

Medical Assisting

Program Review - Comprehensive Review

2023 - 2024

2023 - 2024

Program Context

1. Mission

Share how your program contributes to the College or fits into the College's Mission. For example, what other academic programs and student/academic services does your program engage with? Examples of student/academic services include the Learning Center, Library, STEM Center, SparkPoint, Dream Center, etc. Another example, how does your program fit into any of the College's plans (such as Equity, Technology, Strategic Enrollment, etc.)? If your program has a mission statement, you may include it here.

Program Mission and Alignment with College:

The Medical Assisting Program at Cañada College is a cornerstone in our commitment to fulfilling the college's overarching mission: providing education and training for career development in close cooperation with the medical community. The program plays a pivotal role in preparing our students with the necessary skills to succeed in healthcare careers. Our mission extends to facilitating career advancement and skills updating, ensuring that our students remain competitive in the ever-evolving medical field.

Our annual goals are a testament to our dedication to continuous improvement. We emphasize curriculum and certificate updates, expanded community engagement, and advisory board collaborations. These goals keep us aligned with industry demands for medical administrative assistants, medical coding specialists, medical assistants, and medical billing specialists.

The field of medical assisting maintains its position among the fastest-growing occupations in the United States, as indicated by the United States Department of Labor, Bureau of Labor Statistics. This demand is driven by the increasing need for support personnel within medical facilities, particularly versatile medical assistants who can efficiently manage both administrative tasks (such as handling phone messages, scheduling appointments, dealing with insurance matters, and providing referrals) and clinical responsibilities (including taking vital signs, preparing examination rooms, administering injections, and more). Additionally, the ability to communicate in Spanish is often essential to effectively interact with a diverse patient population, which is especially pertinent as approximately 65% of our students in the program are Spanish-speaking.

The Medical Assisting Program plays a critical role in serving a diverse student body, including many first-generation students, single mothers, and those whose primary language is not English. The students in the program represent a wide age range, typically spanning from 20 to 60 years. For some, their initial career aspiration was to pursue the Nursing Program, but financial constraints, time commitments, and, occasionally, academic challenges have led them to reassess their academic path. Many of our students successfully complete the Medical Assisting Program, secure employment in the field, and simultaneously work on fulfilling prerequisites for the Nursing Program. With the benefit of age and experience, they re-enter the educational journey better prepared for the rigor of the Nursing Program. The Medical Assisting Program serves as an invaluable entry point for these students, allowing them to explore their passion for healthcare and determine if a career in medicine is the right fit for them.

Top of Form

The faculty of the Medical Assisting Program demonstrates an unwavering dedication to the success of all our students. Our instructors are motivated by their commitment to providing exceptional teaching and learning experiences, as well as their aspiration to adapt to the evolving needs of our students. The primary objective of the faculty and staff within the Medical Assisting Program is for this commitment to

excellence and the pursuit of student success to be palpable to our students and mirrored in their accomplishments.

2. Articulation

Are there changes in curriculum or degree requirements at high schools or 4-year institutions that may impact your program? If so, describe the changes and your efforts to accommodate them. If no changes have occurred, please write "no known changes."

In response to changes introduced by AB 705, the program is actively working to ensure equitable access to education by identifying and addressing hidden prerequisites. Strategies include a comprehensive curriculum review, gathering student feedback, creating early intervention systems, offering online resources, and enhancing academic advising. Transparent degree maps, flexible scheduling, bridge programs, feedback mechanisms, and financial support further support our students' success.

While there isn't a direct 4-year program for medical assisting, we've established pathways for students interested in further education, enabling seamless transitions to fields like nursing. Collaborative articulation agreements with high schools offering Allied Health Careers courses facilitate an efficient path for high school students.

Community & Labor Needs:

Our program aligns with the ever-evolving landscape of healthcare. With the ongoing COVID-19 pandemic, we recognize the increased demand for healthcare professionals. This demand is attributed to several factors, including an aging population, a growing emphasis on primary care, expanding healthcare access, technological advancements, and changes brought on by the pandemic.

To tackle the challenges and changes in healthcare, the Medical Assisting Program has adapted by incorporating innovative teaching methods, telehealth training, virtual learning resources, remote and hybrid learning options, and simulation-based training. We have been creative in our approach to maintain academic standards while prioritizing the well-being and safety of our students.

The program is designed to provide not just clinical and administrative skills but also instill soft skills through role plays and simulations. We also offer extensive support for resume building, interview techniques, and externship documentation and placement.

Curricular Changes:

The COVID-19 pandemic significantly impacted our curriculum delivery. In response, we transitioned to blended learning models, incorporating online instruction with in-person clinical experiences. We also expanded the use of simulation training to compensate for reduced clinical experiences.

Our strategic planning focused on student safety and maintaining required contact hours while adhering to social distancing guidelines. We provided safety measures and PPE to students, making us one of the few programs to offer in-person laboratory clinical training during the pandemic.

The program adapted its assessment methods, incorporated telehealth training into the curriculum, addressed technology gaps, and provided additional emotional support to students and faculty during the challenging period.

The Medical Assisting Program at Cañada College has shown remarkable resilience, adaptability, and a commitment to student success, safety, and professional development. We have evolved to meet the changing demands of the healthcare field and continue to provide high-quality education in healthcare careers. Our alignment with the college's mission, articulation efforts, response to community and labor needs, and curricular changes showcase our dedication to excellence and readiness to face challenges head-on.

3. Community & Labor Needs

Are there changes in community needs, employment needs, technology, licensing, or accreditation that may affect your program? If so, describe these changes and your efforts to accommodate them. If no changes

have occurred, please write "no known changes". CTE programs: identify the dates of your most recent advisory group meeting and describe your advisory group's recommendations for your program.

As unemployment rates in the United States continue to rise, the demand for critical healthcare professionals, particularly medical assistants, remains consistently high. The COVID-19 pandemic has significantly underscored the essential role of healthcare workers in addressing public health emergencies. According to the United States Bureau of Labor Statistics, the mean employment estimate for medical assistants stands at 752,460, and the job outlook reflects a projected 14% increase in employment opportunities.

This growing demand for healthcare professionals can be attributed to various factors:

- Aging Population: The elderly population typically requires more medical care and assistance, leading to an increased need for healthcare professionals.
- Primary Care Emphasis: Medical assistants are integral to primary care settings, which are vital for
 preventive care and the management of chronic diseases. The healthcare sector is increasingly focusing on
 primary care, contributing to the rising demand for medical assistants to support these services.
- Outpatient Services Growth: Many healthcare services are transitioning from inpatient to outpatient settings.
 Medical assistants play a pivotal role in outpatient care, further increasing the demand for their services in clinics, ambulatory care centers, and physician offices.
- Technological Advancements: Innovations in healthcare technology, such as electronic health records (EHRs) and telemedicine, have broadened the scope of work for medical assistants. They are often responsible for managing electronic records and facilitating telehealth appointments.
- COVID-19 Pandemic Response: The pandemic underscored the essential role of healthcare workers, including medical assistants, in addressing public health emergencies. This recognition has led to increased investment in healthcare infrastructure and personnel.
- Versatility in Work Settings: Medical assistants can work in diverse healthcare settings, making them
 versatile professionals. This adaptability allows them to meet the changing healthcare needs and work in
 various specialties.
- Healthcare Workforce Replacements: A substantial portion of the healthcare workforce is approaching retirement age, creating a need for new healthcare professionals, including medical assistants, to replace retiring workers.
- Expanding Scope of Practice: In some regions and states, the scope of practice for medical assistants is expanding, enabling them to take on more responsibilities, further increasing the demand for their services.
- Preventive Care Focus: Preventive care and wellness programs are gaining importance in healthcare, with medical assistants playing a crucial role in delivering these services.

The healthcare landscape continually evolves, and the COVID-19 pandemic presents significant challenges for health professional education. While it had a profound impact on healthcare education it also sped up innovation and created new opportunities. Adapting to the lessons learned during the pandemic was crucial in preparing health professionals to meet the evolving needs of healthcare delivery.

Challenges Faced:

A. Academic and Educational Needs:

- Disruption of Traditional Education: The pandemic disrupted traditional in-person education. Innovative teaching methods were explored to maintain the quality of education while adapting to remote or hybrid learning models.
- Restricted Clinical Training Opportunities: Restrictions on patient interactions and elective procedures limited clinical training opportunities. Students had to observe social distancing and other safety protocols, leading to a shift towards simulations and demonstrations to replace essential hands-on experience.
- Technological Gaps: Students come from diverse backgrounds, and not all were adequately prepared for the rapid shift to online learning. Addressing technological gaps and ensuring equitable access to education remained an ongoing challenge.
- Mental Health and Well-being: Both healthcare professionals and students faced increased stress and burnout during the pandemic. Addressing mental health needs and providing resources for coping with stress remained a crucial and ongoing challenge.
- Curriculum Disruption Challenges: The medical assisting program curriculum, schedules, available space, and exposure time allocations needed to be adapted to maintain state-imposed safety protocols. This entailed urgent modifications and quick adaptations, including incorporating pandemic preparedness, infectious disease control, and telehealth training to meet the changing demands of medical courses.

B. Employment Needs:

- Evolving Workplace Roles: The roles and responsibilities of medical assistants are evolving, with employers requiring additional skills or certifications based on changing healthcare regulations and standards.
- Job Market Trends: Healthcare workers at the forefront of the pandemic continue to serve as inspiring examples for students. There is a scarcity of trained healthcare professionals, leading to a growing demand for medical assistants and other healthcare professionals.

C. Technology Needs:

- · Healthcare Technology: Advancements in healthcare technology, such as electronic health records (EHRs), telemedicine, and medical devices, have the potential to impact the skills and competencies required of medical assistants. Incorporating relevant courses in the program is essential, and these developments are actively being integrated into our teaching.
- · Training Tools: The integration of technology into the education and training of medical assistants, including simulation tools and EHR training, can better prepare students for the modern healthcare environment.
- · Patient-Centered Care: There is a growing emphasis on patient-centered care, with a stronger focus on interpersonal skills, empathy, and cultural competence. These skills are increasingly being emphasized in medical assisting programs.

We embraced the challenges and changes introduced to our program because of the pandemic as opportunities to grow and evolve into a stronger program. Efforts to address these challenges and adapt to the changing landscape continue, with ongoing improvements. Key measures include:

- · Innovative Pedagogical Approaches: The pandemic has necessitated the exploration of innovative teaching methods, such as telemedicine simulations, virtual labs, and interactive online platforms, which have the potential to enhance education in the long term.
- · Telehealth Integration in Courses: Given the increased relevance of telehealth, students in our program now receive training in this area, with an integration of telehealth training modalities during our courses, providing opportunities for more comprehensive and versatile education.

- · Virtual Learning Resources: The proliferation of virtual resources has enriched health education, exposing students to a wealth of information.
- · Remote and Hybrid Learning Options: Offering remote and hybrid learning options has made education more accessible to a diverse student population, including those who may not have been able to relocate for in-person programs.
- · Simulation and Scenario-Based Training: In response to restrictions on patient interactions, virtual simulations and scenario-based training have been introduced to enhance critical thinking and decision-making skills in healthcare education.
- · Preparedness for Efficient and Competent Work: Preparedness and competence are essential in healthcare, impacting patient safety, care quality, and overall efficiency. Support systems have been established to ensure students meet high standards, fulfill their legal, ethical, and professional responsibilities, and contribute to the well-being of patients and the healthcare system.

Looking Back

4. Curricular changes

List any significant changes that have occurred over the prior years in your program's curricular offerings, scheduling, or mode of delivery. For decisions made by your department, explain the rationale for these changes. If applicable, how have state policy changes affected your curricular offerings?

In response to the unprecedented challenges posed by the COVID-19 pandemic, the Medical Assisting Program at our college has demonstrated remarkable resilience, adaptability, and creativity in maintaining the well-being and education of our students. Since the outbreak of the pandemic in 2020, our program has faced numerous challenges and has successfully incorporated changes in our delivery methods to overcome them.

Maintaining In-Person and Remote Learning: The Medical Assisting Program stands out as one of the few "in-person programs," alongside the Radiology Technician Program, that continued to serve students both remotely and on-campus throughout the COVID-19 pandemic. This unwavering commitment allowed us to adapt to the evolving needs of our student community while providing uninterrupted educational services.

<u>Curriculum Excellence and Student Preparation:</u> Our program's curriculum is thoughtfully designed, emphasizing practical, hands-on training, and providing students with a solid foundation for a career in medical assisting. With the online and hybrid modalities we are now reaching out to students in many further geographic locations without the need for them to relocate. The curriculum has been instrumental in preparing our students for real-world expectations in the healthcare sector.

We have faced several challenges, and our program's ability to address them effectively stands as a testament to our commitment to student success and safety. Here are the challenges we encountered and the changes we incorporated:

- · <u>Blended Learning Models and Simulated Learning:</u> To compensate for reduced clinical experiences, we shifted to blended learning models. These models combined online instruction with in-person clinical experiences, augmented by simulation training and online resources to enhance clinical skill practice.
- · <u>Strategic Planning:</u> Our program underwent strategic planning to maintain required contact hours while adhering to social distancing guidelines. We created modified clinical course lab hours and space allocation plans to reduce in-person contact, ensuring the safety of our students. We remained one of the few programs offering in-person laboratory clinical training on campus.
- · <u>Commitment to Student Safety and Emergency Preparedness:</u> Ensuring student safety remained paramount. We implemented strict safety measures and provided personal protective equipment (PPE) while focusing on emergency preparedness. Our program set a standard for responsible education during the pandemic.

- · <u>Flexibility in Learning:</u> We successfully adapted to virtual simulations, telehealth experiences, and innovative assessment methods. These adaptations allowed us to maintain the quality of education while prioritizing safety.
- · <u>Resource Support:</u> Recognizing the financial and personal challenges faced by students, we provided resources for technology access and offered flexibility in coursework deadlines. This support helped students overcome obstacles while meeting industry standards.
- Emotional and Mental Health Support and Guidance: Acknowledging the emotional toll of the pandemic on both healthcare professionals and students, we collaborated with the Disability Resources Center, Mental Health Center, and Learning Center to provide additional emotional support. Faculty also offered guidance for academic and personal growth.
- · <u>Adaptive Assessment Methods:</u> We quickly adapted our assessment methods to the online environment, ensuring effective student evaluation and maintaining academic standards.
- · <u>Telehealth Training:</u> With the increased use of telehealth during the pandemic, we incorporated telehealth training into the curriculum. This includes teaching students exposure through video submissions of assignments and online activities, preparing students for roles that involve remote work.
- Resume Writing and Interview Techniques: We provided support in resume building, interview techniques, and documentation submissions. This support extended to externship training and job applications. Our faculty actively guides students for academic and personal growth.
- Externship Documentation and Placement Support: Our program's focus on both clinical and administrative skills provides students with a competitive edge in the job market. We continue to incorporate soft skills role plays and simulations, and support is provided for immunization reports and other documentary submissions for externship training and job applications.

5A. Progress Report - IPC Feedback

Provide your responses to all recommendations received in your last program review cycle.

Executive Summary

- 1. Please summarize your program's strengths, opportunities/challenges, and action plans,
- 2.Articulation: Information has been included regarding 4-year institutions; however, more information could be included about students entering from high schools and adult schools(prerequisite requirements, e.g.math and English requirements).
- 3.Community and Labor needs: You could expand your explanation of the changes you have made to instruction and other facets of your program and identify the ways the college can support your needs.
- 4.IPC feedback- Progress report: Please provide specific information about the ways in which you have responded to each of the recommendations of the last program review.

All Reported above.

The rapid and transformative changes brought about by the COVID-19 pandemic have rendered the 2018 recommendations outdated and less relevant. It is essential for the Medical Assisting Program to adapt to the evolving landscape of healthcare education and ensure that its practices and strategies align with the current and future needs of students and the industry. A new program review, taking into account the lessons and adaptations made during the pandemic, will provide more accurate and effective recommendations for the program's continued success.

5. Impact of resource application: Please clarify if and how the two new software's affected your program.

The arrival of the COVID-19 pandemic led to unforeseen disruptions, including a suspension of school activities and lack implementation of new software programs. We had not received them by the time the pandemic hit.

5B. Progress Report - Prior Program Goals

Provide a summary of the progress you have made on the program goals identified in your last program review.

The rapid and transformative changes brought about by the COVID-19 pandemic have rendered the 2018 recommendations outdated and less relevant. It is essential for the Medical Assisting Program to adapt to the evolving landscape of healthcare education and ensure that its practices and strategies align with the current and future needs of students and the industry. A new program review, taking into account the lessons and adaptations made during the pandemic, will provide more accurate and effective recommendations for the program's continued success.

6A. Impact of Resource Applications

Describe the impact to date of previously requested new resources (assignment, equipment, facilities, research, funding) including both resource requests that were approved and not approved. What impact have these resources had on your program and measures of student success? What have you been unable to accomplish due to resource requests that were not approved?

It is evident that the program needs additional resources, particularly in the areas of marketing, outreach, teacher's aids, and software utilization, are needed to ensure the continued success of the Medical Assisting Program.

Marketing and Outreach Resources:

· The program has experienced a significant impact due to the absence of adequate support around marketing and outreach. Despite the program's commitment to providing students with what they need to succeed, the lack of new brochures, flyers, and promotional materials has hindered our ability to effectively promote the Medical Assisting Program. This has, in turn, affected student enrollments and awareness of the program among potential students.

Simulation Lab Resources: The approval of resources for the simulation lab has proven to be a valuable addition. These resources have allowed the program to adapt to the challenges posed by the COVID-19 pandemic. As a result, we have been able to maintain the quality of hands-on training and skill development for our students, ensuring that they are well-prepared for their future roles in healthcare. But we were not able to launch a simulations lab under the Pandemic crisis and it is going to be part of the action plan.

New Software Resources: Regrettably, the benefits of new software resources were not delivered and we saw the unforeseen abrupt occurrence of the COVID-19 pandemic.

Challenges Faced During the COVID-19 Pandemic: The pandemic presented a unique set of challenges for healthcare education programs like ours. Transitioning to remote learning was particularly challenging, given the program's emphasis on hands-on clinical training. The sudden shift to online and hybrid formats disrupted the traditional learning experience, impacting our students' preparedness and the program's ability to deliver a comprehensive education.

Expansion and Evening Classes: With the program's plans for expansion and the introduction of evening classes, the need for additional teacher's aids has become apparent. The lack of these resources may strain existing resources and faculty, potentially affecting the quality of instruction and support for these new class offerings.

6B. Impact of Staffing Changes

Describe the impact on your program of any changes within the last program review cycle in staffing levels (for example, the addition, loss or reassignment of faculty/staff). If no changes have occurred please write "not applicable."

During the COVID-19 pandemic, there was a significant turnover in medical assisting educators, leading to staffing challenges in our program.

The Medical Assisting Program is currently led by one full-time faculty member with limited adjunct faculty support. Managing a one-person led program with a reliance on adjunct faculty can be demanding. The process of identifying, training, and integrating adjuncts into online teaching modality is time and labor-intensive. Qualified faculty members are critical to maintain the program's quality and meet the growing student interest.

Currently, the program has three part-time faculty members. Furthermore, we faced difficulties in hiring a qualified professor to teach billing and coding as well as pharmacology courses. In the future, we anticipate the need to hire more adjunct faculty to efficiently manage course schedules and accommodate their availability.

The turnover and shortage of experienced educators were primarily due to- the sudden transition to online and remote teaching posed challenges for educators who were not familiar with online learning platforms and pedagogy.

The pandemic's effect on mental health influenced educators as well. Coping with stress, anxiety, and grief may have influenced their decisions to leave their roles. The pandemic prompted some educators to reconsider retirement plans or accelerate their retirement decisions due to health concerns or changes in work conditions, resulting in the loss of experienced educators.

To address these staffing challenges and ensure the continuity of quality healthcare education during and after the pandemic, we propose the following recommendations:

- Increased Funding and Resources: Advocate for increased funding and resources from the institution to support the expansion and sustainability of the Medical Assisting Program, including the hiring of more adjunct faculty.
- Reducing Administrative Burdens: Reduce administrative burdens on the program coordinator, allowing them to focus on growing the program
- <u>Efficient Course Scheduling:</u> Hire additional adjunct faculty to efficiently manage course schedules and accommodate their availability while allowing for evening and Saturday classes.
- Experienced Faculty Mentoring: Assign experienced faculty or mentors to guide new adjuncts during their initial teaching assignments, helping them adapt to the online teaching modality.
- <u>Safety Concerns:</u> Recognize and address the concerns of educators regarding safety, particularly in light of ongoing health and safety considerations.

Current State of the Program

7A. Enrollment Trends

Use the data provided by PRIE to examine your enrollments by department or courses. Describe trends in headcount, FTES, and load. If applicable, describe any other enrollment data that is relevant to your program.

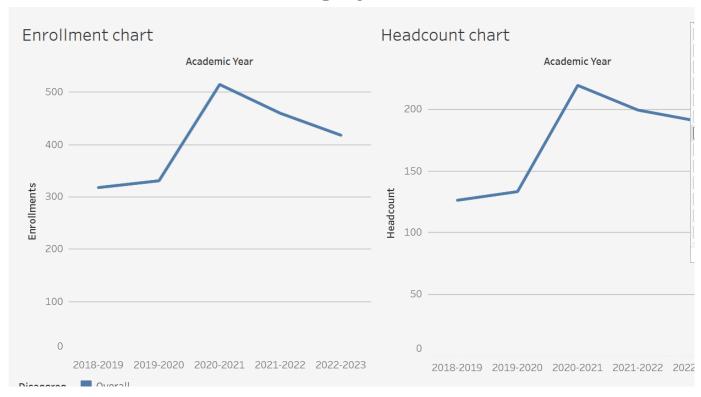
The enrollment trends indicate that the Medical Assisting Program has experienced significant growth in recent years, driven by both the demand for healthcare professionals during the pandemic and the increasing popularity of the program among students.

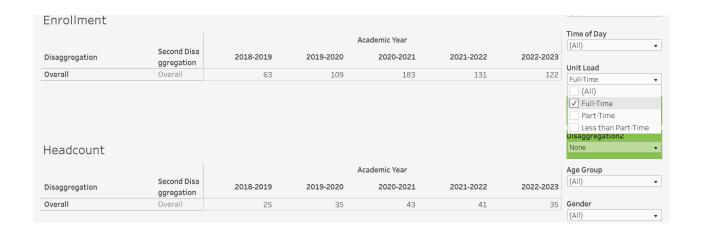
The program's enrollment has exhibited a notably strong upward trend since 2018, signifying sustained interest and demand among students for medical assisting education.

It's important to note that the enrollment rates post-pandemic are still significantly higher than what was observed in 2018.

- <u>Impressive Growth in Headcount:</u> The program has experienced an almost 35% increase in enrollment rates since 2018. This reflects a growing interest in medical assisting as a career choice among students.
- Notable Increase in Headcount: In terms of headcount, there has been an impressive increase of almost 52% since 2018. This surge in headcount underlines the program's ability to attract and retain students over the years.

Student Enrollment & Demographics





Success rate data for five years (2018-2023)

College wide- 71% to 73%

Medical assisting Program - 90% to 84% with a dip recently to 74%. The rate is still higher than the overall college success rate.

Withdrawal Rate for Five years (2018-2023)

College wide- 14.8%-13.7%

Medical assisting Program – 5.4%-7.8% and now higher at 12.7%. The rate is in correlation to the rising inflation and need for working extra hours to make ends meet yet lower than over all college withdrawal rate.

An interesting anomaly in enrollment occurred during the COVID-19 pandemic. The pandemic resulted in an unusual spike in enrollments, which can be attributed to the heightened community demand for healthcare professionals. During the crisis, there was a need to address critical gaps in healthcare services, and as a result, enrollment in the program experienced a substantial increase to meet this demand.

While there was a surge in enrollments during the pandemic, there has been a subsequent slight decline. The slight dip in enrollments post-pandemic appears to be correlated with rising inflation. The increased cost of living and economic pressures may be compelling students to seek additional hours of employment, affecting their capacity to pursue full-time education.

		Academic Year				
Disaggregation	Second Disa ggregation	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023
Overall	Overall	317	330	514	459	417
Headcount						
Headcount			,	Academic Year		
Headcount	Second Disa ggregation	2018-2019	2019-2020	Academic Year 2020-2021	2021-2022	2022-202

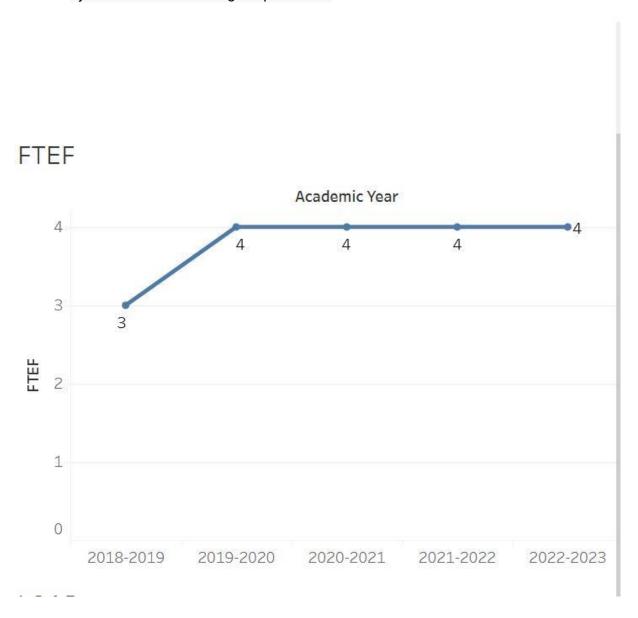
7B. Significant Changes in Your Program

Have there been any significant changes in enrollment trends or course offerings? For example, has there been a significant increase or drop in FTES or Load? If applicable, consider trends in class cancellation rates and how it might have affected your course offerings. If needed, consider how the pattern of course offerings (times/days/duration/delivery mode/number of sections) affected your enrollment?

The Medical Assisting Program has experienced changes in enrollment trends, which were particularly influenced by the COVID-19 pandemic and related factors. The fluctuations in success and withdrawal rates highlight several challenges faced by the program, from marketing and recruitment to addressing financial hardships and attrition due to external factors like the Bay Area exodus. Included are fluctuations in Full-Time Equivalent Students (FTES) and course loads.

In 2020, there was a notable surge in enrollment for healthcare-related educational programs, including the Medical Assisting Program. This increase was driven by several key factors:

- · Pandemic Response: The COVID-19 pandemic created an urgent demand for healthcare workers and professionals, leading to a surge in interest in healthcare careers. As healthcare played a central role in treating patients and managing the crisis, more individuals sought education in this field.
- · Remote Learning: The shift to remote learning due to the pandemic provided individuals with more flexible schedules, making it easier for them to pursue healthcare-related programs.
- · Job Security: Healthcare careers offer job stability and security, which became especially appealing during times of economic uncertainty. This stability contrasted with challenges faced by other industries during the pandemic.



Medical Assisting - Comprehensive Review Enrollment Time of Day Academic Year (AII) Second Disa 2018-2019 2019-2020 2020-2021 2021-2022 2022-2023 Disaggregation ggregation **Unit Load** Overall Overall 131 122 Full-Time (AII) ✓ Full-Time Part-Time Less than Part-Time None Headcount Age Group Academic Year

The program has experienced slight fluctuations in success and withdrawal rates. Several factors contribute to these changes:

2019-2020

2020-2021

2018-2019

- · Lack of Marketing Support: Addressing this challenge is crucial. Effective marketing professionals and strategies are needed to raise awareness of the program, especially considering the regulations and requirements specific to healthcare advertising in California.
- · Scarcity of Qualified Professionals to Teach: Recruiting qualified professionals to teach in a medical assisting program has been challenging, given the higher salaries available in healthcare practice. To tackle this issue, we need to identify and recruit qualified professionals and offer competitive compensation, flexible teaching options, and opportunities for professional growth to make teaching in the program more attractive.
- · Financial Hardships and Inflation: The impact of financial challenges on both students and educators is evident. To address this, flexible class schedules, including evening and weekend classes or online options, are needed to accommodate students who must work or care for children during the day. Exploring partnerships with local childcare facilities or subsidies for affordable childcare options for students with children is a valuable consideration. Additionally, competitive compensation packages for faculty members are essential to attract and retain qualified instructors.

7C. Planning for Your Program

Second Disa

ggregation

Overall

Disaggregation

Overall

What changes could be implemented, including changes to course scheduling (times/days/duration/delivery mode/number of sections), curriculum, marketing, and articulation of pathways that might improve these trends? If applicable, include plans for faculty recruitment and faculty training. NOTE: If other sources of data are used, please upload these documents or provide URLs.

The following recommendations aim to create a more adaptable and robust Medical Assisting program that addresses the diverse needs of our post-COVID student population

Course Scheduling:

- · Flexible Scheduling. We propose expanding our scheduling options to include evening and weekend classes, accommodating students with work and other commitments during traditional hours.
- · Online and Hybrid Courses: To address remote learning needs, we should expand our online and hybrid course offerings to ensure students can participate even when in-person attendance is not feasible.
- · Accelerated Programs: The consideration of accelerated programs would cater to students seeking a shorter timeframe to complete their medical assisting training.

Marketing and Recruitment:

(All)

Gender

(AII)

2022-2023

2021-2022

- Targeted Marketing. Develop marketing campaigns that showcase our program's strengths with flyers, career fairs, social media advertising, using student testimonials and success stories, through both video and written formats, to exemplify the effectiveness of our program.
- *Increased Partnerships*: Strengthen our partnerships with local healthcare institutions and employers to amplify program visibility and enhance students' access to job placement opportunities upon graduation.

Faculty Recruitment and Training:

- Competitive Compensation and faculty recruitment and retention: Actively recruit adjunct faculty from local healthcare institutions who can bring real-world insights and valuable industry connections to our program.
 Develop competitive compensation packages for our faculty to attract and retain experienced healthcare professionals.
- Online Teaching Training. Offer training for faculty to transition effectively to online teaching, providing pedagogical and technical support as they adapt to new teaching modalities.
- *Mentorship Programs*: The establishment of mentorship programs will support new faculty members, facilitating their smooth integration into their teaching roles.
- Professional Development. Ongoing professional development opportunities should be provided for our faculty to ensure they remain updated on industry trends and effective teaching methods.

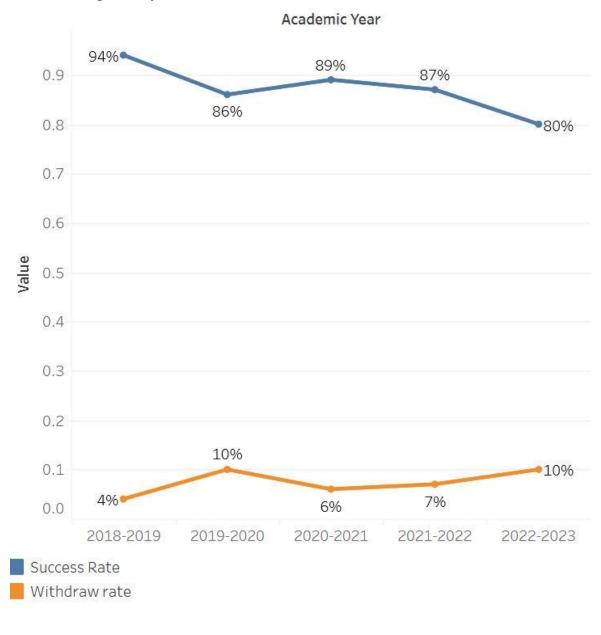
Articulation of Pathways:

- *Clear Pathways*: Clearly articulate educational pathways especially with the current new found challenge with hidden pre- requisites.
- Stackable Credentials: Offering stackable credentials or certificates within the program would provide students with the flexibility to enter the workforce at different stages of their education.

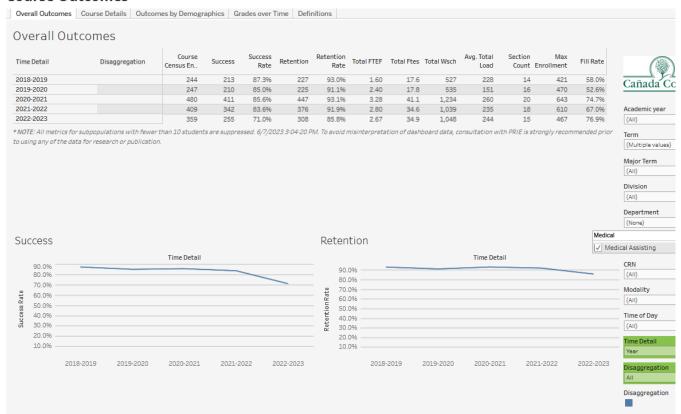
8A. Access & Completion

Describe the student completion and success rate in your courses and/or program using the data provided by PRIE. Look at your course offerings, in the last program review cycle was it possible for a student to complete your certificates or degrees while only completing courses at Cañada College? How can the college help you improve student completion and success? What changes could be made?

The increase in the overall course success rate within the Medical Assisting Program is a positive indicator of our program's effectiveness.



Course Outcomes



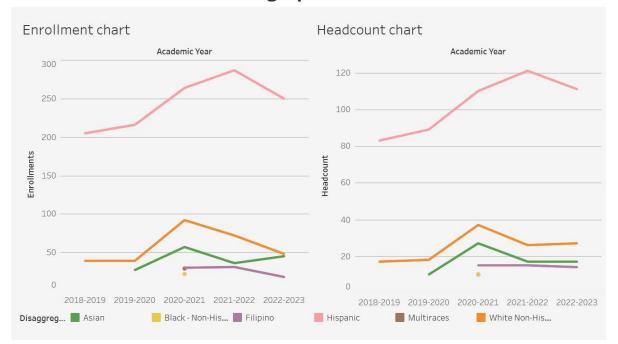
Nevertheless, it is important to address the challenges in specific courses to ensure that students receive the support and resources they need to excel in their studies.

8B. Student Equity

One of the goals of the College's Student Equity plan is to close the performance gaps for disproportionately impacted students. Use the data provided by PRIE that indicates which groups are experiencing a disproportionate impact in your program. Which gaps are most important for improving outcomes in your program? How can the college help you address these gaps? What changes could be made?

Our program has consistently served a diverse student population, with the highest enrollment consisting of Hispanics, White students, and Asians (Filipinos, Chinese, Cantonese, and Mandarin) followed by African American and Pacific islanders populations. Another observation is gender disparity. Stereotypes about gender roles in healthcare fields can create challenges for men entering the profession. This has always been the case in medical assisting which is predominantly female and is evident in the graphs and numbers.

Student Enrollment & Demographics



During the COVID-19 pandemic years of 2020-2021, our program experienced a decline in the success rate for two crucial courses, Pharmacology and Billing and Coding.

The drop in the pharmacology class's success rate can be primarily attributed to students lacking a solid foundation in algebra, math calculations, and the comprehension of problems related to drug dose calculations. These fundamental skills are essential for understanding and accurately performing drug dose calculations, a critical aspect of safe and effective healthcare in the medical assisting field. Importantly, this decline has ripple effects, impacting not only the success rate but also clinical classes, clinical training placements, and course completions.

There is a decrease in the success rate observed in billing and coding courses. This drop can be partly attributed to faculty changes resulting from staff turnover and the retirement of our veteran faculty member. The transition to new instructors introduced variability in teaching styles and course management, thereby affecting student success.

A very slight decline was noticed in the success rate for the introductory course in medical assisting as well. This decline is relatively typical, given the usual census numbers expected for introductory courses, as students often enroll to explore their interest and aptitude in the field and program.

Medical Assisting - Comprehensive Review Equity & Disproportionate Impact

Disaggregation	Academic Year	Headcount	Headcount%	College Headcount %	Access Gap	Access Margin of E	Cañada Coll
	2018-2019	126.0	100.096	100.0%	0.096	8.7%	Cumula Con
	2019-2020	133.0	100.096	100.0%	0.096	8.5%	
	2020-2021	219.0	100.096	100.096	0.096	6.6%	
	2021-2022	199.0	100.096	100.0%	0.096	6.9%	AY 18-19
	2022-2023	190.0	100.096	100.096	0.096	7.1%	to 22-23
							Disaggregation None Academic Year
Success							(AII)
Disaggregation	Academic Year	Enrollment	Success %	Overall Success %	Success Gap	Success Margin of E	✓ 2018-2019 ✓ 2019-2020
	2018-2019	317.0	89.9%	89.9%	0.0%	5.5%	2020-2021
	2019-2020	330.0	84.5%	84.5%	0.096	5.4%	✓ 2021-2022
	2020-2021	514.0	86.2%	86.2%	0.096	4.3%	✓ 2022-2023
	2021-2022	459.0	84.7%	84.7%	0.0%	4.6%	Bus. Design & Workfo
	2022-2023	417.0	74.1%	74.1%	0.096	4.8%	
							Department
							Medical Assisting
							Course Number
							(AII)
							CRN
Withdraws							(AII)
	Academic			Overall	Withdraw	Withdraw	Unit Load
Disaggregation	Year	Enrollment	Withdraw %	Withdraw %		Margin of E	(AII)
	2018-2019	317.0	5.4%	5.4%	0.096	5.5%	Modality
	2019-2020	330.0	10.0%	10.0%	0.096	5.4%	(AII)
	2020-2021	514.0	6.8%	6.8%	0.096	4.3%	
	2021-2022	459.0	7.8%	7.8%	0.096	4.6%	Time of Day
	2022-2023	417.0	12.796	12.7%	0.096	4.8%	(AII)

As part of the College's commitment to equity, our program continues to focus on ensuring that all students, regardless of their background, have access to and success in the Medical Assisting program.

We plan to expand the course offerings for the program during evenings and Saturdays. This might allow for men to enroll for the courses after work hours.

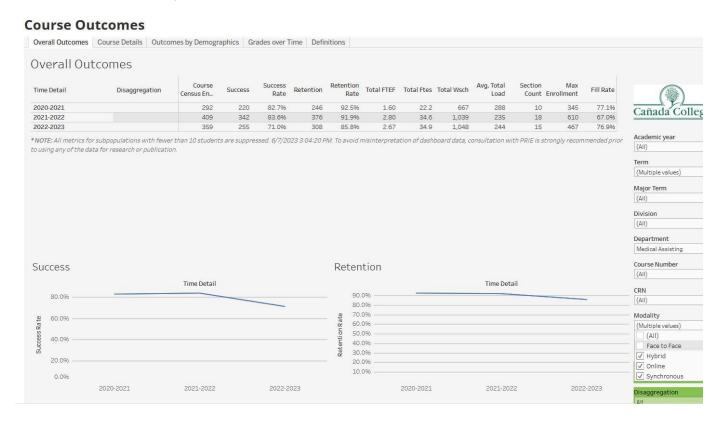
We are implementing additional support mechanisms, such as tutoring, to assist students in mastering the challenging subject matter of pharmacology, addressing the foundational skills gap, and helping them succeed. We are considering the integration of foundational math and writing modules into the program. Offering developmental courses or workshops specifically targeted at these skills will support students in their coursework.

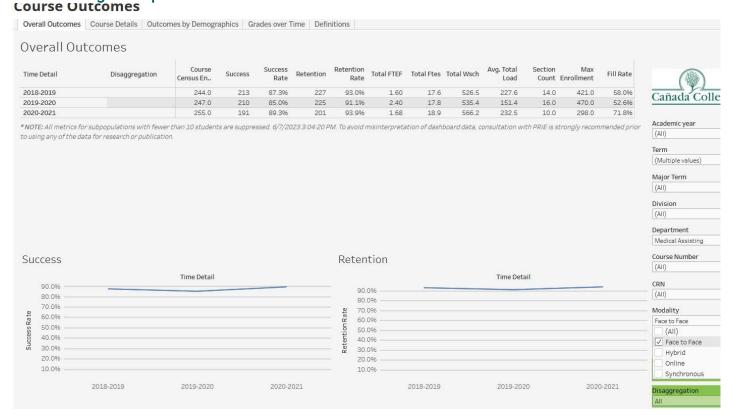
In response to faculty changes in both pharmacology and billing and coding, we are ensuring consistency in teaching and course management by bringing in new faculty members and offering mentorship programs to maintain the quality of instruction.

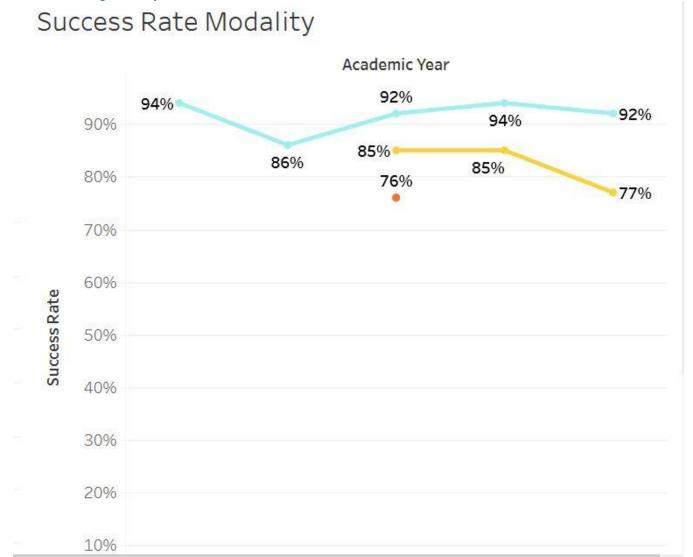
8C. Completion - Success Online

The college has a goal of improving success in online courses. Using the data provided by PRIE, what significant gaps do you see in success between online/hybrid and non-online courses? What changes could be made to reduce these gaps? If your program does not offer online/hybrid courses, please write "not applicable".

The Hybrid Online Courses program has demonstrated notable success, with achievement rates comparable to traditional face-to-face courses. This program has expanded our reach to a broader student demographic, enhancing accessibility and enabling adaptable curriculum modifications to address crises effectively.







However, the resurgence of individuals rejoining the workforce presents new challenges, specifically concerning childcare responsibilities and increased work hours.

Rising inflation is requiring everyone to pick up more hours to provide for their family and it is impacting success and completion rates.

9A. SLO Assessment - Compliance

Are all active courses being systematically assessed over a three-year cycle? Refer to the Program's /Department's Three-Year Assessment Plan and describe how the plan is completed across sections and over time.

The program acquired a coordinator in 2021-22. An effective assessment process has been facilitated by a dedicated faculty coordinator as best possible.

There is continuous dialogue within the department about the student learning outcome assessment, results and challenges. The curriculum review has been ongoing annually since the Pandemic and the introduction of remote learning (online and hybrid) and distance education addendum. In the past three years, faculty have undertaken Canvas training and successfully moved the medical course learning platform to online learning while focusing on student equity and success.

However, the drastic changes with the program to deal with the pandemic and massive turn around in faculty has posed as a challenge at being able to assess the SLO's without bias.

9B. SLO Assessment - Impact

Summarize the dialogue that has resulted from these course SLO assessments. What specific strategies have you implemented, or plan to implement, based upon the results of your SLO assessment?

However, with the advent of COVID-19 in the Spring of 2020 and the resulting shutdown, not only of our College but other community and state colleges as well, the SLO assessment process has been difficult to achieve.

Unfortunately, faculty have not experienced a return on investment from the SLO assessment requirement.

It would be appreciated if an alternative assessment strategy/ self driven reporting process could be introduced to support the effectiveness of this process.

10 PLO Assessment

Describe your program's Program Learning Outcomes assessment plan using your Program/Department's Three Year Assessment Plan
b> Summarize the major findings of your PLO assessments. What are some improvements that have been, or can be, implemented as a result of PLO assessment?

The Medical Assisting Program remains dedicated to student advancement, and over 85% of our students receive job offers and are hired immediately upon program completion. During the pandemic, they requested us to send students who were ready to perform with very little oversight because of a shortage of personnel. Not only did we deliver but in fact most of our students were hired post-training at their respective sites. The feedback received mentioned that the sites were impressed with the level of competency, professionalism, and integrity displayed.

The program maintains an annual meeting with its Advisory Committee, which includes students, graduates, physicians, public members, program faculty, and local business professionals. This diverse group provides valuable insights and recommendations for program improvement, discussing curriculum, goals, learning objectives, and changes in instructional methods.

The committee also offers feedback on current students' practicum experiences. The status of our program learning outcomes remains robust, dynamic, and well-aligned with the needs of Santa Mateo County's healthcare sector and the Bay Area.

Our program maintains strong relationships with a network of externship sites within Santa Mateo County with organizations like Kaiser, Sutter, Stanford, Concentra, smaller proprietorship practices health centers, etc. These partnerships have helped to ensure adequate opportunities to train in real-world scenarios. Regular evaluation of student performance at these sites allows us to assess and collect data to maintain our program outcomes.

The program faculty actively engages in both college-wide and community outreach activities. This includes participation in events such as Career fairs, resume building, interview technique workshops, Job fairs, collaboration with high schools such as Sequoia High School, and other outreach workshops in San Mateo County.

One of the most compelling indicators of our program's efficacy is the success of our students in the field.

Looking Ahead

11. Planning for the future is an important part of Program Review. This is your opportunity to identify new directions for growth and improve your program. Based on your analysis of the data and your responses to the questions above, identify specific and measurable goals and action plans for achieving those goals. Consider goals such as, but not limited to: updating curriculum, closing equity gaps, responding to student and community needs, etc. Please enter your response in the textbox below.

Action Plan for Program Improvement

The Medical Assisting Program has identified various areas for improvement based on the Program Learning

Outcomes (PLO) assessment and other considerations. The following action plan outlines the timeline, responsible parties, and required resources for these enhancements.

Action Item Timeline Responsible Party Resources Required

- 1. Simulation Lab Implementation:
- Establish a Simulation Lab after relocating from modular buildings. Fall 2024 Summer 2025 Dean Hyla Lacefield

Dean Ameer Thompson

Ritu Malhotra and MEDA adjunct faculty Perkins/Strong Workforce funding

Cannot be implemented until administration and deans identify and prioritize a timeline for the shift of the Medical assisting Lab from the modular building to Building 18?

- Acquire supplies for the Simulation Lab and clinical courses. Spring 2024 Hyla Lacefield Fund 1 budget allocation
- 2. Faculty Support:
- Hire full-time faculty to enhance program growth and offerings. Spring 2024 Hyla Lacefield Ritu Malhotra Perkins/Strong Workforce funding and support
- Expand student tutors/assistants for specific MEDA courses. All Semesters All Instructors Strong workforce funding and support
- Hire and train teacher's assistants to support faculty. Summer 2024 All Instructors Perkins/Strong Workforce funding and support
- 3. Program Promotion: Marketing Collateral
- Enhance marketing efforts to boost enrollment and community awareness.
- Develop and distribute marketing materials to raise program awareness.
 Ongoing Marketing team/ department, student services and counselors and Hyla Lacefield Marketing budget, graphic design, content development
- 4. Enriched Learning Tools:
- Introduce EPIC software to enhance program offerings. Spring 2024 Hyla Lacefield

IT team Software acquisition

Support required with-

IT support, HIPAA qualification and copyright, Cost of program and high speed desktop/ laptops to support technology around program.

- 5. Practical Training Enhancement:
- Establish volunteer aides and maintain connections with the medical community to enrich practical training. Fall 2024 - Summer 2025 Ritu Malhotra Collaboration with medical facilities
- 6. Exam Preparation Support:
- Offer support for students using exam prep publisher material (CCMA and NHA license materials).

Ongoing Program Coordinator and Faculty Licensing fees, study materials

Additional Actions:

Action Item Timeline Responsible Party Resources Required

- 1. Accessibility Enhancement:
- Expand evening and online class offerings for improved accessibility. Ongoing Program Coordinator Faculty, course development, online learning platforms
- 2. In-Class Tutoring:
- Implement in-class tutoring for challenging courses. Spring 2023 Faculty and Academic Support Services Additional teaching assistants, tutoring materials and training (release time)
- 4. Community Partnerships:
- Foster community partnerships for the apprenticeship program. Spring 2024 Program Coordinator Collaboration with local businesses, networking, program materials
- 5. Additional Course Offerings:
- Introduce complementary program additions (phlebotomy, EKG technician) to diversify students' skill set. Fall 2023 Curriculum Committee

Ritu Malhotra

All faculty

Strong work force director programs and courses.

Curriculum development, faculty training and budget for supplies/launch of

Next Step: If your program is requesting resources, please go to "STEP 2: Resource Request (OPTIONAL)" and submit your specific requests there. Otherwise, this is the last prompt in the comprehensive program review form.

Supporting Information

Tables & Graphs

Action Plan for Program Improvement

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Wedical Assisting - Comp	TOTIONO ROVIEW		
 Expand student tutors/assistants for specific MEDA courses. Hire and train teacher's assistants to support faculty. 	All Semesters Summer 2024	All Instructors All Instructors	Strong workforce funding and support Perkins/Strong Workforce funding and support
3. Program Promotion: Marketing Collateral			
 - Enhance marketing efforts to boost enrollment and community awareness. - Develop and distribute marketing materials to raise program awareness. 	Ongoing	Marketing team/ department, student services and counselors and Hyla Lacefield	Marketing budget, graphic design, content development
4. Enriched Learning Tools: - Introduce EPIC software to enhance program offerings.	Spring 2024	Hyla Lacefield IT team	Software acquisition Support required with- IT support, HIPAA qualification and copyright, Cost of program and high speed desktop/ laptops to support technology around program.
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- Establish volunteer aides and maintain connections with the medical community to enrich practical training.	Fall 2024 - Summer 2025	Ritu Malhotra	Collaboration with medical facilities

6. Exam Preparation Support:			
- Offer support for students using exam prep publisher material (CCMA and NHA license materials).	Ongoing	Program Coordinator and Faculty	Licensing fees, study materials

Additional Actions:

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5. Additional Course Offerings:			

-Top of Form

Personnel - Librarian or other Non-Instructional Faculty (2023 - 2024)

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Program Need and Impact:

A shortage of full-time faculty may limit a department/program's ability to meet program, institutional, and site responsibilities such as committee work, program oversight, program review, etc. Certain disciplines may find it challenging to solve their staffing needs because faculty are unavailable and/or cannot be retained.

Map Request to College Goals and Strategic Initiatives

Personnel - Instructional Faculty (2023 - 2024)

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Map Request to College Goals and Strategic Initiatives