

GROWING TOGETHER: THE GIVE AND TAKE OF HEALTHCARE MANAGEMENT FELLOWSHIPS

September 2022

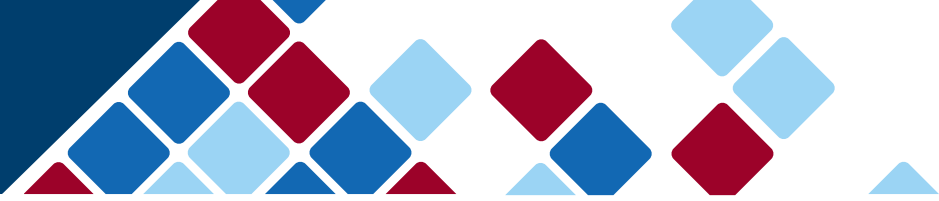


NCHL

National Center for Healthcare Leadership

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Commission on Accreditation
of Healthcare Management Education



INTRODUCTION





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National Center for Healthcare Leadership



Anthony C. Stanowski, DHA, FACHE
President and CEO
Commission on Accreditation
of Healthcare Management
Education
Spring House, PA



LeAnn Swanson
President and CEO
National Center for
Healthcare Leadership
Chicago, IL

Growing Together: the Give-and-Take of Healthcare Management Fellowships

The Giving Tree, written and illustrated by Shel Silverstein, is a beloved and controversial children’s book. Published in 1964 and translated into several languages, the story features the relationship between an apple tree that gives everything she has to please a little boy as he grows and takes her resources without reciprocating much in return.

Some view this story as a beautiful parable of unconditional love. Others say it is a one-sided relationship highlighting humanity’s tendencies to take too much from the natural world. The story leaves us with simple yet important questions:

- What is a healthy amount of give-and-take?
- How much energy is needed to create sustainable relationships?

One answer can be found within the root of a forest floor, an interconnected growth-oriented system known as a mycorrhizal network. Established trees protect and support emerging saplings through the root network. In turn, the saplings give back by becoming integral members of a forest ecosystem. Like any well-functioning system, a forest is constantly rebalancing and redistributing its resources.

In this way, forests have quietly disrupted our accepted theories of evolutionary biology: it’s reciprocal cooperation, not cutthroat competition, that creates robust and thriving ecosystems.

Like a healthy forest, healthcare management requires a balance of collaborative give-and-take. Hands-on experience is highly-valued by healthcare management students and seasoned executives alike. Both credit the success of their career and organizational growth to what they’re able to give and receive in healthcare administrative fellowships. As we slowly emerge from a socially distant existence, the give-and-take nature of healthcare management fellowships is more essential than ever to ensure the health of our future.

CAHME’s mission is to serve the public interest by advancing the quality of healthcare management education.

NCHL is dedicated to advancing healthcare leadership and organizational excellence by building diverse, inclusive, and collaborative relationships in the US and abroad. NCHL is widely recognized as the premier source for evidence-based healthcare leadership practices, cultivating communities for peer collaboration across organizations, and collectively developing industry models and benchmarks to improve healthcare. This joint collaboration between NCHL and CAHME links the fellowship application process with the accreditation of graduate program in health management.

By working together, healthcare fellows and preceptors can apply the lessons learned from forests and reap the global benefits of cooperation and collaboration. By giving and taking at the root level, we can create a healthy and sustainable healthcare system for ourselves and future generations.

This white paper features the perspectives of past and present healthcare fellows and preceptors who share what they have given and received from their experiences in a fellowship. It also includes key statistics based on data from CAHME and NCHL. Our hope is that, as part of the mycorrhizal network of healthcare management, NCHL and CAHME motivate students to pursue fellowships, entice healthcare administration programs to include fellowships in the education process, and spur healthcare organizations to sponsor fellowships. In this way, the field develops a robust and growing healthcare ecosystem of leaders.



WHY PURSUE A FELLOWSHIP?





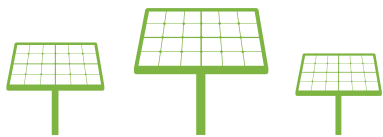
University of
Pittsburgh

Kevin D. Broom, PhD

Associate Professor of Health Policy and Management
Vice Chair for Education
Director, MHA and MHA/MBA Programs
School of Public Health, University of Pittsburgh, PA

Since the 1970s, administrative fellowships have played a critical role in helping early careerists transition into key leadership roles within the career field of health administration. Primarily offered by large organizations with the financial resources to groom future leaders, fellowships help both the organizations and the individuals. For graduates, these fellowship opportunities serve as accelerators to their growth and professional development, enabling them to quickly transition into key leadership roles within large organizations across the health industry spectrum (although most are offered by organizations focused on healthcare delivery). For health organizations, fellowships serve as a means of attracting and developing a pool of future leaders. The fellowship structure ensures they have the requisite skills and experience, are familiar with the entire organization's structure and mission, and have assimilated into the organization's leadership culture.

Administrative fellowships appeal to students in many ways, regardless of their longer-term career interests within the health industry. For students who are primarily interested in operational roles within healthcare delivery, most fellowships fall within integrated delivery systems and/or large academic medical centers. These opportunities afford fellows exposure to a myriad of healthcare services, including both inpatient and outpatient care, in acute care or specialty care settings, as well as chronic care or even aging services. In some cases, fellowships will provide exposure to many or all these services. For students interested in more functional roles, some fellowships focus on developing future leaders with expertise in functional staff roles such as financial management, strategic planning, supply chain, process improvement, etc.



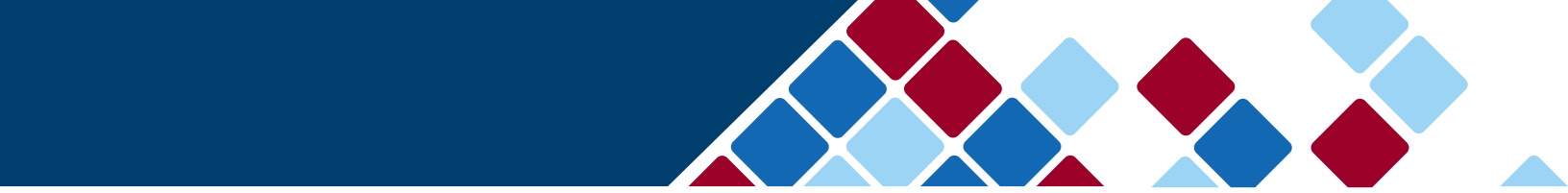
WHAT IS THE DIFFERENCE BETWEEN AN ADMINISTRATIVE RESIDENCY AND AN ADMINISTRATIVE FELLOWSHIP?

Typically, an Administrative Residency is one of the final steps required to obtain a master's degree in health administration. Such experiences are usually arranged by an academic program in collaboration with a preceptor. An Administrative Fellowship is a developmental experience that requires completion of a graduate degree before the fellow begins the program. Fellowship programs usually receive a large number of applicants from many different academic programs.

Source: ACE Career Resources, <https://www.ache.org/career-resource-center/seek-new-opportunitiesZ/postgraduate-fellowships/frequently-asked-questions>



American College of
Healthcare Executives
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Additionally, administrative fellowships also serve to help prepare graduates for longer-term career paths outside of healthcare delivery. Insurance firms and analytic companies are some of the newer settings for administrative fellowships. Even traditional fellowships that focus on healthcare delivery can prepare early careerists for future key leadership roles outside of healthcare delivery. Pharmaceutical companies, biotech firms, durable medical equipment manufacturers, and medical supply firms produce goods and services consumed within healthcare settings. Experience within healthcare delivery settings adds value when helping those companies develop products that target those customers. Likewise, consulting firms leverage knowledge and experience developed within healthcare settings when helping their healthcare clients solve complex problems.

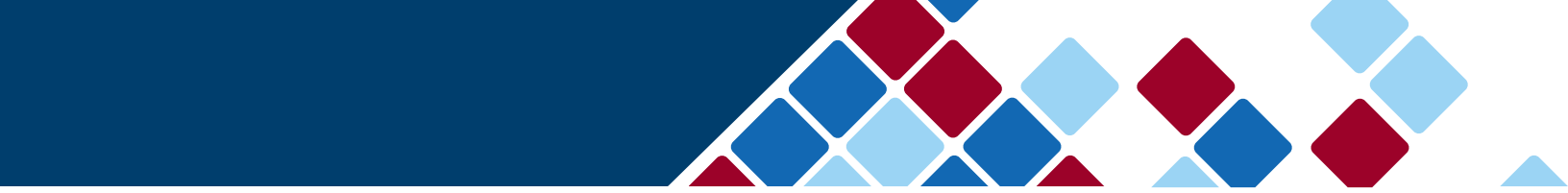
For motivated and ambitious early careerists, administrative fellowships serve as an optimal means to gain both strategic-level exposure and insight, as well as grassroots experience, that they can leverage throughout their careers. Fellowships provide a fast track to executive leadership positions within healthcare delivery, yet also serve as a solid foundation to transition into key leadership roles across the health industry spectrum.

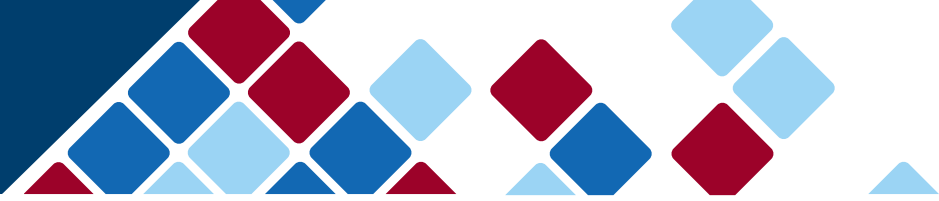
Percent of Fellows Hired on Post-Fellowship

Year	Percent Hired Post-Fellowship	n
2017 - 2018	86%	88
2018 - 2019	90%	83
2021 - 2022	85%	59

Source: National Center for Healthcare Leadership, National Council on Administrative Fellowship Program, Benchmarking Surveys (2017 -2022)







WHAT'S THE EDUCATIONAL VALUE OF A FELLOWSHIP?





THE GEORGE WASHINGTON UNIVERSITY

WASHINGTON, DC

Christopher Bott, MHA
George Washington University
Milken Institute of Public Health
Washington, D.C., VA

I decided to pursue a master's degree in healthcare administration because I wanted to become a leader in healthcare. I had discovered the concept of an administrative fellowship, and saw it as a significant way to accelerate my career and put me on a fast-track. While I was doing my research, I noticed that almost all of the fellowship programs I desired sought students from CAHME accredited schools, and so I only considered such institutions. The George Washington University's Master of Health Administration program was my top choice due to it being CAHME accredited, having a strong history of producing successful individuals, and including the completion of a fellowship within its curriculum. It was clearly the right decision to attend, as the faculty support, academic experience, and ability to grow both personally and professionally exceeded all of my expectations.

Embedded within the curriculum, GW's program instills 29 unique competencies within its students, ranging across the four CAHME domains: (1) management and leadership; (2) communications and interpersonal effectiveness; (3) critical thinking, analysis, and problem solving; and (4) professionalism and ethics. Each competency is measured and tested multiple times across a student's academic journey. Every student is matched with an academic advisor within the program who has access to reports that not only display how their advisee is doing academically, but also how they are scoring on the competency measurements. In the regularly scheduled "touch-bases" between advisor and advisee, the advisor is able to highlight areas that need addressing and focus on developing these areas with their student. The development of these competencies through the faculty support has been incredibly helpful in my experience already, and I have put many to good use.

Aside from just the competencies, GW's academic curriculum provides a rigorous and holistic yet customizable experience through required classes and electives. It is amazing to reflect on the fact that I came into GW's program with no previous experience in healthcare and not knowing even the most basic of healthcare concepts, and compare that to how I feel coming out of the program in feeling confident, well prepared, and capable to handle whatever gets thrown at me. I have been easily able to take the lessons I have learned in class and apply them to my fellowship, which is a true testament to the support of the faculty and their commitment to preparing their students to the absolute best of their ability. Already just one month into my fellowship, I have been able to put my academic and competency learning to great use, and can clearly see the return on investment that I made in pursuing GW's CAHME accredited program.

FELLOWSHIP SATISFACTION

In graduate programs where students (15% or more) do a fellowship, 100% of graduates are either very satisfied or satisfied. This is 9 points higher than programs that have under 15% of graduates in a fellowship.

Source: Analysis of CAHME Annual Report Data 2020 - 2021



Jillian Jweinat, MS, MBA
Chief Strategy and Business Planning Officer
North Atlantic Territory and Keystone Market
Aetna, a CVS Health Company
New York, NY

I was fortunate to earn a Master of Science in Health Systems Management (HSM) from Rush University, a CAHME accredited program. The Rush HSM teacher-practitioner model, dynamic course curriculum, work experience, master's research project, and deeply committed faculty members overprepared me for the real-world. I dare to say that it would not have been possible for me to be selected for the Administrative Fellowship at Yale New Haven Health System without the Rush HSM experience.

My Administrative Fellowship at Yale New Haven Health System was an eye-opening, immensely rewarding, and appropriately challenging experience. As a young early careerist, I obtained broad-based operational, project management, and strategy development experience across three hospitals within Yale New Haven Health System. It was an experience of firsts for me. The first female CEO and President that I ever witnessed lead an organization was Marna Borgstrom during my fellowship. She was the first female executive who coached me to take full credit for my work and happens to be one of the kindest and smartest human beings I have met in my life. The first hospital board meeting that I participated in was during my fellowship. The first hospital acquisition that I was part of planning was during my fellowship. The first time I obtained access to the senior-most leaders in a health system — to their meetings, teams, thought processes, and career advice — was during my fellowship. The first time I recognized organizational politics was during my fellowship. The first time I witnessed an end-to-end strategy development and budget cycle was during my fellowship. I worked on high visibility projects, received mentorship from generous leaders, and truly learned what a high-performing leadership team functioned like. I look back, over a decade later, and still marvel at how much I learned and how much I grew both personally and professionally during my fellowship.

Since then, I have worked in professional management consulting serving payors and providers. I have held leadership roles at two healthcare start-ups. Today, I lead strategy, operations, and business planning for local markets at Aetna, which is a CVS Health company. None of these experiences would have been possible if I had not completed an Administrative Fellowship at Yale New Haven Health System. My fellowship experience opened the doors for joining professional consulting. My professional consulting experience opened the doors for joining healthcare start-ups. My healthcare start-up experiences opened the doors for joining the payor industry. Today, as I navigate a myriad of challenges, I can access my provider, management consulting, healthcare start-up, and payor experiences and network to develop and execute meaningful solutions. My career has not been a straight-line approach, and as a result I have always been challenged, I continue to be energized by my work, and I have met and been mentored by some extraordinary professionals and teachers along the way.

My advice for those considering or accepting an Administrative Fellowship is simple and challenging. Understand that what you put into the experience is what you get out of it. Be a sponge and try to absorb and reflect on everything that you are witnessing. Be patient with yourself and your learning process; we are all a work-in-progress. “Can you please help me understand?” is a great phrase to commit to memory and use. Take the opportunity to identify the leadership characteristics that you particularly respect in others and want to emulate in yourself. Be authentic. Develop relationships with people during your Administrative Fellowship who can help form your personal board of directors — those you respect and admire who can give you the advice and support you need over the course of your career. Dr. Thomas Balcezak, who I worked with during my Administrative Fellowship, remains on my personal board of directors today and he has been the best sounding board I could ever have.

Most importantly, understand that there are rarely, if ever, straight lines in a career path. The lines between providers, payors, and other stakeholders in the healthcare ecosystem continue to blur. Everything that you will or could learn in your Administrative Fellowship is transferable to other roles, other organizations, and other segments in the healthcare industry. Taking different paths can lead to different and rewarding experiences which can propel you forward in your career.

Available Fellowship Positions

Year	Number of Fellowship Positions Available in the NASCAF System
2017 - 2018	165
2018 - 2019	201
2019 - 2020	237
2020 - 2021	239
2021 - 2022	207

Source: National Center for Healthcare Leadership, National Council on Administrative Fellowship Program, Benchmarking Surveys (2017 –2022)





HOW FELLOWSHIPS ALLOW YOU TO TAKE RISKS





Hartford HealthCare



Jeffrey A. Flaks
President and CEO
Hartford HealthCare
Hartford, CT



Quian Callender
Administrative Fellowship
Program Director;
Strategy & Analytics Manager
Hartford HealthCare
Hartford, CT

Hartford HealthCare's Administrative Fellowship Program provides a unique pathway for participants. The program's maturation and success have also offered abundant learning moments for our organization — making our health system the true beneficiary of the Fellowship initiative. We are proud to share key moments in our journey through this exciting and evolving program.

Administrative fellowships offer critical experiential learning experience and create a foundation for personal growth, learning and ideation. For individuals looking to grow in their skill sets and abilities, the fellowship offers an unparalleled experience. While an administrative fellowship is certainly not the only way to enter the healthcare field, it is a way that offers accessibility, mobility and adaptability for those who are newer to the field.

We can speak to this from personal experience. Each of us completed an administrative fellowship and benefited tremendously from the experience due to mentors and executive leaders who were dedicated to our success. While we completed our fellowships years (even decades) apart, we committed to pass forward the lessons learned, but most importantly, to provide opportunities for rising leaders who aspire to transform healthcare to be better and equitable for all.

At Hartford HealthCare, the 12-month project-based administrative fellowship program represents a gateway to vast opportunity with the ability to impact more than 36,000 colleagues across nearly 2 million patient interactions that happen every year. Each administrative fellow is able to chart their own course with direct support from the Administrative Fellowship Program director, and from their preceptor, who is a member of Hartford HealthCare's Executive Leadership Team.

This personalization of experience starts in a competitive recruitment process in which roughly 3% of candidates are offered the role of administrative fellow. Prospective fellows are able to share their passions, current skills and aspirations for personal and professional growth. Those elements, along with organizational needs, determine an administrative fellow's placement. This unique placement format and significant support structure has resulted in a 100% post-fellowship retention rate from 2019 to 2021.

Embedding Equity and Increasing Representation

Our Administrative Fellowship Program indisputably serves as a pipeline for leadership. Since 2018, an equity framework has guided the function and purpose of the Program. We made a commitment to ensure fellowship cohorts represent the increasing diversity of communities we are privileged to serve. With a focus on creating opportunities for individuals who have identities underrepresented on the leadership team, we have seen remarkable progress in changing the face of our emerging leaders. Today, 90% of administrative fellows who joined Hartford HealthCare have at least one identity that is underrepresented in the organization's leadership team. For the cohort who just began in June 2022, 100% of the administrative fellows have at least one identity that is underrepresented.

This deliberate pursuit of equity did not happen overnight. It required us to shift how Hartford HealthCare recruits, where Hartford HealthCare recruits, and what Hartford HealthCare does to ensure a supportive and inclusive experience. In addition to serving as a national destination for learning and growth, the fellowship program also builds on Hartford HealthCare's commitment to identify local talent, with several administrative fellows who have Connecticut roots.

Creating a supportive and inclusive environment requires considerable time and dedication. It starts with displaying a genuine interest in the success of each fellow in the way each participant defines "success." Through authentic and humanistic conversations, we use consistent feedback loops such as one on ones, surveying, ideation sessions where input is heard and acted on. We create frequent opportunities for the cohort to gather as a group to measure their progress and celebrate their achievements. From each administrative fellow's first day with Hartford HealthCare, we encourage them to bring their full and authentic selves.



Our commitment to equity in the fellowship program earned Hartford HealthCare recognition as the 2020 Administrative Fellowship Program of Distinction from the National Center for Healthcare Leadership. The recognition was a result of a concerted effort to center principles of diversity, equity, inclusion and belonging and provide meaningful and rewarding experiences.



HHC Summer 2021 Cohort of Administrative Fellow and Administrative Interns

Enabling Meaningful and Rewarding Experiences

Hartford HealthCare has developed a significant track record of identifying individuals who are ready to challenge themselves and challenge the status quo in an authentic and humanistic way. Administrative fellows are immediately immersed in the Hartford HealthCare Operating Model and provided with essential tools to contribute and make meaningful contributions and create change. This foundational immersion is provided on Day One to ensure that each administrative fellow enters our organization with a firm grounding in what we call “How Hartford HealthCare Works,” or simply, “H3W.”

At Hartford HealthCare every fellow is encouraged to:

1. Say “Yes!” to opportunities
2. Be present and have a presence
3. Ideate solutions to the issues we face
4. Stay curious and have a growth mindset
5. Create their own path

In addition to upholding these five principles, fellows complete and lead project work — a framework that enables participants to be successful during their fellowship experience and in successive roles.

When former fellows across Hartford HealthCare are asked what makes the fellowship experience meaningful, they overwhelmingly call out the cohort model, program support structure and stretch assignments that grew their skillset and provided a challenge. As part of the fellowship experience Hartford HealthCare provides fellows with:

- Executive coaching and peer-to-peer coaching;
- Volunteer impact days that are fellow-led and based on community needs;
- Cohort book clubs and lean huddles; and
- Leadership retreats, among other learning and networking opportunities.

Each administrative fellow has an opportunity to join and take on a leadership role in any of Hartford HealthCare’s Colleague Resource Groups (CRGs). Since the creation of our CRGs in 2021, each fellowship cohort has actively participated in the Black/African American CRG, Asian American and Pacific Islander CRG, LGBTQ+ CRG, and Hispanic/Latinx CRG. These programmatic experiences complement each fellow’s project-based work.



2020-2021 HHC Administrative Fellowship Cohort; Pictured L to R: Sumeet Kotwal, Keshia Shah, and José Garcia



Investing in the Future During a Global Health Crisis

While many organizations cancelled or postponed their administrative fellowship programs during the height of the COVID-19 pandemic, Hartford HealthCare chose to not only continue its program but to expand the cohort size. The administrative fellowship program doubled the cohort size from three in 2020 to six in 2021. In 2022, we welcomed a cohort size of eight. This direct investment in rising leaders and subsequently in the organization as a whole cannot be understated, as the fellows in the last three years have joined at a critical time for Hartford HealthCare and for global health.

Many of the administrative fellows immediately stepped up to say “Yes!” when called upon to support our robust COVID-19 testing and vaccination rollouts. In 2020-2021, administrative fellows Sumeet Kotwal, Keshia Shah, and José Garcia, were instrumental in standing up and supporting Hartford HealthCare “mega-sites” across Connecticut — locations designed to support daily high volumes of patients for COVID-19 vaccinations when they were most in need and demand.

The succeeding 2021-2022 cohort continued and advanced this community-centered work, taking on responsibilities ranging from supporting mobile vaccinations (especially including services to underserved neighborhoods), to engaging colleagues in their own vaccination decision as Hartford HealthCare implemented vaccination requirements to protect our colleagues and our communities. The collective efforts of the fellows demonstrate the versatility and agility the fellows bring to Hartford HealthCare.

Creating Pathways for Non-Traditional Candidates

Rooted in the values of the Administrative Fellowship Program, Hartford HealthCare significantly expanded its leadership development opportunities and created an Executive Administrative Fellowship Program in 2019. The Executive Administrative Fellowship is for individuals with substantial work experience outside of healthcare. Since its inception, two Executive Administrative Fellowship have joined Hartford HealthCare for the 24-month program. They have immersed themselves in understanding the healthcare industry and consumers’ needs, and are now leaders at Hartford HealthCare in finance and operations, respectively. Without the Executive Administrative Fellowship Program as a pathway, industry transitions such as theirs would be difficult and organizations like ours would miss out on identifying and recruiting talented individuals with broader experiences.



ON AVERAGE, EACH APPLICANT RECEIVES 0-3 OFFERS.



ORGANIZATIONS HAVE AN AVERAGE OF 3 FELLOWSHIP POSITIONS.

FOR EACH FELLOWSHIP SITE, AN AVERAGE OF 25 CANDIDATES GO THROUGH AN INITIAL INTERVIEW, 8 MAKE IT TO A SECOND INTERVIEW, AND ONLY 2 MAKE IT TO THE THIRD ROUND.

Source: National Center for Healthcare Leadership, National Council on Administrative Fellowship Program, Benchmarking Surveys (2021 -2022)

Paying it Forward and Demonstrating Our Commitment

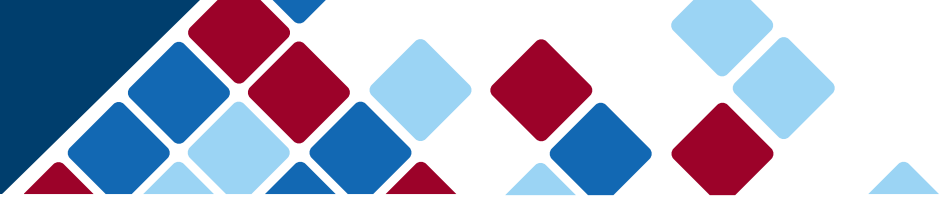
As two natives of Connecticut, Hartford HealthCare and its Administrative Fellowship Program hold special significance. Supporting each successive cohort, and ensuring rich and meaningful programs and experiences are true points of pride. Each year, administrative fellows bring immense energy and a host of new ideas informed by their lived experiences. Those ideas are welcomed, cultivated, and always considered alongside those of others in our organization.

Upon completion of the Program, each fellow is given a charge to “pass it on and give back.” Without fail, every former fellow has stepped up to serve as a mentor to an incoming fellow and all have been instrumental in identifying future cohorts through the recruitment and selection process. The Administrative Fellowship Program at Hartford HealthCare has grown to a point where former fellows are preceptors. Fellows have gone on to lead operations, strategy, access initiatives, equity, and our colleague resource groups, continuing this virtuous cycle of “paying it forward.”

Administrative fellowship programs are one of several career pathways — but the doors to these opportunities must be opened and held wide. Administrative Fellowship Programs such as Hartford HealthCare’s, and the fellows themselves, represent an organization’s resolve to teach, coach and mentor all its colleagues. As leaders, we see it as our responsibility to invest the time, the energy and the financial and operational resources to develop new and emerging leaders. There has been no finer example of that than our Administrative Fellowship Program.



2021-2022 HHC Administrative Fellowship Cohort; Pictured L to R: Claudia Martinez, Deborah Famodimu, Hima Katrapati, Nolan Cianci, Nia Willis and Victoria Okyere



HOW STUDENTS FOUND A FELLOWSHIP





Chris Louis

**Clinical Associate Professor of Health Law, Policy & Management
Boston University School of Public Health
Boston, MA**

The NAFCAS system is the single most important nationwide resource available to students applying to administrative fellowship who seek to access complete and organized information about them. For more than a decade, the NAFCAS system has provided a valuable, streamlined vehicle that allows students to gather information about the fellowships they are interested in and apply directly to them in a single place. Students in the Healthcare Management program at the Boston University School of Public Health (BUSPH) were asked about their recent experiences with the NAFCAS system during the 2021 fellowship application cycle. Their perspectives coalesced into two emergent themes: (1) the NAFCAS system offers a user-friendly portal design, and (2) the NAFCAS system helps students stay organized and meet the application deadlines. The following sections expound further on these two themes.

The first emergent theme that BUSPH students described was that the NAFCAS portal is constructed in a way that students found intuitive, user-friendly, and well-organized. Once a student enters the portal, the prompts to create a profile and enter student-specific information were clear. This enabled students to quickly create a profile and begin browsing fellowship sites, which is what they claimed they wanted to spend most of their time doing early in the process. The organization of fellowship site information within the NAFCAS system then made it easy for students to browse programs and quickly understand the application requirements. Since fellowship sites can have unique application elements (e.g., site-specific essay prompts), each site-specific tab was a reliable place that students learned to examine when determining what they needed to do for that site's application. This was helpful because, at times, what students could find on the website wasn't as current as what was in the NAFCAS system. Moreover, students remarked that it was easy to fill out the different sections of the portal, see which sections were complete/incomplete, and that it was easy to add and remove fellowship sites from their list of places where they were applying. One student noted that the way the application portal was organized made it efficient to apply to multiple programs with little extra work. This student applied to 8 fellowship sites via the NAFCAS system and said that it was less time consuming than the 3 fellowship sites she applied to that did not participate in the NAFCAS system. For example, uploading one transcript for all NAFCAS fellowship sites was far less burdensome than requesting one for each non-NAFCAS fellowship site.

The second theme that emerged from conversations with BUSPH students was that the NAFCAS system helps students stay organized and meet the application deadlines. Students agreed that the suggested timeline provided within the NAFCAS system helped them stay on track with the application process during a very busy Fall semester. They were given the suggested deadlines and received e-mail notifications when transcripts, recommendation letters, and other materials were added to their applications. This helped alleviate some of the anxiety inherent in the process. One student described how she found the recommendations page very easy-to-use and appreciated that applicants could enter their own preferred due dates for when letter writers were to submit their letters. She wanted to get her applications submitted earlier than the designated deadline and this helped her move up those timelines. The most gratifying part for another student was seeing the "check mark" next to the sites where she was applying signaling that all necessary materials had been submitted.



Raavi Singh, MHA, MPH, CPH
 Graduate
 University of South Florida,
 College of Public Health
 Tampa, FL



USF Health
 College of Public Health

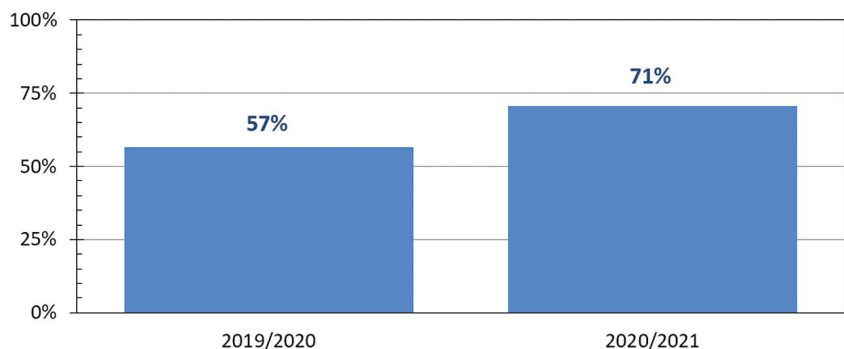
Raavi Singh’s faculty mentor in USF’s CAHME-accredited Master of Health Administration (MHA) program, Dr. Zachary Pruitt, convinced her to start building her winning post-graduate administrative fellowship application package during her first year of graduate school. “When I first arrived at USF, I had not heard of administrative fellowships,” Raavi admitted. “But from the very beginning, Dr. Pruitt told me to build my resume”

Raavi took advantage of as many experiential learning opportunities as possible. Starting in her first year, Raavi became an intern for the local ACHE chapter, a leader of on-campus professional clubs, a summer intern for a hospital’s compliance department, a lead on a hospital patient discharge improvement project, a Lean Six Sigma Green Belt, and a part-time employee working on COVID issues at Moffitt Cancer Center. Raavi found that she could apply what she learned in the classroom to projects in the field and vice versa. “I gained confidence,” Raavi said, “that my MHA program was preparing me to excel outside of the classroom, which in turn made me more effective with my school projects.” These experiences also greatly benefited her fellowship applications. “When writing and editing my personal statement,” said Raavi, “Dr. Pruitt would remind me to give specific examples of how I applied my knowledge to real healthcare problems.” In addition, Raavi felt more comfortable in her many fellowship interviews because she could reflect on her various projects in the field.

Raavi realized that with her busy schedule she would not necessarily earn the highest grades in all her classes. Instead, she sought to balance her academic performance with a robust professional network of mentors, peers, alumni, preceptors, and administrative fellows. “Instead of my focusing solely on grades, Dr. Pruitt encouraged me to make meaningful connections with people,” said Raavi. When the time came to apply for fellowships through the NASCAF system, her working relationships with mentors made requesting recommendations relatively easy. In addition to uploading recommendation letters to the centralized application service, Raavi’s mentors could readily give examples of her professionalism and leadership capabilities based on first-hand interactions.

Her strong relationships and varied experiences paid off. Raavi Singh, MHA, MPH, CPH, graduated from University of South Florida’s College of Public Health in May 2022, and she was chosen for a post-graduate administrative fellowship position at Dana Farber Cancer Institute in Boston, Massachusetts.

**Percent of
 Graduate Programs
 with Students in Fellowships/
 Residencies
 2019-2021**



Source: CAHME Annual Reports



DES MOINES UNIVERSITY
MEDICINE & HEALTH SCIENCES



Rachel A. Reimer, PhD
Associate Professor and Chair
Des Moines University
Des Moines, IA



Nick Pomernackas, MHA
Class of 2022
Des Moines University
Des Moines, IA

Administrative Fellow
CommonSpirit Health
Omaha, NE

Historically, a small portion of healthcare leaders have held a graduate degree in healthcare management (Howard & Lomperis, 2014). Graduate training programs have traditionally focused on face-to-face modalities with novice students prior to their entering the workforce. Experiential learning, including fellowships, has therefore been long recognized as an effective method for bridging the gap between didactic preparation and subsequent leadership practice. Des Moines University recognized the need for advanced training among current healthcare managers in leading the industry through numerous disruptive changes in the 1990s. DMU created a graduate program in healthcare management with the expectation that students were currently working full-time in healthcare. One may conclude, then, that fellowships would be less important for this target student. We argue, rather, that the U.S. healthcare sector benefits from the diverse student body that non-traditional training programs produce. Likewise, students with broad healthcare experience combined with subsequent or simultaneous graduate training from CAHME accredited programs benefit from the mentorship and unique experiential learning that postgraduate administrative fellowships provide.

From our students' perspective, NAFCAS eases their ability to locate and begin to form connections with fellowship programs. Specifically, they can learn about the variations in structure, length, focus, culture, and overall expectations while preparing their materials. Students have received feedback and guidance on their career strategy, their strengths and weaknesses related to CAHME competencies, and how they can build upon their prior experience after graduation throughout their didactic preparation. As a result, they tend to be highly focused in their fellowship searches. The NAFCAS portal eases the application process and allows the students to navigate many applications in one setting. This efficiency creates a manageable process, which is additionally important to students navigating many areas of responsibility in their academic, professional, and personal lives.

It is widely recognized that the changing demographics of the U.S. population require changes in how healthcare is delivered. Moreover, those individuals delivering and leading healthcare rarely represent the communities they serve (Maryland, 2016). Non-traditional students add significant value to both the academic programs and fellowship positions. In the workforce, they bring added wisdom, experience, confidence, and understanding of the professional culture (Stringer, 2015). Many have called for a commitment to diversity within healthcare leadership. CAHME accredited graduate training programs with a mission to recruit and train non-traditional students from a wide variety of backgrounds stand to alleviate this persistent challenge. The culmination of this training is an administrative fellowship to "fast track" these competent and compassionate leaders into the c-suite. The NAFCAS fellowship program supports these students to this end.

Source: Howard, D.M., & Lomperis, A.M.T. (2015). Postgraduate fellowships in healthcare management: A historical perspective. *Journal of Health Administration Education* 32(1).

Stringer, Heather. "The Nontraditional Student." *PsycEXTRA Dataset*, Apr. 2015, <https://doi.org/10.1037/e523642015-009>.



Gwen Archibald, PhD
 Director of Student Services
 and Academic Support
 University of Iowa
 Iowa City, IA



**Department of
 Health Management
 and Policy**



Kristin Wilson, PhD, MHA
 Director of MHA Program
 University of Iowa
 Iowa City, IA



Dan Shane, PhD
 Immediate past Director of
 MHA Program
 University of Iowa
 Iowa City, IA

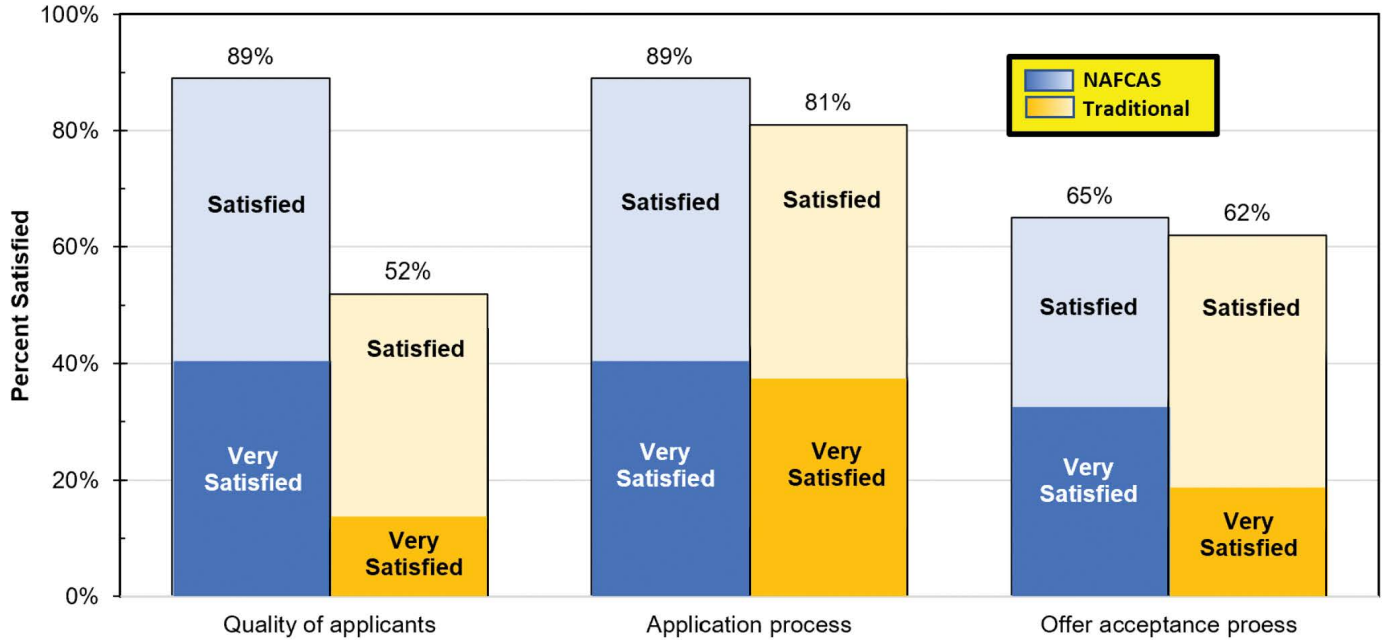
Formation of the emerging leader while a part of our CAHME accredited MHA program is ongoing from the moment the student is accepted into our program. The continuum of opportunities for development is grounded in mentorship, whether by faculty, alumni, preceptors, or other students. The pandemic has laid bare and further emphasized the need for two important aspects of mentorship — connectedness and support. The Iowa MHA program embraces mentorship and these important aspects through an intentional, systematic approach to academic and career advising. Mentorship has become a hallmark of the Program, and it is through this commitment to mentorship that we believe prepares our students for continued mentorship through their NCAF fellowships and preceptor relationships.

Upon enrollment, all MHA traditional track students are assigned an Advising Team made up of an Academic Advisor (prior to Orientation), the MHA Program Director, the MHA Executive-in-Residence, a second or third-year Peer Coach, (within several weeks of class starting) and an Executive Mentor (about two-thirds of the way into the first semester). This team is a resource to the student and provides comprehensive academic and career advising. Throughout the program, the student is engaged with and develops professional mentoring relationships in a variety of ways. Through the team mentorship approach, the student is immersed into professional development opportunities, emphasizing connectedness and support in helping the student discern their future leadership path.

The breadth and depth of engagement of our MHA alumni with the students and the Program with regard to serving as executive mentors, internship preceptors, guest speakers in courses, and lead facilitators and active participants in our Professional Development Seminar course reinforces lifelong learning and our commitment in the mission statement to deliver our Program “through field experiences with our alumni and other practitioners, and extensive professional networking.” The teaching, mentoring, advising, and service as preceptors benefits the alumni as well, given that teaching, mentoring, and assessing performance represents the highest level of teaching and learning.

The next phase of improvement in our mentoring model will include an even greater focus on affinity-based selection and coaching of mentors and executive mentors to offer an additional factor of support to students, in particular those from underrepresented backgrounds in healthcare leadership. The department will use its extensive and historic alumni network to focus on the formation of affinity-based alumni communities, with an additional emphasis on diversity, equity, inclusion, and belonging to enhance the connectedness and support for our students. Greater levels of alignment, participation, and representation of alumni from all backgrounds will help new students be able to see themselves in high level leadership roles and receive culturally relevant advice and mentorship and personal support throughout their graduate studies and beyond. We believe that it is through the fostering of these strong student-mentor relationships, that we best prepare our students for the next phase of their leadership journey.

Fellowship Site Satisfaction by Application Method 2021



Source: National Center for Healthcare Leadership, National Council on Administrative Fellowship Program, Benchmarking Surveys (2022)



WHAT DO STUDENTS NEED TO DO TO BE SUCCESSFUL





Baylor University

HANKAMER SCHOOL OF BUSINESS
Robbins Institute for Health Policy and Leadership



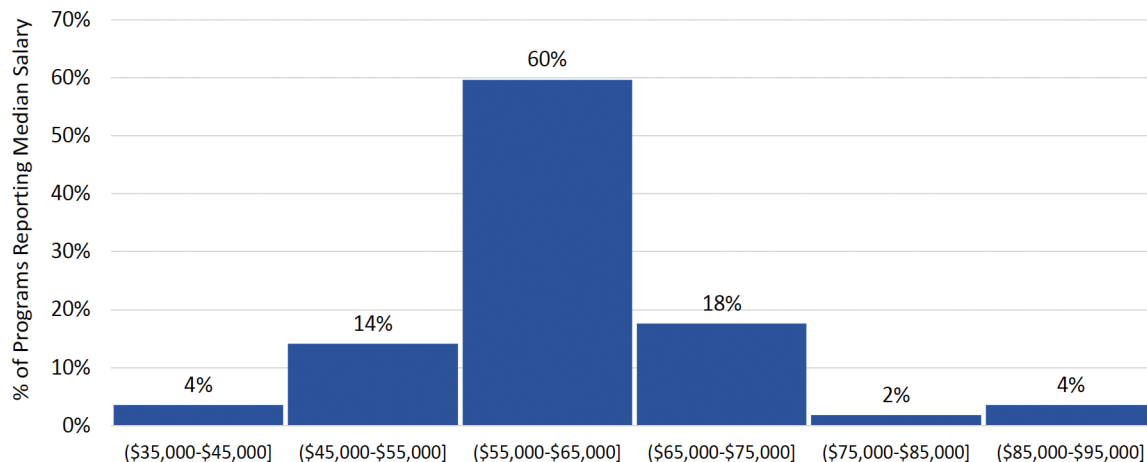
Forest S. Kim, PhD, MBA, MHA, FACHE
Program Director
Baylor University
Waco, TX

Developing the Skills to Succeed in a Fellowship and Beyond

A student's success in an administrative residency or fellowship requires strong academic preparation. The knowledge, skills, and abilities learned during the didactic portion of a program not only allow students to secure a fellowship but also bring early success. Students can hit the ground running; that is, they meaningfully contribute and add value to the organization early in the administrative residency or fellowship.

Since its inception in 2003, students from Baylor University's Robbins Healthcare MBA in the Hankamer School of Business have benefited from its accreditation through CAHME. The accreditation criteria have largely shaped the program's curriculum, helping our students find success in their initial entry into the workforce. I share three areas with their corresponding CAHME criteria that we have found enhance student professional readiness.

Median Fellowship Salary Distribution Reported by Program 2020-2021



Source: CAHME Annual Reports



THE 2020/2021 MEDIAN SALARY FOR
A FELLOWSHIP OR RESIDENCY WAS \$61,000

Competency-based education (CAHME criteria III.A.1., III.A.2., III.C.2., III.D.1., and III.D.2). CAHME's accreditation standards around competency-based education focus our curriculum on management competencies that are critical to workplace success. Our program uses a modified version of the National Center for Healthcare Leadership (NCHL) Health Leadership Competency model that has been adapted with input from our Executive Advisory Council and faculty. Our 24 competencies are assessed throughout our program using both direct and indirect measures. They are tracked using a simple spreadsheet that allows faculty, staff, and students to visualize student progress as they move through the curriculum. Feedback through advising sessions is critical. During these sessions, faculty engage in a dialogue around competency development and brainstorm ways students can improve in deficient areas. For example, a student struggling in financial skills may be encouraged to pursue further training in courses offered by the Healthcare Financial Management Association (HFMA). At the start of our program, faculty and students undergo a series of resume review sessions. These sessions not only help with the practical skill of improving one's resume but also help faculty get to know each student. It is an early way of assessing a student's interpersonal skills. Further in the program, faculty engage in a series of interview coaching sessions which help prepare students for this critical step in the residency placement process.

Integrative experiences and team-based learning (CAHME criteria III.B.4. and III.B.2.). Healthcare is a team sport — nothing in healthcare gets done individually. So, success in a student's first professional setting requires strong team-based skills. The Robbins Healthcare MBA accomplishes this through several integrative and team-based learning experiences. In their fall and spring semesters, students are placed in pairs and assigned to observe managers in two different departments in a local hospital. Additionally, all students engage in a week-long global health immersion (e.g., in Costa Rica) which includes a business case with an organization in the host nation. In the spring, students attend the American College of Healthcare Executives (ACHE) Congress on Healthcare Leadership. Students also compete in several internal and external case competitions such as ones conducted by the University of Alabama at Birmingham, National Association of Health Services Executives (NAHSE), The Ohio State University, and the Business School Alliance for Health Management. The final integrative experience is a Capstone Course where students working in teams develop and pitch a business plan for a disruptive innovation product or service and individually participate in a comprehensive oral examination.



Focus on Leadership (CAHME criterion III.A.6.). Finally, the Robbins Healthcare MBA directional strategies center on the development of servant leaders for the healthcare industry. Thus, leadership is heavily emphasized throughout the curriculum. An example of this is our Executive Leadership Speaker Series led by Baylor Scott & White Health's former President and CEO, Joel Allison, who currently serves as our program's senior advisor. The program invites guest speakers from different sectors across the industry (e.g., home health, physician practice management, health plan) to share leadership and sector-specific knowledge to our students. Students engage in discussions that help integrate content gained in the courses. Many of these sessions are preceded by a mentoring lunch with the speaker and a small group of students.

Health management programs are charged with educating students in a broad set of competencies that will prepare them to successfully engage in the professional work environment. For some students, the fellowship will be their first time working professionally. In the end, success or failure in this environment will determine whether a job offer awaits in the organization or if the student must transition to a job search. Much is at stake. It is my hope that sharing some of the ways CAHME has shaped our program will spark ideas that could help strengthen your program and better prepare our students for a fellowship and beyond.

Used by Students

- **Hospitals & health systems career pages**
- **LinkedIn**
- **Information Session**
- **ACHE Post-Fellowship Listing**
- **Virtual Recruitment**

Recommended by Faculty

- **ACHE Post-Fellowship Listing**
- **Hospitals & health systems career pages**
- **LinkedIn**
- **NAHSE Website**
- **Information Session**

Source: National Center for Healthcare Leadership, National Council on Administrative Fellowship Program, Benchmarking Surveys (2021 -2022)





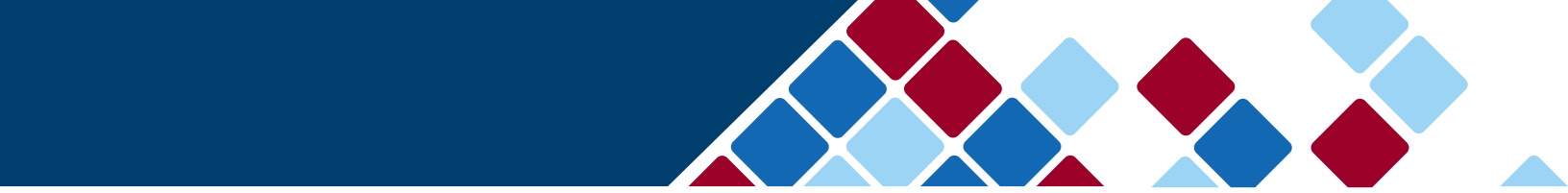
UNIVERSITY OF CENTRAL FLORIDA

Kourtney Nieves, MD
Associate Lecturer and MHA Program Director
University of Central Florida
Orlando, FL

Habit number 2 from Steven Covey's *7 Habits of Highly Effective People* (1989) talks about beginning with the end in mind. At the University of Central Florida (UCF), we strive to embody this habit as soon as our MHA students matriculate into the program. A student's MHA program journey begins with a mandatory program orientation held the week before classes begin to acquaint them to all the MHA program and UCF has to offer, as well as to recommend tips for success both during and after the program. During this orientation, administrative fellowships are introduced to the students so that students can not only understand the importance of a fellowship, but for those who express interest, begin preparing early in their program progression.

Our program has been incredibly fortunate to have placed a number of our graduates into these administrative fellowships over the years in places across the country such as Duke, Oschner, Geisinger, Mayo Clinic, HCA, and Brigham and Women's Hospital. As such, we have developed an impressive roster of alumni who are willing to act as mentors to our current students and help shepherd them through the fellowship process. We believe that the power of our impressive alumni base has served to provide a path for success for current MHA students as they begin their own fellowship journeys. In fact, alumni routinely give back to UCF by serving as guest speakers and panelists for those expressing interest in fellowships. These alumni share their own journey, how to choose the "right" fellowship, the challenges they faced both in the process and the fellowship itself, as well as tips for success on how to earn a fellowship. Such speaking opportunities are incorporated into our voluntary mentor pod meetings as well as held as separate events throughout the year. Many times, in fact, current students on the fellowship track serve as the organizers of such events and recruit the alumni to speak to our current student population.

Over the years, we have also amassed a wealth of information from past alumni fellows that we communicate to our students. We share this info with students about things such as finding the right fit for a fellowship, rotational based versus project-based fellowships, the importance of using NAFCAS, how to make your application stand out, the importance of networking, and tips for success in the application as well as telephone and on site/zoom interviews. We have also engaged our advisory board in the process and have a committee dedicated to fellowships. This committee has also weighed in on tips for a successful fellowship process as well as worked to leverage their own connections to create new fellowship opportunities for students in the Central Florida area. At UCF, we believe that by starting this process early and incorporating multiple learning opportunities along the way, the student's chances of success in earning a fellowship increases tenfold and will serve as a road map for their MHA program as they work towards their ultimate fellowship and career goals.





CONCLUSION: LEADERSHIP EXPERIENCE THROUGH FELLOWSHIPS





Matthew Ramey, MBA
COO
Peregrine Global Services
Gillette, WY



Clarice Tate, M.ED., MBA
Vice President of Quality &
Systems Assurance
Peregrine Global Services
Gillette, WY

Recently, while at dinner with a cohort of Leadership Development program participants, I was asked what qualified me to discuss the various aspects of organizational and professional development being shared. I immediately began rehashing what sounded like a dry version of my resume. I was losing my audience quickly. Then I realized that what he wanted was an answer to give him faith that the hours we had spent in discussion, debate, and critical thinking were founded on something tangible.

When I realized his question was about him, not me, the answer was clear. What qualified me to discuss the subjects we had all labored over for three months? My experience. The experience of leading and orchestrating leadership development professionally throughout many years, several organizations, and a variety of industries, and countries. Being afforded the opportunity to meet, teach and learn with people from around the world, with all levels of education, backgrounds, professional experiences, and worldviews provided the individual asking the question with a foundation of my shared experiences.

The next morning, back in the classroom we expanded on the statement that leaders are created, not born. They are created through experience and the opportunity to witness, participate, and ask questions. They are created through the opportunity to fail and to succeed over time, shaped by both personal and professional experiences.

On-the-job experience is critical to the growth and development of new leaders. Since that conversation, we wanted to examine in more detail the impact of competency-based, experiential learning opportunities. To accomplish this, we compared the outbound competency assessment scores of Peregrine's database of CAHME accredited programs that offered fellowships as a part of their curriculum to those graduate programs that do not support fellowships.

The data shows that students who completed a fellowship had higher retained knowledge in six (6) topics across the competency domains of Business Knowledge & Skills, Leadership, and Communication & Relationship Management, clearly, we see that experiential learning makes a difference in key competencies.

See the table on page 31 which examines the competencies and characteristics most desired of applicants, along with the competencies most improved by fellowships

The findings are consistent with commonly believed benefits of experiential learning. Simply, the process of leadership development is not passive. We must be purposeful in providing experiences in which future leaders have an opportunity to observe, question, participate, fail, and succeed. An environment in which students can fail and succeed while asking themselves, "What can I learn from this opportunity?" or "How can I use this success to grow?"

The foundational question that the research begs us to address is ***how do leading healthcare management programs and fellowship sites design the necessary experiential learning opportunities into graduate education?*** We hope that Peregrine's competency assessment capabilities, CAHME, NCHL, faculty from the great healthcare management programs around the world, and the case studies presented in this White Paper enable students, programs, and fellowship sites advance experiential learning. Together, we can develop creative, knowledgeable and mission driven leaders well-prepared to tackle the difficult healthcare problems that society faces.

Fellowships enhance key competencies and personal characteristics most sought by fellowship site; students completing fellowships see the largest improvement in those competencies.

Top 5 Most Desirable Qualities of a Fellowship Applicant ¹		Top 6 Largest Student Competency Improvement Following a Fellowship ²
Competencies	Personal Characteristics	
Self-Awareness	Ability to speak to previous projects or accomplishments	Leadership: Managing Change
	Diverse Background	Organizational Dynamics
Collaboration	Previous Work Experience: Internship	General Management
		Governance
Initiative	Communication	Communicating Vision
Communication		
Analytical Thinking	Critical Thinking	Quantitative Research Techniques and Statistics

¹ NCHL NCAF Benchmarking Surveys 2021-2022.

² Peregrine Global Services.

10 schools were drawn from Peregrine 2022 data from January through July 2022. The sampling criteria included having at least one period of Outbound Exam data and a minimum of 1 completed exams in the given academic period to be included in the analysis population. The analysis population included traditional (campus-based), online, and blended master’s degree programs.

The Fellowship sample was defined as those students within the sample who completed an Outbound Exam at the end of their degree program and participated in a fellowship program.

No other exclusions were considered. Schools have different incentives and acceptable thresholds for the Outbound Exam. Our intent was to review all exams available to formulate a hypothesis by which we could examine, in future, the comparisons between programs by which fellowships were required and those that were not.

The sample was restricted to the test bank topics within the domains of Communication and Relationship Management, Leadership, Professionalism, Knowledge of the Healthcare Environment, and Business Knowledge and Skills so that exam data could be associated with core competencies defined according to the Healthcare Leadership Alliance (HLA, 2010). Typically, these are general graduate healthcare management programs that do not have a specialization or concentration that included supplemental or advanced assessment topics.

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Universities Offering CAHME Accredited Programs in Healthcare Management

AdventHealth University	The Ohio State University
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Boston University*	Tulane University
California State University, Long Beach*	Uniformed Services University of Health Sciences
California State University, Northridge	Université de Montreal
Clarkson University Capital Regional Campus*	University of Alabama at Birmingham*
Columbia University*	University of Arkansas for Medical Sciences
Concordia University	University of Central Florida*
Cornell University*	University of Colorado Denver*
Creighton University - Nebraska	University of Florida
Dalhousie University	University of Illinois at Chicago*
Des Moines University	University of Kansas Medical Center
Ferris State University*	University of Kentucky
Florida Agricultural and Mechanical University	University of Louisville
Florida International University*	University of Memphis*
George Mason University*	University of Miami
Georgetown University	University of Michigan*
Georgia Southern University	University of Minnesota*
Georgia State University	University of Missouri*
Governors State University	University of Nevada Las Vegas*
Grand Valley State University	University of New Haven
Hofstra University	University of North Carolina at Chapel Hill*
Indiana University	University of North Carolina at Charlotte
Johns Hopkins University	University of North Florida
Minnesota State Moorhead	University of North Texas Health Science Center*
Marymount University	University of Oklahoma
Medical University of South Carolina*	University of Phoenix- Arizona
New York University*	University of Pittsburgh
Pennsylvania State University	University of Puerto Rico
Portland State University	University of Scranton*
Robert Morris University	University of South Carolina
Rochester Institute of Technology	University of South Florida
Rush University*	University of Southern California
Rutgers University	University of Texas Health Science Center at Houston
Saint Louis University*	University of the Incarnate Word
San Diego State University	University of Utah
Seton Hall University*	University of Washington-Seattle*
Stony Brook University*	University of Wisconsin Milwaukee*
Suffolk University*	Virginia Commonwealth University*
Texas A&M University*	Weber State University*
Texas State University	Widener University
Texas Woman's University*	Xavier University
The George Washington University*	

CAHME Accredited Programs in Healthcare Quality and Safety

George Washington University	University of Alabama at Birmingham
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CAHME Certified Programs in Healthcare Quality and Safety

Drexel University	Thomas Jefferson University
Georgetown University	University of Illinois at Chicago
Queens University	University of Pennsylvania

* Universities offering multiple CAHME accredited programs.
List represents status as of 9/03/2022

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