COLLEGE of HEALTH and HUMAN DEVELOPMENT

Department of Recreation and Tourism Management

Annual Assessment Report- 2011-12

Liaison: Veda E. Ward (RTM/HHD)

Overview

1a. The assessment plan for the 2011-12 year focused on: (1) aligning assessment with program review and preparation for national external review by COAPRT; (2) increasing faculty awareness of assessment and commitment to the RTM process, and; (3) improving course components linked to critical thinking (SLO #1), Emotional Intelligence (SLO #4), portfolio preparation and review (SLO #2).

(Source: CSU Northridge, University Catalogue, p. 582)

Student Learning Outcome Assessment Project(s)

2a. Throughout the academic year the overlap among departmental program review activities, College of HHD assessment goals and ongoing commitment to assessment of student learning led to increased momentum among assessment activities. In other words, it became difficult to isolate assessment into the SLO "silos" since there is overlap across courses. The capstone experiences in RTM 490 (Professional Challenges Seminar), Senior Internship (RTM 494C - 01 & 02) became the focus of course-level changes; some prompted by student feedback. Essentially, SLOs # 1 and #2 were the central focus around which other activities evolved/revolved.

2b. SLO # 1 aligns with University Fundamental Learning Competency "Critical Thinking", while SLO # 2 aligns with Written Communication, since portfolios provide evidence of different writing formats and skill levels from the 200-level-through 400-level "core" required courses in the major. There is a commitment to gathering data on SLO #4 on an annual basis.

2c. The RTM department relies heavily on indirect measures of SLOs, primarily because it is a a project-based pre-professional preparation-focused discipline. Faculty members often use problem-based learning (Ward & Lee, 2002) approaches to trigger critical thinking and situations to assess emotional intelligence. Approaches included are presented in Table 1

Table 1: Direct and Indirect Measure of RTM Department Student Learning Outcomes (SLOs)

RTM SLO #	Direct Measure	Indirect Measure
#1		Professional practice lab and
		learning activities in RTM 490
		(Case Study) Application of
		theory to problem -solving in
		RTM 303, 304 and 403
#2		New FT/tenure track hires Fall
· · ·		2012 were asked to review

	1	· · · · · · · · · · · · · · · · · · ·
		portfolios form prior graduates. Feedback provided was discussed in faculty meeting, and at conclusion of Spring 2012, the next crop of portfolios was harvested. Feedback from (the same as well as other)faculty members identified improvement in the portfolios as evidence of student learning. An important improvement included the requirement of short, learning-focused reflections for each course as well as a cumulative reflection at the end of RTM 490, and a revision of the resume and "final" reflection at the conclusion of Senior Internship
		(Florman, 2011).
#3	Emotional Intelligence instrument (Appendix A)was secured online and administered to two lower-division courses and the capstone seminar. A faculty member has committed to assisting with statistical comparisons of results using independent t –test (fall 2012)	Students participate in challenging simulations of workplace situation (RTM 202, 204, 302, 490) which help them assess emotional intelligence, as well as expose them to ways to improve on this developmental skill-set

Design Methodology

Department faculty members were regularly involved in "discussions" about the improvement of assessment activities suggested during faculty meetings through informal discussion, email requests for participation/feedback or through assignment modification. At this point, most measures are cross-sectional, but EI and portfolios can be sampled as longitudinal measures since "evidence" has been collected over time. Methodology is summarized in Table 1 (above).

2e. Assessment Results and Analysis

Assessment results from 2012-12 are already being incorporated into program review and preparation of documents for external accreditation. Evidence was analyzed in a variety of ways including informal and formal reviews of portfolios, identification of a faculty member to complete analysis of EI data during fall 2012, and observation.

During Summer 2012, faculty supervisor (course instructor)visits to internship sites identified areas of strength and weakness among Senior interns, as well, (e.g., communication skills, finance/budgeting). Results are shared with faculty during meetings as well, and some instructional assignments (as well as course learning activities) have been changed as a result.

2f. Use of Assessment Results

RTM faculty members use the assessment process in a variety of ways to inform classroom teaching, program improvement and continuity across the College of HHD in producing students well-prepared to undertake desired careers. Table 2 provides a summary of how the department used results of their efforts during 2011-12.

In addition to the SLO-specific feedback, faculty members, including the Assessment Liaison wished to work on increasing assessment as part of both student and faculty culture. Faculty members are increasingly identifying portfolio assignments on their syllabi, and the department Chair provides coordination through the main office.

Table 2. Closing the Assessment Loop

Opportunity for Growth	Targeted Course/Assignment	Strategy Employed
Increase awareness of	Relevant to all faculty members	Include assessment as a regular
departmental assessment goals		item on faculty meeting
across faculty		agendas
		Disseminate information about
		assessment and accreditation
		to all faculty members
		El surveys were completed in
		lower and upper division
		course where duplication in
		sample would be least likely to
		occur (data to be analyzed Fall
		2012)
Review sample student	RTM core courses	Fall 2011- New faculty hires
portfolios for evidence of		review portfolios and provide feedback at faculty meeting.
student learning		Core course instructors are
		asked to clearly identify on
		syllabus, and discuss
		"portfolio" assignments with
		students enrolled in their
		courses
Identify areas of professional	RTM 400 sequence courses	Spring 490 and Summer 494C
preparation that could be		(Senior Supervised Internship)
strengthened prior to senior		490-design case study that
internship		incorporates diverse aspects of
		the profession and career-
		related competencies (budget,
		public process, facility/ADA,
		etc.)

		Complexity of assignment also enhanced SLO#1 (critical thinking)
Improve information about, and preparation for Senior Internship	RTM 490 & RTM 494C	A Powerpoint presentation on the internship process was developed and shown in the 490 course as well as a separate Sunday afternoon Internship Orientation session Each student was required to meet with the internship instructor to review individual Learning Plans. Permission numbers were issued as review of each learning plan was completed. Summer Internship instructors completed site visits to ascertain areas in need of better preparation Two students elected to submit e-portfolios on CD
Identify College of HHD directions for assessment	RTM 490 (content capstone)	Course instructor included lecture and information on professional ethics; devised
(late in Spring 2012 and continues into Fall 2012)		"final exam" questions on ethics (Appendix). A possible instrument has been identified.

The Department of Recreation & Tourism Management continued its self-study preparation for external accreditation by COAPRT in Fall 2013, and was able to involve new faculty members in the assessment process. The small size of the day-to-day FT faculty poses difficulties with consistently collecting and analyzing data. Faculty members continue to debate the best ways to consistently assess SLOs in classes, but are committed to improving the process through continued dialogue and preparation of program review/accreditation documents. Solutions being explored include selection of student assistants who can input data and identification of FT faculty member who can complete analyses, and possibly develop this as a research line. This will be explored during the 2012-13 academic year.

Students are becoming more familiar with assessment of student learning, are participating in assessment activities and producing portfolios and other forms of evidence that represent improved understanding of assignments and expectations of professional behavior (EI). The Recreation Majors Association (RMA), for example, is encouraging better information and more frequent updating of expectations and increased access through the department web page. Some of these ideas have actually resulted in assignments to faculty to complete by December 2012.

3. Connections to Strategic Plan and 5-year Assessment Plan.

This was a busy year for RTM, since 2 new tenure track hires had to be brought into the mix of assignments and understanding of assessment. For the most part, all faculty members improved their understanding of assessment, and of the expectation to support department learning outcomes. Professional ethics is a value something most FT and PT faculty members share because of their backgrounds and experience as practitioners, as well as academicians.

Since the department is completing its program review/accreditation document, assessment goals will be aligned with the resulting 5-year plan.

4. Other Information, Assessment or Reflective Activities or Processes not Captured Above

Although not required, faculty members are also incorporating assessment activities into general education courses offered in the department. RTM 330, for example, requires a course student learning portfolio. RTM 352 requires an extensive field experience and reflection. A majority of outdoor adventure classes incorporate challenging situations, debriefing and oral reflection that enhance problem-solving and emotional intelligence. These examples are provided as evidence that the department has an increased commitment to levels of assessment of student learning at many levels.

5. Resulting Manuscripts/Publications

Drs. Ward and Visiting Scholar, Nankyoung Cho (Korea) have submitted a poster session proposal (Student Learning Resulting from Participation in a Field-based Research Project) for present at a state conference, in anticipation of submission to a national journal on teaching and learning in recreation, leisure studies and tourism.

References

Cambridge, D., Cambridge, B. & Yancey, K. (2009). *Electronic Portfolios 2.0: Emergent Research on Implementation and Impact.* Sterling, VA: Stylus Publishing.

Florman, J. (2011), Prompting meaningful reflections. NEA Higher Education Advocate, 28, 5, p.7.

Jacobson, W. (2011). Portfolio Teaching. NEA Higher Education Advocate, 28, 5.

Michelson, E. & Mandel, A. (2004). Portfolio Development and the Assessment of Prior Learning.

Sterling, VA: Stylus Publishing.

Ward, J. D. & Lee, C. L. Overview of problem-based learning. *Journal of Family and Consumer Sciences Education*, 20, 1, pp. 16-26.

RTM 490: Challenges of the RTH Profession

What's Your Emotional Intelligence Score?

(Adapted from Hunsaker, P. L. (2001). Training in Management Skills. New Jersey: Prentice-Hall.

Very Slight Ability

Moderate Ability

Very Much Ability

1

2

3

A

5

- 1. Associate different internal physiological cues with different emotions.
- 2. Relax when under pressure in situations.
- 3. "Gear up" at will for task.
- 4. Know the impact your behavior has on others.
- 5. Initiate successful resolution of conflict with others.
- 6. Calm yourself quickly when angry.
- 7. Know when you are becoming angry.
- 8. Regroup quickly after a setback.
- 9. Recognize when others are distressed.
- 10. Build consensus with others.
- 11. Know what senses you are currently using.
- 12. Use internal "talk" to change your emotional state.
- 13. Produce motivation when doing uninteresting work.
- 14. Help others manage their emotions.
- 15. Make others feel good.
- 16. Identify when you experience mood shifts.
- 17. Stay calm when you are the target of anger from others.
- 18. Stop or change an ineffective habit.
- 19. Show empathy to others.
- 20. Provide advice and emotional support to others as needed.
- 21. Know when you become defensive.

RTM 490: Challenges of the Parks, Recreation, Hospitality and Tourism

Profession (Ward)

FINAL EXAM

Spring 2012

YOUR NAME:

What Is a Professional Code of Ethics?

Business or professional ethics are standards or codes of conduct set by people in a specific profession. A code of ethics is a part of the expectations of those involved in many different types of professions. People in a profession don't want to condone bad, dishonest or irresponsible behavior if it does occur by someone in their field. By setting out expected behaviors in the form of professional ethics, professionals work together to try to uphold a good reputation. Professional ethics are commonly known as ethical business practices. Respect and honesty are the two main components of professional ethics. All employees are expected to represent a business ethically as they are a part of it. This is why businesspeople traditionally speak of "we" or "us" rather than the more personal "I" for the most part. For instance, if an employee must mention company policy to a customer, he or she may say "I'm sorry, but this is our company policy in these situations." Policies are another type of preferred standards in how business is done, and everyone in a company is expected to represent them. (taken from online website)

1. Why Do Professional Organizations Have a Code of Ethics?

Businesses and other organizations can benefit in many ways from having a code of ethics. Establishing an ethics code can help businesses comply with governmental regulations, comp...

http://www.ehow.com/about_6563459_do-professiona.....

2. What is Code of Professional Ethics?

Authoritative statement regarding the rules of conduct for certified public accountants in performing their functions, the American Institute of Certified Public Accountants (alcpa...

http://www.answers.com/topic/code-of-professiona.....

3. What is Professional Ethic?

Professional ethic is the system of moral standards by which one uses in the line of work or their career. It is your behavior that is above board.

http://answers.ask.com/Society/Philosophy/what i....

Briefly describe YOUR professional code of ethics. Next, identify how YOU will locate and discuss professional ethics with your agency (internship) supervisor and then describe a "hypothetical" situation that would *test* your ability to adhere to your organization's ethical standards of practice.

Please use front sides of paper only to expedite grading. This "final" will be placed in your portfolio when you pick it up (Friday or Tuesday before graduation)



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Ethics Self-Assessment

Purpose of the Ethics Self-Assessment

Affiliates of the American College of Healthcare Executives agree, as a condition of membership, to abide by ACHE's <u>Code of Ethics</u>. The <u>Code</u> provides an overall standard of conduct and includes specific standards of ethical behavior to guide healthcare executives in their professional relationships.

Based on the *Code of Ethics*, the Ethics Self-Assessment is intended for your personal use to assist you in thinking about your ethics-related leadership and actions. *It should not be returned to ACHE nor should it be used as a tool for evaluating the ethical behavior of others*.

The Ethics Self-Assessment can help you identify those areas in which you are on strong ethical ground; areas that you may wish to examine the basis for your responses; and opportunities for further reflection. The Ethics Self-Assessment does not have a scoring mechanism, as we do not believe that ethical behavior can or should be quantified.

How to use this self-assessment

We hope you find this self-assessment thought-provoking and useful as a part of your reflection on applying the ACHE *Code of Ethics* to your everyday activities. You are to be commended for taking time out of your busy schedule to complete it.

Once you have finished the self-assessment, it is suggested that you review your responses, noting which questions you answered "usually," "occasionally" and "almost never." You may find that in some cases an answer of "usually" is satisfactory, but in other cases such as when answering a question about protecting staff's well-being, an answer of "usually" may raise an ethical red flag.

We are confident that you will uncover few red flags where your responses are not compatible with the ACHE *Code of Ethics*. For those you may discover, you should use it as an opportunity to enhance your ethical practice and leadership by developing a specific action plan. For example, you may have noted in the self-assessment that you have not used your organization's ethics mechanism to assist you in addressing challenging ethical conflicts. As a result of this insight you might meet with the chair of

the ethics committee to better understand the committee's functions, including case consultation activities, and how you might access this resource when future ethical conflicts arise.

We also want you to consider ACHE as a resource when you and your management team are confronted with difficult ethical dilemmas. In the About ACHE area, you can access an Ethics Toolkit, a group of practical resources that will help you understand how to integrate ethics into your organization. In addition, you can refer to our regular "Healthcare Management Ethics" column in *Healthcare Executive* magazine, and you may want to consider attending our annual ethics seminar.

Please check one answer for each of the following questions.

Almost Never/Occasionally/Usually/Always/Not Applicable

I. Leadership

	ous, consistent lers to achievin		te management tion's mission.	actions to
Almost Never	Occasionally	Usually	Always	N/A
To come of the company of the compan				
I place commu	ınity/patient ber	nefit over my p	ersonal gain.	
Almost Never	Occasionally	Usually	Always	N/A
	role model for Occasionally	ethical behavio	or. Always	N/A
	re that decisions cessity, not only		to care are base to pay.	ed primarily
Almost Never	Occasionally	Usually	Always	N/A
[*]				
My statements	and actions are	consistent wi	th professional e	thical

standards, including the ACHE Code of Ethics.

Almost Never	Occasionally	Usually	· Always	N/A
•	s and actions are infuse the issues		when circumsta	nces would
Almost Never	Occasionally	Usually	Always	N/A
I advocate eth medical staff.	ical decision ma	king by the bo	ard, manageme	nt team and
Almost Never	Occasionally	Usually	Always	N/A
	k*****			[]
I use an ethica	l approach to co	nflict resolutio	on.	
Almost Never	Occasionally	Usually	Always	N/A
	ncourage discus: inancial Issues.	sion of the eth	ical aspects of	
_	Occasionally	Usually	Always	N/A
			F	F
	- Annual Control of the Control of t			
I initiate and p	romote discussio	n of controve	rsial issues affec	ting
community/pat	ient health (e.g.			
	the end of life).	M	A1	N1/A
Almost Never	Occasionally 	Usually	Always	N/A
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	candidly explain mic trends and e			enolaers
Almost Never	Occasionally	Usually	Always	N/A
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Almost Never	Occasionally	Usually	Always	N/A
When an ethic in finding an e	al conflict confro ffective resolutio	nts my organi n process and	zation or me, I a ensure it is folk	am success owed.
Almost Never	Occasionally	Usually	Always	N/A
			<u> </u>	
I demonstrate	respect for my o	colleagues, sup	periors and staff	
Almost Never	Occasionally	Usually	Always	N/A
	£****			
I demonstrate my actions. Almost Never	my organization Occasionally	's vision, miss Usually	ion and value st Always	atements II
	[]			
I make timely politically risky	decisions rather choices.	than delaying	them to avoid d	lifficult or
Almost Never	Occasionally	Usually	Always	N/A
I seek the advi challenging dec	ce of the ethics	committee wh	en making ethic	ally
Almost Never	Occasionally	Usually	Always	N/A
My personal e single organiz	expense report ration.	s are accurat	e and are only	billed to
Almost Never	Occasionally	Usually	Always	N/A
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I openly suppo an ethics com	ort establishing a mittee or progra	and monitoring m) to support	internal mecha ethical decision	nisms (e.g., making.
Almost Never	Occasionally	Usually	Always	N/A
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	consider decisio o a person or a (ng a promise on e.	benair or the
Almost Never	Occasionally	Usually	Always	N/A
II. Relationsh	nips			
Community				
			ment as a guldir irts on behalf of	
Almost Never	Occasionally	Usually	Always	N/A
	2			
I personally de problems.	vote time to dev	veloping soluti	ons to communi	ty health
Almost Never	Occasionally	Usually	Always	N/A
I participate in time to commu		my manageme	ent team to devo	ote personal
Almost Never	Occasionally	Usually	Always	N/A
Patients and Th	eir Families			

I use a patien	t- and family-ce	ntered approa	ch to patient car	e.
Almost Never	Occasionally	Usually	Always	N/A
I am a patient	advocate on bo	th clinical and	financial matter	s,
Almost Never	Occasionally	Usually	Always	N/A
I ensure equit group or payo		of patients reg	ardless of socio-	economic
Almost Never	Occasionally	Usually	Always	N/A
			S. S	No.
I recease the r	aracticae and cus	tome of a dive	erse patient popi	ulation while
	ne organization's		crac patient pop	
Almost Never	Occasionally	Usually	Always	N/A
			s and personal a its are unaccepta	
Almost Never	Occasionally	Usually	Always	N/A
I protect patie information ab	nts' rights to autoout their illness	tonomy, clinica es, treatment (al efficacy, and f options, and rela	ull ited costs.
· Almost Never	Occasionally	Usually	Always	N/A
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I promote med this confidentia		dentiality and	do not tolerate	breaches of
Almost Never	Occasionally	Usually	Always	N/A
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Board

	ine system in Id reveal poter		of interest.	make full
Almost Never	Occasionally	Usually	Always	N/A
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Almost Never	Occasionally	Usually	Always	N/A
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	the board focus		issues of importa ders.	ance to the
Almost Never	Occasionally	Usually	Always	N/A
			<u> </u>	
indicators.	rd appropriately Occasionally	Informed of p	atient safety and Always	d quality N/A
those where or incompatible.	ganizational and	d community in	ation issues, par nterests may app	pear to be
Almost Never	Occasionally	Usually	Always	N/A
	linical malpracti		ut issues of alleg al litigious situat	
Almost Never	Occasionally	Usually	Always	N/A

Colleagues and Staff

Ethics Self-Assessment Page 8 of 12

I foster discus	sions about ethi	cal concerns w	then they arise.	
Almost Never	Occasionally	Usually	Always	N/A
5				[- 1
I maintain con	fidences entrus	ted to me.		
Almost Never	Occasionally	Usually	Always	N/A
				F
• .1	11	-1t! I		-11-1
	ny form of staff		organizational p	olicies zero
Almost Never	Occasionally	Usually	Always	N/A
	scussions about code of ethics a		for the impleme ments.	ntation of the
Almost Never	Occasionally	Usually	Always	N/A
I fulfill the pror	nises I make.			
Almost Never	Occasionally	Usually	Always	N/A
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*				
•	of views differe		A l	NI / A
Almost Never	•	Usually	Always	N/A
I am respectful education or jo		ho differ from	me in ethnicity,	gender,
Almost Never	Occasionally	Usually	Always	N/A
			-	

Almost Never	Occasionally	Usually	Always	N/A
I ownest and h	old staff account	able for adhe	rence to our ora	anivation'
	ds (e.g., perform			umzacion :
Almost Never	Occasionally	Usually	Always	N/A
	that incompeten s regarding mar			and make
Almost Never	Occasionally	Usually	Always	N/A
I ensure adhere patients and st Almost Never		elated policies Usually	and practices af Always	fecting N/A
patients and st Almost Never	aff. Occasionally	Usually	Always	N/A
patients and st Almost Never	aff. Occasionally to employees whese concerns.	Usually	Always	N/A
patients and st Almost Never The sensitive in the sensit	aff. Occasionally to employees whese concerns.	Usually	Always Concerns and f	N/A
patients and st Almost Never I am sensitive tresolution of th Almost Never	aff. Occasionally to employees whese concerns. Occasionally use of organizarogram) and oth	Usually no have ethica Usually	Always I concerns and f Always I always	N/A acilitate N/A

I act quickly and decisively when employees are not treated fairly in their

relationships with other employees.					
Almost Never	Occasionally	Usually	Always	N/A	
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	only to official d f of my family, f		ot ask them to a clates.	ssist me with	
Almost Never	Occasionally	Usually	Always	N/A	
				<u>[**</u> -]	
	and clinical/bus nal standards, ir		accountable for behavior.	compliance	
Almost Never	Occasionally	Usually	Always	N/A	
Clinicians					
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When probler receive prom Almost Never	pt attention ar	clinical care, I nd resolution Usually	ensure that the that the the the the the the the the the th	he problems sible parties. N/A	
receive prom	pt attention ar	nd resolution	by the respons	sible parties.	
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I insist that my with our vision practice.	pt attention and Occasionally organization's mission, value	nd resolution Usually Clinical practice statements ar	Always Always guidelines are and ethical standa	sible parties. N/A Consistent ards of	
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I insist that my with our vision practice. Almost Never	pt attention and Occasionally organization's, mission, value Occasionally wariations in cally actions that	usually clinical practice statements ar Usually Usually re suggest qua serve patients	Always e guidelines are not ethical standa Always lity of care is at interests.	sible parties. N/A Consistent ands of N/A Stake, I N/A	

I insist that participating clinicians and staff live up to the terms of

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managed care	contracts.			
Almost Never	Occasionally	Usually	Always	N/A
I encourage cl occur.	inicians to acces	s ethics resou	rces when ethica	al conflicts
Almost Never	Occasionally	Usually	Always	N/A
needs and app	source allocatio ropriately balan /clinical resource	ces patient ne	able, is based or eds and	clinical
Almost Never	Occasionally	Usually	Always	N/A
To the state of th				
I expeditiously necessary action his/her clinical	on when I believ	v deal with imp ve a clinician is	paired clinicians a not competent	and take to perform
Almost Never	Occasionally	Usually	Always	N/A
		[F. v.]		
	old clinicians acc zation's ethical ¡		dhering to their	professiona
Almost Never	Occasionally	Usually	Always	N/A
(· · · · ·				
Buyers, Payors	and Suppliers			
I negotiate and	expect my mai	nagement tear	n to negotiate in	good faith.
Almost Never	Occasionally	Usually	Always	N/A

	I am mindful o wrongdoing, o	of the importanc onflict of interes	e of avoiding e st, or interferen	ven the appearace ce with free cor	ance of npetition.
	Almost Never	Occasionally	Usually	Always	N/A
	7.7				
	clinicians to di	sclose and expe sclose any possi elationships witl	ble conflicts of	interests before	
•	Almost Never	Occasionally	Usually	Always	N/A
	[45]				
		iliarity and comp tionships with b Occasionally			cies N/A
	I set an examp gifts from supp Almost Never		my organizatio Usually	n by not accept Always	ing personal N/A
				·	

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CORE VALUES ASSESSMENT

Your values are your GPS navigation system for life. Getting them defined and properly calibrated is one of the most important steps in redirecting your life toward your grandest vision. The below series of questions will help you evaluate and refine what is truly important to you and what matters most in life. Answer each question thoughtfully, and then I will help you select the top half-dozen values for your life.

Who is the person I respect most in life? What are their core values?			
Who is my best friend, and what are his/her top three qualities?			
If I could have more of any one quality instantly, what would it be?			
What are three things I hate? (e.g., cruelty to animals, credit card companies, deforestation, etc.)			
Which three people in the world do I dislike the most and why?			
Which personality trait, attribute or quality do people compliment me on the most?			
What are the three most important values I want to pass on to my children?			

If I were to teach a graduating high-school class value	es that would give them
the best opportunity for success in life, what would t	hose be and why?
A A A A A A A A A A A A A A A A A A A	
•	
If I had enough money to retire tomorrow, what value	es would I continue to hold?
What where do I are being valid 100 years from now	2
What values do I see being valid 100 years from now?	i
The top dozen qualities of the "ideal" man or woman:	:
1 1	
1	
Now take a look at your answers above. Do you n	notice any reoccurring themes? Taking what you've observed in
others, what others have observed about you, who	at you want for others, and things you would fight for or against,
create a list of your top 10 values (in any order) b	
, -	
Гор 10 Values:	
	6
2.	7
	8
	9
5	10

Now, let's reduce it down to the half-dozen most important to you. Put a star by the values you're sure about. Then take the ones you feel are important but aren't sure if they're top-six material and put them in pairs. Think about two of those values side by side, and ask yourself which of the two is more important, eliminating the other. Keep pitting the survivors against each other until you're down to six. If some of the values you listed are just two words describing the same idea, combine them.

Top 6 Values	s :						
1			4.				
2	***************************************						
3			6,	6,			
Now prioritiz	a vour cora value	us in audor of im	nortongo with th	aa maat immanta	nt first. All are impe		
			·='	-	-		
course, but w	hich are the most	: important? If y	ou had to choose	between two va	lues, which would	you fight for, o	
even die defer	nding? Now which	h are your top t	hree?				
MYTOP 3 VA	ALUES IN LIFE	ARE.					
		•					
				***************************************	<u></u>		
3	- *************************************		·····				
M Y							
	ger of Values	0 41			0.1		
Abundance Acceptance	Cheerfulness	Creativity	Expressiveness	Humility	Order	Responsibility	
Accountability	Clarity Cleanliness	Curiosity	Fairness Faith	Humor	Organization	Righteousness	
Accomplishment	Collaboration	Daring Decisiveness	Fame	Imagination	Originality	Risk-taking	
Accuracy	Longevity	Delight		Independence Influence	Outcome	Romance	
Achievement	Love	Dependability	Family Fidelity		orientation	Safety	
Acknowledgement	Loyalty	Desire	Flexibility	Ingenuity	Outstanding service Passion	Security Selflessness	
Adaptability	Love	Determination	Flow	Inner peace Innovation	Peace	Self-esteem	
Adventure	Making a difference	Devotion	Focus	Insightfulness		Seriousness	
Affection	Mastery	Dignity	Forgiveness	Inspiration	Perceptiveness Perseverance	Service	
Aggressiveness	Maturity	Diligence	Fortitude	Integrity	Persistence	Simplicity	
Agility	Comfort	Discipline	Freedom	Intelligence	Personal growth	Sincerity	
Alertness	Commitment	Discovery	Friendship	Intensity	Pleasure	Skill	
Ambition	Communication	Discretion	Frugality	Intimacy	Poise	Speed	
Anticipation	Community	Diversity	Fun	Intuitiveness	Positive attitude	Spirit	
Appreciation	Compassion	Drive	Generosity	Inventiveness	Power	Stability	
Assertiveness	Competence	Duty	Giving	Investing	Practicality	Strength	
Attentiveness	Competition	Eagerness	Going the extra	Joy	Precision	Style	
Audacity	Concentration	Education	mile	lustice	Preparedness	Systemization	
lwareness	Confidence	Effectiveness	Goodness	Kindness	Presence	Teamwork	
Balance	Connection	Efficiency	Grace	Knowledge	Preservation	Timeliness	
Beauty	Consciousness	Elation	Gratitude	Leadership	Privacy	Tolerance	
Belonging	Consistency	Elegance	Growth	Learning	Proactivity	Tradition	
Hissfulness	Contentment	Empathy	Guidance	Liberty	Progress	Tranquility	
Boldness	Content over fluff	Encouragement	Happiness	Logic	Prosperity	Trust	
Bravery	Continuity	Endurance	Harmony	Meaning	Punctuality	Truth	
Brilliance	Continuous	Energy	Hard work	Merit	Quality	Unity	
Calm	Improvement	Enjoyment	Health	Mindfulness	Quiet	Variety	
Candor	Contribution	Enthusiasm	Helpfulness	Modesty	Rationality	Well-being	
Carefulness	Control	Equality	Heroism	Money	Recognition	Wisdom	
aring	Conviction	Excellence	Holiness	Motivation	Relationships	•	
Certainty	Convincing	Excitement	Honesty	Nonviolence	Reliability		
Challenge Change	Cooperation	Experience	Honor	Openness	Religion		
hange	Courage	Expertise	Hopefulness	Opportunity	Resourcelulness		
harity	Courtesy	Exploration	Hospitality	Optimism	Respect		