**Sinclair Community College**

**Continuous Improvement Annual Update 2014-15**

**Please submit to your Division Assessment Coordinator / Learning Liaison for feedback no later than March 1, 2015**

**After receiving feedback from your Division Assessment Coordinator, please revise accordingly and make the final submission to your dean and the Provost’s Office no later than May 1, 2015**

**Department:** 0679 – Health Information Management

Year of Last Program Review: FY 2006-2007

Year of Next Program Review: FY 2013-2014

**Section I: Department Trend Data, Interpretation, and Analysis**

**Degree and Certificate Completion Trend Data – OVERALL SUMMARY**

Please provide an interpretation and analysis of the Degree and Certificate Completion Trend Data (Raw Data is located in Appendix A*): i.e. What trends do you see in the above data? Are there internal or external factors that account for these trends? What are the implications for the department? What actions have the department taken that have influenced these trends? What strategies will the department implement as a result of this data?*

With the advent of our remote cohort plus our curriculum offered entirely online (started in 2010), this has dramatically increased the accessibility for HIM student and therefore our program cohort numbers have greatly increased. Also, our curriculum has been “flexed” to offer more cohort courses in the summer, therefore “spreading” the HIM-required courses and adding more opportunity for working students to successfully handle an overall lighter course load each semester. This trend towards “more online and offered-more-often” courses has caused a s-t-r-e-t-c-h and increased workload for course coordinators as courses must now be more frequently updated and additional new adjunct faculty require mentoring.

The decrease in degree and certificate completion for 2012-13 as compared to the previous year and following year is associated with 1) Sinclair’s conversion from quarters to semesters as students were counseled and encouraged to complete their degree and certificate prior to the conversion which occurred fall semester 2012; 2) In 2008, many Dayton-area manufacturing employees were displaced and sought an HIM degree or certificate; and 3) due to the pending implementation to the ICD-10-CM/PCS system, students were counseled to delay their coding courses until after the scheduled October 1, 2013 start of the new coding system. When the scheduled 2013 implementation date for ICD-10-CM/PCS was delayed, students were counseled to complete their certificates and degrees (and no longer postpone their coding courses).

 According to the Bureau of Labor Statistics job outlook for 2012-22 for HIM is a growth of 22% which is much faster than average. Our strategies to accommodate this increase include changing our Administrative Assistant position to an Online Coordinator to coordinate with the influx of Professional Practice Experience (PPE) Affiliation Agreements and we have implemented “fast-track” and “early options” to accommodate students who need to expedite their completion and student who need to “spread” the cohort-restricted course over a 2.5 – 3 year period. On-going strategies include continual investigation for streamlining certain processes (such as implementing an electronic signature capability for on-boarding documents) and eliminating any unnecessary processes (such as mailing student handbooks). Another strategy includes use of adjuncts where skills and talents are strategic for our curriculum.

**Course Success Trend Data – OVERALL SUMMARY**

Please provide an interpretation and analysis of the Course Success Trend Data (Raw Data is located in Appendix A). Looking at the success rate data provided in the Appendix for each course, please discuss trends for high enrollment courses, courses used extensively by other departments, and courses where there have been substantial changes in success.

**Trends in high enrollment courses:** HIM 1101 Medical Terminology has remained consistent with a success rate of 75.9, 78.1, 73.5 & 74.3% in the last four years. (No significant success variation with the change from combining 2 quarter courses – HIM 121 & 122 to one semester course.)

**Courses used extensively by other departments:** See HIM 1101 above.

**Courses where there have been substantial changes in success:**

* HIM 1201 (HIM 260/261 in quarters): This course has shown a significant increase in student success in the past four years (63.9%, 58.9%, 76.4%, and 69.3%). This is due to ongoing course coordinator efforts to align course content, activities and assessments with the skill level for a beginning coder.
* HIM 2110: This course demonstrated a staggering decline in student success between FY12/13 & 13/14 (96.0% to 78.9%). Fall semester, 2013 reflects the time period which contained much of the problematic saga of the US government converting to a new coding system and then recanting that decision. At one point, we were requiring the students to use 3 different coding systems to code one scenario. This continual “governmental indecision” has caused us to develop and maintain the HIM 2297 course (Transition to ICD-10-CM) as a separate course to introduce the new coding system to students (and not “mix” the coding systems). The success rate for HIM 2297 in FY 13/14 was an impressive 92.5%.

Please provide any additional data and analysis that illustrates what is going on in the department (examples might include accreditation data, program data, benchmark data from national exams, course sequence completion, retention, demographic data, data on placement of graduates, graduate survey data, etc.)

Employer Survey: 100% (11/11 employer networks) responded as “Strongly agree” that hired graduates are overall “excellent” quality.

Pass rate for national RHIT examination: 93% (28/30) grads passed on 1st attempt (based on 10/1/13 – 9/30/14 American Health Information Management Association summary report)

Program average scores per AHIMA Domain: Above national score in 100% of all domains (based on 10/1/13 – 9/30/14 American Health Information Management Association summary report)

|  |  |  |
| --- | --- | --- |
| Domain | AHIMA National Score | Program Avg Score |
| D1 | 18.23 | 20.63 |
| D2 | 14.66 | 17.20 |
| D3 | 14.66 | 16.43 |
| D4 | 10.05 | 10.73 |
| D5 | 10.91 | 11.87 |
| D6 | 10.23 | 11.00 |
| D7 | 7.84 | 9.73 |

**Section II: Progress Since the Most Recent Review**

Below are the goals from Section IV part E of your last Program Review Self-Study. Describe progress or changes made toward meeting each goal over the last year.

|  |  |  |
| --- | --- | --- |
| **GOALS** | **Status** | **Progress or Rationale for No Longer Applicable** |
| As a result of the success rate data received for semester courses (12/FA, 13/SP & 13/SU), we are aware of the undesirable (although not totally unexpected) success rate in online HIM 1201 (72.92%) and HIM2262 (47.06%). A copy of the on-campus and online course comparison is found in Appendix F.  | In progress [x] Completed [ ] No longer applicable [ ]  | HIM 1201 was moderately revised with updated practice coding assessments that provided immediate and more specific feedback for students. This change was made in fall 2014 for delivery in spring 2015. Success rates for these changes will be reviewed after spring 2015. HIM 2262 was updated with 75 verbal explanations/narrated videos for coding procedures and processes for spring 2015. Ethical discussions were also added. Most HIM 2262 students take this very technical coding course online and struggle with the critical thinking process that it takes to arrive at the correct medical codes. These pre-recorded audio files provide students the instructor’s “thought process” for deriving at the accurate codes. In an effort to gather student feedback, student surveys concerning the verbal explanations/narrated videos were injected into weeks 5, 10 and 15 of the course. Only week 5 surveys have been completed and evaluated so far this semester. The results demonstrate that on-campus students access the narrated videos just as frequently as the online students. Students responses to the survey:* “Relative advantage”: Responses from on-campus students indicated that 100% agreed that the inclusion of the narrated videos improved their coding skills and enhanced their effectiveness on coding some of the required medical records. “Ease of use”: Responses from on-campus students indicated that 100% agreed that the narrated videos were easy to use and that it was easy to learn how to use the videos.
* “Relative advantage”: Responses from online students indicated that 89% agreed that the inclusion of the narrated videos improved their coding skills and enhanced their effectiveness on coding some of the required medical records.
* “Ease of use”: Responses from online students indicated that 89% agreed that the narrated videos were easy to use and that it was easy to learn how to use the videos.

Success rates for these changes will be reviewed after spring 2015.  |
| Both of these coding courses are scheduled this year for revision with the Distance Learning department. Our goal for these revisions is not only to include the new ICD-10-CM coding system but also to transform and enhance the coding courses with narrated PowerPoints, “how to” video recordings, and course material and assignments to provide remediation for improved student success. | In progress [x] Completed [ ] No longer applicable [ ]  | The timeline for the ICD-9-CM coding system (national) conversion to the ICD-10-CM/PCS coding system is still undecided. Since the HIM 1201 course will be the first course required to contain the ICD-10-CM/PCS coding system, a course was developed (in ANGEL) and then “shelved” until the U.S. actually converts to the new coding system. However, as described above, the course was enhanced with feedback to provide technical guidance that students need for coding medical office scenarios.With the undecided timeline and SCC’s upcoming conversion from ANGEL to the elearn LMS, faculty decided not to convert HIM 2262 to ICD-10-CM/PCS at this time. However, as described above, the course was enhanced with narrated feedback to provide technical guidance that students need for coding advanced medical office scenarios. |
| Investigate the option of developing and offering an advanced ICD-10-CM/PCS course for non-cohort students. | In progress [ ] Completed [ ] No longer applicable [x]  | With the uncertainty associated with the US government’s date of conversion to ICD-10-CM/PCS, this option is no longer a consideration. |
| Expand the planning schedule of courses to change the curriculum so that there are other options for the difficult first semester in the second year. | In progress [ ] Completed [x] No longer applicable [ ]  | Flexibility has been added into the cohort restricted courses to include offering HIM 2144 and HIM 2233 in the summer terms. |
| Students in coding courses struggle with concepts that may be explained and understood in a more focused and one-on-one environment. Investigate running an open coding lab where students can obtain personalized coaching with coding theories and course materials. | In progress [ ] Completed [x] No longer applicable | A faculty member hosts an open coding lab for students every Friday from 10:00 am to 11:30 am. Both cohort and non-cohort coding students, ranging from the introductory coding courses through the advanced inpatient coding courses, are invited to this open lab for guidance and direction for medical coding. This open lab has been well-received by students. |
| With the ensuing issues of coding concept “lapses” and coordination between HIM 1201, HIM 2110 and HIM 2211, investigate the position of a possible Coding Course Coordinator | In progress [ ] Completed [x] No longer applicable | In the past, the course coordinating of each of the three cohort coding courses have been assigned to different faculty members. The course coordinator for HIM 1201, HIM 2110 and HIM 2211 has now been assigned to only one faculty member. This allows for compatible and congruent learning throughout the coding courses series in the HIM curriculum. |
| With our accrediting body mandate for decreasing attrition and state budgetary emphasis on completion, competitive admission requirements should be examined and considered, especially for the local cohort. | In progress [x] Completed [ ] No longer applicable | Competitive admission is still under discussion in the HIM program. The TEAS assessment is not an option for our program because of our remote cohort and students living outside of the state and country (students cannot feasibly travel to campus to take the exam). |

Below are the Recommendations for Action made by the review team. Describe the progress or changes made toward meeting each recommendation over the last year.

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| **RECOMMENDATIONS** | **Status** | **Progress or Rationale for No Longer Applicable** |
| It is evident that the department collects a substantial amount of general education and program assessment data via rubrics and other sources. However, for the most part this data was not shared in the self-study. The department is encouraged to include some of its abundant data in the next self-study in five years, and also to provide examples of this data in its Annual Update submissions in the intervening years. | In progress [x] Completed [ ] No longer applicable [ ]  | Faculty members are in review of collecting and comparing specific data. Grading rubrics to assess general education data have been inserted into almost all HIM cohort assignments. There is a plan to insert a specific general education assignment in one of our introductory course and have the identical general education assignment in one of our last-semester courses, for a direct measure of proficiency with skills such as in-text citation, writing skills, and citing sources.  |
| The department has closely examined changing its admissions policies, and appears to have been thoughtful and deliberative in its discussions. The Review Team encourages the department to continue to consider whether a competitive or blended admission model might be appropriate for the program. It is clear that the department has been mindful of the pros and cons of changing its approach, and it is hoped that this same level of thoughtful analysis will be employed when a final decision is made. | In progress [x] Completed [ ] No longer applicable [ ]  | Competitive admission is still under consideration. One factor that needs careful consideration is that local cohort students, who may rank “low” in competitive admission may decide to switch to the remote cohort to avoid the wait list, and this may cause some unintended consequences. In an effort to alleviate some wait time for some students, an “early start” option has been developed and has been well received by students. |
| It was suggested during the discussion with the Review Team that the dean of the division may have suggestions of strategies for getting students to take the certification exams sooner. The department is strongly encouraged to work with the dean to identify and implement strategies that have worked in other departments in the division. | In progress [ ] Completed [x] No longer applicable [ ]  | Incentive for getting students to take the certification exam sooner has been instituted in HIM 2278 HIM Capstone by substituting a perfect grade “reward” on the mock RHIT exam for an early attempt. Also, application forms for early test taking are distributed in HIM 2278. Submitting this application creates a 4-month window in which students are required to take the exam.  |
| Some Review Team members expressed concern about the “one strike” policy where students are only allowed one opportunity to leave the program and return. This policy may well be justified – it would not be a bad idea, however, for the department to examine this policy again, using the comprehensive analysis of pros and cons that it has demonstrated it is capable of. | In progress [ ] Completed [x] No longer applicable [ ]  | The draft for revision of the program’s reinstatement policy was submitted for review and approval by the Health Science’s Assistant Dean in January, 2015. |
| The self-study identified success rates in HIM 2262 as a concern – the department is encouraged to develop and implement strategies to increase success in this course. | In progress [x] Completed [ ] No longer applicable [ ]  | HIM 2262 was updated in spring 2015 with 75 verbal explanations/narrated videos for coding procedures and processes. Ethical discussions were also added. Most HIM 2262 students take this very technical coding course online and struggle with the critical thinking process that it takes to arrive at the correct medical codes. These pre-recorded audio files provide students the instructor’s “thought process” for deriving at the accurate codes. In an effort to gather student feedback, student surveys concerning the verbal explanations/narrated videos were injected into weeks 5, 10 and 15 of the course. |
| The possibility of online open labs was suggested by the department. Currently one-on-one assistance is given to students, but development of a synchronous open lab experience where multiple students could participate simultaneous may benefit student learning. The Review Team recommends that the department continue to explore this possibility, particularly as a support to those students who are reluctant to take on online course but were unable to enroll in a traditional section. | In progress [x] Completed [ ] No longer applicable [ ]  | A faculty member hosts an open coding lab for students every Friday from 10:00 am to 11:30 am. Both cohort and non-cohort coding students, ranging from the introductory coding courses through the advanced inpatient coding courses, are invited to this open lab for guidance and direction for medical coding. This open lab has been well received by students. The faculty have not yet developed a synchronous open lab option for online students. |
| The Review Team strongly believes that there are things this department is doing that could be of great benefit to other departments. The intrusive, hands-on approach to student advising in the department, the tried and true processes that have been developed in relation to online offerings, and the online orientation are just a few of the examples of innovative practices that should be shared across the college. The department should actively pursue sharing its innovative approaches with other departments via workshops, Faculty Forum articles, and other means of dissemination throughout the campus community. The college could see a substantial increase in student success and learning if other departments adopted some of the practices that the HIM department has developed. | In progress [ ] Completed [x] No longer applicable [ ]  | The chairperson participated in a 2014 CTL faculty workshop “Online Learning: Show and Tell” where HIM online courses and online processes were showcased. Faculty have worked with other departments related to coordinating an online student orientation. The chairperson and another faculty member are active members of the Online Teaching and Learning Committee. HIM processes and best practices are shared within this committee. |

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| Please respond to the following items regarding external program accreditation. |
| **Date of Most Recent Program Accreditation Review** | Date of most recent accreditation review: submitted 2/20/15**OR**[ ]  Programs in this department do not have external accreditation  |
| **Please describe any issues or recommendations from your last accreditation review (if applicable)** | No corrective actions required. |
| **Please describe progress made on any issues or recommendations from your last accreditation review (if applicable)** | N/A |

**Section III: Assessment of General Education & Degree Program Outcomes**

The Program Outcomes for the degrees are listed below. **All program outcomes must be assessed at least once during the 5 year Program Review cycle, and assessment of program outcomes must occur each year**.

**PLEASE NOTE – FOR THE NEXT TWO YEARS, GENERAL EDUCATION OUTCOME ASSESSMENT WILL BE TEMPORARILY POSTPONED. WE WOULD ASK THAT IN THIS ANNUAL UPDATE YOU IDENTIFY AT LEAST ONE COURSE IN YOUR DEGREE PROGRAM(S) WHERE ASSESSEMENT AT THE MASTERY LEVEL WILL OCCUR FOR THE FOLLOWING THREE GENERAL EDUCATION OUTCOMES:**

* **CRITICAL THINKING/PROBLEM SOLVING**
* **INFORMATION LITERACY**
* **COMPUTER LITERACY**

**NOTE THAT THERE WILL NEED TO BE AT LEAST ONE EXAM / ASSIGNMENT / ACTIVITY IN THIS COURSE THAT CAN BE USED TO ASSESS MASTERY OF THE COMPETENCY.**

**YOU MAY ALSO SUBMIT ASSESSMENT RESULTS FOR THESE GENERAL EDUCATION COMPETENCIES IF YOU HAVE THEM, BUT IT WILL BE CONSIDERED OPTIONAL**.

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| **General Education Outcomes** | To which degree(s) is this program outcome related? | Year courses identified where mastery of general education competency will be assessed. | PLEASE INDICATE AT LEAST ONE COURSE WHERE MASTERY OF THE COMPETENCY WILL BE ASSESSED FOR EACH OF YOUR DEGREE PROGRAMS | What were the assessment results for this General Education competency? (Please provide brief summary data)**NOTE: - THIS IS OPTIONAL FOR THE FY 2014-15 AND FY 2015-16 ANNUAL UPDATES** |
| Critical Thinking/Problem Solving | All programs | **2014-2015** | HIM 2278: Resume development |  |
| Information Literacy | All programs | **2014-2015** | HIM 2145: EMS and Highway Safety Database assignment |  |
| Computer Literacy | All programs | **2014-2015** | HIM 2278: First submission of RHIT review test |  |
| Values/Citizenship/Community | All programs | **2015-2016** | Due in FY 2015-16 |  |
| Oral Communication | All programs | **N/A** | COM 2206/2211 |  |
| Written Communication | All programs | **N/A** | ENG 1101 |  |
| Are changes planned as a result of the assessment of general education outcomes? If so, what are those changes | **OPTIONAL FOR FY 2014-15** |
| How will you determine whether those changes had an impact?  | **OPTIONAL FOR FY 2014-15** |

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| --- | --- | --- | --- | --- |
| **Program Outcomes** | To which course(s) is this program outcome related? | Year assessed or to be assessed. | Assessment MethodsUsed | What were the assessment results? (Please provide brief summary data) |
| Demonstrate the ability to design, organize and implement changes in the evolution of health information to electronic formats. | HIM 1110, HIM 2144, HIM BIS 1120, BIS 1121, HIM 1204 |       |       | Faculty will review this program outcome for possible revision for next year. |
| Evaluate and appropriately apply principles of confidentiality and privacy congruent with the standards and ethics of the health information profession. | HIM 1110, HIM 1204, HIM 2278, HIM 2252 | 2014-15 | AHIMA Summary Report from National RHIT Exam – Domain 7 (Privacy and Security) | From Summary dated 10/1/13 – 9/30/14:SCC HIM Program Avg Score = 9.73National Avg Score = 7.84(Note: SCC score is 124% above the national score) |
| Apply effective skills in the areas of written and oral communication, critical thinking and problem solving in the practice of health information management. | COM 2206/2111, ENG 1101,MAT 1130/1110, PSY 1100 or SOC 1101, BIS 1121, HIM 1110,HIM 1201, HIM 1204, HIM 2110, HIM 2211,HIM 2144, HIM 1217, HIM 2165, HIM 2233, HIM 2252, HIM 2278 | 2014-15 | Grading rubric from Narrated PowerPoint assignment in HIM 2278 Capstone course. | Second-year students scored an average of 91.2% on the Narrated PowerPoint assignment in March 2015. |
| Demonstrate proficiency in classifications and nomenclatures sufficient to support reimbursement in multiple patient care environments. | BIO 1121, BIO 1222, ALH 1140, HIM 1101, HIM 1110, HIM 1201, HIM 1217, HIM 2110, HIM 2211, HIM 2144, HIM 2252, HIM 2278 | 2014-15 | Clinical Data Management (Domain 3) from 10/1/13 – 9/30/14 AHIMA summary report. This domain includes the following topics: ICD-9-CM/CPT/HCPCS, prospective payment systems (DRGs, APCs), ICD-10 and registries. | The average score of our first-time test takers was 16.43 as compared to the national average of 14.66. (112% of the national average) |
| Demonstrate competency and skill in the technology used by the healthcare information environment. | BIS 1120, BIS 1121, HIM 1110, HIM 1201, HIM 1217, HIM 2120, HIM 2106, HIM 2214, HIM 2216, HIM 2218, HIM 1204, HIM 2110,HIM 2211 | 2014-15 | Technology (Domain 1) from 10/1/13 – 9/30/14 AHIMA summary report. This domain includes the following topics: electronic health records, HIM software applications, Personal health records, health information exchange, and speech recognition. | The average score of our first-time test takers was 20.63 as compared to the national average of 18.23. (113% of the national average) |
| Demonstrate the ability to perform the health information associate degree entry-level competencies as identified by the American Health Information Management Association. | All courses in the HIM curriculum | 2014-15 | 10/1/13 – 9/30/14 American Health Information Management Association summary report |

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| --- | --- | --- |
| Domain | AHIMA National Score | Program Avg Score |
| D1 | 18.23 | 20.63 |
| D2 | 14.66 | 17.20 |
| D3 | 14.66 | 16.43 |
| D4 | 10.05 | 10.73 |
| D5 | 10.91 | 11.87 |
| D6 | 10.23 | 11.00 |
| D7 | 7.84 | 9.73 |

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| Demonstrate personal behaviors, attitudes and values consistent with and appropriate to the entry-level health information management professional. | All HIM courses in the HIM curriculum |       | Annual Employer Surveys |       |

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| **Are changes planned as a result of the assessment of program outcomes? If so, what are those changes?**  | Based on national exam results, no changes planned at this time. |
| **How will you determine whether those changes had an impact?**  | N/A |

**APPENDIX – PROGRAM COMPLETION AND SUCCESS RATE DATA**

**Degree and Certificate Completion**

**Course Success Rates**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Division | Department | Department Name | Program | FY 07-08 | FY 08-09 | FY 09-10 | FY 10-11 | FY 11-12 | FY 12-13 | FY 13-14 |
| HS | 0679 | Health Information Management | HCC.CRT | 1 | . | . | . | . | . | . |
| HS | 0679 | Health Information Management | HIM.AAS | 19 | 15 | 33 | 24 | 34 | 38 | 4 |
| HS | 0679 | Health Information Management | HIM.S.AAS | . | . | . | . | . | . | 35 |
| HS | 0679 | Health Information Management | MCBS.S.STC | . | . | . | . | . | 5 | 39 |
| HS | 0679 | Health Information Management | MCBS.STC | . | 9 | 115 | 126 | 121 | 28 | 8 |
| HS | 0679 | Health Information Management | MOCS.STC | 81 | 62 | 17 | 3 | . | . | . |
| HS | 0679 | Health Information Management | MOR.S.STC | . | . | . | . | . | 7 | 69 |
| HS | 0679 | Health Information Management | MOR.STC | . | 21 | 45 | 58 | 65 | 10 | 3 |
| HS | 0679 | Health Information Management | MT.CRT | 5 | 1 | . | . | . | . | . |

**Course Success Rates**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Department** | **Department Name** | **Course** |  | **FY 07-08** | **FY 08-09** | **FY 09-10** | **FY 10-11** | **FY 11-12** | **FY 12-13** | **FY 13-14** |
| 0679 | Health Information Management | HIM-110 |  | 95.5% | 89.2% | 90.0% | 93.8% | 93.8% | . | . |
| 0679 | Health Information Management | HIM-1101 |   | . | . | . | . | . | 73.5% | 74.3% |
| 0679 | Health Information Management | HIM-111 |  | 90.9% | 96.8% | 94.4% | 97.6% | 93.6% | . | . |
| 0679 | Health Information Management | HIM-1110 |   | . | . | . | . | . | 92.9% | 95.9% |
| 0679 | Health Information Management | HIM-116 |  | . | . | . | . | . | . | . |
| 0679 | Health Information Management | HIM-1160 |   | . | . | . | . | . | 78.2% | 73.6% |
| 0679 | Health Information Management | HIM-1165 |  | . | . | . | . | . | 88.8% | 80.6% |
| 0679 | Health Information Management | HIM-118 |   | . | . | . | . | . | . | . |
| 0679 | Health Information Management | HIM-1201 |  | . | . | . | . | . | 76.4% | 69.3% |
| 0679 | Health Information Management | HIM-1204 |   | . | . | . | . | . | 77.9% | 75.4% |
| 0679 | Health Information Management | HIM-121 |  | 69.4% | 77.5% | 79.1% | 75.9% | 78.1% | 86.0% | . |
| 0679 | Health Information Management | HIM-1217 |   | . | . | . | . | . | 92.2% | 95.2% |
| 0679 | Health Information Management | HIM-122 |  | 81.7% | 87.4% | 89.2% | 85.4% | 84.7% | 96.3% | . |
| 0679 | Health Information Management | HIM-135 |   | 66.0% | 71.8% | 77.6% | 75.7% | 69.0% | . | . |
| 0679 | Health Information Management | HIM-165 |  | . | 97.4% | 94.6% | 91.0% | 92.3% | . | . |
| 0679 | Health Information Management | HIM-178 |   | 100.0% | 100.0% | 97.1% | 100.0% | 97.5% | 97.7% | . |
| 0679 | Health Information Management | HIM-202 |  | 50.0% | . | . | . | . | . | . |
| 0679 | Health Information Management | HIM-2110 |   | . | . | . | . | . | 96.0% | 78.9% |
| 0679 | Health Information Management | HIM-2144 |  | . | . | . | . | . | 100.0% | 94.6% |
| 0679 | Health Information Management | HIM-2145 |   | . | . | . | . | . | 96.6% | 95.7% |
| 0679 | Health Information Management | HIM-2165 |  | . | . | . | . | . | 97.5% | 88.6% |
| 0679 | Health Information Management | HIM-218 |   | . | . | 100.0% | 93.1% | 100.0% | . | . |
| 0679 | Health Information Management | HIM-220 |  | 90.9% | . | . | . | . | . | . |
| 0679 | Health Information Management | HIM-2211 |   | . | . | . | . | . | 100.0% | 100.0% |
| 0679 | Health Information Management | HIM-2233 |  | . | . | . | . | . | 92.5% | 100.0% |
| 0679 | Health Information Management | HIM-2252 |   | . | . | . | . | . | 97.4% | 100.0% |
| 0679 | Health Information Management | HIM-2262 |  | . | . | . | . | . | 52.2% | 51.1% |
| 0679 | Health Information Management | HIM-2278 |   | . | . | . | . | . | 100.0% | 100.0% |
| 0679 | Health Information Management | HIM-228 |  | 94.4% | 100.0% | 100.0% | 100.0% | 100.0% | . | . |
| 0679 | Health Information Management | HIM-2297 |   | . | . | . | . | . | . | 92.5% |
| 0679 | Health Information Management | HIM-240 |  | 100.0% | 97.0% | 83.9% | 88.6% | . | . | . |
| 0679 | Health Information Management | HIM-241 |   | 100.0% | 100.0% | 100.0% | 100.0% | 94.6% | . | . |
| 0679 | Health Information Management | HIM-244 |  | 93.8% | 100.0% | 96.6% | 100.0% | 91.4% | . | . |
| 0679 | Health Information Management | HIM-245 |   | 100.0% | . | 96.3% | 93.6% | 96.6% | . | . |
| 0679 | Health Information Management | HIM-246 |  | 94.1% | 100.0% | 100.0% | 96.2% | 100.0% | . | . |
| 0679 | Health Information Management | HIM-249 |   | 83.3% | 90.9% | 90.5% | 83.1% | 88.1% | . | . |
| 0679 | Health Information Management | HIM-250 |  | 94.1% | 93.8% | 96.9% | 100.0% | 94.6% | . | . |
| 0679 | Health Information Management | HIM-251 |   | 100.0% | 100.0% | 100.0% | 96.2% | 100.0% | . | . |
| 0679 | Health Information Management | HIM-252 |  | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | . | . |
| 0679 | Health Information Management | HIM-258 |   | 100.0% | 100.0% | . | . | . | . | . |
| 0679 | Health Information Management | HIM-260 |  | 71.2% | 69.0% | 74.9% | 63.9% | 58.9% | . | . |
| 0679 | Health Information Management | HIM-261 |   | 64.9% | 64.2% | 68.2% | 60.8% | 60.0% | . | . |
| 0679 | Health Information Management | HIM-262 |  | 65.3% | 64.5% | 74.1% | 56.9% | 59.3% | . | . |
| 0679 | Health Information Management | HIM-265 |   | 100.0% | 96.6% | 90.6% | 92.5% | 100.0% | . | . |
| 0679 | Health Information Management | HIM-278 |  | 100.0% | 100.0% | 97.0% | 100.0% | 100.0% | . | . |
| 0679 | Health Information Management | HIM-297 |   | . | . | . | . | 96.9% | 100.0% | . |
| 0679 | Health Information Management | HIM-9122 |  | . | . | . | . | . | 73.2% | . |
| 0679 | Health Information Management | HIM-9244 |   | . | . | . | . | . | 100.0% | 100.0% |