



8600 W. Bryn Mawr Ave. • Suite 710 N. • Chicago, IL 60631  
CE@nahq.org • www.nahq.org

## Program Outline

**Program Title:**

**Date of Program:**

<b>Learning Outcomes</b>
In the space below, list up to five (5) learning outcomes for the program. Learning outcomes are actions you expect participants to be able to do successfully by the end of the program.
<i>Example: Participants will be able to define value management.</i>
1. Participants will be able to
2.
3.
4.
5.

<b>Topics</b>	<b>CPHQ Content Outline</b>	<b>Delivery Method</b>	<b>Faculty</b>	<b>Time</b>
List each topic that will be covered. (Add more rows as needed.)	List the corresponding area of the <a href="#">CPHQ Content Outline</a> to which the topic relates.	List the delivery method that will be used to present each topic.	Name the presenter(s) who will cover each topic.	State time, in minutes, that will be spent on each topic.
<i>Example: Define value management; address its connection to balanced scorecards</i>	<i>Example: 1.B.1. Assist in developing organizational measures (e.g., balanced scorecards, dashboards)</i>	<i>Example: Lecture, Slides</i>	<i>Example: Mary Doe, PhD</i>	<i>Example: 30 min</i>
	Assist in	<input type="checkbox"/> Lecture <input type="checkbox"/> Panel Discussion <input type="checkbox"/> Small Group <input type="checkbox"/> Discussion <input type="checkbox"/> Slides <input type="checkbox"/> Video <input type="checkbox"/> Internet <input type="checkbox"/> Other:		

		<input type="checkbox"/> Lecture <input type="checkbox"/> Panel Discussion <input type="checkbox"/> Small Group <input type="checkbox"/> Discussion <input type="checkbox"/> Slides <input type="checkbox"/> Video <input type="checkbox"/> Internet <input type="checkbox"/> Other:		
		<input type="checkbox"/> Lecture <input type="checkbox"/> Panel Discussion <input type="checkbox"/> Small Group <input type="checkbox"/> Discussion <input type="checkbox"/> Slides <input type="checkbox"/> Video <input type="checkbox"/> Internet <input type="checkbox"/> Other:		
		<input type="checkbox"/> Lecture <input type="checkbox"/> Panel Discussion <input type="checkbox"/> Small Group <input type="checkbox"/> Discussion <input type="checkbox"/> Slides <input type="checkbox"/> Video <input type="checkbox"/> Internet <input type="checkbox"/> Other:		
		<input type="checkbox"/> Lecture <input type="checkbox"/> Panel Discussion <input type="checkbox"/> Small Group <input type="checkbox"/> Discussion <input type="checkbox"/> Slides <input type="checkbox"/> Video <input type="checkbox"/> Internet <input type="checkbox"/> Other:		