**Academic Program Review: Self-Study**

***Instructions:*** *The following pages will guide your submission of your academic program review self-study. Please type your responses directly into the document. The completed self-study instrument and all attachments must be submitted to the Academic Program Review Coordinator and your Academic Dean by September 1.*

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| **Program Under Review: Medical Assistant AAS Degree** |
| Degree(s): AAS |
| Certificate(s): NA |
| Contact Information for lead on Self-Study: Name: Susan Horn, BS, CMA (AAMA)Campus: Signal PeakPhone: (520) 494-5465Email: susan.horn@centralaz.edu |

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| **Program Description, Vision and Outcomes** |
| 1. What is the description of the program as stated in the current CAC catalog:

The Medical Assistant AAS Degree prepares entry-level Medical Assistants in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains as established by the American Association of Medical Assistants (AAMA), located at 20 N. Wacker Drive, Suite 1575, Chicago, IL 60606, 800-228-2262; aama-ntl.org This Degree includes general education requirements and prepares individuals to perform administrative and clinical procedures in ambulatory settings, including physician’s offices, clinic’s and group practice. The Medical Assistant AAS degree is accredited by the American Association of Medical Assistants (AAMA). Graduates are eligible to take the AAMA examination to become certified Medical Assistants/ CMA (AAMA) |
| 1. Does your program have a mission and/or a vision statement? If it does, please write them below and indicate where they appear.

To provide an intellectually stimulating and challenging environment where competency-based education in Medical Assistant is focused on the needs of the patient and intended to produce competent and progressive Medical Assistant professionals of the highest caliber. Website-division & programs-Health Careers- Medical Assisting |
| 1. Describe how the program’s description, mission and/or vision aligns with the College’s Mission and Vision:

**CAC Vision and Mission Statements:***OUR VISION*Central Arizona College is the leader of innovative learnersuccess and the center for educational opportunities in ourdiverse communities.*OUR MISSION*Central Arizona College engages our diverse communities inquality learning experiences for lifelong success by providingaccessible educational, economic, cultural, and personalgrowth opportunities.The Medical Assisting program’s mission/vision align with Central Arizona College because it is intended to produce competent and progressive Medical Assistant professionals of the highest caliber. We offer an intellectually stimulating and challenging environment which provides them accessible educational, economic, cultural, and personal growth opportunities. |

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| **Program Enrollment and Graduation Trends** |
| 1. Summarize the program enrollment data for the past 5 years in the chart below:

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| --- | --- | --- | --- | --- | --- |
| Degree/Certificate | 2016-17 | 2015-16 | 2014-15 | 2013-14 | 2012-13 |
| AAS | 96 | 109 | 122 | 153 | 181 |
|  |  |  |  |  |  |

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| 1. Discuss and explain the factors influencing the enrollment trends:

Main factor for the decline in enrollment was due to the illness of the previous Program Director. We are now on an upward swing with enrollment. |
| 1. How has the program typically recruited students and marketed the program?

Website and word of mouth |
| 1. Summarize the program graduation rate trends for the past 5 years in the chart below:

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| --- | --- | --- | --- | --- | --- |
| Degree/Certificate | 2016-17 | 2015-16 | 2014-15 | 2013-14 | 2012-13 |
| AAS | 3 | 10 | 10 | 21 | 9 |
|  |  |  |  |  |  |

Enrollment had decreased due to the illness of the previous program director. We are on an upward swing with having a person at both campus’s that give students an academic advisor to help with registration and class advising plans. |
| 1. How many program enrollees or graduates studied at an in-state baccalaureate level institution during the past 5 years? Put the data in the table below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Degree/Certificate | 2016-17 | 2015-16 | 2014-15 | 2013-14 | 2012-13 |
| AAS | 0 | 0 | 0 | 0 | 0 |
|  |  |  |  |  |  |

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| 1. Discuss and explain the graduation trends. What efforts has the program made to help students achieve completion?

Graduation trends are increasing. Students receive more hands-on experience through the smaller class size of 12 students. We have also implemented an increase in funds to pay for their certification exams. Our accreditation is requiring students to sit for the exam. Arizona is also implementing that medical assistants be certified to work due to the law changes with Medicaid and Medicare. We have also removed the HESI exam to give more students a chance to work in the field of medical assisting. |
| 1. Provide a summary of this section. Indicate trends observed in the data, identify areas of strengths, and areas for improvement.

Enrollment suffered when there was no one for students to get help, return phones, and have someone that would answer their questions and help them register for classes. We are finally in an upward trend with enrollment. We are in the process of going through our accreditation site visit in October. Once this has been completed, we are in the ongoing process of revamping the program to utilizing new technology and update curriculum. Making this program more competency based and bringing in new better ways of teaching Electronic Medical Records and using scenarios and roleplay to give students a more real-world experience. I am currently in talks with Education Assessment Corporation and MedTrak to elevate the program and make it more appealing to students coming in to the school. |

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| **Program Curriculum:** *Submit a completed Curriculum Comparison Chart along with the self-study, comparing the CAC program curriculum to three similar programs, for each Degree and Certificate discussed in this self-study. Ideally compare to other Arizona programs, and out of state if necessary. Use the charts to answer the following questions.*  |
| 1. Certificate(s): After reviewing the Curriculum Comparison Chart of the other institutions for the certificate(s), is insight given into courses that could be added, combined or deleted?

We do not offer a certificate program |
| 1. Degree (s): After reviewing the Curriculum Comparison Chart of the other institutions for the degree(s), is insight given into courses that could be added, combined or deleted?

Yes. It solidifies the changes I feel, needs to be done to keep us a major contender for the medical assisting program |
| 1. When the Curriculum Review for each degree and certificate comes due, are there any course descriptions, articulation, additions, revisions or deletions anticipated?

Yes |

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| **Program Outcomes and Assessment** |
| 1. What are the student learning outcomes for the degree or certificate as currently indicated in ACRES:

Upon completion of this program the students will incorporate critical thinking based on cognitive knowledge in performance of psychomotor (skills) and affective (behavior) domains in their practice as medical assistants in the following areas: 1. General Education competencies applied to the following: A.(Evaluation Level) Correlate the knowledge acquired in the general education courses to medical assistant concepts and practice. (CSLO#4) 2. Foundation for Clinical Practice: Provide patient care applied to the following: A. (Application Level) Using knowledge of anatomy and physiology, perform the following tests: vital signs, venipuncture, capillary puncture, pulmonary function testing, ECG, patient screening, administration of oral and parenteral medications, quality control measures, CLIA waived hematology, chemistry, urinalysis and immunology testing while demonstrating respect for patient diversity. (CSLO#2) B. (Evaluation Level) Using knowledge of applied mathematics, prepare and verify proper doses of medication for administration, maintain laboratory test results using flow sheets, distinguish normal and abnormal test results, nutritional values, and maintain growth charts. (CSLO#4) C. (Synthesis Level) Using knowledge of microbiology/infection control, practice standard precautions using appropriate barrier/personal protective equipment, hand washing, sterilization techniques, and specimen collection and testing while showing awareness of patient rights, feelings and concerns. (CSLO#2) 3. Applied Communications competencies applied to the following: A. (Analysis Level) Use concepts of effective verbal, nonverbal and written communications to analyze appropriate means of effective communication with patients verbally, nonverbally and in documentation of patient care. (CSLO#4) 4. Medical Business Practices competencies applied to the following: A. (Synthesis Level) Using knowledge of administrative functions, manage scheduling and organization of patient medical records using electronic health care records and hardware and software to maintain office system while incorporating time management principles to maintain effective office functions. (CSLO#2) B. (Analysis Level) Using knowledge of basic practice finances, apply basic bookkeeping procedures to manual and computerized systems used in ambulatory health care with implementation of time management principles to maintain effective office functions. (CSLO#4) C. (Application Level) Using knowledge of managed care and insurance and procedural and diagnostic coding, apply these policies and procedures to implementing both managed care and insurance plans using third party guidelines and using effective communication with patients and managed care and insurance providers. (CSLO#2) 5. Medical Law and Ethics competencies applied to the following: A. (Synthesis Level): Integrate knowledge of appropriate local, state and federal health care legal and ethical regulations and laws in providing patient care, practice within the standard of care and scope of practice for a medical assistant, apply HIPAA rules in regard to confidentiality, privacy and release of information, accurately document information and demonstrating sensitivity to patient rights. (CSLO#2) 6. Safety and Emergency Practices competencies applied to the following: A. (Analysis Level) Using knowledge of safety and emergency practices, apply quality control measures in following health and safety policies and procedures to prevent illness and injury including recognition of the effects of stress on all persons involved in emergency situations. (CSLO#4) (\*All of the Learning Outcomes listed are based on the Medical Assisting Education Review Board (MAERB) of the American Association of Medical Assistants (AAMA) Appendix B Core Curriculum for Medical Assistants 2015 Curriculum Plan.)  |
| 1. Are the outcomes from your program determined or influenced by any external organization, agency, or accreditor? If so, please explain. Are there any available accreditations which the program does not have, but maybenefit from seeking?

Yes, we must abide by the governing board MAERB (Medical Assistant Education Review Board) and AAMA (American Association of Medical Assistants). To remain accredited, we must abide by their standards and policies. We also offer AMT (American Medical Technicians) to offer the RMA (Registered Medical Assistant) |
| 1. Describe the department/program strategies for determining how learning outcomes are assessed using direct and indirect methods and for collecting, analyzing and discussing findings.

 The MA program is assessed using Cognitive (Knowledge), Psychomotor (Skills), and Affective (Behavior) competencies. All soft skills and hard skills are evaluated per each cohort. We also have surveys that the students complete after their practicum is finished; College resources, practicum site experience, graduate and employer surveys. Each survey is divided into cognitive, psychomotor, and affective competencies. A spreadsheet is kept documenting all information collected. All surveys and documentation are kept showing compliance to MAERB, CAAHEP, and AAMA |
| 1. Is a common assessment being conducted to assess the Measurable Student Learning Outcomes (MSLOs) for a common course? Is there data which indicates the degree to which students in the program are achieving the program’s MSLOs?

Testing is done using the cognitive competencies. This provides the information used to assess the MSLOs in each course. |
| 1. Is there data which indicates the degree to which students in the program are achieving the program’s Common Student Learning Outcomes (CSLOs)? Please share and explain the data.

**The four Common Student Learning Outcomes are:**1. Cultural and Civic EngagementParticipate in diverse environments while demonstrating global citizenship and social consciousness2. Integrative KnowledgeIdentify, comprehend, apply and synthesize facts, concepts, theories and practices across broad and specialized knowledge areas3. Personal and Professional SkillsDemonstrate skills which enhance personal and professional development4. Reasoning SkillsInquire and analyze to solve problems, draw logical conclusions, or create innovative ideasEach of the four (4) CSLOs are achieved by following the standards and policies set forth by MAERB. Students must achieve and pass each competency to move on to the next skills class. They are unable to graduate if they don’t achieve mastery which is 70% cognitive (knowledge), 100% psychomotor (skills), and 100% affective (behavior). These rules are set forth by MAERB and must be followed.  |
| 1. Discuss how the program has used MSLO and CSLO assessment results to improve instruction and/or student learning over the past 5 years. Summarize actions taken based on assessment of student learning findings.

MSLO and CSLO is used to monitor how students are doing within the program. We have dropped the HESI exam because it had no bearing on how well the student did in the specialty classes. It is also being used to make some major changes to be utilized in the near future. |
| 1. Discuss how the program supports current or future needs for the job market in Pinal County, the state of Arizona, and/or the United States.

Medical assisting has become one of the fastest growing occupations due to the retirement of the ‘baby boomers.’ MAERB along with the AAMA have been granted international accreditation. Our students can sit for the CMA (AAMA) exam to become credentialed, then they are able to work in 161 countries. The CMA (AAMA) credential that they receive here will let them work in every state, along with 161 other countries. |
| 1. For degree programs, identify any specific in-state baccalaureate programs into which this program is particularly suited for transfer.

There are no baccalaureate programs in Arizona for medical assisting. |
| 1. Indicate if there are any articulation agreements in place for degree graduates.

We have no articulation agreements. |
| 1. Discuss how the program gets feedback on its program and curriculum from external sources, suchas advisory boards, employers, articulation task forces, accreditors, etc.

We have two (2) advisory board meetings a year. We can discuss with them their wants and needs associated with medical assistants. We also use feedback from employers to make changes within the program to produce high quality medical assistants. I also sit of the advisory board for CAVIT. This me insight on how better to serve are high school graduates. |

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| **Program Specific Resources:***In this section please focus on program specific resource. You may, but do not have to, discuss resources available to the college at large such as Blackboard, the Learning Centers, Library, etc. However, if these resources are impacting your program in a positive or negative way which you would like to discuss, please do so.* |
| 1. Discuss the adequacy of the budgetary resources, human resources, technological resources, classrooms, labs and space, academic support for students (ie: learning center, library) and student support (ie: advising) available to the program over the past 5 years:

Budgetary resources are the most difficult to manage. The use of the Perkins Grant has given us the capability to update equipment that has been needed for a while. There are still many things needed to update the medical assisting lab (more storage in the lab by adding cabinets to the walls.) Student resources has become better with each new year passing. It would be a big help to have an instructor platform with computer in the lab. It would be much easier to let them perform skills while watching a video demonstration. Being able to do small lectures between each new skill instead of moving rooms four or five times during a class. |
| 1. What future goals does the program have? Will extra resources and funding be required to achieve it?

We have many changes that we are wanting to implement. Most changes will add minimal monetary sources. We will be deleting a couple classes, dividing three of the classes into four classes, and combining two classes. We should still be at 60 credit hours and this will help with the added content that MAERB has added to the curriculum. Our hopes are to elevate the student learning outcomes, giving them a more enriched classroom experience than are receiving now. |

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| **Program Effectiveness for Graduates** |
| 1. Describe how you measure the success of degree and certificate program graduates. For example, are graduate surveys conducted? Are surveys given to employers to determine satisfaction with program graduate employees?

 Graduate surveys are obtained from all graduates. Employer surveys are also collected after a student has been employed for 6 months to a year. This information is kept in a spreadsheet to measure any changes. All surveys are used to update the MAERB ARF annually. |
| 1. If a degree or certificate is designed to lead directly into the workforce, describe the success of students in obtaining a job in the field of study upon graduation. Please provide any qualitative or quantitative data you have:

Success has been stable. At least two or three students a practicum are hired by their practicum site. I have many graduates that are continuing their education, i.e.…radiology, sonography, nursing. Those that haven’t been hired anywhere are usually the one not putting in the effort to find employment. For the most part, 70% to 90% actively look for work and are now employed at clinics throughout Pinal and Maricopa Counties. |
| 1. If your program serves to prepare a student for external certification or licensure of any kind identify the certification or license and the percentage of program graduates who earn/achieve it. Put data in the table below.

The AAMA threshold is 30% for participation and 60% threshold passage. No data for AMT. Not many students opt for this credential.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Licensure/Certification | 2016-17 | 2015-16 | 2014-15 | 2013-14 | 2012-13 |
| CMA (AAMA) | 45% | 100% | 25% | 45% | 0 |
| RMA (AMT) | 20% | 0 | 0 | 0 | 0 |

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| **Program Continuous Quality Improvement** |
| 1. Discuss how the program has used operational planning goals to achieve quality improvement over the past 5 years:

I can only vouch for the past two years. I have used the operational planning goals to accomplish improvement. We now offer the AAS degree in Medical Assisting at our Superstition Mountain Campus. The certificate has been dropped because of numbers obtained from completing a plan. We have designed a plan to help those that graduate high school, that sit and pass the RMA (AMT) exam, a way to obtain their AAS degree in Medical Assisting without having to retake the same specialty classes they took at CAVIT.  |
| 1. Describe other ways the program has engaged in continuous quality improvement

We use all of the surveys completed by graduates to make changes to the program whether it be updating equipment and/or curriculum changes. We take into account any suggestions from the advisory board to provide them with the skilled medical assistants they need for their practices. |

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| **Program Alignment with Institutional Strategic Goals:** |
| 1.Describe how the program has directly or indirectly is helping the College achieve its current strategic goals.***CAC Strategic Goals:*** 1. Ensure broad access to high-quality innovative educational programs, services and training opportunities for Pinal County residents
2. Improve student retention, persistence, completion and job placement
3. Ensure a safe, sustainable environment that promotes learning, communication, diversity and satisfaction among students, faculty and staff
4. Enhance our physical and technological infrastructure to support changes in the learning and work environment
5. Expand partnerships with Universities to provide advanced degrees to Pinal County residents
6. Obtain approval from the state and regional accreditation body to offer baccalaureate degrees at CAC
7. Optimize fiscal resources that support the needs and expectations of students and the community

Contribute to the economic vitality, workforce development, and job training needs of Pinal County and surrounding regionWe strive to offer a high-quality innovative educational program. We are constantly reviewing the program to make changes as necessary to elevate the quality. We take feedback from practicum sites to produce a higher quality medical assistant. We perform within the constraints of our accrediting body to continue making a strong program for our students. We work our publishers to learn of new technology that is being developed for teaching. I have started the process of using EAC (Education Assessment Corporation) to maintain a check and balance of all competencies that are required for MAERB. I am hoping in the fall of 2019 to change our administrative medical procedures to incorporate MedTrak. It will give the students a more real-world experience verses read a chapter do a competency. I have started a Facebook page to post any job opening for graduates. This page lets them contribute to the posting along and stay connected with their fellow graduates. Having a full-time person at SMC allows students to have a person there to help and answer any of their questions. It has been a while since there was a person there to handle any medical assistant questions or problems. Enrollment continues to climb at SMC which is a plus to the higher enrollment. They are able to obtain their AAS without traveling to SPC. |

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| **Evaluation of Program Strengths, Viability and Areas for Improvement:** |
| 1. After completing the APR Self Study, identify areas of strength and areas for improvement in the program. Is the program still a viable program? Discuss the next steps for the program and possible Action Plan Ideas.

It is still a viable program. With the changes that have been implemented so far, shows a growth in enrollment. Retention remains steady with the only students we lose are those that do not pass their cohort class HPM140. I have one student that must take a break for personal reasons and plans on continuing next fall.Improvements are in the works. I am going to delete Healthcare Law and Ethics and interpersonal skills and incorporate them more in a new medical Assisting Skills I class. Next is to divide Medical Assisting Skills I and Medical Assisting Skills II to add a Laboratory Procedures. New curriculum is being added constantly and there is not enough time to incorporate everything in to just two classes. All competencies have to be measured and passed at 100% to abide by MAERB policies and procedures. I am working on combining Pathophysiology and Pharmacology together, similar to what the nursing program offers. They have shown success in student understanding and it should do the same for the medical assisting students. I should still be able to keep the total credits the same. |