



Program Review - Instructional Program Plan

Program Title: Medical Assisting

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Executive Summary

Please summarize your program's strengths, opportunities/challenges, and action plans. This information will be presented to the Board of Trustees. (1000 word limit)

The mission of the Medical Assisting Program at Cañada College is to provide education and training directed towards career development in cooperation with the medical community in order that students may achieve gainful employment in healthcare, to advance in current employment positions, and to update skills in order to maintain current employment.

The Medical Assisting Department goals for each academic year include expanding the advisory board when necessary experts are needed, review and update curriculum, certificates, and degree offered with assistance from advisory board in order to meet the needs of the medical community. The Medical Assisting courses are all taught by dedicated, experienced adjunct faculty members. There are no full time faculty members in the department at this time due to the expertise that each faculty member brings to the team. Each professor participates in promoting the program throughout San Mateo County. An ongoing goal for the Medical Assisting Department is to provide a steady stream of medical administrative assistants, medical coding specialists, medical assistants, and medical billing specialists to the workforce. While statistics show an increasing need for allied health care professionals there is a difference between need and what health facilities can afford.

The entire faculty works closely in securing guest speakers, externship sites, and employer outreach. It is imperative to have close contact with the medical community to assure that the program stays up-to-date with changes in the field and to keep the program in the public eye. The Medical Assisting Advisory Committee continues to strengthen and there are more partnerships with potential employers.

The Medical Assisting Program contributes to the mission of the College and District by:

- a) Providing up-to-date quality instruction for student learning and success.
- b) Offering course work leading to the four Medical Assisting certificates and or an Associate of Science Degree, as well as elective courses to enable students to transfer to the California State University system or four year private institutions.
- c) Providing health career education and training to meet medical community needs for first time students, continuing students, returning students, as well as individuals who need to update their skills for a promotion and or career change.



- d) Recruiting students from all ethnic, age, gender, and economic groups.

Program Context

1. Mission: Please identify how your program aligns with the college's mission by selecting the appropriate check box(es):

X Career Technical Basic Skills Transfer Lifelong Learning

If your program has a mission statement, include it here.

The mission of the Medical Assisting Program at Cañada College is to provide education and training directed towards career development in cooperation with the medical community in order that students may achieve gainful employment in healthcare, to advance in current employment positions, and to update skills in order to maintain current employment.

2. Articulation: Describe how your program's articulation may be impacted by changes in curriculum and degree requirements at high schools and 4-year institutions. Describe your efforts to accommodate these changes.

The Medical Assisting program has always sought to remain in compliance with changes. We have always accepted articulation with MEDA 100 – Introduction to Medical Assisting with any high school that offers courses in Allied Health Careers. There is no 4-year program for medical assisting. Our students who want to go on to 4-year institutions enter nursing programs. We have maintained the quality and integrity of our program so that every medical assisting student has priority in nursing programs.

3. Community and Labor Needs: Describe how changes in community needs, employment needs, technology, licensing, or accreditation affect your program. CTE programs should identify the dates of their advisory group meetings.

There is no licensing or accreditation of medical assistants for our program. We are in constant contact through Advisory Committee and contact with externship sites, We constantly update our curriculum to meet these needs. Our Advisory Committee meets in December and April. Next meeting is April 13, 2015. The greatest medical community need has been in personality needs (common manners) referred to as "concierge".



Looking Back

4. Curricular Changes: List any significant changes that have occurred in your program's curricular offerings, scheduling, or mode of delivery. Explain the rationale for these changes.

There have been no significant changes, but to continually address the "soft skills" (communication skills) required. We have incorporated this in every course in our curriculum.

5. Progress Report: Provide your responses to all recommendations received on your last program review and report on progress made on previous action plans and toward your strategic goals.

Link: [2013-2014 Program Plan and Feedback forms](#)

Our program reviews have not been incomplete. We have continued to expand our externship sites as they have gone under masses reforms and changes. Each instructor has extended personal tutoring on Tuesdays and Thursdays as most students work or have child care issues on other days of the week and cannot go to the Learning Center. We have added 26 hours of personal tutoring for those students.

6. Impact of resource allocations: Describe the impact to-date that each new resource (staff, non-instructional assignment, equipment, facilities, research, funding) has had on your program and measures of student success.

Resource allocations have not affected our program. We continue to provide our students with what they need to be successful.

Current State of the Program

Data packets link <http://www.canadacollege.edu/programreview/datapackets1314.php>

7. Connection & Entry:

- A. Observation: Describe trends in program and course enrollments, FTES, LOAD and Fill Rates. Cite quantitative data and specific tables from the data packets.

It is impossible to describe trends as there are only 14 sections per semester and 28 per academic year in the Medical Assisting Program not 43. We have no control or knowledge of the Academy and any off-site classes versus the regular program and thus do not know the breakdown.

Enrollment Patterns & Course Offerings & Department Efficiency

The FTES has remained consistent throughout the semesters from 34 to 40. The yearly Load rate for the last three years has fluctuated between 340 and 382. Department efficiency rate is usually lower than College average in part due to limited seating in some classrooms and the RN/student ratio governed by liability. Maximum enrollment is the least accurate because of the different classroom sizes. The Fill Rate during the years of high unemployment was in the 80 percentile and now as employment rates increase there has been a downward trend ranging from 70 to 72

percent. Because we are a program, if students leave due to work, childcare, pregnancy, and illness the subsequent advanced classes have a lower enrollment. The other factor that effects enrollment is that medical assistants are the lowest paid of allied health careers. Some students enter our program while waiting to be accepted into other allied health programs, primarily nursing and rad tech, and often leave before finishing.

- B. Evaluation: What changes could be implemented, including changes to course scheduling (times/days/duration/delivery mode/number of sections), marketing, and articulation that may improve these trends?

We have ascertained the best schedule to meet student needs, we do marketing through the medical community and public areas, but there needs to be more on the College level.

8. Progress & Completion:

- A. Observation: Describe trends in student success and retention disaggregated by: ethnicity, gender, age, enrollment status, day/evening. Cite quantitative data and specific tables from the data packets.

Retention and Success by Ethnicity

The rate is in the mid to high 80s and low 90s which is excellent considering the high standards dictated by the medical community and the fact that many of our students work and are parents. The lowest rate is for African American, but we can only address those in our regular program. The barrier here is absenteeism, lack of transportation, health issues, lack of time to devote to studies. We make every effort to try to help them resolve problems.

Retention and Success by Gender

The rate for female and males has fairly equal from the mid to high 80s to low 90s. In the last year (2013-14) males have dropped a bit lower due to returning to former jobs or new jobs.

Retention and Success by Age

The rate for all age categories is excellent from mid 80s to low 90s. We have quite a broad age range because the medical community prefers mature adults. The 18-22 range is the lower from low to mid 80s. Again, the maturity level and life experience plays an important factor.

Retention and Success by Enrollment Status

It's hard to believe the outstanding percentages up to 100 percent. The First-Time Student categories are the highest from 88 to 100 percent. Continuing and Return Student categories are lower from low 80s to high 80s. This is due to getting into other programs, finding jobs, and this category tends to be older and have more childcare, health, and caregiver issues.

- B. Observation: For online courses describe any significant differences in the success and retention of students who are taking online courses compared to face-to-face courses.

The medical community does not support online courses.

- C. Evaluation: Based on these trends, what do you feel are significant factors or barriers influencing student success in your courses and program? What changes (e.g. in curriculum, pedagogy, scheduling, modality) could be implemented to improve these trends?

The barrier influencing student success is English level of competency. In the medical field English requirement is much higher than other areas. Medical Assisting student must realize that medical facilities will test to college level English, regardless of what courses they have completed.

In all administrative classes (regular program) course materials have been added to provide a review of grammar, spelling, and punctuation.

Faculty also does personal tutoring.

9. SLO Assessment:

<https://smccd.sharepoint.com/sites/can/CANSLOAC/default.aspx>

- A. Are all course SLOs being systematically assessed at least once/4 years? Describe the coordination of SLO assessment across sections and over time.

All SLOs for every course are assessed every semester. We do this because we need to assess in order to address problems.

- B. Summarize the dialogue that has resulted from these assessments. What are some improvements in your courses that have been implemented through SLO assessment? How has student learning been improved by changes in teaching? Cite specific examples.

The assessments have revealed lack of English skills and students simply never returning to class. To address the problems we have incorporated the personal tutoring sessions by instructors as previous outlined.

10. PLO Assessment:

[PLO Assessment link https://smccd.sharepoint.com/sites/can/prie/_layouts/15/start.aspx#/](https://smccd.sharepoint.com/sites/can/prie/_layouts/15/start.aspx#/)

- A. Describe your program's Program Learning Outcomes assessment plans and results of direct and indirect assessments.

We do PLO assessments every academic year for each PLO. This documentation is based upon evaluations from externship sites, Advisory Committee feedback, medical community input, students already employed who are increasing their skills or maintaining their jobs by updating their skills. We have achieved outstanding results in all these areas.



B. Summarize the major findings of your program’s PLO assessments. What are some improvements that have been, or can be, implemented as a result of PLO assessment?

Based upon our feedback, we implemented any changes necessary. This have primarily been soft skill (communications skills).

Looking Ahead

11. Strategic goal & action plans:

How will you address the opportunities for improvement that you identified above in Articulation, Community & Labor Needs, Connection & Entry, Progress & Completion and PLO Assessment? Identify timelines for implementation, responsible party, and resource requirements.

Action Plan	Timeline	Responsible party	Resources required
Re-establishing Kaiser externships	Fall 2015	Victoria Clinton	None
Expanding tutorial	Spring 2016	All instructors	None
Volunteer Aides	Fall 2015	Victoria Clinton	None
Continued connection with medical community	All Semesters	All instructors	None

Complete the Resource Request form to request instructional equipment, IT equipment, facilities, professional development, research, or funding (if needed) and submit with this form to your Division Dean.

Link to resource request form <http://www.canadacollege.edu/programreview/instruction-forms.php>

There are no resource requests.