. Use the phone and in-person interview rubrics provided to you by your program director to practice comportment and body language. Show energy and enthusiasm to provide value to the organization by displaying an eagerness to learn and perform. Dress for success, i.e., a business suit; make sure your shoes are in good shape. Bring a couple of copies of your resume. No eating or drinking or chewing gum. For women, conservative make up and jewelry; less is better; no perfume. Always follow up with a thank you note, either by email or regular mail within 24 hours of the interview.

B. Procedure for Completion of Graduate Assistant Contract

Graduate assistantships require a formal contract between the University and the agency employing the student. A contract form can be obtained from the faculty representative or the Department administrative coordinator. The student is responsible for having the contract signed by a faculty representative and the preceptor at the agency. After signatures, the student brings the contract to the administrative coordinator of the Department of Health Services Policy and Management. At this time a Proposal form will be completed and signed by the faculty representative and the Department Chair. It is then entered into USCeRA, and reviewed by the Office of Research and Practice of the School of Public Health. The form is reviewed by the Sponsored Awards Management (SAM). SAM checks the legality of the contract and then it is submitted to the Associate Vice-Provost for signature. Once all signatures are obtained the contract is assigned a number. After SAM assigns a number, the paperwork is sent to the Department, at which time the GA paperwork for the student to be paid is complete. The Department Chair signs it; it is then given to the Dean's Office for the Dean's final signature; then the paperwork goes to the Graduate School. The Graduate School enters the student's name in the computer and then sends the information to payroll. After payroll verifies all information and enters it in the computer, the student can be paid. If the completed paper work is not processed by payroll before the cutoff date for the pay period, the student will not get paid until the following pay period.

After turning in the contract signed by the organization and by the faculty representative to the Department, the student should allow about a week (two weeks for international students) for the above steps to be completed. For clarification about the status of the contract or if the completed contract is not received at the health care organization preceptor's end, the student should contact the Department.

To allow for these procedures, the student should have the signed contract with all of the correct information at least 3 weeks before the start of the contract. The contract needs to be submitted prior to the start of the semester. If unavoidable (e.g. new students), the contract can be submitted up to no later than 1 month after school starts, otherwise there will be no tuition reduction. Students will not receive a paycheck until after the completion of the University paperwork that the paragraph above describes.

C. Grants, Loans, and Other Financial Assistance

The University of South Carolina, Office of Student Financial Aid provides access to a variety of grants and loans for students in the Graduate School. For application forms and all questions for all types of financial aid, contact the office of financial aid and scholarship (http://www.sc.edu/financialaid/).

The Department offers two awards to students each year. The **Susie James Yates Award** is given to the outstanding second year MHA student who is a resident of North Carolina, South Carolina, or Georgia. The **Michael D. Jarrett Scholarship** is given to an MPH student who exhibits leadership potential and commitment to improve public health. Every two to three years, the **McGaw Scholar Award** is available through AUPHA (Association of University Programs in Health Administration).

X. Healthcare Executive Student Association (HESA)

HESA is a member of the American College of Healthcare Executives (ACHE) Higher Education Network. ACHE is an international professional society of healthcare executives. As a member of the Network, HESA joins other select university and college accredited programs offering degrees in the areas of health care services and management.

Student-Membership in both ACHE and HESA is an invaluable step in a student's career progress. Membership and participation enhances the young careerists in professional development, leadership, and marketability. The Department strongly recommends MHA and MPH students consider membership in ACHE and HESA. Importantly, the opportunities in healthcare administration presented in both Associations transcend those of the Department and the University.

Benefits of Student Membership in ACHE & HESA:
- *Healthcare Executive Magazine:* Student members of ACHE receive a bi-monthly magazine that provides critical industry topics, special features and best practices from all over the world.
- ***The Journal of Hospital and Health Services Administration***: The official journal of ACHE. This journal is printed six times per year and includes articles in healthcare management, executive leadership, education, and research.

These two publications will keep students up to date on current issues affecting the health care industry.
- Members will also be eligible to participate in all conferences, seminars and professional meetings offered by ACHE. After graduation, in beginning a career, ACHE is there to help the new graduate along the way, offering advancement through the various levels of achievement which improves one's status as a health care manager.

Benefits of Student Membership in HESA:
- HESA offers the opportunity to enhance the student's academic experience through close association and networking with fellow students, especially senior students who can provide mentorship and support.
- HESA sponsors guest lecturers from the working world to speak on topics of interest to aspiring health care managers. HESA also holds frequent social events, which allows members to relax and enjoy social activities away from the pressures of the classroom, and provides an opportunity to get to know each other and build camaraderie.

The *objectives* upon which the Association is organized are as follows:

A. To promote an environment conducive to educational and ethical development of personal and social skills in a manner that will enhance the attainment of effective leadership in health care organizations.

B. To provide a vehicle for constructive student involvement, recognition, and representation in the profession of health care administration.

C. To develop an association with local and regional health care executive groups that will enhance academic and career opportunities.

D.   To establish congruence between graduate and professional continuing educational activities to foster a skillful approach to health care administration.

E.   To inform members, potential members, and others in the community of the purposes of the American College of Healthcare Executives, its goals, benefits, and reasons for advancing status within the College.

F.   To provide faculty, local healthcare executives/administrators, and students in health care administration a forum for professional dialogue.

Become a Senior Officer:

For those who wish to be involved, senior-officer elections are held each Fall-Semester.

Membership Fees & Dues:

ACHE Annual Student-Membership Fee: $75.00
HESA Annual Student-Membership Fee: $75.00

For more information see any one of the elected student officers.

XI. Career Oriented Services

USC Career Planning and Placement Center

The USC Career Center offers career development services to both graduate and undergraduate students. The office is located on the sixth floor of the Business Administration Building. This office exists to assist students to transition successfully from college or graduate school to their chosen field or career. Their phone number is 777-7280.

The USC Career Center located in the Moore School of Business building provides a wide range of services accessible to all USC students. Career and job information/placement services are available to all USC students and to alumni for life, once they register into the system. Student services offered by the Career Center include:

a. Workshops and seminars designed to increase students' awareness of career opportunities and potential employment sites in the health professions.

b. Workshops designed to teach students appropriate job search skills. Workshop titles include Resume Writing, Interviewing Techniques, Writing a Career Objective, Job Search Strategies.

c. Individual career counseling for graduate students.

d. A listing of current employment opportunities for health professionals.

e. Interview counseling with video tape assistance.

f, Free access to foreign language learning labs such as Rosetta Stone

The complete range of services is posted at http://www.sc.edu/career/. There is no charge for the Career Center services. Also, many firms having health administration positions recruit at USC. If you wish to interview with recruiters, contact the Career Center at 777-7280.

Center for Business Communication

Another university-wide resource is the Center for Business Communication also located in the Business Administration building which provides one-on one tutoring and practice sessions on written and oral business and scientific communication and presentations.

Alumni access to USC webmail services

In addition, alumni have access to use their USC email address for two years after graduation which helps them pursue jobs and receive solicitations and job information from USC Career Services.

Professional Development Seminar Series

Effective August of 2005, all MHA students are required to participate in the Professional Development Seminar Series, in the first semester of the program. (Students who complete the MHA program in the Professional Format mode are not required to complete this seminar). An overview of this seminar is provided in the description of the MHA program. This Seminar has promoted stronger linkages between the Department and professionals at the USC Career Center. This Seminar is non-credit bearing, and offered to students without charge. MPH and Doctoral students are welcome to participate in this Seminar. MPH students are strongly encouraged to participate in the MPH Professional Development Series in the first semester of the program. This seminar is non-credit bearing, and offered to students without any tuition charge.

HSPM Department's career related services for HSPM students

In addition to the USC Career Center services, the respective program directors (MHA, MPH and doctoral) disseminate information to students on management fellowship, CDC fellowship, faculty positions and other career opportunities as received or accessed from other sources. For alumni who keep the Department updated with their contact information, the Department circulates by email notices of jobs received from recruiters and HR departments nationally.

XII. Health Services Policy & Management Alumni Association (HSPM-AA)

The Health Services Policy and Management Alumni Association (HSPM-AA) of the Programs in Health Services Policy and Management (HSPM) of the University of South Carolina is the organization for the graduates of programs in the Department of Health Services Policy and Management. The primary mission of HSPM-AA is to provide a forum for purposes of professional networking and communication, continuing education, and interaction with and support for HSPM. It is the organization which represents alumni in contacts with HSPM, the university, and health care organizations. It serves as the collective voice of HSPM alumni.

The goals of the HSPM-AA are as follows:

1. To encourage participation of University of South Carolina Department of Health Services Policy and Management alumni and students in the activities and services of the HSPM-AA.
2. To promote, support and be involved in the continuing development of the University of South Carolina Department of Health Services Policy and Management programs.
3. To provide opportunities for professional networking, mentoring, information exchange, social interaction, and continuing education among alumni students and faculty.
4. To assist alumni and students in identifying employment, management residencies, graduate assistantships, and other opportunities.
5. To promote and support quality and professionalism among graduates of the Department of Health Services Policy and Management.
6. To communicate and coordinate the activities, interests and concerns of the HSPM-AA with other organizations.

The Alumni Association sponsors seminars twice a year, providing continuing education for alumni and an opportunity for current students and alumni to meet. The Department will distribute information about the seminars.

The HSPM Alumni Association's mailing address is: P.O. Box 6981, Columbia SC 29260.

Appendices: Forms

RESIDENCY APPROVAL FORM

DEPARTMENT OF HEALTH SERVICES POLICY AND MANAGEMENT

I. Proposal Approval

Student's Name_____

Project Title_____

A. Faculty Advisor Approval

_____   _____
         Signature of Faculty Advisor   Date of Approval

B. Preceptor Approval

_____   _____
         Signature of Preceptor   Date of Approval

_____
         Organization

Preceptor Statement: The attached proposal represents my understanding of what the student has agreed to do with this organization and I am hereby agreeing to provide necessary supervision and support in order to carry out this work. I will monitor this student to ensure that he/she does not violate policies and legal restraints of this organization.

II. Final Approval of Written Report

A. Faculty Advisor Approval

_____   _____
         Signature of Faculty Advisor   Date of Approval

B. Preceptor Approval

_____   _____
         Signature of Preceptor   Date of Approval

C. Second Reader Approval

_____   _____
         Signature of Second Reader   Date of Approval

(Approved May 1997; reviewed May 2004, revised May 2005; revised July 2010)

MANAGEMENT RESIDENCY PRECEPTOR EVALUATION FORM

Student Name _____ Dates of Residency: ___ to ___ _____

Organization _____ Location: _____

Project Title: _____

1. The student was well prepared academically for the Residency. (Please circle one response).

Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree

1.1 Please comment on specific issues/areas of practice in which the student could have been better prepared.
_____
_____
_____
_____
_____

2. <u>Residency Performance Dimension</u>.

Please rank each area on a scale of 1-5 with 5 being Excellent and 1 being Poor.

	Excellent 5	Good 4	Adequate 3	Needs to improve 2	Poor 1
Promptness and Reliability	5	4	3	2	1
Inter-personal relations	5	4	3	2	1
Analytic skills	5	4	3	2	1
Knowledge: Current issues in Healthcare	5	4	3	2	1
Knowledge: Planning	5	4	3	2	1
Knowledge: Finance	5	4	3	2	1
Knowledge: Management	5	4	3	2	1
Professional: Writing skills	5	4	3	2	1
Professional: Presentation skills	5	4	3	2	1
Professional: Appearance	5	4	3	2	1
Professional: Behavior	5	4	3	2	1

1. Please circle the score that best represent the student current abilities on the competencies targeted in the residency using Level 1-5 as your scale based on the MHA Competency Model definitions)
   (Student will fill in the targeted competencies from the residency report here)

Competencies targeted	Level 4 4	Level 3 3	Level 2 2	Level 1 1	Level 0 0
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1

Please list any suggestions you would have for improving the Management Residency.

_____
_____
_____

5. The student met the goals and objectives that we had agreed on for the Residency.
   (Please circle one response)

Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree

6. Did you and the student's faculty advisor have a chance to make contact during the residency semester before the final residency report? ____Yes ____No

6.1 The faculty advisor should be more involved with the Management residency.

Strongly Agree	Somewhat Agree	Cannot say/Not sure	Somewhat Disagree	Strongly Disagree

If you think there should be increased faculty involvement, please indicate how you would like to see this done._____
_____
_____

_____   _____
Student Signature   Preceptor Signature
Date_____   Title_____
                                              Date_____
Reviewed by preceptor with Student: _____

                                              _____
                                              MHA/MPH Program Director Signature

(Approved May 1997; revised October 2013)
MANAGEMENT RESIDENCY STUDENT EVALUATION FORM

Student Name: _____ Date of Residency: _____

Organization:_____ Location:_____

Project Title:_____

1. The practice site preceptor fulfilled his/her responsibilities as we had agreed upon and as outlined in the Departmental handbook. (Please circle one response)

Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree

Comments:_____
_____
_____ _____
_____
_____

2. The residency and project allowed for integration of course theory and content in a practice setting. (Please circle one response)

Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree

3. The residency allowed for:

3.1 Exposure to senior management activities in the organization

Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree

3.2 Experience throughout the organization.

Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree

3.3 Completion of a management project.

Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree

3.4 Participation in small projects.

Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree

3.5 Opportunity to work in a team.

Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree

4. Please circle the score that best represents your current abilities on the competencies targeted in the residency using Level 1-5 as your scale based on the MHA Competency Model definitions) (Student will fill in the targeted competencies from the residency report here)

Competencies targeted	Level 5 5	Level 4 4	Level 3 3	Level 2 2	Level 1 1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1

5. What were the strengths in the MHA curriculum relative to your residency experience _____
_____
_____
_____

6. What areas in the MHA curriculum should be strengthened relative to your residency? _____
_____
_____
_____

7. How did the residency meet your needs or how could it have been improved _____
_____
_____
_____
_____

8. Faculty availability and assistance met my needs during the residency. (Please circle one response)

Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree

9. What could be done differently to enhance the learning and integration aspects of the residency?
_____

10. General comments:

_____
_____

	_____	_____
	Student Signature	Faculty Advisor Signature
	Date_____	Date_____

(Approved May 1997; revised October 2013)

Department of Health Services Policy and Management
Arnold School of Public Health, University of South Carolina
Student Evaluation of the Graduate Assistantship Experience
(Return the completed form by email or hard copy to the sender)

Semester and year: _____

Degree objective: MHA / MPH   No of semesters in this GA-ship:____ / __ months

Hours per week:_____   Years of full time work experience *prior to* MHA program: _____

GA organization: _____   Unit/department: _____

Preceptor name:_____   Title: _____

Your name: _____

1. *Please rank order how important your GA-ship is for you on the following*:
    RANK 1,2,3 or 4
    □   Work experience
    □   Income
    □   Tuition reduction
    □   Professional experience in a health service or allied setting

2. To what extent was your GA-ship this semester a learning experience?

Not at all	A little	Moderate	A lot	I am a different person due to this GA-ship
1	2	3	4	5

3. a) To what extent did you gain (or not) the following skills/competencies?

	Not at all	A little	Moderate	A lot	I am a different person due to this GA-ship
Organizational skills	1	2	3	4	5
Management skills	1	2	3	4	5
Accounting	1	2	3	4	5
Communication skills:					
Oral communication	1	2	3	4	5
Written communication	1	2	3	4	5
Making presentations	1	2	3	4	5
Scientific knowledge	1	2	3	4	5
Program implementation	1	2	3	4	5
Cultural Competency	1	2	3	4	5
Data management	1	2	3	4	5
Research skills	1	2	3	4	5

3. b) Any other comments on your GA-ship experience:

_____
_____
_____
_____

4. *Self-assessment of performance*: In your estimation, to what extent did YOU meet your SUPERVISOR'S EXPECTATIONS on the following (*Please check appropriate box.)*

	Excellent 5	Good 4	Average 3	Could improve 2	Very Poor 1	Not applicable
1. Punctual, and maintaining reliable schedule						
2. Professional appearance						
3. Professional behavior						
4. Inter-personal relations						
5. Responding promptly to work requests						
6. Reliably completing tasks						
7. Initiative						
8. Readiness to learn						
9. Accommodate new work needs						
10. Meeting deadlines						
11. Oral communication						
12. Written communication						

Comments: *If your performance had changed later in the semester, indicate the items here.*

Performance item	Improved/Worsened

5. *Time utilization*: Indicate how your GA-ship time was spent (Percentages MUST add to 100).

Routine chores (filing, faxing, photocopying, errands)	___ %
Simple tasks pertinent to your department's core business or mission (e.g. finance, quality improvement, etc.)	___ %
Responsibilities pertinent to the core mission, with some autonomy of execution	___ %
Major responsibility for planning or executing a project	___ %
Attend departmental or work group meetings	___ %
Attend interdepartmental/ senior management meetings	___ %
Work with other departments/units for task or program planning/execution	___ %
Shadowing managers/executives/clinical functionaries	___ %
Idle time or busy work with no apparent work objective	___ %

Comments: *If your tasks changed later in the semester, indicate the items here.*

Task/ Activity	Improved/Worsened

Department of Health Services Policy and Management
Arnold School of Public Health, University of South Carolina
Supervisor's Evaluation of Graduate Assistant's Performance

Organization:_____

Preceptor: _____ Title: _____ Email:_____

Student name:_____ Date of evaluation:_____

Number of semesters this student has worked for you so far: _____

I. GA professionalism: (*Please check appropriate box.*)

	Excellent 5	Good 4	Average 3	Could improve 2	Poor 1	Not applicable NA
1. Prompt, maintains reliable schedule						
2. Professional appearance						
3. Professional Behavior						
4. Inter-personal relations						
5. Responds promptly to work requests						
6. Reliably completes tasks						
7. Initiative						
8. Eagerness to learn						
9. Accommodates new work needs						
10. Meets deadlines						
11. Oral communication						
12. Written communication						

II. General comments on the ***student's strengths and weaknesses***?

III. Please recommend *two **top priority areas for improvement*** (your items may be different from the above).

IV. **Value to your organization**:
   a) On a scale of 0-4, please indicate whether the student's work performance ***contributed value*** to your organization/department/your own area of responsibilities? __0 __1 __2 __3 __4
   b) If not currently at a high level, do you feel that he/she is better prepared him/her to ***contribute value in future semesters***? __0 __1 __2 __3 __4

V. Please rank order your perspective on why you like having a MHA student GA:
   RANK
   □   Resource for getting ongoing departmental tasks completed
   □   Mentoring and training students to become better administrators
   □   GAs are a good resource for developing new initiatives/programs
   □   Students sometimes bring fresh perspective/ skills/ new ideas that enhance unit performance
   □   Not much value, I may not continue to seek a MHA student as a GA in future

VI. a) Do you have experience with hiring other major GAs/interns, which major? _____ / Not applicable

    b) If you have experience with graduate assistants/interns from other majors (e.g. business), how would you compare the overall utility/performance of the MHA GA with other major students?
    __About the same   __MHA GA fit your needs better   __Other major was better

    c) On what aspects was your MHA GA better or otherwise relative to other major GAs?
_____
_____
_____

    d) Any recommendations on how we can improve the ability of our students to improve performance?
_____
_____
_____
_____
_____

VI. Based on the GA's performance, **_would you rehire this student_** if you needed help and had the funds in future semesters?   Yes / No / Can't say, too early

VII. Based on the GA's performance and attitudes **_would you recommend this student to a potential employer_** upon his/her graduation?   Yes / No / Can't say, too early

VII. Other comments on the GA-ship experience or process:
_____
_____
_____
_____
_____
_____
_____
_____

Thank you! Please return the survey (email or fax) to Tim Durden (durdenta@mailbox.sc.edu) or fax to HSPM at 803.777.1836. _(Please call 777-1627before faxing, so that we can retrieve it immediately.)_