



PROGRAM REVIEW



2014-2015

Program Name: Medical Assisting

Self Study Members: Susan Reardon

MEDICAL ASSISTING COMPREHENSIVE SELF-STUDY 2015

I. Program Mission

Describe the need that is met by the program or the purpose of the program. For CTEA programs only, show that “the program does not represent an unnecessary duplication of other vocational or occupational training programs in the area.” (Sample: *The Health, Physical Education, and Recreation Division is committed to providing excellent education opportunities to our students for their affective, cognitive and psychomotor development as they pursue sport, recreation, physical education, health education and wellness. We will encourage our students to further and sustain their individual endeavors toward the regular, lifelong pursuit of physical activity and a healthy lifestyle.*)

The mission of the Allan Hancock College Medical Assisting Program is to prepare students with the knowledge and skills to become successful entry-level medical assistants or medical billers. We are committed to providing our students with a strong foundation for competent and professional practice in the health care environment. Students are encouraged to become lifelong learners (a necessity to keep up with the rapidly changing technology in medicine) and to advance their careers in healthcare, if they so desire.

The program offers two certificate options: a Medical Assisting Certificate of Achievement and a Medical Billing and Coding Certificate of Accomplishment. The medical assisting option prepares students to work in a doctor’s office or outpatient clinic setting under the direct supervision of a physician, nurse practitioner, podiatrist, or physician’s assistant. The student is trained in both front and back office techniques and skills. Graduates of the medical assisting certificate program are eligible to sit for the California Certifying Board for Medical Assistants examination to obtain the state certification (CCMA-C and/or CCMA-A) and for the American Medical Technologist’s Registered Medical Assistant certification (RMA). The medical billing and coding certification prepares a student to work as a medical biller in a hospital, skilled nursing facility, medical office, outpatient clinic, or billing office setting. Experienced medical billers can also find employment in specialized medical billing agencies or can start their own businesses in medical billing.

In 2014, the Centers of Excellence partnered with the Health Workforce Initiative (HWI) and the California Hospital Association (CHA) to conduct two surveys to assess state healthcare workforce needs. The surveys received responses from 190 hospitals and 1,600 clinics, labs and facilities. The surveys revealed a projected need for 398 medical assistants in the next year. Survey questions about hiring preferences revealed that two out of three employers require or prefer state or national certification of medical assistant job applicants. The survey also revealed that employers believe that increased accessibility to health care made possible by the Affordable Care Act will lead to

increased demand for medical assistants. (www.coecc.net/health)

In north Santa Barbara and San Luis Obispo counties there is one other community college medical assisting program, located at Cuesta College in San Luis Obispo. There are two private schools offering medical assisting programs, both in Santa Maria: Center for Employment Training (CET) and Santa Barbara Business College. Tuition for the CET program is \$10,954.00. The school's website states, *"The program is designed to take 7 months to complete. Of those that completed the program in 2013-2014, 19% finished in 7 months"*. Tuition for the 30-unit program at Santa Barbara Business College is \$18,215.00. The total cost for the 10-month Allan Hancock College Medical Assisting Program is \$2,700.00.

II. Progress Made Toward Past Program/Departmental Goals

Summarize the progress the program/department has made toward achieving its goals during the past six years. Discuss briefly the quality, effectiveness, and strengths of the program as reflected in its Annual Updates. Show the relationship between the program goals, the mission of the college, the district strategic plan, and the impact on student development and success.

The last comprehensive program review of the medical assisting program was completed in 2003. In 2008, the decision was made to stop admitting new students and to completely revise the program. The program had been open-entry, open-exit, in which students could start and stop at any point, taking classes as they wished until all classes were completed. Externships were not arranged by the program coordinator and offered as a course. Rather, students completed clinical experience through the CWE program. Students could receive certificates in administrative or clinical medical assisting, and could continue to achieve an associate's degree. The program was not in compliance with Title V changes regarding certificates.

The model did not serve the students well and was very difficult to manage. The 2007 2-year program review stated, "Extensive efforts are underway to reconfigure the MA program into cohort groups that can move through the program together and be monitored accordingly". Between 2008 and 2010, Julie Kuras, CNA Coordinator and Health Science Department Chair, and Holly Stromberg, RN Instructor, undertook the revision of the program. The MA program was revised as a 10-month cohort program, with students proceeding in a logical manner through the courses, culminating in an externship experience, arranged and supervised by the program coordinator. In 2010, the MA program reopened with many changes. The following changes were included in the new program:

1. Changing the program from a three semester to a two semester cohesive program with a start and end date for the cohort of students.
2. Creation of an application process to assure that students are informed of the requirements of the program in a timely fashion and have time to meet them prior to the start of the program.
3. The program now produces MA generalists with coursework preparing them to pass a certification examination given by one of the MA professional organizations.
4. A clinical externship course was added to the medical assisting program to allow students the opportunity to gain real-world experience in medical offices and outpatient facilities.
5. Courses were added that lead to a Medical Billing and Coding Certificate.
6. Curriculum was based on the Medical Assistant Model Curriculum developed by the Chancellor's Office, California Community Colleges (Revised February 2008).

The new entrance requirements included the following:

1. Student must be age 18 (required by California Codes- Business and Professions Code Section 2069-2071)
2. Complete a background check and drug screening (required by clinical agencies utilized for externship) Instructions for this will be given when accepted into the program.
3. Current Healthcare Provider CPR card (American Heart Association or American Red Cross ONLY)
4. Completion of English 300 and Math 531 or equivalent with a C or better.
5. Bus 107 Human Relations in Business – 3 units

Core courses for MA certificate in 2010

First Semester: 14 units

1. MA 305 Body Systems and Disease - 5 units
2. MA 350 Medical Assisting Fundamentals - 2 units
3. MA 351 Clinical Procedures 1 - 3 units
4. MA 352 Medical Assisting Administrative 1 - 4 units

Second Semester (15u)

5. MA 353 Medical Assisting Clinical Procedures 2 - 5 units
6. MA 354 Medical Assisting Administrative 2 - 3 units
7. MA 355 Pharmacology - 4 units
8. MA 356 Job Success Externship - 2 units (72 hours)

Core courses for Billing and Coding Certificate in 2010

First Semester: 9 units (12u with CBIS 101)

1. CBIS 101 Computer Concepts and applications or equivalent (could be taken prior to or concurrent with other courses) – 3 units
2. MA 305 Body Systems and Disease - 5 units
3. MA 352 Medical Assisting Administrative 1 - 4 units

Second Semester: 7 units

1. MA 360 Medical Billing and Insurance – 4 units
2. MA 361 Coding for Medical Insurance – 3 units

These courses lead to certificates only and could no longer be applied toward an associate's degree.

2010/11 Year

During the first year of the new program (2010/11), several deficiencies were identified and a plan of action was created to address and correct them. The first obvious problem was the configuration of the classroom/laboratory, which was not conducive to learning. There was a large computer cart with a projection screen in the front of the room, with tables situated to either side of it. This made unobstructed viewing of presentations impossible. The textbook that was being used was the text that had been used by the program prior to revision. Although the edition had been updated, the text was not up to date with its instruction. For instance, there was a heavy emphasis on scheduling using a pegboard and paper charting, when medical offices were transitioning to electronic medical records. The first annual update was written in October, 2010, two months into the new program. The following is excerpted from that update:

At this point in the program (midterm of the first semester) all students who started the program are still attending. It is too early to have gathered meaningful data.

There has been a request for TAC funds to obtain a full presentation station in the MA classroom (W9). The computer cart makes it impossible for all students to have an unobstructed view of the lecture materials presented in class. It also blocks the view of the instructor, causing the instructor to have to walk back and forth across cables lying in the ground in order to see all of the students.

MEDICAL ASSISTING Annual Update 10/15/10

<u>PLAN OF ACTION</u>	<u>TARGET DATE</u>	<u>RESOURCES REQUIRED</u>
Change text to Pearson's Comprehensive	Fall 2011	None

Medical Assisting, 2e in order to increase student and instructor support and provide instruction that meets the industry standard.			
Use clicker system to obtain assessment data	Fall 2011	Instructor time for set-up	
Combine the Administrative 1 and Administrative 2 courses into one comprehensive administrative procedures course to allow time for more externship hours.	Fall 2012	Instructor time for curriculum revision	
Increase externship hours to 160 in order to enable students to become independent in medical assisting skills and to meet the expectations of externship site supervisors.	Spring 2013	None	
Increase use of videotaping of skill scenarios for teaching purposes and for gathering assessment data.	Fall 2012	Instructor time – instructor is using her own videocamera	

In Spring, 2011, another update was written, which identified the challenges undertaken during the first year of the revised program. It was noted that the continuing recession and high unemployment in the area led to an increased interest in the medical assisting program, with many applicants having had previous job experience and, in the case of four applicants, who had already earned degrees. Out of the 25 students in that year's class, seven had previous careers in banking, real estate, engineering, law enforcement, or accounting.

The challenge was to educate that very diverse group of students with a wide range of educational backgrounds, ranging from a recent immigrant to the United States for whom English was a second language, to a mechanical engineer. The approach that year was to use a multi-targeted approach of lecture, accompanied by PowerPoint slides with lots of graphics, and nonverbal communication—demonstrating symptoms of Parkinson's by acting them out, for example. I also used a lot of scenarios that required group participation, thereby encouraging communication among class members and increasing camaraderie. For many of the scenarios I paired a more mature and experienced student with one who could benefit from mentoring. Although there were some minor clashes during the year between students from very different backgrounds, none escalated to become a serious problem. Students worked well together the great majority of the time.

Advisory committee members and externship site supervisors anticipated hiring in the clinics to increase as more provisions of the new health care bill were implemented.

Feedback from the externship sites was extremely positive. All said that they would hire the student if they had a position to offer them.

During clinic visits to externship sites in spring of 2011, several site supervisors said they would like to see more "live" injections as preparation prior to externship. One challenge the first year was obtaining the sterile syringes and needles needed for students to do "live" blood draws and injections on each other. There was inadequate money in the supplies budget for the number of sterile materials needed. We did most of the required skill check-off draws and injections on simulation equipment and only had students do two injections and two blood draws on each other. Although the California Board of Medicine does not require "live" injections in medical assistant programs, I agreed with the site supervisors that increasing the number would give the students more confidence when first performing them on patients. Purchasing enough equipment for students to give 10 "live" injections of each type and 10 "live" blood draws would have been costly for the program and would have left little in the materials budget for other reoccurring costs, such as autoclaving materials, personal protective equipment, wound dressings, etc. It was arranged to obtain student practice kits with the necessary supplies from the same company that assembles the kits for the nursing program. Students pay for the kits at the beginning of the program through a materials fee, as they do in the nursing program.

The other suggestion made by all externship sites was that we have more hours of externship. The program had only 72 hours of externship experience. Even though the students performed very well in the time that was available for them to practice in the clinics, three weeks was just enough time to start to feel comfortable in the clinic environment. A longer externship would allow the student to become independent in all medical assisting skills. It was also necessary to increase hours in order to make the program compliant with the requirements of the American Medical Technologists certification agency to allow students to sit for their national certification examination. Certification by a recognized state or national agency was not required, but was starting to become an advantage when attempting to find employment in the medical assisting field. Physicians used to not be concerned whether or not their medical assistants were certified, of the Affordable Care Act was just starting to change that, and some employers were now requiring certification. The Medical Board of California recognized three certification agencies at that time: the American Association of Medical Assistants, American Medical Technologists, and the California Certifying Board of Medical Assistants. Our graduates were not eligible for certification by the American Association of Medical Assistants, because only graduates of an ABHES or CAAHEP accredited program can sit for that exam. They were also not eligible to sit for the American Medical Technologists examination, because the externship was less than 160 hours, the minimum required by that agency. The only agency certification available to them was the California Certifying Board of Medical Assistants. Although recognized in California, this certification would not be recognized if a graduate moved out of the

state. Because of this, the program applied for and was granted approval by the National Healthcareer Association, a certification agency that is well-known and recognized in other states, although is not approved by the California Board of Medicine. This allowed graduates that year who planned to move out of state to sit for that exam. The program was then revised to allow for a 160-hour externship experience.

The revision required some changes in the courses being offered. In order to keep the program to two semesters, the MA Administrative 1 and MA Administrative 2 courses were combined into one comprehensive administrative procedures course, taught in the first semester. Feedback from students and the Administrative 2 instructor stated that the material could easily be combined into one course. That enabled the increase in the number of hours of externship to 160 in the second semester.

The Plan of Action included changing the text to Pearson's Comprehensive Medical Assisting, 2e. The original text was lacking in student and instructor support and the information was outdated. During the first year of the program, I compared several different texts when preparing each lecture. I found that my "go to" text was almost always Pearson. The graphics in the text were well done and visually appealing, the accompanying videos of skills looked professionally done and realistic, and the instructions for procedures in the text conformed to the industry standard (I confirmed this through discussion with externship site supervisors). The Pearson text had terrific resources, such as the "My Health Professions Kit", which included on-line activities such as the "virtual office", where students could schedule patients and deal with numerous situations that could occur in a medical office. There were dozens of scenarios where students were presented with realistic problems and had to choose the best course of action. This would make it much easier to assess critical thinking skills and would be a valuable tool for fostering the development of critical thinking. I was concerned that I might have students who did not have access to a computer, and so was reluctant to adopt a text that made extensive use of on-line resources. However, I found that all students either owned a computer or had access to one. Students also had the option of using computers in the school library.

Another use of technology that year was to videotape students while performing a patient intake scenario. The students then watched the video with me and critiqued their performance of the skill. It was a revelation to some of them that their verbal or nonverbal communication could be improved upon. Discovering the deficit by themselves had a much greater impact than my telling them they needed to speak louder or they had an annoying verbal habit (saying "um" repeatedly, for instance). All students actually did quite well with the skill. Feedback from students told me that it gave them confidence that they could perform well in the clinics. I have continued to use this technique each year to good effect.

A challenge that was mentioned several times in both updates was lack of coordinator time. I originally taught all but two of the MA certificate option courses and functioned as coordinator. I found it impossible to keep this up and planned to reduce my teaching overload as much as I could with the .20 coordinator reassigned time.

One problem that became obvious during the first year of the program was confusion among students during registration for classes. The medical assisting option of the program had been designed for a cohort of students, who would progress through the program together. Two of the courses, MA 352 MA Administrative I and MA 305 Body Systems and Disease, were core courses for the first semester of both the medical assisting option and the medical billing option. The medical assisting courses are all taught during the day; the medical billing option is taught in the evenings. It is not possible to block students from one of the programs from registering for those two courses in the other option. For instance, a medical assisting student might decide to take MA 305 and MA 352 in the evening with the medical billing group and MA 350 and MA 351 in the day with the rest of the medical assisting students. When the instructor for MA 351 referred to part of the lesson that took place in the MA 305 class that week, the students who were taking those classes in the evening had no knowledge of it, because they were in the evening class. That led to what would have been unnecessary repetition, had the students all been in the correct courses for the option they were taking. In an attempt to avoid this problem, the decision was made to change the start date for the medical billing program to Spring Semester of the 2011/12 year.

Single Term Display

Fall 2010 Enrollment	Fall 2010 Sections	Fall 2010 FTES	Fall 2010 Retention & Success	Retention %	Success %	retained	success
course MA305	60 MA305	2 MA305	9.71 MA305	93.33%	90.00%	56.0	54.0
MA350	25 MA350	1 MA350	1.62 MA350	96.00%	96.00%	24.0	24.0
MA351	25 MA351	1 MA351	4.05 MA351	96.00%	96.00%	24.0	24.0
MA352	58 MA352	2 MA352	11.27 MA352	96.55%	94.83%	56.0	55.0
Grand Total	168 Grand Total	6 Grand Total	26.65 Grand Total	95.24%	93.45%	160.0	157.0

Retention & Success Graph Fall 2010 MA

Click on course name to get retention/success by course demographics



Statistics for Retention and Success for the Fall 2010 Semester is as follows:

MA 305: Retention 93%, Success 90%

MA 350: Retention 96%, Success 96%

MA 351: Retention 96%, Success 96%

MA 352: Retention 97%, Success 95%

Grand Total: Retention 95%, Success 93%

Single Term Display - Demographics

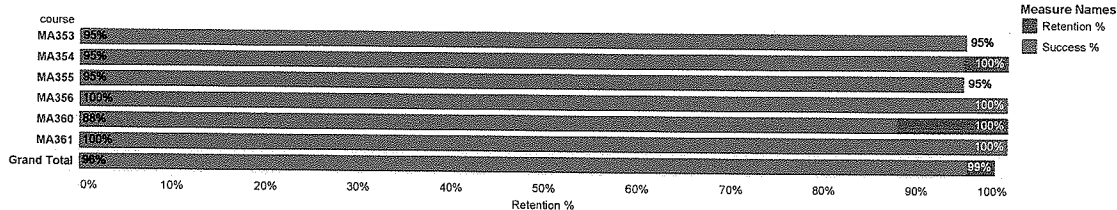
click on any demographic category or course to sort by that field

	Term Spring 2011	subject_code MA	Credit Status Multiple Values	Retention % 0 to 1	Success % 0 to 1					
	CENTER All	DAYTIME All	Residency All							
ETHNICITY	Headcount	% Headcount	Enrollment	% Enrollment	FTES	% ftes	Age category	Headcount	Enrollment	FTES
Asian	2.0	4.26%	6.0	4.44%	1.3	4.43%	Under 19	3.0	12.0	2.7
Filipino	2.0	4.26%	8.0	5.93%	1.8	5.93%	20-24	14.0	42.0	9.3
Hispanic	19.0	40.43%	57.0	42.22%	12.6	42.00%	25-29	11.0	34.0	7.6
White	24.0	51.06%	64.0	47.41%	14.3	47.64%	30-34	4.0	11.0	2.5
Grand Total	47.0	100.00%	135.0	100.00%	29.9	100.00%	35-39	4.0	8.0	1.8
							40-49	6.0	18.0	4.0
							50+	5.0	10.0	2.2
							Grand Total	47.0	135.0	29.9

Enrollment S..	Headcount	Enrollment	FTES	Gender	Headcount	Enrollment	FTES	Spring 2011 AHC Enrollment, FTES, Retention & Success
Continuing	47.0	135.0	29.9	Female	41.0	119.0	26.4	
Grand Total	47.0	135.0	29.9	Male	6.0	16.0	3.5	

Enrollment	33,109
Headcount	12,689
Sections	1,240
Retention %	84.72%
Success %	68.82%
FTES	4,162

Retention & Success Spring 2011 MA



Statistics for Retention and Success for Spring 2011 Semester:

MA 353: Retention 95%, Success 95%

MA 354: Retention 100%, Success 95%

MA 355: Retention 95%, Success 95%

MA 356: Retention 100%, Success 100%

MA 360: Retention 100%, Success 88%

MA 361: Retention 100%, Success 100%

Grand Total: Retention 99%, Success 96%

The program was successful in reaching the goal of graduating students who were well prepared to obtain an entry-level position in medical assisting. 100% of the externship site supervisors told me they found the students to be professional, responsible, empathetic toward patients, and proficient in medical assisting skills, considering the brevity of the externship experience. The brevity of the experience had the negative impact of not allowing supervisors adequate time to assist students with improving skills. That feedback, which was echoed by members of the MA Advisory Committee, reinforced the validity of increasing the length of the clinical experience as soon as

approval for a major modification to the program could be obtained.

The demographic data from the Spring 2011 term reveals that 51.06% of students in the 2010/11 year were white, 40.43% were Hispanic, 2% were Filipino, and 2% were Asian. Students under the age of 30 were 59.6% of the total. Three were under 19 years of age; 14 were between 20-24 years old; 11 were between 25-29 years old. 40.4% of the students were age 30 or older. Four students were between the ages of 30-34; four between 35-39, six between 40-49, and five were over the age of 50. Medical assisting is a field that is primarily female, and this class was not an exception. 87.2% of the class participants were female; 12.8% of participants were male.

It is desirable to have a majority of bilingual English/Spanish students in medical assisting in this geographical area. 2010 census data shows that Santa Maria's population is 70.4% Hispanic or Latino.

(<http://quickfacts.census.gov/qfd/states/06/0669196.html>)

In the Spring 2011 externship placements, I discovered that placing non-bilingual students into externship experiences at physician's offices in Santa Maria was difficult. Many clinics, including the Santa Barbara County Clinics and the Community Health Centers would only accept students who were Spanish-speaking. Because the majority of patients were Spanish-speaking only, it was not beneficial to the student or the clinic to place a student who was not bilingual into the clinics. It meant that I would have to take into account not only the student's strengths and weaknesses in clinical performance into account for placement but also their ability to speak Spanish. This was unfortunate, because it often meant that I often had to place a student based upon that one factor, rather than many other factors that come into play when matching a student to a clinic. For example, there might be an obstetrician in Pismo Beach who was willing to take a student and didn't require that the student speak Spanish. I might have a Spanish-speaking student who lived in Pismo Beach and requested an externship in obstetrics. However, I would have to place a non-bilingual student who lives in Santa Maria in that clinic, instead of the student who really wanted it, because of the lack of availability of clinics willing to take the non-bilingual student. I realized that I would have to seek out more clinics in the Santa Maria area that would take non-bilingual students and obtain Student Affiliation Agreements with them, if possible.

Comparing the retention and success rates of the revised program and the previous program demonstrates that the revisions made were beneficial and led to increased student success. The statistics last year of the previous program (2008) was Retention:

2008 Retention = 88.4% Success = 75.6%

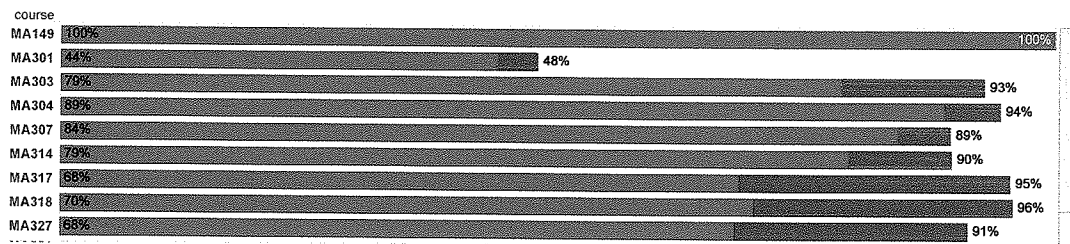
2010 Retention = 99% Success = 96%

Single Term Display

Fall 2008 Enrollment		Fall 2008 Sections		Fall 2008 FTES		Fall 2008 Retention & Success				
course		course		course		course	Retention %	Success %	retained	success
MA149	1	MA149	1	MA149	0.13	MA149	100.00%	100.00%	1.0	1.0
MA301	25	MA301	1	MA301	3.60	MA301	48.00%	44.00%	12.0	11.0
MA303	28	MA303	1	MA303	2.92	MA303	92.86%	78.57%	26.0	22.0
MA304	18	MA304	1	MA304	0.62	MA304	94.44%	88.89%	17.0	16.0
MA307	19	MA307	1	MA307	1.98	MA307	89.47%	84.21%	17.0	16.0
MA314	29	MA314	1	MA314	3.91	MA314	89.66%	79.31%	26.0	23.0
MA317	22	MA317	1	MA317	0.75	MA317	95.45%	68.18%	21.0	15.0
MA318	23	MA318	1	MA318	2.40	MA318	95.65%	69.57%	22.0	16.0
MA327	34	MA327	1	MA327	3.55	MA327	91.18%	67.65%	31.0	23.0

Retention & Success Graph Fall 2008 MA

Click on course name to get retention/success by course demographics



2011/12 Year

According to the State of California Employment Development Department statistics report of March 23, 2012, the unemployment rate in Santa Barbara County had fallen in the 2011/12 year, but remained high at 8.9%. Industry statistics for Santa Barbara County showed that employment in the healthcare industry had increased by 5.2% in the past year. This provided a good opportunity for employment for the graduates of the medical assisting program. The opportunity for employment led to increased applications for the program.

Major modifications to the program were approved during the 2011/12 school year for implementation the following year, including the elimination of the Administrative 2 course and development of a single Administrative Procedures course in order to allow the expansion of the clinical experience to 5 weeks (160 hours). The challenge for the 2012/13 year would be to obtain enough clinical placements for the students for the expanded number of weeks.

During the 2011/12 year, a new presentation station was installed in the MA program classroom with the use of TAC funding. That was a great improvement, as students now had a clear view of the PowerPoint presentations and the instructor during lecture.

Increasing the number of "live" injections and vernipunctures increased the need for sterile supplies. There was insufficient money in the budget for all of the sterile supplies

needed. The requirement that students purchase lab kits for the clinical lab courses was instituted to assure that each student would have the supplies they needed for safe practice.

The following is from the 2011/12 Annual Update. The only change from the Plan of Action in the 2010/11 Annual Update was the plan to use the clicker system to collect assessment data, which did not work well due to technical difficulties.

PLAN OF ACTION	TARGET DATE
Change text to Pearson's Comprehensive Medical Assisting, 2e in order to increase student and instructor support and provide instruction that meets the industry standard.	Fall 2011
ACTION TAKEN + RESULTS	REASONS FOR CHANGES
The textbook was changed to Pearson's Comprehensive Medical Assisting, 2e in fall of 2011. The text is vastly superior to the previous text and offers increased student and instructor support. Students have found the text to be very user-friendly. The increased material in the text regarding rationale for actions encourages critical thinking in the students.	No change from action plan
PLAN OF ACTION	TARGET DATE
Use clicker system to obtain assessment data	Fall 2011
ACTION TAKEN + RESULTS	REASONS FOR CHANGES
The target date for using the clicker system to obtain assessment data has been changed to Spring 2012. I am using the clicker system to obtain assessment data in the MA 353 MA Clinical Procedures 2 and MA 356 Job Success Externship courses this semester.	The presentation station that was requested for Fall 2011 was not installed until the beginning of Spring 2012. The old podium set-up in the classroom made it very difficult for students to see the information being presented on the screen and to use the clicker system.
PLAN OF ACTION	TARGET DATE
Combine the Administrative 1 and Administrative 2 courses into one comprehensive administrative	Fall 2012

procedures course to allow time for more externship hours.	
ACTION TAKEN + RESULTS	REASONS FOR CHANGES
The major modification for this plan of action has been approved by AP&P and will take place by the target date of Fall 2012.	No change from action plan
PLAN OF ACTION	TARGET DATE
Increase externship hours to 160 in order to enable students to become independent in medical assisting skills and to meet the expectations of externship site supervisors.	Spring 2013
ACTION TAKEN + RESULTS	REASONS FOR CHANGES
The major modifications necessary to increase the externship hours next year were approved.	No changes from action plan.
PLAN OF ACTION	TARGET DATE
Increase use of videotaping of skill scenarios for teaching purposes and for gathering assessment data.	Fall 2012
ACTION TAKEN + RESULTS	REASONS FOR CHANGES
The major modifications to the MA 351 MA Clinical Procedures 1 and MA 353 MA Clinical Procedures 2 courses were approved this year and will take place starting in Fall 2012. The videotaping technique is being used again this semester in MA 353 and use of the technique will be incorporated into MA 351 course, as stated in the action plan, in Fall 2012.	No changes from action plan

The biggest challenge was the time required for the program coordinator to teach most of the courses and perform all of the duties to allow the program to run smoothly without a large budget for supplies. For instance, supplies such as simulated skin for suture and staple removal and simulated pap test kits were needed for skills that students cannot practice on each other. The cost for purchasing these supplies was beyond what was available in the budget. Therefore, the supplies were created from inexpensive materials by the program coordinator. The challenge was in finding the time to do this, as they had to be recreated each time they were used. By 2012, more medical offices were switching to Electronic Medical Records. Medical assistants needed

to be equipped to access and use this type of charting. The Program Annual Update addressed the fact that more coordinator time was needed to consult with community partners, the local healthcare providers, and assess what changes might be needed to the MA program to assure that students were adequately prepared.

There was no way to track how many students had taken the optional CCMA (California Certified Medical Assistant) test at the end of the 2010/11 year. Students were requested to inform the program coordinator if they took the test and whether or not they had passed. Five students did respond that they took and passed the test. The program received approval from the National Healthcareer Association for graduates to take the certification test. Nine students who completed the medical billing option took and passed the test. Twelve completers of the medical assisting option took and passed the test.

Single Term Display

Fall 2011 Enrollment		Fall 2011 Sections		Fall 2011 FTES		Fall 2011 Retention & Success		Fall 2011	
course	Enrollment	course	Sections	course	FTES	course	Retention %	Success %	retained
MA305	35	MA305	1	MA305	5.67	MA305	91.43%	91.43%	32.0
MA350	29	MA350	1	MA350	1.88	MA350	89.66%	89.66%	26.0
MA351	29	MA351	1	MA351	5.14	MA351	89.66%	89.66%	26.0
MA352	30	MA352	1	MA352	5.83	MA352	90.00%	90.00%	27.0
Grand Total	123	Grand Total	4	Grand Total	18.51	Grand Total	90.24%	90.24%	111.0

Fall 2011

subject_code MA

Credit Status Multiple Values

ETHNICITY All

Gender All

Age category All

Enrollment Status All

Retention % 0 to 1

Success % 0 to 1

Residency All

CENTER All

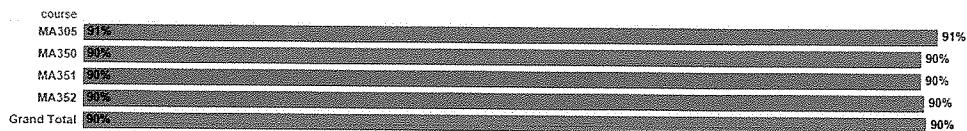
DAYTIME Day

Measure Names

Retention % Success %

Retention & Success Graph Fall 2011 MA

Click on course name to get retention/success by course demographics



Fall 2011 AHC Enrollment, FTES, Retention & Success

Enrollment	29,219
Headcount	10,957
Sections	1,023
Retention %	86.69%
Success %	68.63%
FTES	3,905

The retention and success rates for the MA courses in Fall 2011 were as follows:

MA 305: 91% Retention, 91% Success

MA 350: 90% Retention, 90% Success

MA 351: 90% Retention, 90% Success

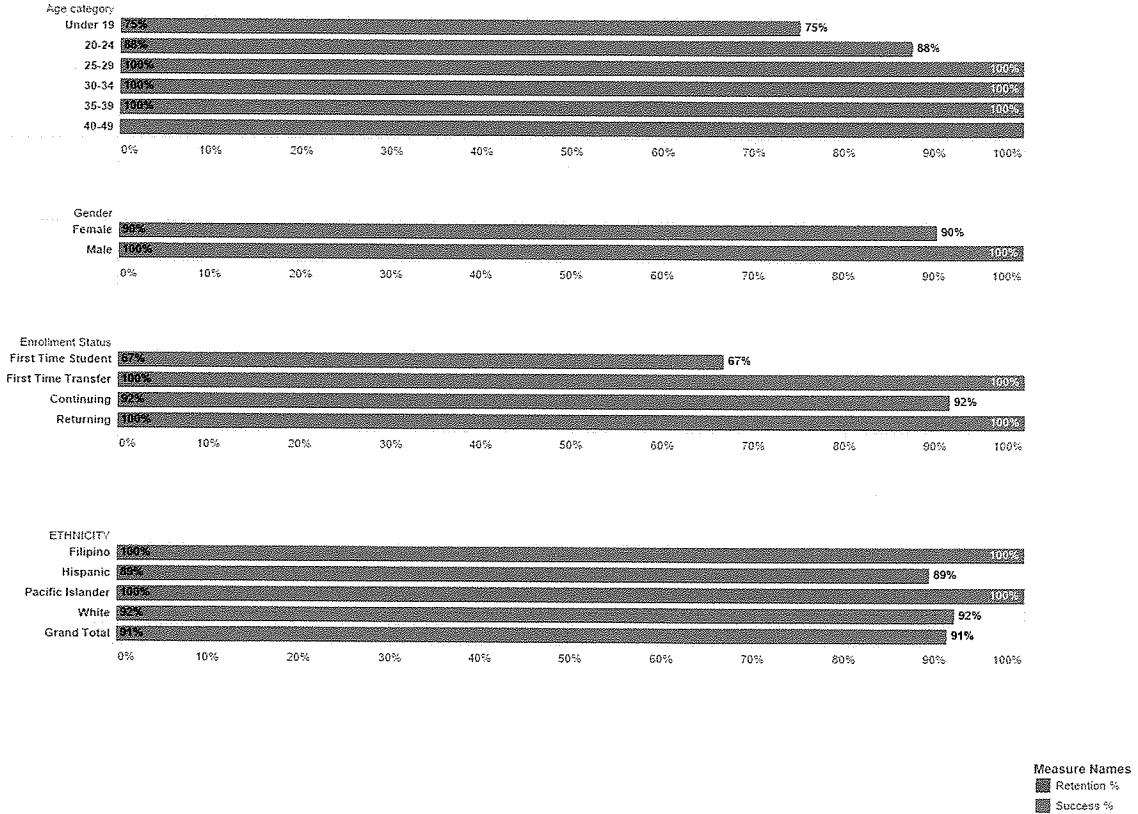
MA 352: 90% Retention, 90% Success

Grand Total: 90% retention, 90% success

The overall Allan Hancock College statistics for retention and success for Fall 2011 were Retention % 86.69; Success % 68.63

The program compared very favorably in retention, and even more favorably in success, with the overall AHC statistics.

Retention & Success by Demographics for MA305 Fall 2011



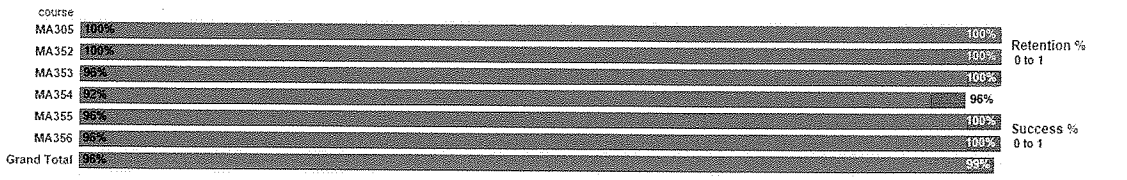
Retention and success data by demographics for the MA 305 course, which is the most difficult of the courses in Fall Semester, reveals that students aged 25 and over were the most successful. Males had a 100% success rate, compared with 90% for females. It should be noted that there were only two males in that class. First-time students had a lower success rate (67%) than continuing students (92%). The ethnicity graph shows that the highest success rate (100%) in the class was held by Filipino and Pacific Islander students, followed by White students (92%) and Hispanic students (89%). The difference between White and Hispanic students' success rates was only 3%.

Single Term Display

Single Term Display										Term Spring 2012
Spring 2012 Enrollment	Spring 2012 Sections		Spring 2012 FTES		Spring 2012 Retention & Success					subject_code MA
course	course	course	course	Retention %	Success %	retained	success			
MA305	17	MA305	1	MA305	2.75	MA305	100.00%	100.00%	17.0	17.0
MA352	16	MA352	1	MA352	3.11	MA352	100.00%	100.00%	16.0	16.0
MA353	27	MA353	1	MA353	8.97	MA353	100.00%	96.30%	27.0	26.0
MA354	26	MA354	1	MA354	4.16	MA354	96.15%	92.31%	25.0	24.0
MA355	27	MA355	1	MA355	8.41	MA355	100.00%	96.30%	27.0	26.0
MA356	27	MA356	1	MA356	4.01	MA356	100.00%	96.30%	27.0	26.0
Grand Total	140	Grand Total	6	Grand Total	31.42	Grand Total	99.29%	96.43%	139.0	135.0

Retention & Success Graph Spring 2012 MA

Click on course name to get retention/success by course demographics



Spring 2012 AHC Enrollment, FTES, Retention & Success

Enrollment	30,988
Headcount	11,736
Sections	1,146
Retention %	84.65%
Success %	69.09%
FTES	3,879

The Spring retention and success rates for MA courses in Spring 2012 were as follows:

- MA 305: 100% Retention, 100% Success
- MA 352: 100% Retention, 100% Success
- MA 353: 100% Retention, 96% Success
- MA 354: 96% Retention, 92% Success
- MA 355: 100% Retention, 96% Success
- MA 356: 100% Retention, 96% Success
- Grand Total: 99% retention, 96% success**

Overall Allan Hancock College retention and success for Spring 2012 were Retention % 84.65; Success % 69.09

One negative change that year was the drop in enrollment for the evening MA 305 and MA 352 courses, which dropped from 30 students to 17 for MA 305 and from 28 students to 16 in MA 352. Possibly, switching from fall to spring for the medical billing program had caused the drop. The decision was made to keep the start date the same for the following year to see if the decrease persisted, or was just a one-time occurrence.

2012/13 Year

The following is from the 2013 Annual Update:

PLAN OF ACTION	TARGET DATE
Use clicker system to obtain assessment data	Fall 2012
ACTION TAKEN + RESULTS	REASONS FOR CHANGES
The target date has been moved to Spring 2013.	I was unable to use the clicker system by the date. I had difficulty using the software on my computer. A company representative met with me toward the end of the semester to help me with it. By the time I got the information, it was too late to incorporate it into the fall classes. Also, I found that the clicker system we have is several years old and all of the units need new batteries.
PLAN OF ACTION	TARGET DATE
Combine the MA Administrative Procedures 1 and MA Administrative Procedures 2 courses into one comprehensive administrative procedures course to allow time for more externship hours.	Fall 2012
ACTION TAKEN + RESULTS	REASONS FOR CHANGES
The MA Administrative 1 and 2 courses were combined into one Administrative Procedures course. The combined course was taught for the first time Fall 2012. There was adequate time within the course to cover all of the administrative material and accomplish the check-offs for the administrative procedures.	No changes were made from the action plan.
PLAN OF ACTION	TARGET DATE
Increase externship hours to 160 in order to enable students to become independent in medical assisting skills and to meet the	Spring 2013

<p>expectations of externship site supervisors.</p>		
<p>ACTION TAKEN + RESULTS The externship hours have been increased for this spring. Students will be in clinical sites from April 15 – May 16, Monday through Thursday, for a total of 160 hours. I will evaluate the results of this action after externships are complete and I receive feedback from the clinical sites in May, 2013.</p>	<p>REASONS FOR CHANGES No changes were made from action plan.</p>	
<p>PLAN OF ACTION</p>	<p>TARGET DATE</p>	
<p>Increase use of videotaping of skill scenarios for teaching purposes and for gathering assessment data.</p>	<p>Fall 2012</p>	
<p>ACTION TAKEN + RESULTS Videotaping is being done in the MA Clinical Procedures 2 course in Spring 2013, but did not take place in the MA Clinical Procedures 1 course in Fall 2012.</p>	<p>REASONS FOR CHANGES I found it impossible to include videotaping of Procedures 1 course due to time constraints. I needed to increase the number of skills being checked off in the course in order to decrease the number of skills check-offs in the MA Clinical Procedures 2 course. The MA Clinical Procedures 2 course is being taught over 11 weeks instead of 13 due to the increase in length of the externships. There are just 2 instructors to supervise all of the check-offs and monitor students who are practicing in the lab. I would need additional staffing to increase the use of videotaping.</p>	<p>sh</p>
<p>Industry statistics for Santa Barbara County showed that employment in the healthcare industry had increased by 5.2% in 2012. Despite the fact that there were increased employment opportunities, enrollment in the program was not as high as desired. There were 30 applications accepted during the 2012 spring enrollment period. By the time the class started in fall, the number had dropped to 23. 20 students remained by the second semester. Because of the low enrollment, it was decided to accept 35 applications for the 2013/14 year.</p>		

Medical offices were quickly switching to Electronic Medical Records (EMRs) during the 2012/13 year. A survey of clinical supervisors was taken by the coordinator during clinic visits to determine what type of software clinics were using. The outcome was that there was no consistent type of software being used. In fact, no two clinics were using the same EMR software. The program used the web resources in myhealthprofessionskit that came with the Pearson Comprehensive Medical Assisting text to practice scheduling of patients. The software was not sufficient to provide competency in all areas of medical charting. More research into available resources would be needed.

Major modifications were approved and put into effect during the year:

- 1) The MA Administrative Procedures 1 and 2 courses were combined into a single Administrative Procedures course.
- 2) The MA Clinical Procedures 1 and 2 courses were revised to coordinate with the new Pearson textbook.
- 3) The MA 353 MA Clinical Procedures 2 and MA 355 Pharmacology course labs incorporated more "live" injection and venipuncture practice, in which students practiced on each other rather than on simulation equipment. The skills kit contents were revised to allow 10 live injections of each type, 10 capillary punctures, and 10 live venipunctures.
- 4) The MA 356 Job Success and Externship course was revised to provide 5 weeks of externship experience in a medical office instead of 3 weeks.

These changes presented several challenges. The increased amount of live practice was challenging because of the increased amount of 1:1 supervision from instructors that was required. The challenge presented by the change in clinical externships was to assure that every student was able to complete 160 hours of externship within the 5 weeks. One of the reasons for increasing the hours was to qualify the AHC MA program to partner with the American Medical Technologists certification agency. The application to become a partner school was accepted by the AMT. The AMT externship requirement meant that students had to make up any missed time in clinics. A minimum of 160 documented hours is required to sit for the certification test, which grants candidates who pass the designation Registered Medical Assistant (RMA). The amount of time required to arrange for externships, get new Affiliation Agreements to replace those clinics who could not accommodate a longer externship, and arrange for and supervise make-up time, was considerable. Increased reassigned time for the coordinator was documented as a need in the annual update.

Clinical supervisors reported that students were more comfortable giving injections and drawing blood that year because they had performed more of them live rather than as simulations on manikins. Supervisors were also happy with the increased time that

students were spending in the clinics.

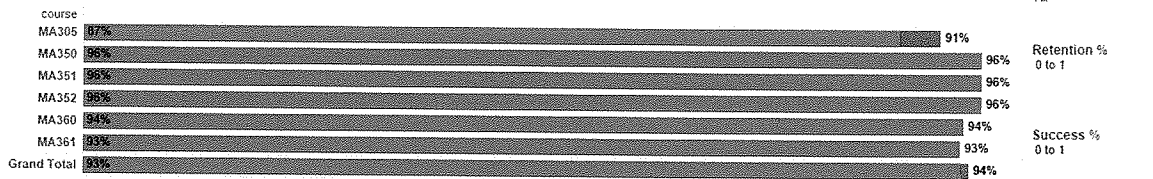
Needs identified in the Annual Update were a new microscope and otoscope/ophthalmoscope, an increased budget for office supplies and instructional supplies, and student workers to act as lab assistants for the following year. With the increase in students anticipated, it would be necessary to have more supervision in the labs for students practicing on manikins while the instructors supervised the live procedures.

Single Term Display

Fall 2012 Enrollment		Fall 2012 Sections		Fall 2012 FTES		Fall 2012 Retention & Success				Term Fall 2012	
course		course		course		course	Retention %	Success %	retained	success	subject_code MA
MA305	23	MA305	1	MA305	3.72	MA305	91.30%	86.96%	21.0	20.0	
MA350	23	MA350	1	MA350	1.49	MA350	95.65%	95.65%	22.0	22.0	Credit Status Multiple Values
MA351	23	MA351	1	MA351	4.07	MA351	95.65%	95.65%	22.0	22.0	
MA352	23	MA352	1	MA352	4.47	MA352	95.65%	95.65%	22.0	22.0	ETHNICITY All
MA360	16	MA360	1	MA360	4.14	MA360	93.75%	93.75%	15.0	15.0	
MA361	15	MA361	1	MA361	2.53	MA361	93.33%	93.33%	14.0	14.0	Gender All
Grand Total	123	Grand Total	6	Grand Total	20.43	Grand Total	94.31%	93.50%	116.0	115.0	Age category All

Retention & Success Graph Fall 2012 MA

Click on course name to get retention/success by course demographics



Fall 2012 AHC Enrollment, FTES, Retention & Success

Enrollment	28,559
Headcount	10,853
Sections	1,004
Retention %	86.82%
Success %	69.63%
FTES	3,775

Retention and success rates were a few percentage points higher for the Fall 2012 semester than the Fall 2011 semester:

- MA 305: 91% Retention, 87% Success
- MA 350: 96% Retention, 96% Success
- MA 351: 96% Retention, 96% Success
- MA 352: 96% Retention, 96% Success
- MA 360: 94% Retention, 94% Success
- MA 361: 93% Retention, 93% Success
- Grand Total: 94% retention, 94% success**

The overall Allan Hancock College retention and success rates for Fall were 87% retention, 70% success.

MA 360 and MA 361 are the billing and coding courses, now being taught in the Fall, instead of Spring, due to switching the start date for the program to Spring. 17 of the 23 students who started the medical assisting option of the MA program in Fall 2012, completed the program and obtained certificates of accomplishment. All 19 of the applicants to the medical billing option of the program started the program in Spring Semester. The numbers for medical billing had stayed low since switching the start of the program to Spring Semester. Because the numbers had not improved over the previous year, the start of the program would be switched back to Fall Semester in the 2013/14 year.

Single Term Display - Demographics

click on any demographic category or course to sort by that field

		Term Fall 2012	subject_code MA	Credit Status Multiple Values	Retention % 0 to 1	Success % 0 to 1				
		CENTER All	DAYTIME All	Residency All						
ETHNICITY	Headcount	% Headcount	Enrollment	% Enrollment	FTES	% ftes	Age category	Headcount	Enrollment	FTES
Hispanic	19.0	48.72%	57.0	46.34%	9.7	47.29%	Under 19	3.0	12.0	1.8
White	20.0	51.28%	68.0	53.66%	10.8	52.71%	20-24	14.0	46.0	7.5
Grand Total	39.0	100.00%	123.0	100.00%	20.4	100.00%	25-29	9.0	25.0	4.4
							30-34	5.0	16.0	2.6
							35-39	2.0	6.0	1.0
							40-49	3.0	8.0	1.5
							50+	3.0	10.0	1.6
							Grand Total	39.0	123.0	20.4

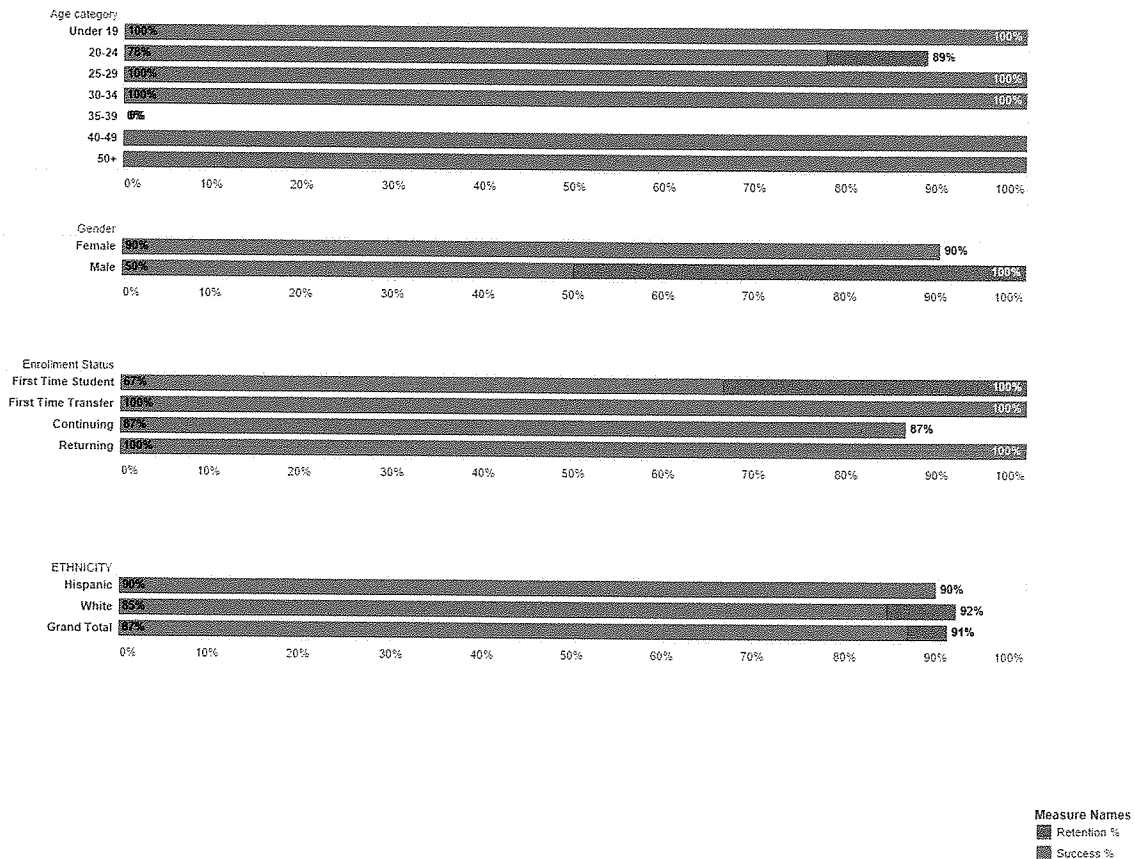
Enrollment Status	Headcount	Enrollment	FTES	Gender	Headcount	Enrollment	FTES	Fall 2012 AHC Enrollment, FTES, Retention & Success
First Time Student	4.0	14.0	2.2	Female	35.0	111.0	18.4	Enrollment 28,559
First Time Transfer	3.0	8.0	1.5	Male	4.0	12.0	2.1	Headcount 10,883
Continuing	27.0	83.0	13.9					Sections 1,004
Returning	5.0	18.0	2.8					Retention % 86.62%
Grand Total	39.0	123.0	20.4					Success % 69.63%
								FTES 3,775

The demographic data for Fall 2012 reveals that 49% of the combined MA and billing and coding students were Hispanic, and 51% were White. 35 students were female; 4 were male. Three students were under the age of 19; 14 were in the 20-24 age group; 9 were 25-29 years old; 5 were aged 30-34; 2 were 35-39; 3 were 40-49, and 3 were over 50.

Several of the students were seeking training for other careers, having lost their previous employment due to the recession. Those tended to be the students in the older category. Medical assisting is typically an entry-level field, attracting students for a variety of reasons. Some don't have the educational background or finances to attend school for more than a year to prepare for a job. Those students tend to be in the younger age group. I have had some non-working mothers whose children have grown come to the program because they would like to work in medicine, but don't want to

spend years preparing. Some are looking to the field as the first step in a medical career, perhaps going into nursing or physician's assisting if they find they like working in medicine. Some know they want to be nurses but want to start working as medical assistants while they are waiting to get into the nursing program, which can take several years.

Retention & Success by Demographics for MA305 Fall 2012



The lowest success rate was for males (50%). There were four students in the class; two did not pass. Next to males, the first time students again had the lowest rate of success (67%). The highest success rate that semester was in Hispanic students (90%), while White students had an 85% success rate.

In the age groupings, the lowest percentage of success (89%) was in the 20 - 24 age group. Several of the students in that age group were working mothers, which could account for the reduced percentage. All other age groups had 100% retention and success. By the end of Fall 2012, there were 17 students remaining in the MA option of the program. One student was returning in Spring 2013 to repeat the MA 353 course, which she had not passed the previous year. There were 19 completed applications for the billing and coding option of the program, which would begin in Spring 2013. Enrollment numbers were now low for both programs. The plan to increase enrollment in the programs included more outreach by the coordinator through attendance at

career fairs, informing counselors that the program was low on enrollment, and accepting more applications (above the maximum number for the classes) during the application period.

Single Term Display

Spring 2013 Enrollment	Spring 2013 Sections	Spring 2013 FTES	Spring 2013 Retention & Success	Retention %	Success %	retained	success			
course	course	course	course							
MA305	19	MA305	1	MA305	3.26	MA305	94.74%	89.47%	18.00	17.00
MA352	17	MA352	1	MA352	3.30	MA352	100.00%	94.12%	17.00	16.00
MA353	18	MA353	1	MA353	6.29	MA353	94.44%	94.44%	17.00	17.00
MA355	17	MA355	1	MA355	5.04	MA355	100.00%	100.00%	17.00	17.00
MA356	17	MA356	1	MA356	5.47	MA356	100.00%	100.00%	17.00	17.00
Grand Total	88	Grand Total	5	Grand Total	23.36	Grand Total	97.73%	95.45%	86.00	84.00

Retention & Success Graph Spring 2013 MA

Click on course name to get retention/success by course demographics



Spring 2013 AHC Enrollment, FTES, Retention & Success

Enrollment	29,609
Headcount	11,361
Sections	1,087
Retention %	96.17%
Success %	70.38%
FTES	3,813

MA 305: 95% Retention, 89% Success
MA 352: 100% Retention, 94% Success
MA 353: 94% Retention, 94% Success
MA 355: 100% Retention, 100% Success
MA 356: 100% Retention, 100% Success
Grand Total: 98% retention, 95% success

The overall Allan Hancock College retention and success rates for Fall were 86% retention, 70% success.

The course with the lowest success rate was MA 305. In both the medical assisting and medical billing options, that course tends to have the lowest success rate. The course, which is a combination of medical terminology, anatomy and physiology, and pathology, is one of the most difficult in the program. It tends to have the lowest success rate in every semester in both options of the program.

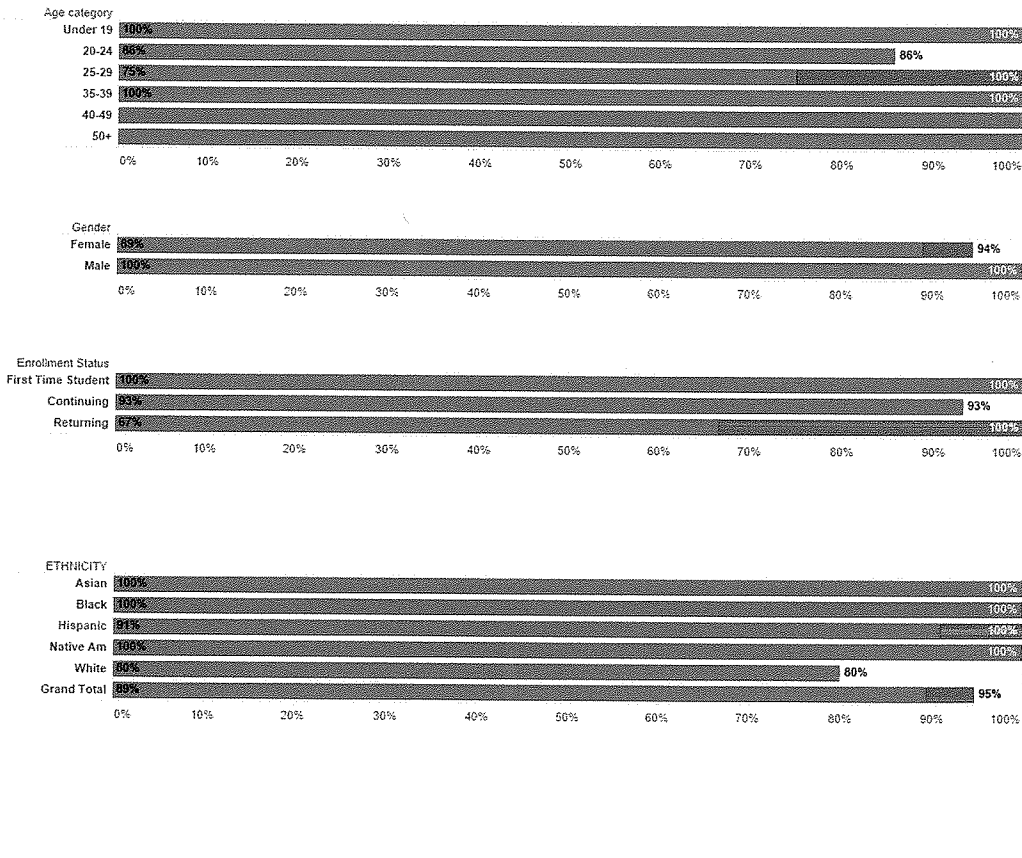
Single Term Display - Demographics

click on any demographic category or course to sort by that field

	Term Spring 2013	subject_code MA	Credit Status Multiple Values	Retention % 0 to 1	Success % 0 to 1					
	CENTER All	DAYTIME All	Residency All							
ETHNICITY	Headcount	% Headcount	Enrollment	% Enrollment	FTES	% ftes	Age category	Headcount	Enrollment	FTES
Asian	1.00	2.70%	2.00	2.27%	0.37	1.57%	Under 19	3.00	6.00	1.51
Black	1.00	2.70%	1.00	1.14%	0.17	0.73%	20-24	15.00	37.00	10.11
Hispanic	20.00	54.05%	48.00	54.55%	12.54	53.66%	25-29	7.00	17.00	4.37
Native Am	1.00	2.70%	2.00	2.27%	0.37	1.57%	30-34	3.00	7.00	2.28
White	14.00	37.84%	35.00	39.77%	9.92	42.47%	35-39	1.00	2.00	0.37
Grand Total	37.00	100.00%	88.00	100.00%	23.36	100.00%	40-49	4.00	9.00	2.07
							50+	4.00	10.00	2.67
							Grand Total	37.00	88.00	23.36

Enrollment Status	Headcount	Enrollment	FTES	Gender	Headcount	Enrollment	FTES	Spring 2013 AHC Enrollment, FTES, Retention & Success
First Time Student	3.00	6.00	1.68	Female	35.00	85.00	22.64	
Continuing	31.00	76.00	20.58	Male	2.00	3.00	0.72	Enrollment 29,609
Returning	3.00	6.00	1.10					Headcount 11,361
Grand Total	37.00	88.00	23.36					Sections 1,087
								Retention % 86.17%
								Success % 70.38%
								FTES 3,813

Retention & Success by Demographics for MA305 Spring 2013



The retention and success rates by demographics for the MA 305 course reveals that the lowest success rate was in the 25-29 age group, female, white, returning student.

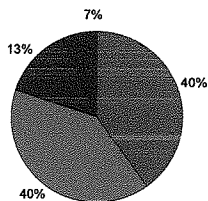
The BUS 107 course was dropped as a prerequisite. Many students had been given waivers because they had been unable to get into the course in time to complete it prior to the start of the program. If everyone who was not able to take the course had been dropped, there would not have been enough students to start the program. The majority of students entering the MA program have not been planning for years to become medical assistants. They decide to apply to the program in spring, too late to take the prerequisite course.

Data reveals that those who did not take the course were as successful as those who did take it. There was one failure in the MA 305 course in the group who had not taken the prerequisite, but there were also more As in that group than in the group that had taken the prerequisite.

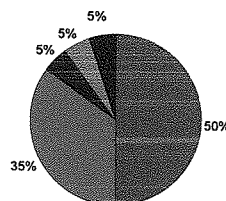
Students in MA305 that also took BUS107 prior to Fall 2011

		Grade								
In / Out of Cohort	Display Course	A	B	C	D	F	NP	P	W	
In Prereq Course	MA305	6	6	2					1	STEP 1: Choose 2 courses to evaluate
NOT in Prereq Course	MA305	10	7	1					1	STEP 2: Choose term o cohort to evaluate Fall 2011
Grand Total		16	13	3					2	
In / Out of Prereq A	Display Course	A	B	C	D	F	NP	P	W	STEP 3: Set to earliest term in step 2 Fall 2011
In	MA305	2	2							
In / Out of Prereq B	Display Course	A	B	C	D	F	NP	P	W	STEP 4: Choose which course is the cohort MA305
In	MA305			1					1	
In / Out of Prereq C	Display Course	A	B	C	D	F	NP	P	W	STEP 5: Choose which course is the prereq BUS107
In	MA305	3	1							
In / Out of Prereq D	Display Course	A	B	C	D	F	NP	P	W	STEP 6: Choose same course as step 4 MA305
In	MA305	1	1							
In / Out of Prereq F	Display Course	A	B	C	D	F	NP	P	W	
In	MA305	1	1	1						

Grade Distribution for MA305 students who took BUS107 prior to Fall 2011



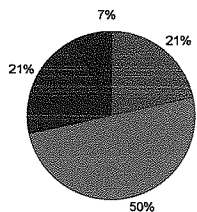
Grade Distribution for MA305 students who DID NOT take BUS107 prior to Fall 2011



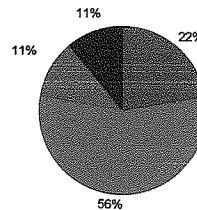
Students in MA305 that also took BUS107 prior to Fall 2012

		Grade								
In / Out of Cohort	Display Course	A	B	C	D	F	NP	P	W	
In Prereq Course	MA305	3	7	3					1	
NOT in Prereq Course	MA305	2	5			1				
Grand Total		5	12	3		1				2
										STEP 1: Choose 2 courses to evaluate
In / Out of Prereq A	Display Course	A	B	C	D	F	NP	P	W	
In	MA305		1							
										STEP 2: Choose term of cohort to evaluate Fall 2012
In / Out of Prereq B	Display Course	A	B	C	D	F	NP	P	W	
In	MA305	1	3	2						
										STEP 3: Set to earliest term in step 2 Fall 2012
In / Out of Prereq C	Display Course	A	B	C	D	F	NP	P	W	
In	MA305	1	1							1
										STEP 4: Choose which course is the cohort MA305
In / Out of Prereq F	Display Course	A	B	C	D	F	NP	P	W	
In	MA305		1							
										STEP 5: Choose which course is the prereq BUS107
										STEP 6: Choose same course as step 4 MA305

Grade Distribution for MA305 students who took BUS107 prior to Fall 2012



Grade Distribution for MA305 students who DID NOT take BUS107 prior to Fall 2012



- Grade
- A
- B
- C
- D
- F
- NP
- P
- W

2013/14 Year

When applications came in for the class of 2013/14, 35 were accepted into the medical assisting option, with the rationale that at least five students were likely to drop prior to the beginning of the Fall 2013 semester. The maximum capacity for students in the labs is 30. It seemed to be a reasonable assumption (based upon the experience of the past two years) that we would start in Fall with no more than 30 students. We did lose three of the 35 students prior to the start of the semester, but retained 32 of them, which made teaching the lab courses not only very challenging, but stressful for instructors, due to the difficulty of checking off that number of students for the required skills. I applied for and received a CTEA grant for two student workers to assist in the labs to assure safety. I was able to hire two graduates of the program to observe students practicing simulation with manikins so that the two instructors could concentrate on 1:1 supervision with students who were performing injections and blood draws on each other. Even so, it was very difficult to check off all students on all skills during lab time. We frequently ran past the ending time for lab and were still checking off students after the written final. I learned from my experience that year that it is inadvisable to accept more than 30 applications for the MA program. Going over that number of students makes the labs almost unmanageable, even with lab assistants. Without the assistants, it would be impossible. Since I was told that I could not use CTEA funds for lab assistants

the following year, I determined that the program should not accept more than 30 applications for the program.

Lack of coordinator time to find new clinical placements and manage the program was again noted in the annual update. A request was submitted on the appropriate form for consideration for increased reassigned time, which disappeared into the ether upon submission, apparently, as nothing was heard about it afterward. With no increase in reassigned time, I planned to decrease my teaching load by using the 40% reassigned time I was to receive in the following year by becoming department chair.

Students were not required to obtain state or national certification in medical assisting, but job opportunities were increased for those who had certification. More clinical supervisors were verbalizing that certification was being required. Our graduates qualified to take the certification exam given by the California Certifying Board of Medical Assistants (CCBMA), which is recognized in California, and a national certification through the National Healthcareer Association (NHA) and the American Medical Technologists (AMT). Those employers who preferred certified applicants, such as Sansum Clinic, preferred applicants who had certification by Medical Board of California approved certifying agencies. The certifying agencies that were accepted by the Medical Board of California were the American Association of Medical Assistants (AAMA), American Medical Technologists (AMT), and the CCBMA. Graduates of our program do not qualify to sit for the AAMA exam, because applicants must have graduated from an ABHES or CAAHEP accredited school, which Allan Hancock College is not. Certification tests were given at Pearson VUE, and I did not have access to the results. I asked students to let me know when they took a certification exam and whether or not they passed the exam so that I could determine the success rate. However, I received few emails with that information.

It was noted in the annual update that the program could use an increase in the budget for additional equipment and supplies. The budget included \$1175.00 for instructional supplies, \$100.00 for office/operational supplies, and \$100.00 for repairs. \$921.00 of the instructional supplies were restricted funds, so couldn't be used for equipment needs. There were numerous non-reusable supplies that were needed in the program for skills practice. Supplies such as personal protective equipment (disposable gowns, masks, gloves, caps), bandages, dressings, sutures, staples, needles, syringes, practice medications, blood collection vials, reagent strips, tourniquets, and simulated blood were used and discarded every year. In the 2011-2012 year I started requiring students to purchase a skills kit, containing supplies for some of the procedures that use sterile equipment. The kits didn't contain all of the supplies needed for practice of skills or for repeat attempts of check-offs on skills. Much of the equipment that we had, such as the centrifuge, otoscope and ophthalmoscope, hemaglobinometer, were outdated and were not up to the standard of the industry.

The following is from the 2014 annual update:

RECOMMENDATION	TARGET DATE	RESOURCES NEEDED
Increase coordinator reassigned time from 20% to 40%. See course action plans and Internal/External conditions for rationale and data.	2014-2015	Additional 6 hrs/week of part-time faculty pay
RECOMMENDATION	TARGET DATE	RESOURCES NEEDED
New equipment that is up to industry standards. See course action plans and Internal/External conditions for rationale and data.	Fall 2014	Will apply to CTEA for funds for Centrifuge Otoscope + Ophthalmoscope Hemoglobinometer Lifeform phlebotomy training arm Lifeform intramuscular injection simulator
RECOMMENDATION	TARGET DATE	RESOURCES NEEDED
Limit class size to 30.	Fall 2014	0
RECOMMENDATION	TARGET DATE	RESOURCES NEEDED
Increase supplies for clinical procedures classes. See course action plans and Internal/External conditions for rationale and data.	Fall 2014	Increased budget for instructional supplies from from \$254.00 to \$1000.00
RECOMMENDATION	TARGET DATE	RESOURCES NEEDED
Increase office supplies budget.	Fall 2014	Increased budget for office supplies \$400.00
RECOMMENDATION	TARGET DATE	RESOURCES NEEDED
Increase budget for repairs.	Fall 2014	Increased budget for repairs from \$100.00 to \$300.00
RECOMMENDATION	TARGET DATE	RESOURCES NEEDED

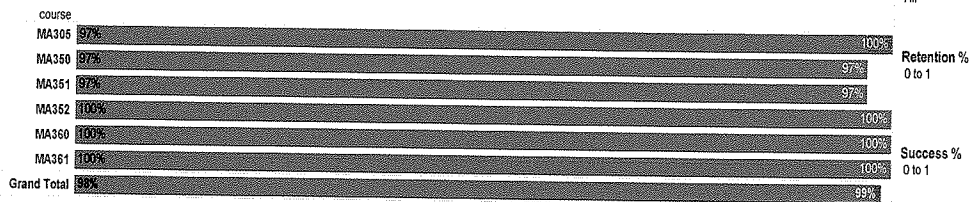
<p>Include in budget money for travel to reimburse cost of visits to externship sites. See course action plan for MA 360.</p>	<p>Spring 2015</p>	<p>There is no money in the budget for this item at present.</p>
<p>The issue of most concern was the continuing low enrollment for the medical billing option of the program. Students in the medical billing program verbalized that they found it confusing that the two options started at different times. They were also not happy that starting in Spring meant there was a break in-between the first and second semester of the program, making it longer to obtain the certificate. It now took 12 months to obtain the certificate rather than the 10 months it would take if the first and second semesters were offered consecutively. The summer session was too short to offer the courses in the evening, so that was not an option.</p> <p>Despite the challenge, the success rate for Fall 2013 was again very high for the program:</p> <p>MA 305: 100% Retention, 97% Success MA 352: 97% Retention, 97% Success MA 353: 97% Retention, 97% Success MA 355: 100% Retention, 100% Success MA 356: 100% Retention, 100% Success Grand Total: 99% retention, 98% success</p>		

Single Term Display

Single Term Display										Term	
										Fall 2013	
Fall 2013 Enrollment	Fall 2013 Sections		Fall 2013 FTES	Fall 2013 Retention & Success						subject_code	
course	course	course	course	Retention %	Success %	retained	success				
MA305	31	MA305	1	MA305	5.02	MA305	100.00%	96.77%	31.0	30.0	MA
MA360	32	MA360	1	MA360	2.07	MA360	96.88%	96.88%	31.0	31.0	Credit Status
MA351	32	MA351	1	MA351	5.67	MA351	96.88%	96.88%	31.0	31.0	Multiple Values
MA352	31	MA352	1	MA352	6.02	MA352	100.00%	100.00%	31.0	31.0	ETHNICITY
MA360	13	MA360	1	MA360	3.37	MA360	100.00%	100.00%	13.0	13.0	All
MA361	13	MA361	1	MA361	2.19	MA361	100.00%	100.00%	13.0	13.0	Gender
Grand Total	152	Grand Total	6	Grand Total	24.34	Grand Total	98.68%	98.03%	150.0	149.0	All

Retention & Success Graph Fall 2013 MA

Click on course name to get retention/success by course demographics



Fall 2013 AHC Enrollment, FTES, Retention & Success

Enrollment	28,612
Headcount	10,922
Sections	1,069
Retention %	86.97%
Success %	70.56%
FTES	3,852

Measure Names
 Retention %
 Success %

The following graph shows that the demographics for the program remained similar to past semesters.

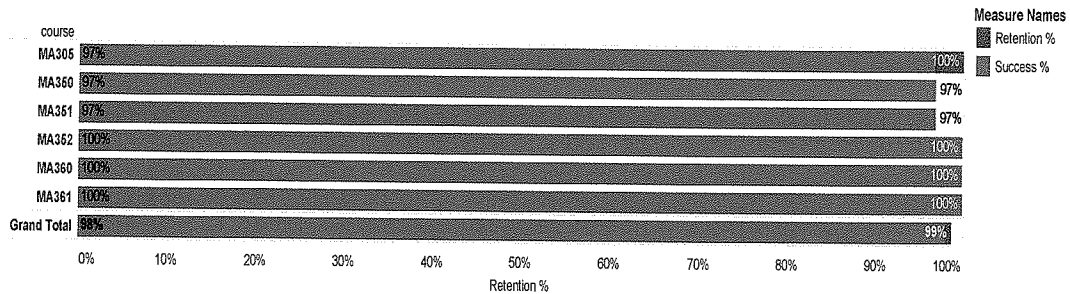
Single Term Display - Demographics

click on any demographic category or course to sort by that field

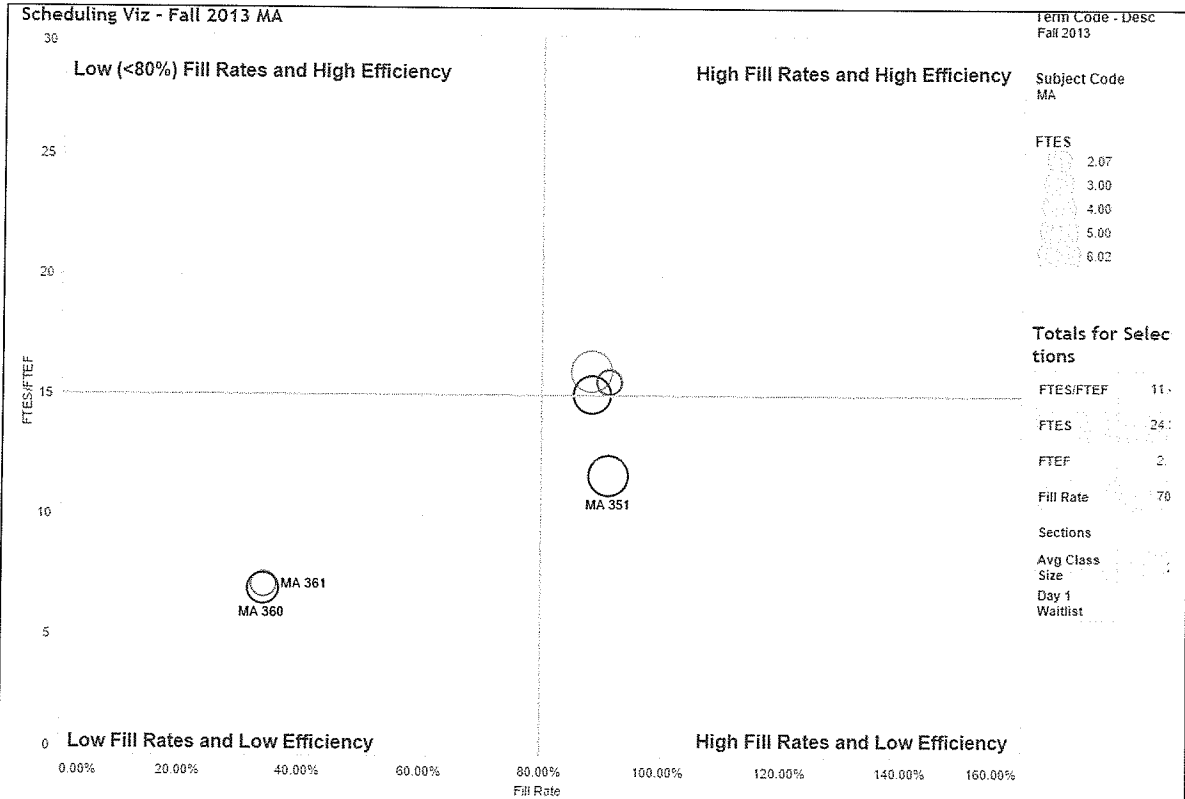
	Term	subject_code	Credit Status	Retention %	Success %					
	Fall 2013	MA	Multiple Values	0 to 1	0 to 1					
	CENTER	DAYTIME	Residency							
	All	All	All							
ETHNICITY	Headcount	% Headcount	Enrollment	% Enrollment	FTES	% ftes	Age category	Headcount	Enrollment	FTES
Filipino	1.0	2.27%	4.0	2.63%	0.6	2.46%	Under 19	2.0	8.0	1.2
Hispanic	27.0	61.36%	96.0	63.16%	15.3	62.73%	20-24	15.0	58.0	8.9
Native Am	1.0	2.27%	2.0	1.32%	0.4	1.76%	25-29	12.0	40.0	6.5
White	15.0	34.09%	50.0	32.89%	8.0	33.06%	30-34	4.0	14.0	2.2
Grand Total	44.0	100.00%	152.0	100.00%	24.3	100.00%	35-39	2.0	6.0	1.0
							40-49	5.0	14.0	2.5
							50+	4.0	12.0	2.1
							Grand Total	44.0	152.0	24.3

Enrollment Status	Headcount	Enrollment	FTES	Gender	Headcount	Enrollment	FTES	Fall 2013 AHC Enrollment, FTES, Retention & Success
First Time Transfer	4.0	16.0	2.4	Female	43.0	150.0	23.9	
Continuing	37.0	126.0	20.3	Male	1.0	2.0	0.4	Enrollment 28,612
Returning	3.0	10.0	1.6					Headcount 10,922
Grand Total	44.0	152.0	24.3					Sections 1,069
								Retention % 86.97%
								Success % 70.56%
								FTES 3,852

Retention & Success Fall 2013 MA



As seen in the following Fill Rate and Efficacy graph, the two medical billing courses (MA 360 + MA 361) had the lowest fill rate and efficacy. Fill rate and efficacy for the medical billing option of the program are all in the 80 – 100% column.



subj_crse_no	CRN	Site Code	FTEF/FTEF	FTEF	FTEF	Enrollment	Max Enroll	Fill Rate	Day 1 Waitlist	Demand Ratio
MA 305	20695	SM	15.07	5.02	0.33	31.00	35.00	89%	0.00	89%
MA 350	20692	SM	15.58	2.07	0.13	32.00	35.00	91%	0.00	91%
MA 351	20693	SM	11.69	5.67	0.49	32.00	35.00	91%	0.00	91%
MA 352	20694	SM	16.02	6.02	0.38	31.00	35.00	89%	0.00	89%

There were no courses offered in Spring 2014 for the medical billing option, as the start date for the program had been moved to Fall 2014, to make the application period coincide with that of the medical assisting option. As seen in the following graph, the retention and success rate for the second semester of the medical assistant option remained very high:

- MA 353: 100% Retention, 97% Success
- MA 355: 100% Retention, 100% Success
- MA 356: 97% Retention, 97% Success
- Grand Total: 99% retention, 98% success**

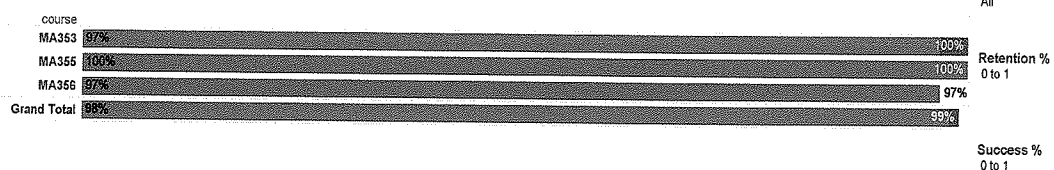
The retention and success rate for Allan Hancock College as a whole:
 85% Retention
 70% Success

Single Term Display

Spring 2014 Enrollment		Spring 2014 Sections		Spring 2014 FTES		Spring 2014 Retention & Success				Term Spring 2014	
course		course		course		course	Retention %	Success %	retained	success	subject_code
MA353	31	MA353	1	MA353	10.84	MA353	100.00%	96.77%	31.00	30.00	MA
MA355	31	MA355	1	MA355	8.92	MA355	100.00%	100.00%	31.00	31.00	Credit Status Multiple Values
MA356	31	MA356	1	MA356	9.66	MA356	96.77%	96.77%	30.00	30.00	
Grand Total	93	Grand Total	3	Grand Total	29.41	Grand Total	98.92%	97.85%	92.00	91.00	ETHNICITY All

Retention & Success Graph Spring 2014 MA

Click on course name to get retention/success by course demographics



Spring 2014 AHC Enrollment, FTES, Retention & Success

Enrollment	29,369
Headcount	11,293
Sections	1,141
Retention %	85.23%
Success %	70.22%
FTES	3,868

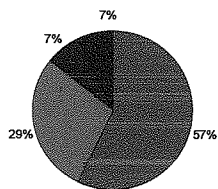
Measure Names
 Retention %
 Success %

The Course Review, which was to be completed prior to the Comprehensive Review, due in Spring 2015, was not done by the coordinator until summer break, due to lack of coordinator time. The Course Review resulted in recognition that taking the CBIS 101 course did not result in better outcome for students. In fact, most students were already getting the course waived because they had already taken computer courses or had the ability to use a computer. The course for which the CBIS 101 course would be the most advantageous would be the MA 352 MA Administrative Procedures course. A comparison of student grades in the Fall 2012 MA 352 course for those who had taken the CBIS 101 course with those of students who had not taken the course, revealed that the students who had not taken the course had slightly better grades than those who had taken the course.

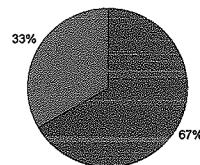
Students in MA352 that also took CBIS101 prior to Fall 2012

		Grade									
In / Out of Cohort	Display Course	A	B	C	D	F	NP	P	W		
In Prereq Course	MA352	8	4	1						1	STEP 1: Choose 2 courses to evaluate
NOT in Prereq Course	MA352	6	3								STEP 2: Choose term of cohort to evaluate Fall 2012
Grand Total		14	7	1						1	
In / Out of Prereq A	Display Course	A	B	C	D	F	NP	P	W		STEP 3: Set to earliest term in step 2 Fall 2012
In	MA352	3	2							1	
In / Out of Prereq B	Display Course	A	B	C	D	F	NP	P	W		STEP 4: Choose which course is the cohort MA352
In	MA352	1	1								
In / Out of Prereq C	Display Course	A	B	C	D	F	NP	P	W		STEP 5: Choose which course is the prereq CBIS101
In	MA352	1	1	1							
In / Out of Prereq D	Display Course	A	B	C	D	F	NP	P	W		STEP 6: Choose same course as step 4 MA352
In	MA352	2	1								
In / Out of Prereq F	Display Course	A	B	C	D	F	NP	P	W		
In	MA352	1									

Grade Distribution for MA352 students who took CBIS101 prior to Fall 2012



Grade Distribution for MA352 students who DID NOT take CBIS101 prior to Fall 2012



Grade
A
B
C
D
F
NP
P
W

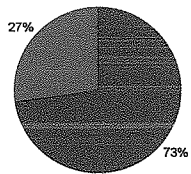
A comparison of grades for the CBIS 101 prerequisite for the Fall 2013 MA 352 class showed a slight advantage for those students who had taken the prerequisite. All students who had not taken the prerequisite passed the MA 352 course. Most students received an A or B in the course. Only one student received a C in the course. Any slight advantage there might have been was outweighed by the difficulty students were having registering for the course, which filled quickly.

The decision was made to drop the program prerequisite for future classes. Dropping the prerequisite has not resulted in lower retention or pass rates. It did result in a change to the certificate for Medical Billing. The drop in units caused the certificate to become a Certificate of Accomplishment instead of a Certificate of Achievement. Local employers were asked if it made a difference to them in deciding whether or not to hire a student from our program. None said that it would make any difference.

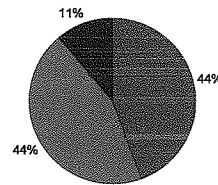
Students in MA352 that also took CBIS101 prior to Fall 2013

		Grade								
In / Out of Cohort	Display Course	A	B	C	D	F	NP	P	W	
In Prereq Course	MA352	16	6							
NOT in Prereq Course	MA352	4	4	1						
Grand Total		20	10	1						STEP 1: Choose 2 courses to evaluate
In / Out of Prereq A	Display Course	A	B	C	D	F	NP	P	W	
In	MA352	9	2							STEP 2: Choose term of cohort to evaluate Fall 2013
In / Out of Prereq B	Display Course	A	B	C	D	F	NP	P	W	
In	MA352	4	1							STEP 3: Set to earliest term in step 2 Fall 2013
In / Out of Prereq C	Display Course	A	B	C	D	F	NP	P	W	
In	MA352	2	2							STEP 4: Choose which course is the cohort MA352
In / Out of Prereq D	Display Course	A	B	C	D	F	NP	P	W	
In	MA352		1							STEP 5: Choose which course is the prereq CBIS101
In / Out of Prereq F	Display Course	A	B	C	D	F	NP	P	W	
In	MA352		1							STEP 6: Choose same course as step 4 MA352

Grade Distribution for MA352 students who took CBIS101 prior to Fall 2013



Grade Distribution for MA352 students who DID NOT take CBIS101 prior to Fall 2013



Demographics for the class for Spring 2014 were as follows:

Ethnicity

Filipino: 1
Hispanic: 20
White: 10

Age

Under 19: 1
20 – 24: 16
25 – 29: 6
30 – 34: 3
35 – 39: 1
40 – 49: 2
50 +: 2

Gender

Female: 31
Male: 0

Single Term Display - Demographics

click on any demographic category or course to sort by that field

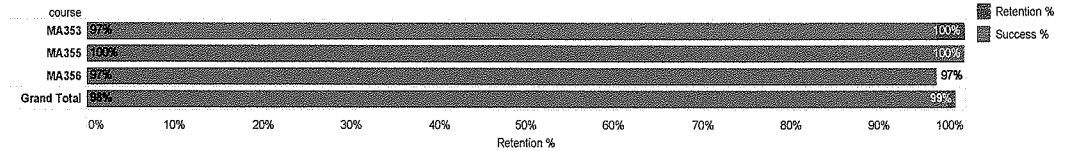
	Term Spring 2014	subject_code MA	Credit Status Multiple Values	Retention % 0 to 1	Success % 0 to 1					
	CENTER All	DAYTIME All	Residency All							
ETHNICITY	Headcount	% Headcount	Enrollment	% Enrollment	FTES	% ftes	Age category	Headcount	Enrollment	FTES
Filipino	1.00	3.23%	3.00	3.23%	0.96	3.26%	Under 19	1.00	3.00	0.96
Hispanic	20.00	64.52%	60.00	64.52%	18.86	64.13%	20-24	16.00	48.00	15.35
White	10.00	32.26%	30.00	32.26%	9.59	32.61%	25-29	6.00	18.00	5.43
Grand Total	31.00	100.00%	93.00	100.00%	29.41	100.00%	30-34	3.00	9.00	2.88
							35-39	1.00	3.00	0.96
							40-49	2.00	6.00	1.92
							50+	2.00	6.00	1.92
							Grand Total	31.00	93.00	29.41

Enrollment S..	Headcount	Enrollment	FTES	Gender	Headcount	Enrollment	FTES
Continuing	30.00	90.00	28.46	Female	31.00	93.00	29.41
Returning	1.00	3.00	0.96				
Grand Total	31.00	93.00	29.41				

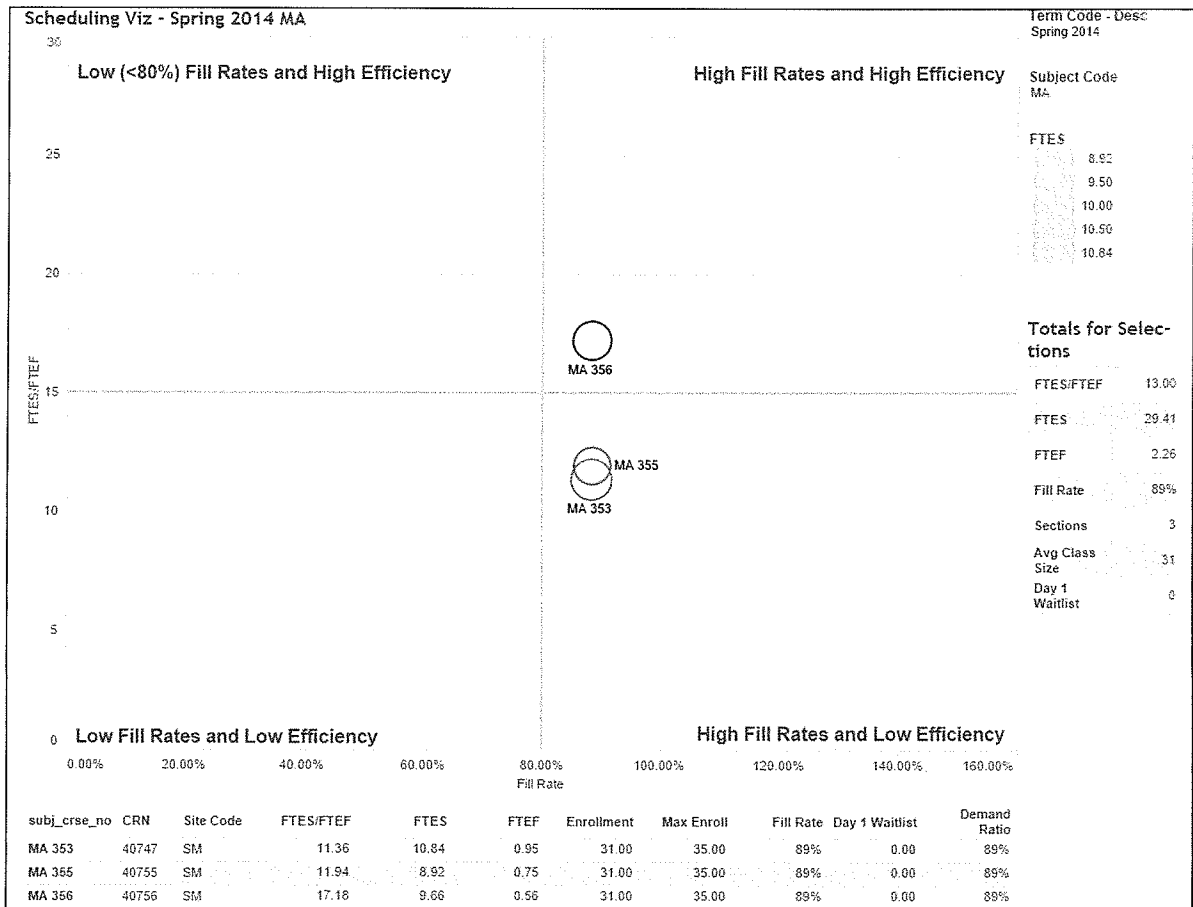
Spring 2014 AHC Enrollment, FTES, Retention & Success

Enrollment	29,369
Headcount	11,293
Sections	1,141
Retention %	85.23%
Success %	70.22%
FTES	3,868

Retention & Success Spring 2014 MA



As seen in the following graph, fill rates and efficacy for the courses in the Spring 2014 semester remained in the 80% - 90% column.



2014/15 Year

Fall of 2014, the billing option and medical assisting options of the program began at the same time.

There is no annual update for this year, because this is the year that the comprehensive review was due. Unfortunately, I found that the increased reassigned time I had gained as department chair really did not make up for the lack of coordinator time. Due to the demands of both positions, I was unable to complete the review in time to submit it by the end of the semester, and will be submitting it in the Fall 2015 semester.

A survey of the clinical supervisors during the 2014 externships revealed that most clinics no longer used centrifuges, as the blood tests that required a centrifuge were now being run using more advanced equipment, therefore I did not request purchase of a new centrifuge. The program did need several other types of equipment. In order to reduce the amount of time it takes to check students off on skills in the lab, equipment was requested to set up 2 clinic workstations. Funding for the following equipment was requested: Brewer access examination table, mayo stand, exam lamp,

otoscope/ophthalmoscope set. The following is excerpted from the CTEA application for funding the equipment:

1. **Program Improvement:** Describe specific program improvement issues, and include specific examples. (use Core Indicator Reports, Program Review plans, Outcomes Assessment data)

There is inadequate equipment for two clinic workstations. There is only one examination table, one mayo stand and one functional otoscope/ophthalmoscope in the lab. There is no examination lamp. These items are needed to check students off on several clinical procedures. Having only one of each for 30 students makes it an arduous task to check off all of the students. Having two workstations would allow for both lab instructors to check off students at the same time on those skills that require that equipment. The 2013-14 Program Review addressed the need for additional equipment in the program. Outcomes assessment data also addresses this need. The Core Indicator Information for 2014-2015 reveals in Core Indicator 1 (Technical Skill Attainment) that 4 out of 53 students are nontraditional, 2 are displaced homemakers, 36 are economically disadvantaged, 5 have limited English proficiency, 15 are single parents, and 3 are students with disabilities.

2. Describe how you **plan to address** the issues identified in #1.

I plan to purchase a second examination table, examination lamp, mayo stand and otoscope/ophthalmoscope to create a second workstation.

3. What **workforce development** need does your program improvement plan address? How was this need determined?

My program improvement plan addresses the increasing need for medical assistants. Projections for occupational need and job growth are in the top 5% of careers, according to Labor Market data. The Bureau of Labor Statistics projects the increase in demand between 2010 and 2020 to be much faster than average at 31%. (<http://www.bls.gov/ooh/Healthcare/Medical-assistants.htm>). Increasing the proficiency of the medical assisting students will increase the likelihood of their being successful in externships and in being hired.

4. What is the **target special population** for this priority? How will your program improvement plan overcome their barriers to access and success?

Special population students are more likely to be successful when they have adequate practice opportunities. Providing increased opportunities to practice assisting with patient examinations will overcome the barrier of lack of confidence and hesitancy in attempting this skill.

- *Special Populations include: economically disadvantaged, limited English proficient, students with disabilities, single parents and displaced homemakers, and nontraditional gender representation in the discipline.*

The fall semester began with a total of 24 students in the medical assisting option and 20 in the medical billing program. Success rates in all courses were high:

MA 305: 93% Retention, 91% Success

MA 350: 96% Retention, 96% Success

MA 351: 96% Retention, 96% Success

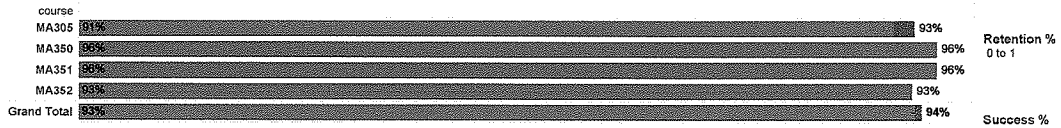
MA 352: 93% Retention, 93% Success

Grand Total: 94% Retention, 93% Success

Single Term Display

Fall 2014 Enrollment		Fall 2014 Sections		Fall 2014 FTES		Fall 2014 Retention & Success				Term	subject_code	
course		course		course		course	Retention %	Success %	retained	success	Fall 2014	MA
MA305	45	MA305	2	MA305	7.29	MA305	93.33%	91.11%	42.0	41.0		
MA350	24	MA350	1	MA350	1.55	MA350	95.83%	95.83%	23.0	23.0		
MA351	24	MA351	1	MA351	4.25	MA351	95.83%	95.83%	23.0	23.0		
MA352	44	MA352	2	MA352	8.55	MA352	93.18%	93.18%	41.0	41.0		
Grand Total	137	Grand Total	6	Grand Total	21.64	Grand Total	94.16%	93.43%	129.0	128.0		

Retention & Success Graph Fall 2014 MA
 Click on course name to get retention/success by course demographics



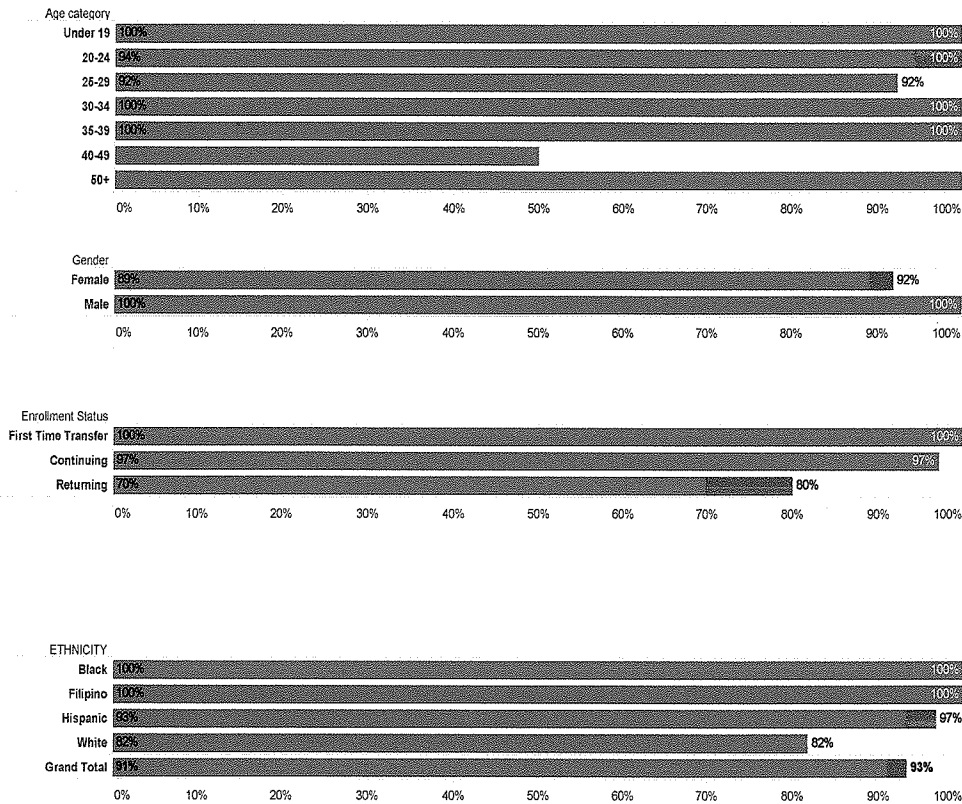
Fall 2014 AHC Enrollment, FTES, Retention & Success

Enrollment	29,153
Headcount	11,084
Sections	1,141
Retention %	86.83%
Success %	69.80%
FTES	3,900

Measure Names
 ■ Retention %
 ■ Success %

AHC overall retention and success rates were 87% Retention, 70% Success. Because the medical assisting and billing and coding options were both starting at the same time in this semester, the success rates in MA 305 and MA 352 are the combined rates for both options, because both options take the same classes in this semester.

Retention & Success by Demographics for MA305 Fall 2014

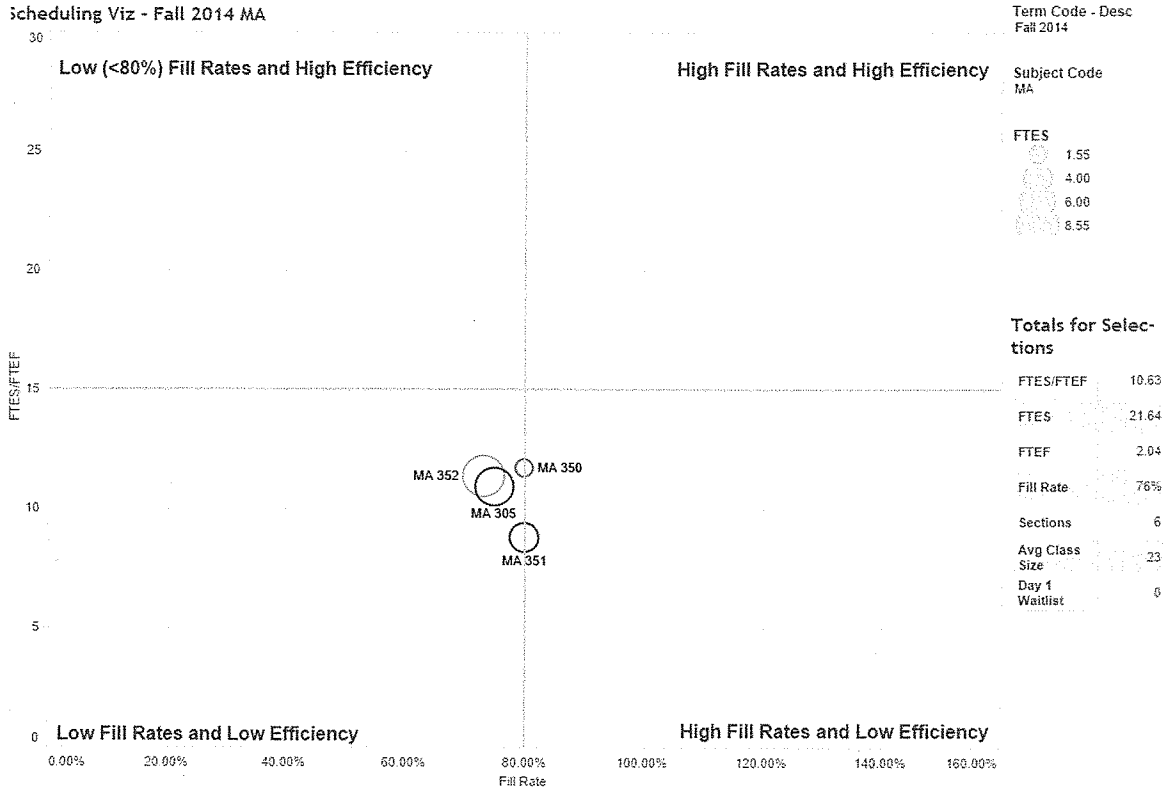


Measure Names
 ■ Retention %
 ■ Success %

As in previous semesters, the Fall 2014 success rate in the MA 305 course, which was taken by students in both options of the program, was higher for Hispanic students than for White students (93% for Hispanics and 82% for Whites). As seen in the demographic chart below, the fall MA program had the following numbers of students by demographics:

Ethnicity	Age	Gender
Black: 2	Under 19: 1	Female: 38
Filipino: 2	20 – 24: 18	Male: 8
White: 11	25 – 29: 14	
Hispanic: 31	30 – 34: 5	
	35 – 39: 2	
	40 – 49: 4	
	50 +: 2	

There were several more males than usual in that class (all of whom were successful in completing the program). As seen in the following graph, there was an increase in fill rate for the billing program from 20 – 40% to 60 – 80%, but a corresponding drop in fill rate and efficiency for the medical assisting option from 80 – 100% to 60 – 80%.



subj_crse_no	CRN	Site Code	FTES/FTEF	FTES	FTEF	Enrollment	Max Enroll	Fill Rate	Day 1 Waitlist	Demand Ratio
MA 305	22096	SM	11.67	3.89	0.33	24.00	30.00	80%	0.00	80%
	22934	SM	10.21	3.40	0.33	21.00	30.00	70%	0.00	70%
MA 350	22093	SM	11.69	1.55	0.13	24.00	30.00	80%	0.00	80%
MA 351	22094	SM	8.77	4.25	0.49	24.00	30.00	80%	0.00	80%

All 24 students who started the medical assisting option of the program continued into the Spring 2015 Semester. All 24 students were retained in the program and were successful. The MA 356 course shows a 96% retention and success rate. That reflects one student receiving an Incomplete grade for the course because she had to miss a week of externship due to illness. She later finished the externship and did pass the course; essentially, the retention and success rate for the MA 356 course was also 100%.

College Core Indicator Information by 4-Digit TOP (2014-2015)

Perkins IV, Title I, Part C Local Application

Core Indicator 4 Employment			Negotiated Level		College Performance	Percent Above or Below Negotiated Level
	Count	Total	State	District		
25 CTE Cohort*	16	30	80.85	78.23	53.33	-24.9
26 Non-Traditional	DR	DR	80.85	78.23	DR	N/A
27 Displaced Homemaker			80.85	78.23	N/R	N/R
28 Economically Disadvantaged	13	25	80.85	78.23	52.00	-26.2
29 Limited English Proficiency	DR	DR	80.85	78.23	DR	N/A
30 Single Parent	DR	DR	80.85	78.23	DR	-44.9
31 Students with Disabilities	DR	DR	80.85	78.23	DR	N/A
32 Migrant			80.85	78.23	N/R	N/R

Core Indicator 5a Nontraditional Participation			Negotiated Level		College Performance	Percent Above or Below Negotiated Level
	Count	Total	State	District		
33 CTE Cohort*	4	44	22.60	16.44	9.09	-7.3
Non-Traditional	4	44	22.60	16.44	9.09	-7.3
Displaced Homemaker		2	22.60	16.44	0.00	N/A
Economically Disadvantaged	2	36	22.60	16.44	5.56	-10.9
Limited English Proficiency		5	22.60	16.44	0.00	N/A
Single Parent		15	22.60	16.44	0.00	-16.4
Students with Disabilities		3	22.60	16.44	0.00	N/A
Migrant			22.60	16.44	N/R	N/R

Core Indicator 5b Nontraditional Completions			Negotiated Level		College Performance	Percent Above or Below Negotiated Level
	Count	Total	State	District		
34 CTE Cohort*	1	31	26.50	17.93	3.23	-14.7
Non-Traditional	1	31	26.50	17.93	3.23	-14.7
Displaced Homemaker		1	26.50	17.93	0.00	N/A
Economically Disadvantaged		26	26.50	17.93	0.00	-17.9
Limited English Proficiency		3	26.50	17.93	0.00	N/A
Single Parent		12	26.50	17.93	0.00	-17.9
Students with Disabilities		1	26.50	17.93	0.00	N/A
Migrant			26.50	17.93	N/R	N/R

College Core Indicator Information by 4-Digit TOP (2014-2015)

Perkins IV, Title I, Part C Local Application

Agreement # _____ District/College: ALLAN HANCOCK/ALLAN HANCOCK

1208 - Medical Assisting

Instructions: Print out forms. Complete and sign bottom of last page.

Cohort Year CTE Enrollments: 263

CTE Headcount: 53

(includes CTE enrollments above introductory level only)

(CTE students enrolled above introductory level only)

Core Indicator 1 Technical Skill Attainment			Negotiated Level		College Performance	Percent Above or Below Negotiated Level
	Count	Total	State	District		
1 CTE Cohort*	41	44	89.50	89.50	93.18	3.7
2 Non-Traditional	4	4	89.50	89.50	100.00	N/A
3 Displaced Homemaker	2	2	89.50	89.50	100.00	N/A
4 Economically Disadvantaged	34	36	89.50	89.50	94.44	4.9
5 Limited English Proficiency	5	5	89.50	89.50	100.00	N/A
6 Single Parent	15	15	89.50	89.50	100.00	10.5
7 Students with Disabilities	3	3	89.50	89.50	100.00	N/A
8 Migrant			89.50	89.50	N/R	N/R

Core Indicator 2 Completions - Credential, Certificate, Degree or Transfer Ready			Negotiated Level		College Performance	Percent Above or Below Negotiated Level
	Count	Total	State	District		
9 CTE Cohort*	29	31	81.50	81.50	93.55	12.0
10 Non-Traditional	1	1	81.50	81.50	100.00	N/A
11 Displaced Homemaker	1	1	81.50	81.50	100.00	N/A
12 Economically Disadvantaged	24	26	81.50	81.50	92.31	10.8
13 Limited English Proficiency	2	2	81.50	81.50	100.00	N/A
14 Single Parent	10	12	81.50	81.50	83.33	1.8
15 Students with Disabilities	1	1	81.50	81.50	100.00	N/A
16 Migrant			81.50	81.50	N/R	N/R

Core Indicator 3 Persistence and Transfer			Negotiated Level		College Performance	Percent Above or Below Negotiated Level
	Count	Total	State	District		
17 CTE Cohort*	32	42	86.50	86.50	76.19	-10.3
18 Non-Traditional	2	4	86.50	86.50	50.00	N/A
19 Displaced Homemaker	2	2	86.50	86.50	100.00	N/A
20 Economically Disadvantaged	27	34	86.50	86.50	79.41	-7.1
21 Limited English Proficiency	4	4	86.50	86.50	100.00	N/A
22 Single Parent	11	15	86.50	86.50	73.33	-13.2
23 Students with Disabilities	3	3	86.50	86.50	100.00	N/A
24 Migrant			86.50	86.50	N/R	N/R

In the medical billing option of the program, 20 students passed the first semester, but 21 students began the second semester of the program. Because students who have previously taken the medical assisting option can opt to take just the second semester of the medical billing option to obtain a medical billing certificate, there may be more students in the second half than in the first, because of returning students. The medical billing courses both had 95% retention and success.

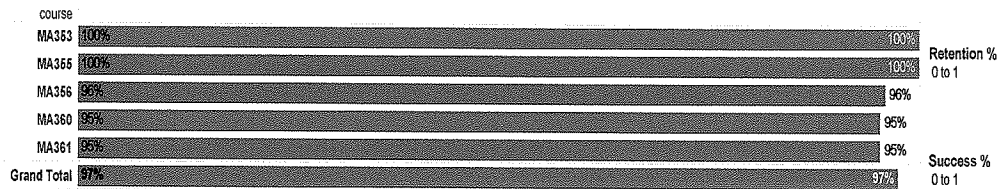
Single Term Display

Term
Spring 2015

Spring 2015 Enrollment	Spring 2015 Sections	Spring 2015 FTES	Spring 2015 Retention & Success	Retention %	Success %	retained	success	subject_code MA
course MA363 24	course MA363 1	course MA363 17.86	course MA363 17.86	100.00%	100.00%	24.0	24.0	
MA365 24	MA365 1	MA365 15.54	MA365 15.54	100.00%	100.00%	24.0	24.0	Credit Status Multiple Values
MA366 24	MA366 1	MA366 7.70	MA366 7.70	95.83%	95.83%	23.0	23.0	
MA360 21	MA360 1	MA360 5.44	MA360 5.44	95.24%	95.24%	20.0	20.0	ETHNICITY
MA361 21	MA361 1	MA361 3.54	MA361 3.54	95.24%	95.24%	20.0	20.0	All
Grand Total 114	Grand Total 5	Grand Total 50.07	Grand Total 50.07	97.37%	97.37%	111.0	111.0	Gender All

Retention & Success Graph Spring 2015 MA

Click on course name to get retention/success by course demographics



Spring 2015 AHC Enrollment, FTES, Retention & Success

Enrollment	28,984
Headcount	11,249
Sections	1,209
Retention %	85.44%
Success %	71.38%
FTES	4,048

Residency
All

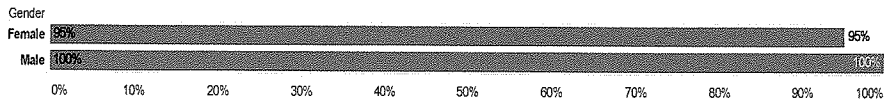
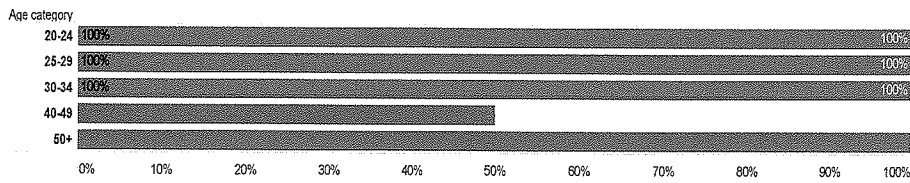
CENTER
All

DAYTIME
All

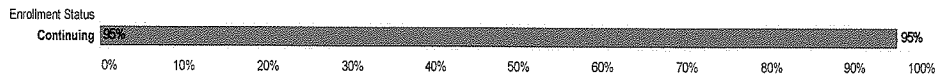
Measure Names

- Retention %
- Success %

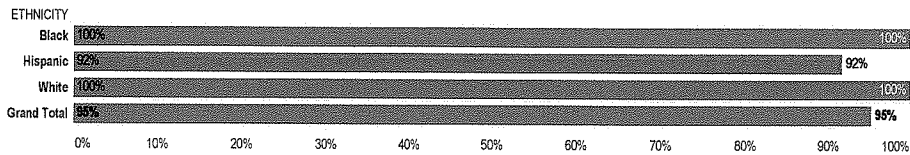
Retention & Success by Demographics for MA360 Spring 2015



Retention & Success by Demographics for MA360 Spring 2015



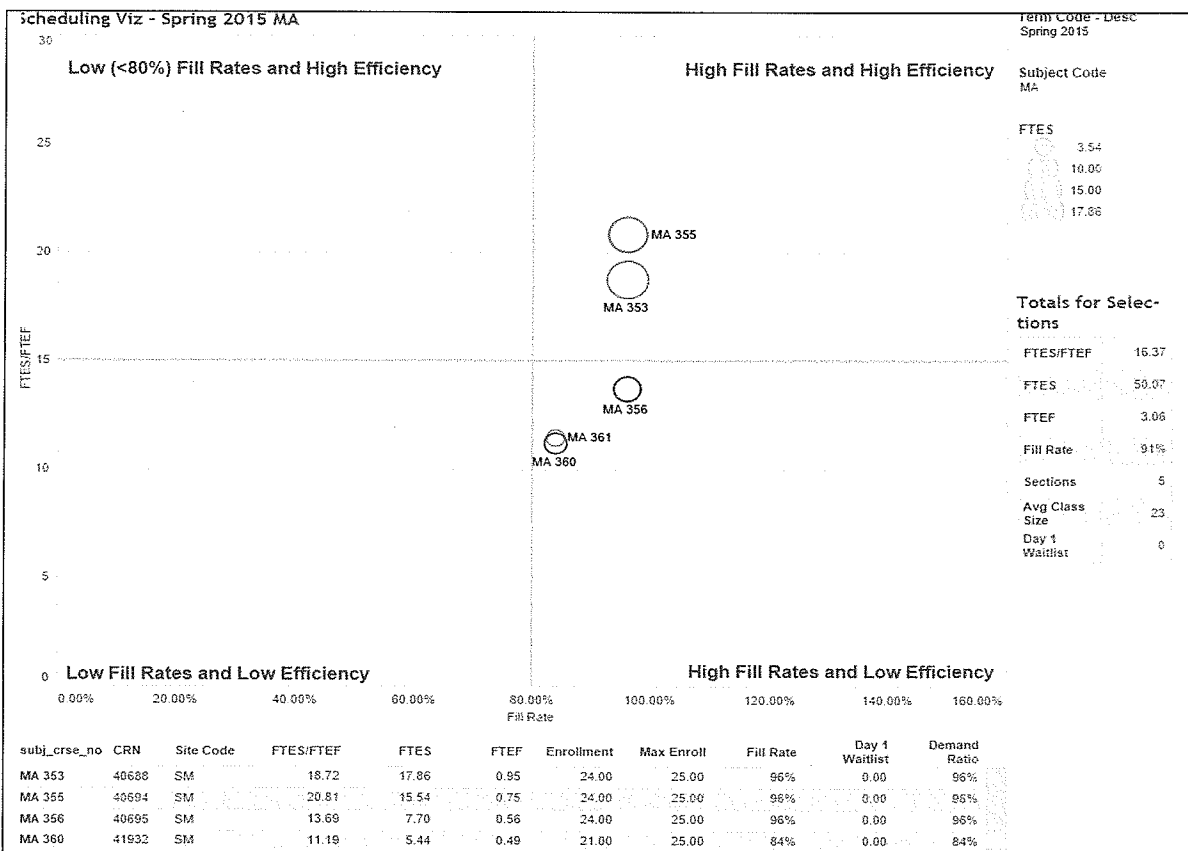
Retention & Success by Demographics for MA360 Spring 2015



Measure Names
 ■ Retention %
 ■ Success %

The increased reassigned time for the chair position allowed me to hire a part-time instructor to teach the MA 353 MA Clinical Procedures 2 lab. That made it possible for me to help as needed when additional supervision was required. It also gave me additional time for finding student placement at externship sites. I could have used even more time for that purpose.

As seen in the next graph, in Spring 2015, all courses now were in the 80 – 100% fill rate and efficiency column. The change in start date for the medical billing option was a success, at least for this year.



Through equipment prioritization, I was able to purchase simulation phlebotomy arms, injection models, and updated Hemacues (for performing hemoglobin and hematocrit testing). That equipment plus the equipment purchased through the CTEA grant enabled the lab instructors to check off all of the students in clinical skills in a timely manner. Students demonstrated greater confidence when performing live injections and phlebotomy. Clinical supervisors in the externships reported that students were able to give injections and draw blood confidently and with good technique.

The greatest challenge in the Spring 2015 semester was placing all of the students into clinical externships. With the additional duties of department chair, I still needed more time for that coordinator responsibility. Several recent trends in the industry have led to the increased difficulty of placing students into clinics:

- 1) Many previously independently-owned clinics have now become part of larger organizations, such as Central Coast Family Care and Dignity Health. These larger organizations have much more complicated processes for accepting student externs and are less likely to take externs at their clinics.
- 2) Because more people have health insurance, due to the Affordable Care Act, clinics are busier and have less time to supervise students in clinics.
- 3) Clinics are increasing their requirements for externs: Spanish-speaking, fast

learner, able to keep up with a fast-paced environment, etc. They are less willing to nurture a student who might take more time to pick up on new methods. Clinics all vary in the medical charting software they use and how they expect their staff to perform certain skills, such as set up trays for minor surgery. It is impossible to teach every possible permutation of skills. Yet, many clinical supervisors are expecting students to assimilate very quickly.

These trends have led to more difficulty finding clinics that are willing to take students, a longer process to get a student accepted (involving multiple layers of administrators, sending resumes for review, and setting up interviews), a tendency to cancel the externship (sometimes at the last minute), and, on occasion, less successful clinical experiences. I had to remove a student from a clinic last semester because the physician supervisor was unrealistic in his demands and was demeaning in his approach to the student. After speaking with both physician and student I determined that a resolution other than removal was not possible. I had to find another clinic, which involved calling clinics that had already turned me down and begging them to reconsider. After considerable time calling clinics, I was able to place the student, and he had a very successful last few weeks of externship in the new placement.

Because of the increased expectations of clinics and to make our students the first choice of clinics, I devised a way to encourage and quantify professional behavior. Each student would be given 100 professionalism points at the beginning of the semester in each course. Points would be lost for unprofessional behavior, which was to be defined as follows in the course syllabi:

Professionalism Points

Professionalism is essential to a successful career in health care. Professionalism in the healthcare field is demonstrated by adhering to the dress code of the medical office; showing up for work when scheduled and arriving on time; working collaboratively as a member of the healthcare team; communicating professionally with healthcare professionals and patients; choosing actions that are ethical and legal; avoiding inappropriate language, private conversation, and private cellphone use during work.

In order to promote professional demeanor in the future medical assistant, 100 professionalism points are awarded to each student at the beginning of the semester. Points can be lost throughout the semester by exhibiting unprofessional behavior. Each instance of failure to comply with the dress code results in the loss of 3 points. Tardiness at the beginning of class or at the return from breaks results in the loss of 5 points. Absence from class in excess of two instances during the semester results in the loss of 15 points/absence. Use of electronic devices during class results in the loss of 5 points. Rude or belligerent behavior toward classmates or instructors results in the loss of 10 points.

Course Grading

A	90 –100% of total points available
B	80 – 89%
C	70 – 79%
D	65 – 69%
F	Less than 60%

Course Evaluative Measures

Class Quizzes	10%
Final Exam	25%
Myhealthprofessionslab Assignments	20%
Skills Check-offs	25%
Professionalism	20%

Professionalism points would be used by all courses in both options of the program in the 2015/16 year to see if it resulted in fewer tardies and absences, less talking and texting in class, and more attentive, professional behavior on the part of the students, leading to increased success in placing students into clinics, student success in the externship experience, and increased job offers.

III. Analysis of Resource Use and Program Implementation

Describe the program's current allocation and use of human, physical, technology, and fiscal resources. Are resources sufficient and appropriate to meet program needs? Can program resources be reallocated to better meet student needs?

Human Resources: There is currently one full-time instructor, who is also the coordinator and department chair. There are five part-time instructors in the medical assisting option of the program and three part-time instructors in the medical billing option. The coding instructor for the medical billing option also teaches the MA 352 course for medical assisting. All instructors have received excellent evaluations from faculty evaluators and from student surveys.

The coordinator anticipates retiring within the next 1 – 2 years. It is going to be essential that someone be hired who can take over that role prior to the departure of the present coordinator. None of the present part-time faculty is interested in a full-time position. The management of the program is so complex that a new person coming in without preparation would have an extremely difficult and stressful time. The present coordinator has just .20 reassigned-time for the position. Becoming department chair enabled the coordinator to reduce teaching load to allow more time for the

coordination duties. The next coordinator will most likely be new to the college and so will not be department chair, therefore having to teach more classes and having less time to devote to coordination of the program. The coordinator again submitted a request for increased reassigned time (.40) this semester to bring the position into parity with all of the other coordinators in the Department of Health Sciences and coordinators of other programs with a similar workload. The difficulty will be in finding someone who can work part-time initially, then increase to full-time after the departure of the present coordinator.

Coordinator duties for which there is not enough time at present include:

- 1) Finding many more clinics willing to sign a Student Affiliation Agreement (includes visiting and evaluating clinics and clinic supervisors for suitability). There is a growing need for more sites that will accept a student who is not Spanish-speaking.
- 2) Researching starting pay at clinics in Northern Santa Barbara County and San Luis Obispo County. Several program completers have told me their starting pay is less than the amounts stated as average starting pay in our pamphlet and website. The information was obtained from the government employment information. Because those statistics include Southern Santa Barbara County, which tends to pay higher than Northern Santa Barbara County, it is possible that the stated numbers are not correct for our local area, giving students an incorrect anticipation of the hourly wage they will be making.
- 3) Looking for opportunities to grow the program. Tawnya Karstrom, Health Sciences Program Technician, has reported that she frequently receives calls asking about a phlebotomy certification program. Cuesta College has a program that is highly impacted. The only other option for certification is through Career Training Institute, a for-profit school in Santa Maria that charges \$2140 for 60 hours of training and 40 hours of externship. Managing this program would take many more hours than the present coordinator has available. In fact, the coordinator time would have to be at least 60% to manage both programs. Other ideas for growing the program would be a program for medical scribes, which is a career in great demand. Physicians prefer to have scribes accompany them in the office or at the hospital. The scribe makes notes that go directly into the EMR via a mobile technology device.
- 4) Restructuring the program to lend to development and adoption of a model curriculum for medical assisting. Sue Reardon, Program Coordinator, attended the first CI-D meeting in Orange, CA to determine whether or not this would be possible. There is at least one course, MA 305, that would lend itself to a New Descriptor for CI-D approval. However, the process would take much more time

than the coordinator presently has available.

Physical Resources: The physical resources for the medical billing option are, in general, adequate. Most of the classes meet in the computer lab, which suits their needs well. The MA 352 course, which is also taught in medical assisting, needs a mock front office set-up for practicing the skills of admitting, scheduling and referring patients. The medical assisting option meets in the W building. The building will be demolished at some point and new quarters will need to be found. The program needs a dedicated lab space that is separate from the classroom, just as the other health science programs have. This lab could incorporate the mock front office and a mock back office, where blood specimens are drawn, simple laboratory tests are run, and "patients" are prepared for examination and procedures. There is a tiny amount of space in the present classroom for two simulated clinic practice stations. Students are unable to practice and check off skills at the same time. The stations are used mainly for check-offs during lab, not allowing students to practice while waiting for their turn to test. Some of the skills require a lot of set-up. With dedicated lab space, the labs could be left set up for the next class, as they do in the nursing labs.

Technology Resources: Through the use of TAC and CTEA funding, I have been able to purchase the software required for medical billing. New software programs must be purchased when the International Coding of Diseases (ICD) is changed, which happens every few years. There is not enough money in the budget to purchase this software, so the program is dependent upon grant funding. Medical technology is progressing very rapidly. New devices are being developed constantly that will revolutionize medicine. It is important for the program to have the devices that are presently being used in medical offices. The use of electronic medical records (EMR) in medical offices has revolutionized the way charting is done by medical assistants. Paper charts are no longer being used. We are still having students practice charting on paper. We need to switch to electronic charting, because supervisors of clinics expect students to be proficient in this skill when they go to externships.

Fiscal Resources: Every year, the need for fiscal resources to obtain instructional materials is greater than that in the budget. The coordinator makes some of the simulation materials used in labs, for suture removal, for instance, because there is inadequate funding to purchase from the medical supply companies. The following is the adopted budget for both options of the medical assisting program for 2015:

Program: 12037000 – Med Asst. and Office Asst.

Acct Type: 4000 Supplies and Materials

4310 Instructional Supplies \$254.00

4520 Office/Operational Supplies \$100.00

Total Supplies and Materials \$354.00

Acct Type: 5000 Other Operating Expenses
5650 Repairs (Labor-Diagnostics) \$100.00
Total Other Operating Expenses \$100

The second year of the program I initiated requiring students to purchase skills kits to supplement the instructional materials for labs. It was essential that students have sterile supplies for injections and blood draws they would be performing on each other. Purchasing enough syringes, needles, sterile saline, and phlebotomy equipment for 30 students to perform 30 injections, 10 venipunctures and 10 capillary punctures (which is the minimum requirement for MA education), would have been impossible with the amount allotted to instructional supplies in the budget. I can barely purchase enough personal protective equipment (gowns, gloves, masks) to last the year. For practice supplies to be used on manikins, I request donations from clinics of outdated needles, vacuum specimen tubes, syringes, etc. Several clinics in Santa Maria and Lompoc now tell me when they have some supplies I can pick up.

There are not enough resources to reallocate to better serve the student's needs.

IV. Program SLOs/Assessment

What are your program student learning outcomes? Have each of these been assessed since the last comprehensive program review? How are they measured? What did the assessment data indicated about the strengths and weaknesses of your program? What changes do you plan based on these data?

Some of the SLOs have not been assessed since the beginning of the program. For the majority of the courses, only one SLO has been assessed, and it is the same SLO each semester.

The outcomes of the assessed SLOs have indicated that the program is strong in promoting good student outcomes and success. Outcomes are measured by means of results on tests and quizzes, and results of clinical skills check-offs.

The data from measurement of SLOs have always indicated that students are doing well in the program and are achieving the desired outcomes. That result is borne out by the high percentage of success in each of the courses in the program. Changes have been made despite the outcome data, from observations of students and instructors and a desire to always work toward improvement, even when outcomes are good. Rarely is anything as good as it could be, and that is what the program coordinator has worked

toward for the past five years, making the program better each year with the goal of making it as effective as possible in preparing students for a career in health care.

A definite area of improvement needed is to make sure that the SLOs are all measured, and also to develop more SLOs that provide meaningful data for each course, with measurement tools that are chosen to best measure that particular outcome, appropriate for each course and SLO.

There should be consistency between two sessions of the same course. The instructors for the MA 305 and MA 352 courses have used their own methods to measure the SLOs for the courses. That makes it difficult for the program coordinator to develop action plans for the course and program.

Course Statistics and Evidence

Course Group: Medical Assisting Dept Course Group
Outcomes Group: Medical Assisting Program Outcomes

Statistics	
# Catalog Courses:	9 MA305, MA350, MA351, MA352, MA353, MA355, MA356, MA360, MA361
# Catalog Courses with CSLOs:	9 MA305, MA350, MA351, MA352, MA353, MA355, MA356, MA360, MA361
# Catalog Courses without CSLOs:	0
# Catalog Courses whose CSLOs are mapped to PSLOs:	9 MA305, MA350, MA351, MA352, MA353, MA355, MA356, MA360, MA361
# Catalog Courses whose CSLOs are NOT mapped to PSLOs:	0
# Catalog Courses whose CSLOs are mapped to ISLOs:	9 MA305, MA350, MA351, MA352, MA353, MA355, MA356, MA360, MA361
# Catalog Courses whose CSLOs are NOT mapped to ISLOs:	0
# Catalog Courses with Planned Assessments:(Term-specific)	7 MA305, MA350, MA351, MA352, MA353, MA355, MA361
# Catalog Courses without Planned Assessments:(Term-specific)	2 MA356, MA360
# Catalog Courses with Assessment Data:(Term-specific)	7 MA305, MA350, MA351, MA352, MA353, MA355, MA361
# Catalog Courses without Assessment Data:(Term-specific)	2 MA356, MA360
# Catalog Courses with a Completed CIP:(Term-specific)	9 MA305, MA350, MA351, MA352, MA353, MA355, MA356, MA360, MA361
# Catalog Courses without a Completed CIP:(Term-specific)	0

Active Courses

Course: 1.	MA305 Body Systems And Disease
Owner:	Medical Assisting
Course Groups:	All Course Group - 300 Level, HEALTH SCIENCES DEPARTMENT, Medical Assisting (Certificate), Medical Assisting Dept Course Group, Medical Assisting: Medical Billing & Coding (Certificate)
CSLOs:	<ul style="list-style-type: none"> MA305 SLO1 - Demonstrate an understanding of foundational allied health knowledge of anatomical and physiological function and how disease and injury affect the human body.
PSLOs:	<p>Outcomes Group: Medical Assisting Program Outcomes</p> <p>Medical Assisting Program Outcomes</p> <ul style="list-style-type: none"> MA PSLO - Develop communication skills necessary to effectively communicate with other health care team members, patients, and physicians.
ISLOs:	<p>Outcomes Group: Institutional Learning Outcomes (ILOs)</p> <p>ILO 1 - Communication</p> <ul style="list-style-type: none"> ILO 1 - Communication: Communicate effectively using verbal, visual and written language with clarity and purpose in workplace, community and academic contexts.
Planned Asmts:(Term-specific)	<ul style="list-style-type: none"> Fall 2013 Sec A Exercise 11
Terms with Scores:(Term-specific)	<ul style="list-style-type: none"> Fall 2013
Course Analysis:(Term-specific)	<p>Fall 2013</p> <ul style="list-style-type: none"> [What did the assessment data indicate about the strengths of your course?]The assessment data indicated that the course is strong in encouraging students to think critically. Students were able to demonstrate the ability to extrapolate from classroom work to real world situations. [What did the assessment data indicate about the weaknesses of your course?]Students were not always able to explain the rationale for taking specific actions. [What changes have you made/do you plan to make based on the data? What resources would you need, if any, to make these changes?]Incorporating more scenario-based problems in which students must not only think critically to decide between two or more courses of action, but also must explain their choices.

Course: 2.	MA350 MA Fundamentals
Owner:	Medical Assisting
Course Groups:	All Course Group - 300 Level, HEALTH SCIENCES DEPARTMENT, Medical Assisting (Certificate), Medical Assisting Dept Course Group
CSLOs:	<ul style="list-style-type: none"> MA350 SLO1 - Demonstrate individual responsibility, personal integrity and respect for diverse peoples and cultures including those with different cultural and linguistic backgrounds and different abilities. MA350 SLO2 - Identify federal and state legislative standards and policies regulating medical assistant scope of practice.
PSLOs:	<p>Outcomes Group: Medical Assisting Program Outcomes</p> <p>Medical Assisting Program Outcomes</p> <ul style="list-style-type: none"> MA PSLO - Demonstrate respect for the human dignity and the rights of all individuals with awareness of cultural differences.
Page 1 Created Mon Apr 14 12:07:38 PDT 2014	
Course: 3.	MA351 MA Clinical Procedures I
Owner:	Medical Assisting
Course Groups:	All Course Group - 300 Level, HEALTH SCIENCES DEPARTMENT, Medical Assisting (Certificate), Medical Assisting Dept Course Group
CSLOs:	<ul style="list-style-type: none"> MA351 SLO1 - Demonstrate confidence in medical office laboratory procedures.
PSLOs:	<p>Outcomes Group: Medical Assisting Program Outcomes</p> <p>Medical Assisting Program Outcomes</p> <ul style="list-style-type: none"> MA PSLO - Utilize critical thinking and decision-making skills while providing competent clinical and administrative service in healthcare settings.
ISLOs:	<p>Outcomes Group: Institutional Learning Outcomes (ILOs)</p> <p>ILO 2 - Critical Thinking & Problem Solving</p> <ul style="list-style-type: none"> ILO 2 - Critical Thinking & Problem Solving: Explore issues through various information sources; evaluate the credibility and significance of both the information and the source to arrive at a reasoned conclusion.
Planned Asmts:(Term-specific)	<ul style="list-style-type: none"> Fall 2013 Sec A Procedure Check-off
Terms with Scores:(Term-specific)	<ul style="list-style-type: none"> Fall 2013
Course: 4.	MA352 MA Administrative Procedures
Owner:	Medical Assisting
Course Groups:	All Course Group - 300 Level, HEALTH SCIENCES DEPARTMENT, Medical Assisting (Certificate), Medical Assisting Dept Course Group, Medical Assisting: Medical Billing & Coding (Certificate)
CSLOs:	<ul style="list-style-type: none"> MA352 SLO1 - Utilize current technology to complete common office forms, including insurance claims, billing forms, and required reporting.
PSLOs:	<p>Outcomes Group: Medical Assisting Program Outcomes</p> <p>Medical Assisting Program Outcomes</p> <ul style="list-style-type: none"> MA PSLO - Utilize critical thinking and decision-making skills while providing competent clinical and administrative service in healthcare settings.
ISLOs:	<p>Outcomes Group: Institutional Learning Outcomes (ILOs)</p> <p>ILO 4 - Information & Technology Literacy</p> <ul style="list-style-type: none"> ILO 4 - Information & Technology Literacy: Define what information is needed to solve a real-life issue then use appropriate technologies to locate, access, select and manage the information.
Planned Asmts:(Term-specific)	<ul style="list-style-type: none"> Fall 2013 Sec A Administrative Procedures Checkoffs
Terms with Scores:(Term-specific)	<ul style="list-style-type: none"> Fall 2013

Course: 5.	MA353 MA Clinical Procedures 2
Owner:	Medical Assisting
Course Groups:	All Course Group - 300 Level, HEALTH SCIENCES DEPARTMENT, Medical Assisting (Certificate), Medical Assisting Dept Course Group
CSLOs:	<ul style="list-style-type: none"> • MA353 SLO1 - Demonstrate critical thinking by logically solving problems and explaining the rationale. • MA353 SLO2 - Demonstrate safe performance in the medical assistant clinical role.
PSLOs:	<p>Outcomes Group: Medical Assisting Program Outcomes Medical Assisting Program Outcomes</p> <ul style="list-style-type: none"> • MA PSLO - Utilize critical thinking and decision-making skills while providing competent clinical and administrative service in healthcare settings.
ISLOs:	<p>Outcomes Group: Institutional Learning Outcomes (ILOs) ILO 2 - Critical Thinking & Problem Solving</p> <ul style="list-style-type: none"> • ILO 2 - Critical Thinking & Problem Solving: Explore issues through various information sources; evaluate the credibility and significance of both the information and the source to arrive at a reasoned conclusion.
Planned Asmts:(Term-specific)	<ul style="list-style-type: none"> • Spring 2014 Sec A Procedure Check-off
Terms with Scores:(Term-specific)	<ul style="list-style-type: none"> • Spring 2014
Course: 6.	MA355 MA Pharmacology
Owner:	Medical Assisting
Course Groups:	All Course Group - 300 Level, HEALTH SCIENCES DEPARTMENT, Medical Assisting (Certificate), Medical Assisting Dept Course Group

Course Analysis:(Term-specific)	<p>Spring 2014</p> <ul style="list-style-type: none"> [What did the assessment data indicate about the strengths of your course?]No students fell below expectations for the course. Students were able to satisfactorily demonstrate skills in administering medications. [What did the assessment data indicate about the weaknesses of your course?]Although not reflected in this data, labs ran overtime frequently in order to get all students checked off on the skill of giving injections. This was partly due to the number of students in the class, which was over the previous maximum number of students for this course. Each additional student = another 30 live injections that need to be supervised 1:1 by an instructor. [What changes have you made/do you plan to make based on the data? What resources would you need, if any, to make these changes?]I plan to revert to 30 as the maximum number of students accepted into the program. The instructor will modify the course schedule to start injections earlier in the semester. The purchase of injection simulation equipment would help to increase the competence of students in giving injections. I will request CTEA funds to purchase the equipment.
Course: 7.	MA356 MA Job Success Externship
Owner:	Medical Assisting
Course Groups:	All Course Group - 300 Level, HEALTH SCIENCES DEPARTMENT, Medical Assisting (Certificate), Medical Assisting Dept Course Group
CSLOs:	<ul style="list-style-type: none"> MA356 SLO1 - Develop positive, professional job related attitudes and abilities to facilitate job success.
PSLOs:	<p>Outcomes Group: Medical Assisting Program Outcomes</p> <p>Medical Assisting Program Outcomes</p> <ul style="list-style-type: none"> MA PSLO - Develop communication skills necessary to effectively communicate with other health care team members, patients, and physicians.
SLOs:	<p>Outcomes Group: Institutional Learning Outcomes (ILOs)</p> <p>ILO 1 - Communication</p> <ul style="list-style-type: none"> ILO 1 - Communication: Communicate effectively using verbal, visual and written language with clarity and purpose in workplace, community and academic contexts.
Course: 8.	MA360 Medical Billing & Insurance
Owner:	Medical Assisting
Course Groups:	All Course Group - 300 Level, HEALTH SCIENCES DEPARTMENT, Medical Assisting Dept Course Group, Medical Assisting: Medical Billing & Coding (Certificate)
CSLOs:	<ul style="list-style-type: none"> MA360 SLO1 - Demonstrate the ability to problem-solve insurance billing issues. MA360 SLO2 - Write a collections letter in a culturally competent manner that demonstrates respect for the rights and dignity of the individual.
PSLOs:	<p>Outcomes Group: Medical Assisting Program Outcomes</p> <p>Medical Assisting Program Outcomes</p> <ul style="list-style-type: none"> MA PSLO - Utilize critical thinking and decision-making skills while providing competent clinical and administrative service in healthcare settings. MA PSLO - Demonstrate respect for the human dignity and the rights of all individuals with awareness of cultural differences.
SLOs:	<p>Outcomes Group: Institutional Learning Outcomes (ILOs)</p> <p>ILO 2 - Critical Thinking & Problem Solving</p> <ul style="list-style-type: none"> ILO 2 - Critical Thinking & Problem Solving: Explore issues through various information sources; evaluate the credibility and significance of both the information and the source to arrive at a reasoned conclusion. <p>ILO 3 - Global Awareness & Cultural Competence</p> <ul style="list-style-type: none"> ILO 3 - Global Awareness & Cultural Competence: Respectfully interact with individuals of diverse perspectives, beliefs and values being mindful of the limitation of your own cultural framework.
Course: 9.	MA361 Coding for Medical Insurance
Owner:	Medical Assisting
Course Groups:	All Course Group - 300 Level, HEALTH SCIENCES DEPARTMENT, Medical Assisting Dept Course Group, Medical Assisting: Medical Billing & Coding (Certificate)

The following are the SLOs for the course and outcomes for the Spring 2014 Semester:

MA 305 SLO 1 - Demonstrate an understanding of foundational allied health knowledge of anatomical and physiological function and how disease and injury affect the human body.

This SLO was assessed in the Fall 2013 semester. The SLO is measured by means of the final grade for the course. The data indicated that students were able to think

critically about how disease affects the human body, but can't necessarily explain rationale for choices made based on that knowledge. The plan is to include more scenario-based problems in which students must explain their choices.

MA 350 SLO 1 - Demonstrate individual responsibility, personal integrity and respect for diverse peoples and cultures including those with different cultural and linguistic backgrounds and different abilities.

This SLO was measured in the Fall 2013 semester by means of a cultural presentation project. 77% of students demonstrated cultural competence. In the medical assisting field, where students will be working with people of diverse cultures, cultural competence is essential. The plan is to seek medical professionals to speak to the class about their own experiences in treating people of diverse cultures and emphasize the importance of cultural competence.

MA 351 SLO 1 - Demonstrate confidence in medical office laboratory procedures.

This SLO was measured in the Fall 2013 semester by means of skills procedural check-offs that were given throughout the semester. Students were successful in demonstrating confidence in the clinical skills, however, lack of equipment prevents the practice of some commonly performed point of care testing. The plan is to acquire this equipment. Having over 30 students in the class adversely affected the practice time in the class. The plan is to accept a maximum of 30 students into the program in the future.

MA 352 SLO 1 - Utilize current technology to complete common office forms, including insurance claims, billing forms, and required reporting.

This SLO was assessed in the Fall 2013 semester by means of administrative skills check-offs. 100% of the students met the standard. However, the changeover to electronic medical records in clinics means that students need to have increased instruction in this area. An additional text will be used for this course in fall to enable that.

MA 353 SLO 1 - Demonstrate critical thinking by logically solving problems and explaining the rationale.

This SLO has not been assessed since the last annual update.

MA 353 SLO 2 - Demonstrate safe performance in the medical assistant clinical role.

This SLO was measured in the Spring 2013 semester by means of skills procedural check-offs that were given throughout the semester. 100% of students met or exceeded the standard for safety in performance of clinical skills. However, labs ran consistently late in order to get all students checked off because of the number of students in the class. The plan is to not admit more than 30 to the program in the future. Also, more equipment is needed to allow more students to practice at one time, instead of waiting for equipment to be available.

MA 355 SLO 1 - Describe the role of the medical assistant in medication administration.

This SLO has not been assessed since the last annual update.

MA 355 SLO 2 - Demonstrate safe medication administration practice: choice of administration routes and sites, and administration of medications prescribed by the physician.

This SLO was assessed in the Spring 2013 semester by means of check-offs on administering medications. 100% of students met or exceeded standard, however, the labs ran late due to the number of students in the class. Limiting the number of students admitted to the program to 30 will help alleviate this in the future.

Purchasing additional injection simulation equipment would help students to be ready for check-offs in a timely manner. Adjusting the schedule to start injections earlier in the semester will help to relieve the rush to finish all of the check-offs at the end.

MA 356 SLO 1 - Develop positive, professional job related attitudes and abilities to facilitate job success.

The SLO for this course was assessed in Spring 2013. All of the students completed the clinical externships successfully. It was noted at the time that placements were much easier with the 17 students in the class at that time than they would be with 30 students. I have just placed 30 students in clinics and it was a very difficult task with a lot of last-minute stress due to new clinics that waited until the last minute to get the contracts in. I was chasing down contracts and frantically looking for a placement for a student whose clinic had decided not to take a student after all at the end of last week, which is why I was unable to get this report in on Friday. I need to get many more clinics under contract for the future. Also, limiting the number of students accepted into the program will be helpful.

MA 360 SLO 1 - Demonstrate the ability to problem-solve insurance billing issues.
The SLO for this course was assessed in Fall of 2012 by means of testing. The students met or exceeded standard for the course.

MA 360 SLO 2 - Write a collections letter in a culturally competent manner that demonstrates respect for the rights and dignity of the individual.

The SLO for this course was assessed in Fall of 2012 by means of a written collections letter. The biggest issue was the difficulty students have with English grammar and punctuation. Since this is not a basic English course, it is difficult to remedy these deficits.

MA 361 SLO 1 - Use information from the electronic medical record to decide upon the codes appropriate for the medical procedures performed.

This course was assessed in the Fall 2013 semester. 100% of the students met or exceeded the standard, demonstrating the ability to code correctly. Spending more

individual time with the students who just met the standard was the action plan by the instructor.

MA 361 SLO 2 - Assign a medical code appropriate for the medical condition, using written and verbal communication with medical professionals.

This SLO has not been assessed since the last annual report.

ISLO/PSLO Summary Map by Course

Outcomes for: Institutional Learning Outcomes (ILOs)

Course Group: Medical Assisting Dept Course Group

List of ISLOs/PSLOs:

- A** ILO 1 - Communication: Communicate effectively using verbal, visual and written language with clarity and purpose in workplace, community and academic contexts.
- B** ILO 2 - Critical Thinking & Problem Solving: Explore issues through various information sources; evaluate the credibility and significance of both the information and the source to arrive at a reasoned conclusion.
- C** ILO 3 - Global Awareness & Cultural Competence: Respectfully interact with individuals of diverse perspectives, beliefs and values being mindful of the limitation of your own cultural framework.
- D** ILO 4 - Information & Technology Literacy: Define what information is needed to solve a real-life issue then use appropriate technologies to locate, access, select and manage the information.
- E** ILO 5 - Quantitative Literacy: Use mathematical concepts and models to analyze and solve real life issues or problems.
- F** ILO 6 - Scientific Literacy: Use scientific knowledge and methodologies to assess potential solutions to real-life challenges.
- G** ILO 7 - Personal Responsibility & Development: Take the initiative and responsibility to assess your own actions with regard to physical wellness, learning opportunities, career planning, creative contribution to the community and ethical integrity in the home, workplace and community.

	ILO 1 - Communication	ILO 2 - Critical Thinking & Problem Solving	ILO 3 - Global Awareness & Cultural Competence	ILO 4 - Information & Technology Literacy	ILO 5 - Quantitative Literacy	ILO 6 - Scientific Literacy	ILO 7 - Personal Responsibility & Development	
	A	B	C	D	E	F	G	Totals:
MA305	1							1
MA350			1					1
MA351		1						1
MA352				1				1
MA353		1						1
MA355		1						1
MA356	1							1
MA360		1	1					2
MA361	1	1						2
Totals:	3	5	2	1				

Allan Hancock College

ILO/PSLO Summary Map by Course/Context

Selected SLOs: PSLOs for Medical Assisting

Course Group: Courses for Medical Assisting

Courses	SLOs	Medical Assisting Program Outcomes		
		MA PSLO - Develop communication skills necessary to effectively communicate with other health care team members, patients, and physicians.	MA PSLO - Utilize critical thinking and decision-making skills while providing competent clinical and administrative service in healthcare settings.	MA PSLO - Demonstrate respect for the human dignity and the rights of all individuals with awareness of cultural differences.
MA305		1		
MA350				1
MA351			1	
MA352			1	
MA353			1	
MA355			1	
MA356		1		
MA360			1	1
MA361		1	1	
		3	6	2

V. Trend Analyses/Outlook

Using the information already gathered in the AUs (e.g., enrollment and achievement data; student learning outcomes assessment and analysis; input by advisory boards; existing articulation agreements; labor market trends) summarize the major trends, challenges, and opportunities that have emerged in the program since the last program review

There are several major trends that have emerged since the last program review. One of the most impactful trends has been the implementation of the Affordable Care Act. Allowing more people to be covered by Medical and not allowing insurance companies to deny coverage for preexisting conditions has led to more of the population having the insurance coverage to see a physician. This has resulted in both good and bad news for the program. The good news is that more jobs will be available for the MA program completers, especially if they obtain the state or national certification following the program. The bad news is that clinics are expanding, merging, and hiring new physicians. That has resulted in a reluctance to take a medical assistant student for externship. Members of my advisory committee who manage medical offices have confirmed that such is the case. They have become extremely busy. So much so that the only offices really eager to take a student are either offices that want to use the student as free staff, instead of providing a learning experience (which is prohibited by our Student Affiliation Agreement), or they are looking to hire and want to use the opportunity to observe the student during the affiliation prior to hiring. That is a positive development. It is always great to hear that the clinical site is planning on hiring. It is a benefit to student and clinic to have five weeks to get used to the clinic, get acquainted with the staff and the job requirements and determine if it is a good "fit".

According to the Occupational Handbook for 2015, "Employment of medical assistants is projected to grow 29 percent from 2012 to 2022, much faster than the average for all occupations. The growth of the aging baby-boom population will continue to spur demand for preventive medical services, which are often provided by physicians. As their practices expand, physicians will hire more assistants to perform routine administrative and clinical duties, allowing the physicians to see more patients." (<http://www.bls.gov/ooh/healthcare/medical-assistants.htm>)

The expansion of medical insurance coverage is leading to a shortage of physicians. From the Occupational Handbook for 2015, "Employment of physician assistants is projected to grow 38 percent from 2012 to 2022, much faster than the average for all occupations. Increased demand for healthcare services from the growing and aging population and widespread chronic disease, combined with a shortage of physicians, will result in increased demand for healthcare providers, such as physician assistants." <http://www.bls.gov/ooh/healthcare/physician-assistants.htm>

Medical assisting is an excellent pathway to a career as a physician's assistant. Physician's assistant schools require previous experience in the medical field. Medical assisting is accepted as previous experience.

Other trends are the rapid development of new medical technologies to be used in the medical office. Many surgeries that used to be performed in a hospital are done in outpatient surgery Centers. According to the Johns Hopkins website, "With improved

technology and advances in anesthesia and pain control, many less invasive surgical procedures are now being performed on an outpatient, or ambulatory, basis. Common procedures that are now routinely performed on an outpatient basis include tonsillectomies, hernia repairs, gallbladder removals, some cosmetic surgeries, and cataract surgeries.”

http://www.hopkinsmedicine.org/healthlibrary/conditions/surgical_care/outpatient_surgery_85,P01404/

The result of this trend will be increased job opportunities for medical assistants. MAs cannot work in inpatient settings, but can work in outpatient surgery settings.

The adoption of EMR in the physician’s offices, which has taken place over the past few years, presents the challenge that the program be able to offer the student adequate opportunities to practice using EMR prior to externship. Software has been updated on the computers in the computer lab to allow students to practice scheduling, coding and billing. The area that is lacking is the opportunity to practice charting following procedures and patient intake. Typically, mobile electronic devices such as iPads are used for charting by medical assistant in the exam rooms. The device must be compatible with the EMR software installed on the computers. Apps are available for downloading onto an iPad for charting. The coordinator will request two iPads to be used for the charting element of clinical skills check-offs in the skills lab. Because two students are usually checking off at the same time (one with each instructor), each will have use of a device. Advisory committee members and clinical supervisors have both stated that having the ability to become familiar with EMR charting would be an asset for the student during externship and on the job when hired.

Medicare and Medicaid now allow medical assistants to enter physician’s orders into the medical record, but only if they are certified by a recognized state or national certification agency. Many medical assistants presently working do not have certification. To fill the need for preparation of these medical assistants in the community for the certification exam, a certification preparation course was developed by one of the program’s part-time instructors, who is teaching the course in Community Education. A credit course for that purpose is going through the AP&P process for approval. The credit course would be a refresher for MAs who are wanting to get back into the field after taking time out for a while and would prepare participants to pass the certification exam.

As applicable, please address the breadth, depth, currency, and cohesiveness of the curriculum in relation to evolving employer needs and/or transfer requirements, as well as other important pedagogical or technology-related developments.

Transfer requirements do not apply to medical assisting. It is a certificate only program.

The curriculum is successful in preparing students for employment in the field. Students enter into the program as a cohort and move through the curriculum in a logical manner, with more complex learning, such as pharmacology, following foundational learning, such as medical terminology. More complex skills, such as blood draws and injections, follow simpler skills, such as vital signs and preparing patients for examination. The courses are kept current by obtaining the equipment, electronic devices, and software that is being used in medical offices. Information is obtained regarding the state of the profession and employer expectations from advisory committee members and clinical supervisors at externship sites.

The curriculum could be broadened to include other options, such as phlebotomy certification, or medical scribe training, but that would require much more coordinator time than is currently provided for the program.

VI. Long-Term Program Goals and Action Plans (Aligned With the College Educational Master Plan)

Describe the long-term plans for changing or developing new courses and programs, other actions being taken to enhance student success, and the need for professional development activities and other resources to implement program goals. Be sure to show how these plans are related to assessment results. (Plan should cover five-year period and include target dates and resources needed.)

Long-Term Plans

Action	Target Date	Resources Needed
Obtain approval for short course to prepare MAs in the community to re-enter the field and pass the certification test.	Fall 2015	Coordinator time to assure that the course will meet its objectives and to get through the approval process
Find advisory committee members to replace the members who have left due to retirement or changing jobs.	Spring 2016	Coordinator time.
Write more SLOs for the courses. Develop tools that will best measure the outcomes and provide meaningful data to drive action. Assure that SLOs listed in course syllabi are consistent with those in CORs. Use the same tools for both	Spring 2016	Coordinator time.

sections of courses.		
All courses use the Professionalism Points to encourage professional behavior in students and maximize the opportunity to gain and maintain employment in the field.	Spring 2016	Coordinator time to educate all part-time instructors in the use of professionalism points. Time to evaluate the results.
Hire a part-time instructor to teach the MA 350 MA Fundamentals course and to teach the MA 353 MA Clinical Procedures course to allow the coordinator time to accomplish the goals of the program.	Fall 2017	Increased coordinator time to .40 to allow a reduction in load, so that a part-time instructor can teach one of the courses presently being taught by the coordinator.
Develop a phlebotomy certificate option and a medical scribe option for the program. Hire a full-time program coordinator to take over the position from the retiring coordinator, to start in Fall. If possible, provide training time for the new coordinator prior to the present coordinator leaving the position. The learning curve for the position is huge.	Spring 2018	Coordinator time. Faculty salary to allow for training time for the new coordinator.
Develop a plan for moving to a new location when Building W is demolished. See if a location in the M building could work for lab and classroom space. A separate lab space should be available for clinical skills, instead of using the classroom.	Fall 2018	Coordinator time.
Set up a dedicated lab in the new location. Purchase equipment for several practice stations and a simulation front and back office.	Spring 2019	Equipment cost approx. \$20,000.
Hire faculty for the phlebotomy and medical scribe courses.	Spring 2020	Coordinator time for faculty prioritization process and hiring process.
Start a cohort in the phlebotomy certification course and the medical scribe course.	Fall 2020	Salary for instructors for phlebotomy certification course and medical scribe course. Increased Coordinator time to

		at least .60 for coordinating all of the options in the program.
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STUDENT SURVEY RESULTS

Program Review
 Program Review Online Surveys ()
 No. of responses = 24
 For the Period

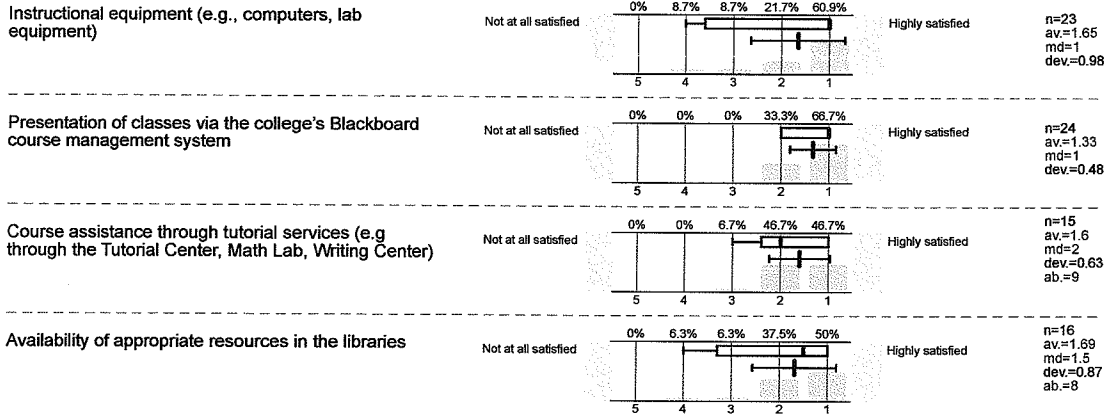


Survey Results

Part I. Please indicate how satisfied you are, in general, with the following aspects of the Medical Assisting Program.

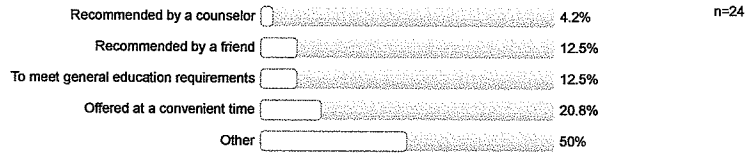
Quality of instruction within the program	Not at all satisfied	4.2% 0% 0% 20.8% 75%	Highly satisfied	n=24 av=1.38 md=1 dev=0.88
The way textbooks and other materials used in courses within the program help me learn	Not at all satisfied	0% 4.2% 8.3% 29.2% 58.3%	Highly satisfied	n=24 av=1.58 md=1 dev=0.83
Advice about the program from counselors	Not at all satisfied	5.3% 10.5% 15.8% 36.8% 31.6%	Highly satisfied	n=19 av=2.21 md=2 dev=1.18 ab=5
The way this program meets your educational goals	Not at all satisfied	0% 0% 0% 29.2% 70.8%	Highly satisfied	n=24 av=1.29 md=1 dev=0.46
Contribution towards your intellectual growth	Not at all satisfied	0% 0% 0% 33.3% 66.7%	Highly satisfied	n=24 av=1.33 md=1 dev=0.48
Clarity of course goals and learning objectives	Not at all satisfied	0% 0% 0% 33.3% 66.7%	Highly satisfied	n=24 av=1.33 md=1 dev=0.48
Feedback and assessment of progress towards learning objectives	Not at all satisfied	4.2% 0% 0% 33.3% 62.5%	Highly satisfied	n=24 av=1.5 md=1 dev=0.88
The availability of courses offered in the program	Not at all satisfied	0% 4.2% 0% 41.7% 54.2%	Highly satisfied	n=24 av=1.54 md=1 dev=0.72
The content of courses offered in the Medical Assisting Program	Not at all satisfied	0% 0% 4.2% 37.5% 58.3%	Highly satisfied	n=24 av=1.46 md=1 dev=0.59
The physical facilities and space (e.g., classrooms, labs)	Not at all satisfied	4.2% 16.7% 20.8% 16.7% 41.7%	Highly satisfied	n=24 av=2.25 md=2 dev=1.29

Program Review, Program Review Online Surveys.



Part II. Please answer the following questions about the Medical Assisting Program.

Which of the following best describes your reason for taking this and other courses in the Medical Assisting Program?



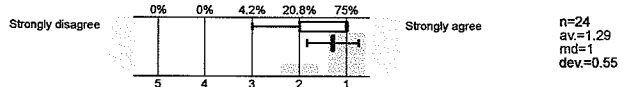
Compared to the beginning of the semester, your attitude about the Medical Assisting Program has



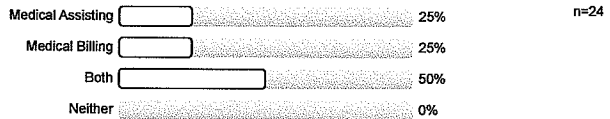
I would recommend taking courses in the Medical Assisting Program.



I plan on taking additional courses in the Medical Assisting Program.

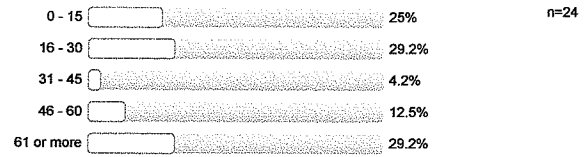


Which 'track' in Medical Assisting are you pursuing?

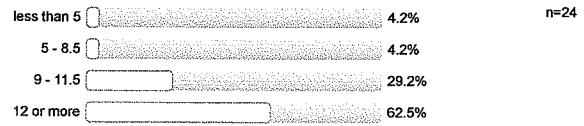


Part III. Background Questions

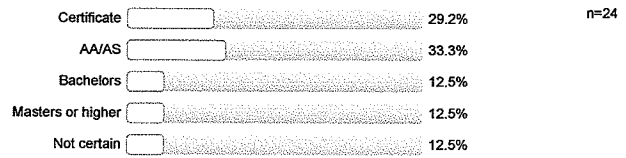
How many units have you completed prior to this semester?



In how many units are you currently enrolled?



What is your final academic goal?



Profile

Subunit: IR General Surveys
 Name of the instructor: Program Review
 Name of the course: Program Review Online Surveys
 (Name of the survey)

Values used in the profile line: Mean

Part I. Please indicate how satisfied you are, in general, with the following aspects of the Medical Assisting Program.

Quality of instruction within the program	Not at all satisfied					Highly satisfied	n=24	av.=1.38nd=1.00@ev.=0.88
The way textbooks and other materials used in courses within the program help me learn	Not at all satisfied					Highly satisfied	n=24	av.=1.58nd=1.00@ev.=0.83
Advice about the program from counselors	Not at all satisfied					Highly satisfied	n=19	av.=2.21nd=2.00@ev.=1.18
The way this program meets your educational goals	Not at all satisfied					Highly satisfied	n=24	av.=1.29nd=1.00@ev.=0.46
Contribution towards your intellectual growth	Not at all satisfied					Highly satisfied	n=24	av.=1.33nd=1.00@ev.=0.48
Clarity of course goals and learning objectives	Not at all satisfied					Highly satisfied	n=24	av.=1.33nd=1.00@ev.=0.48
Feedback and assessment of progress towards learning objectives	Not at all satisfied					Highly satisfied	n=24	av.=1.50nd=1.00@ev.=0.88
The availability of courses offered in the program	Not at all satisfied					Highly satisfied	n=24	av.=1.54nd=1.00@ev.=0.72
The content of courses offered in the Medical Assisting Program	Not at all satisfied					Highly satisfied	n=24	av.=1.46nd=1.00@ev.=0.59
The physical facilities and space (e.g., classrooms, labs)	Not at all satisfied					Highly satisfied	n=24	av.=2.25nd=2.00@ev.=1.29
Instructional equipment (e.g., computers, lab equipment)	Not at all satisfied					Highly satisfied	n=23	av.=1.65nd=1.00@ev.=0.98
Presentation of classes via the college's Blackboard course management system	Not at all satisfied					Highly satisfied	n=24	av.=1.33nd=1.00@ev.=0.48
Course assistance through tutorial services (e.g. through the Tutorial Center, Math Lab, Writing Center)	Not at all satisfied					Highly satisfied	n=15	av.=1.60nd=2.00@ev.=0.63
Availability of appropriate resources in the libraries	Not at all satisfied					Highly satisfied	n=16	av.=1.69nd=1.50@ev.=0.87

Part II. Please answer the following questions about the Medical Assisting Program.

I would recommend taking courses in the Medical Assisting Program.	Strongly disagree					Strongly agree	n=24	av.=1.25nd=1.00@ev.=0.44
I plan on taking additional courses in the Medical Assisting Program.	Strongly disagree					Strongly agree	n=24	av.=1.29nd=1.00@ev.=0.55

STUDENT DATA SUMMARY

Data analysis is a critical component of program review. The three categories below should be used as guidelines in developing a summary of the student data.

State at least three positive factors about the discipline/program identified by students. Include the number (or percentage) of students responding and any implications for planning.

24 students in the Fall 2014 class responded to the survey. The majority of students responded satisfied or highly satisfied to all questions in the survey. The 6 most positive responses were given for the following factors:

- Quality of instruction - 75% highly satisfied, 20.8% satisfied
- The way this program meets your educational goals - 70.8 highly satisfied, 29.2 satisfied
- Contribution toward your intellectual growth - 66.7% highly satisfied, 33.3% satisfied
- Clarity of course goals and learning objectives - 66.7% highly satisfied, 33.3% satisfied
- Presentation of classes via the College's Blackboard learning system - 66.7% highly satisfied, 33.3% satisfied

The data indicates that students enjoy learning using Blackboard, which we will continue doing. The program will maintain the high quality of instruction.

State at least three negative factors about the discipline/program identified by students. Include the number (or percentage) of students responding and any implications for planning.

There were no responses that were majority less than satisfied responses. The lowest scoring responses were the following:

- The physical facilities and space (e.g. classrooms and labs) - 41.7% highly satisfied, 16.7% satisfied, 20.8% neither satisfied nor dissatisfied, 16.7% dissatisfied, 4.2% very dissatisfied
- Advice about the program from counselors - 31.6% highly satisfied, 36.8% satisfied, 15.8% neither satisfied nor dissatisfied, 10.5% dissatisfied, 5.3% very dissatisfied
- Instructional equipment (computers, lab equipment) – 60.9% highly satisfied, 21.7% satisfied, 8.7% neither satisfied nor dissatisfied, 8.7% dissatisfied

The physical facilities are not adequate, as mentioned in the program review. A dedicated lab space would be very beneficial to the program. Lab equipment was in the process of being updated when this survey was done.

Better communication with the college counselors about the program is in order. The program coordinator will plan to communicate with counselors during the application period for the program to clarify any questions about the program.

State any other information (use responsive numbers) that you obtained from student data (e.g. focus groups, questionnaires, or SGIDs) that may be of special interest to the self study team. What planning implications will result from this information?

A survey was sent to the 48 completers of the program for whom I had working email addresses to see how long it took them to get jobs in the field and what the average starting pay was. There were only 13 responses. Of those who responded, 53.8% were working as

within 3 months of completing externships. 23.1% found employment after 6 months. The same 23.1% did not find positions as MAs.

11 people chose to answer the question about starting pay. 81.8% were making a salary of a little less than \$29,999/year. 18.2% were making a little over \$30,000/year. \$29,999 = \$14.42/hr, which is consistent with the information we give applicants regarding starting salary. In order to give the most accurate information regarding starting salary to our applicants, it would be beneficial to conduct a survey of employers to determine the average starting salary in this area.

38.5% had obtained state or national certification, 61.5% had not.

92.3% agreed that the MA program had prepared them well for a job in the field, 7.7% did not.

84.6% would recommend the program to others, 15.4% would not.

From this data, it appears that the great majority of students felt they were well prepared for a job in the field, but only 53.8 had found positions. Because certification is desired by employers, it benefits the student to become certified. The coordinator will plan to explore the possibility of having students take the certification exam prior to graduating from the program. The American Medical Technologist certification organization will allow students to take the test during the last few weeks of the program, then send transcripts to get the certificate once courses are completed. That speeds up the process for certification. It seems that those students who did not get hired in the field within the first 3 months did not get employed as medical assistants. The sooner they can obtain certification, the better.

One student stated that pediatrics was a weakness of the program. The program prepares students to work in a variety of settings, one of which is pediatrics. We could not devote more time to the one specialty without taking time away from others, such as cardiology. Students are being instructed to spend more time studying and reviewing information on specialty areas if they wish to work in that area.

Comments Report

1. Please answer the following questions in order to help us improve the Medical Assisting Program at Allan Hancock College.

1.6) If 'no', what were the areas of weakness of the Allan Hancock College MA Program?

- Pediatrics

Data Request, General,

Data Request

General ()
No. of responses = 13
For the Period



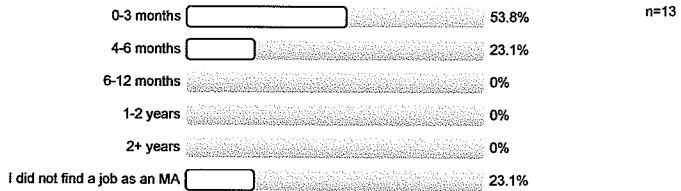
Survey Results

1. Please answer the following questions in order to help us improve the Medical Assisting Program at Allan Hancock College.

1.1) Are you working in the Medical Assisting field?



1.2) How long did it take you after graduation to obtain employment as an MA?



1.3) What is the range of your starting salary as an MA?



1.4) Did you obtain a state or national certification after graduation? (ex. RMA, CCMA)



1.5) Do you think the Allan Hancock MA Program prepared you well to work in the medical field?



1.7) Would you recommend the Allan Hancock College MA program to others?



COURSE REVIEW VERIFICATION SHEET

Discipline: Health Sciences Year: 2014

Program/Discipline: Medical Assisting

As part of the program evaluation process, the self-study team has reviewed the course outlines supporting the discipline/program curriculum. The review process has resulted in the following recommendations:

1. The following course outlines are satisfactory as written and do not require modification (list all such courses):
2. The following courses require minor modification to ensure currency. It is anticipated that such minor modifications will be completed by Fall 2014.
MA305 Body Systems and Disease
MA350 MA Fundamentals
MA351 MA Clinical Procedures 1
MA352 MA Administrative Procedures
MA353 MA Clinical Procedures 2
MA355 MA Pharmacology
MA360 Medical Billing & Insurance
MA361 Coding for Medical Insurance
3. The following courses require major modification. The self study team anticipates submitting such modifications to the AP&P committee, FALL 2014 _____ SPRING 20 _____
MA353 MA Clinical Procedures 2
MA356 MA Job Success Externship
MA360 Medical Billing & Insurance
MA361 Coding for Medical Insurance

GENERAL EDUCATION or MULTICULTURAL/GENDER COURSES

The following courses were also reviewed as meeting an **AHC general education** requirement and were found to satisfactorily meet the established criteria (list courses by prefix & number):
N/A

The following courses were also reviewed as meeting an **AHC general education** requirement and will require modification to ensure the content reflects compliance with category definitions (list courses by prefix & number). It is anticipated that such modifications will be completed by:

(date) _____

N/A

The following courses were also reviewed as meeting the **multicultural/gender graduation** requirement and were found to satisfactorily meet the established criteria (list courses by prefix & number):

N/A

The following courses were also reviewed as meeting the **multicultural/general graduation requirement** and will require modification to ensure the content reflects compliance with category definitions (list courses by prefix & number). It is anticipated that such modifications will be completed by:

(date) _____

N/A

Course Review Team Members:

Signature Date

Signature Academic Dean Date

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DEGREES AND CERTIFICATES

The medical assisting program is a certificate program leading to a Certificate of Achievement for the medical assisting option of the program and a Certificate of Accomplishment for the medical billing option. The medical billing option did lead to a Certificate of Achievement prior to the removal of CBIS 101 as a core course.

The courses for both programs are as below:

MEDICAL ASSISTING: MEDICAL ASSISTING OPTION (Certificate of Achievement)

Required Core Courses (26.5 units)

FALL:

MA 305	Body Systems and Disease	5 units
MA 350	MA Fundamentals	2 units
MA 351	MA Clinical Procedures 1	3 units
MA 352	MA Administrative Procedures	4 units

SPRING:

MA 355	MA Clinical Procedures 2	5 units
MA 355	MA Pharmacology	4 units
MA 356	MA Job Success Externship	3.5 units

MEDICAL ASSISTING: MEDICAL BILLING (Certificate of Accomplishment)

Required Core Courses (16 units)

FALL:

MA 305	Body Systems and Disease	5 units
MA 352	MA Administrative Procedures	4 units

SPRING:

MA 360	Medical Billing and Insurance	4 units
MA 361	MA Coding for Medical Insurance	3 units

**PLAN OF ACTION - PRE-VALIDATION
Six Year**

DEPARTMENT: HEALTH SCIENCES

PROGRAM: MEDICAL ASSISTING

List below as specifically as possible the actions that the department plans to take as a result of this program review. Be sure to address any problem areas you have discovered in your analysis of the program. Number each element of your plans separately and for each, please include a target date. Additionally, indicate by the number each institutional goal and objective which is addressed by each action plan. (See Institutional Goals and Objectives)

Please be sure the signature page is attached.

RECOMMENDATIONS TO IMPROVE STUDENT LEARNING OUTCOMES AND ACHIEVEMENT

	Theme/Objective/ Strategy Number AHC from Strategic Plan	TARGET DATE
1. Incorporate electronic medical record charting into clinical skills check-offs in order to keep up with industry standard of increasing use of technology in the medical field.	SLS1, SLS2, SLS6, IR3	S 2016
2. Add to the present SLOs to include Professionalism to expected outcomes. Professionalism is the largest determining factor in success as a medical assistant, according to clinic supervisors and advisory committee members.	SLS2, SLS6	S2016
3. Develop a measurement artifact for the SLOs for courses that have two sections in order to obtain more meaningful data for improvement of the program.	SLS1	S2016
4. Assure that wording for SLOs on syllabi for all courses is consistent with the wording on the CORs for the courses, by meeting with the part-time faculty to communicate the importance of accuracy in stating SLOs.	G1, E2	S2016
5. Obtain a dedicated lab for the program so that labs can be set up ahead of time, maximizing the time students have to practice skills, thereby increasing their chances of success in clinical skills.	SLS2, IR4, SLS5, SLS6	F2020

RECOMMENDATIONS TO ACCOMMODATE CHANGES IN STUDENT CHARACTERISTICS

	Theme/Objective/ Strategy Number AHC from Strategic Plan	TARGET DATE
Enrollment Changes		
1. Work with public relations to consider strategies to increase community awareness of the medical assisting program and medical billing option, thereby increasing enrollment.	E2	S2016
2. Work with public relations to increase enrollment of male students, in order to increase diversity.	E2	S2016

<p>Demographic Changes</p> <p>1. Consider including a statement in the school catalogue regarding the desirability of the ability to speak Spanish. Because the Hispanic population in the local area is increasing, local medical offices are becoming increasingly unwilling to accept a student extern who is not fluently bilingual. A statement should probably be added to the information about the program that students must be willing to travel up to an hour to an externship site. This will be discussed with the advisory committee at the next meeting.</p>	E1	F2016
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RECOMMENDATIONS TO IMPROVE THE EDUCATIONAL ENVIRONMENT

	Theme/Objective/ Strategy Number AHC from Strategic Plan	TARGET DATE
<p>Curricular Changes Investigate the addition of a phlebotomy certification option to the program.</p>	E1	F2018
<p>Co-Curricular Changes Investigate cross-linking MA 305 with biology in order to give students the option of taking the course prior to taking anatomy and physiology courses, thereby increasing their chances of success. Any student anticipating entering the medical field would benefit from the course.</p>	SLS2	F2016
<p>Neighboring College and University Plans Work with Southern California C-ID group toward developing a model curriculum for medical assisting.</p>	SLS3	F2015 S2016
<p>Related Community Plans Collaborate with advisory committee members to identify a strategy to increase the number of medical clinic externship sites that will commit to taking students for externship sites.</p>	SLS2, SLS5, SLS6, SLS8	F2015 S2016

RECOMMENDATIONS THAT REQUIRE ADDITIONAL RESOURCES

	Theme/Objective/ Strategy Number AHC from Strategic Plan	TARGET DATE
<p>Facilities When present building is demolished, the program will have to be moved, preferentially into the M building, where the other health sciences programs are located. The program needs a dedicated lab where clinical skill labs can be set up ahead of time, maximizing the amount of time available for practice.</p>	SLS2, SLS5, SLS6, IR4	F2020?
<p>Equipment</p> <ol style="list-style-type: none"> 1. Two iPad Pros to keep up with industry standard in use of electronic medical record charting: \$2612.88 2. Simulation equipment for administration of injections: \$500 3. New electronic medical record software installed in computer lab and classrooms: \$8000 4. New presentation station in classroom: \$10,000 5. New phlebotomy chairs (2) \$1400 6. New lab equipment as technology evolves: cost unknown. 7. Increased funding for instructional supplies for clinical skills labs to assure adequate supplies for practice. \$500 	IR3 SLS1, SLS2 IR3 IR3 SLS1, SLS2 IR3 SLS1, SLS2	S2016 F2016 F2017 F2018 F2019 F2020 F2016
<p>Staffing</p> <ol style="list-style-type: none"> 1. The present staffing need is to increase the coordinator reassigned time from .20 to .40. A request has been submitted. 2. Prepare a succession plan for the program coordinator position. The present program coordinator will be retiring within the next 2-3 years. 	SLS2, IR1 SLS2, IR1	F2016 F2016

PROGRAM REVIEW – VALIDATION TEAM MEMBERS

Board Policy requires that the validation team be comprised of the dean of the area, one faculty member from a related discipline/program, and two faculty members from unrelated disciplines.

Dean: Larissa Nazarenko

Faculty Member from a Related Discipline: Holly Stromberg, Health Sciences, RN Program

Faculty Member from Unrelated Discipline: Mary Perry, Life/Physical Sciences

Faculty Member from Unrelated Discipline: Alexandra Bell, Student Health Services

EXECUTIVE SUMMARY
(Validation Team Report)

1. MAJOR FINDINGS

Strengths of the program

Since the last program review, the validation team recognized tremendous evolution and revamping of the program. Based on 2008 program revision recommendations, Medical Assisting has successfully transitioned into a cohort program. The program has a great reputation and is highly respected in the community.

Faculty

- The dedicated full-time faculty provides strong leadership for both Medical Assisting and Medical Billing and Coding. She has done a remarkable job at taking a new format for the program and working to improve student outcomes.
- Faculty has done a thorough implementation of SLO assessment and built up program goals and objectives upon findings.
- Faculty is very well connected to the other MA programs in the state and is involved in the process of developing C-IDs in Medical Assisting.
- Faculty implemented a unique way to reinforce attendance policy based on professionalism points.

Enrollment

- The retention and success rates are much higher than the college's overall rates, including male students showing 100% success rate.
- Student survey showed that 100% of students are satisfied or highly satisfied with the way the program meets their educational goals, contribution to their intellectual growth, and would recommend taking courses in the program.
- Alumni survey revealed that 92.3% agreed that the MA program prepared them well for the job in the field and 84.6% would recommend the program to others.

- The program serves a very diverse non-traditional population including unusually high representation of older students.

Concerns of the Program

- The physical facilities are not adequate and a dedicated lab space would be beneficial to the program.
- The greatest challenge for the program is placing students for externships in the local clinics that are increasing their requirements for externs such as being bilingual, fast-learner, and being able to keep up with a fast-paced environment. The challenge requires much more of the coordinator's time.
- The program needs to be funded appropriately so that students have opportunity to practice skills with adequate supplies.
- Although the only full-time faculty plans to retire before the next program review, there is no plan on how prepare a successor for the coordination of both programs.
- About 16% of students are dissatisfied and 15.6% are neither satisfied nor dissatisfied with advice from counselors about the program.
- Rapidly changing technology in doctor offices requires the program to stay abreast with the industry standards.

2. RECOMMENDATIONS

- The Validation Team recommends that the coordinator obtains more reassign time due to increased external challenges such as placing students for externships.
- The Validation Team recommends that the program work towards providing students with clear local employment prospects that are geared towards hiring bi-lingual medical assistants.
- The Validation Team recommends that the program identifies a succession plan to replace the only full-time faculty due to retirement.
- The Validation Team recommends that the faculty continue to work closely with other programs in Health Sciences to ensure that a dedicated counselor assists all students in the department.
- The Validation Team recommends that the program continue to seek for adequate space that can be potentially dedicated for Medical Assisting lab.
- The Validation Team recommends that the program budget be augmented to adequately fund and support required program activities.

PLAN OF ACTION – POST-VALIDATION
(Sixth-Year Evaluation)

DEPARTMENT Health Sciences PROGRAM Medical Assisting

In preparing this document, refer to the Plan of Action developed by the discipline/program during the self-study, and the recommendations of the Validation Team. Note that while the team should strongly consider the recommendations of the validation team, these are recommendations only. However, the team should provide a rationale when choosing to disregard or modify a validation team recommendation.

Identify the actions the discipline/program plans to take during the next six years. Be as specific as possible and indicate target dates. Additionally, indicate by the number each institutional goal and objective which is addressed by each action plan. (See Institutional Goals and Objectives) The completed final plan should be reviewed by the department as a whole.

Please be sure the signature page is attached.

RECOMMENDATIONS TO IMPROVE DESIRED STUDENT OUTCOMES AND IMPROVE STUDENT PERFORMANCE

	Theme/Objective/ Strategy Number AHC from Strategic Plan	TARGET DATE
1. Incorporate electronic medical record charting into clinical skills check-offs in order to keep up with industry standard of increasing use of technology in the medical field.	SLS1, SLS2, SLS6, IR3	S 2016
2. Add to the present SLOs to include Professionalism to expected outcomes. Professionalism is the largest determining factor in success as a medical assistant, according to clinic supervisors and advisory committee members.	SLS2, SLS6	S2016
3. Develop a measurement artifact for the SLOs for courses that have two sections in order to obtain more meaningful data for improvement of the program.	SLS1	S2016
4. Assure that wording for SLOs on syllabi for all courses is consistent with the wording on the CORs for the courses, by meeting with the part-time faculty to communicate the importance of accuracy in stating SLOs.	G1, E2	S2016
5. Obtain a dedicated lab for the program so that labs can be set up ahead of time, maximizing the time students have to practice skills, thereby increasing their chances of success in clinical skills.	SLS2, IR4, SLS5, SLS6	F2020
6. Increase coordinator reassigned time to allow adequate time for placing students in externships.	SLS1, SLS2, IR1	F2016
7. Provide students with clear local employment prospects that are geared toward hiring bi-lingual medical assistants.	SLS1, SLS2, SLS6, SLS8	S2017
8. Increase the budget for instructional supplies to ensure adequate supplies for practicing clinical skills.	SLS1, SLS3	F2016

RECOMMENDATIONS TO ACCOMMODATE CHANGES IN STUDENT CHARACTERISTICS

	Theme/Objective/ Strategy Number AHC from Strategic Plan	TARGET DATE
Enrollment Changes		
1. Work with public relations to consider strategies to increase community awareness of the medical assisting program and medical billing option, thereby increasing enrollment.	E2	S2016
3. Work with public relations to increase enrollment of male students, in order to increase diversity.	E2	S2016
4. Work with other programs in Health Sciences to ensure that a dedicated counselor assists all students in the department to register for appropriate classes to facilitate progression through the Health Sciences career pathway.	E2, SLS1, SLS2	S2017

<p>Demographic Changes</p> <p>1. Consider including a statement in the school catalogue regarding the desirability of the ability to speak Spanish. Because the Hispanic population in the local area is increasing, local medical offices are becoming increasingly unwilling to accept a student extern who is not fluently bilingual. A statement should probably be added to the information about the program that students must be willing to travel up to an hour to an externship site. This will be discussed with the advisory committee at the next meeting.</p>	E2	S2016
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RECOMMENDATIONS TO IMPROVE THE EDUCATIONAL ENVIRONMENT

Theme/Objective/
Strategy Number
AHC from Strategic
Plan

**TARGET
DATE**

<p>Curricular Changes Investigate the addition of a phlebotomy certification option to the program.</p>	E1	F2018
<p>Co-Curricular Changes Investigate cross-linking MA 305 with biology in order to give students the option of taking the course prior to taking anatomy and physiology courses, thereby increasing their chances of success. Any student anticipating entering the medical field would benefit from the course.</p>	SLS2	F2016
<p>Neighboring College and University Plans Work with Southern California C-ID group toward developing a model curriculum for medical assisting.</p>	SLS3	S2016
<p>Related Community Plans Collaborate with advisory committee members to identify a strategy to increase the number of medical clinic externship sites that will commit to taking students for externship sites.</p>	SLS2, SLS5, SLS6, SLS8	

**RECOMMENDATIONS THAT REQUIRE ADDITIONAL
RESOURCES**

Theme/Objective/
Strategy Number
AHC from Strategic
Plan

**TARGET
DATE**

<p>Facilities When present building is demolished, the program will have to be moved, preferentially into the M building, where the other health sciences programs are located. The program needs a dedicated lab where clinical skill labs can be set up ahead of time, maximizing the amount of time available for practice.</p>	SLS2, SLS5 SLS6, IR4	F2020?
<p>Equipment</p> <ol style="list-style-type: none"> Two iPad Pros to keep up with industry standard in use of electronic medical record charting: \$2612.88 Simulation equipment for administration of injections: \$500 New electronic medical record software installed in computer lab and classrooms: \$8000 New presentation station in classroom: \$10,000 New phlebotomy chairs (2) \$1400 New lab equipment as technology evolves: cost unknown. Increased funding for instructional supplies for clinical skills labs to assure adequate supplies for practice. \$500 	IR3 SLS1, SLS2 IR3 IR3 SLS1, SLS2 IR3 SLS1, SLS2	S2016 F2016 F2017 F2018 F2019 F2020 F2016
<p>Staffing</p> <ol style="list-style-type: none"> The present staffing need is to increase the coordinator reassigned time from .20 to .40. A request has been submitted. Prepare a succession plan for the program coordinator position. The present program coordinator will be retiring within the next 2-3 years. 	SLS2, IR1 SLS2, IR1	F2016 F2016



Medical Assisting Program

Student Handbook

2014 – 2015

Medical Assisting Program Student Handbook

Table of Contents

	Page
Non-Discrimination Statement	3
Alternate Format Statement.....	3
Student Success	3
Program Policies	3
Student Policies.....	4
Grading Policy	5
Student Attendance Policy.....	5
Pregnancy Leave	5
Sick Leave: Injury, Post-Surgery or Extended Illness	6
Student Dress Code.....	6
Faculty Hours for Student Counseling.....	7
Student Services	7
Clarification of Student Health Insurance	9
Appendix "A" – Program Course Requirements	11
Appendix "B" – AHC Board of Trustees Policies.....	13
Appendix "C" – Student Consent Statements.....	25
Appendix "D" – Medical Assisting Scope of Practice	28

Non-Discrimination Statement

The Allan Hancock College Joint Community College District is committed to the active promotion of diversity and equal access and opportunities to all staff, students, and applicants, including qualified members of underrepresented/-protected groups. The college assures that no person shall be discriminated against regardless of race, color, ancestry, religion, gender, national origin, age, physical/mental disability, medical condition, status as a Vietnam-era veteran, marital status, or sexual orientation.

Alternate Format Statement

Allan Hancock College will provide, upon request, alternate translation of its general information documents in large print, Braille, e-text, etc. Please call (805) 922-6966, ext. 3788.

Student Success

It is the goal of the staff and faculty of the Allan Hancock Medical Assisting Program that every student be successful in the program. The following are suggested strategies for success:

1. Enlist the help of friends and family to help with chores and responsibilities so that adequate study time and sleep may be obtained.
2. Keep up with reading assignments and coursework. The work is intensive and catching up is very difficult.

3. Take good care of yourself. Eat right, exercise and get enough sleep. The ability to learn and understand is impaired when the body is in need.
4. Join a study group that supports your learning needs.
5. Take responsibility for your own learning.
6. Attend classes regularly and be prepared to learn.
7. Reflect on class content. Ask questions of your instructors.
8. Utilize resources in addition to your textbooks. The Learning Resource Center has many print and media items available.
9. Ask for help when you need it.
10. Know and abide by the program polices.

Program Policies

Failure to comply with any policy, rule, or regulation established within the Medical Assisting program will result in student(s) being subject to discipline and/or dismissal from the Medical Assisting program. The following procedure will be implemented for infraction of the stated rules and policies:

- a. Policies dealing with dismissal, grievance and challenge are outlined in the college catalog.
- b. Procedure for Grade Review is in appendix (B) of this Student Handbook. If a grievance is filed related to a grade, the California Administrative and Education Code stipulates that the instructor's grade will stand except in instances of mistake, bad faith, or incompetence.
- c. The Medical Assisting instructor(s) shall verify and document the infraction with a written report to the student and the Medical Assisting Program Coordinator.
- d. The incident shall be investigated and input solicited from all involved parties.
- e. A decision shall be delivered by the Medical Assisting Program Coordinator.

If a student feels that he or she has been subjected to unfair or improper action by any member of the academic community, the student can seek to resolve the complaint. (See Board Policy 6200, Appendix B section C, Page 16).

Tests for students requesting accommodations will be given at the Learning Assistance Center **only**.

Alarms or rings on cell phones or pagers are not allowed during classes. Silent pages may be answered **only** during scheduled breaks unless prior permission is obtained.

Student Policies

These policies are established in the belief that Allan Hancock College has a responsibility to the people of California to prepare competent Medical Assistants. Failure of a student to adhere to the requirements of these policies shall result in dismissal from the Medical Assisting Program. In addition to these policies, students shall adhere to all rules and regulations generally applicable to Allan Hancock College students. Failure of any Medical Assisting course in this program shall result in dismissal from the program. The college shall not certify any person dismissed from the program as eligible to take any professional certification or to engage in the practice of Medical Assisting.

Grounds for dismissal include, but are not limited to:

1. Obtaining or possessing, in violation of law, or prescribing, except as directed by a licensed physician, surgeon, dentist, or podiatrist, administering to himself/herself or furnishing or administering to another, any narcotic as defined in Division 10 of the California Health and Safety Code.

2. Using any narcotic as defined in Division 10, of the California Health and Safety Code, or any dangerous drug as defined in Article 8, of Chapter 9, of Division 2 of the Business and Professions Code, or alcoholic beverages, to an extent or in a manner dangerous or injurious to himself/herself, any other person, or the public.
3. Use, possession, distribution, or presence on a campus while under the influence of alcoholic beverages, narcotics, or other dangerous drugs, such as, but not limited to: marijuana, methamphetamine, or lysergic acid diethylamide (LSD), except as expressly permitted by law.
4. Being convicted of a crime involving moral turpitude or evidencing unsuitability for employment as a Medical Assistant.
5. Commission of any act involving dishonesty, fraud, or deceit with the intention to substantially benefit oneself or another, or substantially injure another.
6. Violating confidentiality regarding patients or school-related persons.
7. Abusing verbally or physically any fellow student, teacher, or employee of Allan Hancock College or the extended campus laboratories.
8. Theft, abuse, destruction, or misuse of property of Allan Hancock College or extended campus laboratories.
9. Failure to maintain a "C" grade or better in **all** Medical Assisting classes. A "C" grade is required to progress within the Medical Assisting program.
10. Excessive absenteeism. In compliance with college policy, instructors set an attendance policy for each class. It is the students' responsibility to know and comply with each one. Instructors may drop a student from a class for infractions of attendance policy. Do not ask instructors for permission to be absent. It is always a personal choice and personal responsibility to assume the consequences of absenteeism. (See Attendance Policy). *Dropping or withdrawing from one of the Medical Assisting program courses results in being dropped from the program.*
11. Failure to maintain a professional appearance as a representative of Allan Hancock College Medical Assisting Program. (Please see Dress Code).

Grading Policy

The Medical Assisting Program at Allan Hancock College will adhere to the following grade scale:

90 – 100 = A

80 – 89 = B

70 – 79 = C

60 – 69 = D

59 and below = F

To pass a course in the Medical Assisting Program, the student must earn a minimum grade of "C" (70 percent or better).

Student Attendance Policy

Two (2) days of absence per course are allowed for the entire semester. Three (3) tardies are considered a full day's absence. If you are not present when role is called, you are tardy. More than 30 minutes late is considered a full day's absence. Missing 30 minutes or more during **ANY** part of class is considered a full day's absence. Make sure you have backup childcare and transportation. Do not make appointments during class time. There is no such thing as an excused absence.

Consistent attendance in both the theory and lab classes is essential to receive the maximum benefit from these learning experiences.

Pregnancy Leave

Although pregnancy is not considered an illness, it is recognized that certain physiological changes take place during pregnancy that place additional stress on the body. For this reason, students who are past the third month (12th week) of gestation must present written clearance to participate in the Medical Assisting Program from the student's treating physician. After the birth of the child, a similar clearance must be presented before return to the Medical Assisting Program.

1. Antepartum:

- A written clearance from the student's treating physician must be submitted to the Medical Assisting Program Coordinator by the end of the first trimester of pregnancy.
- Prior to starting the externship experience, a student who is in the second or third trimester of pregnancy must submit another medical clearance, stating that she may safely engage in all clinical activities for the duration of the clinical externship, including such activities as administering injections, obtaining blood and body fluid specimens, and assisting with transfer of patients to and from the examination table.
- Once such written clearance is obtained, the student may remain active in the Medical Assisting Program until she delivers, provided that she is able to meet all of the weekly clinical laboratory objectives and her attendance record remains satisfactory.

2. Postpartum:

- The student must present written clearance from her treating physician for return to the Medical Assisting Program. This must be submitted to the Medical Assisting Program Coordinator.
- Attendance requirements must be met to satisfy mandated hours.

Sick Leave: Injury, Post-Surgery and/or Extended Illness

1. The student who has been absent due to illness or injury and is under the care of a physician must present written clearance from his/her treating physician before returning to clinical.
2. The student must be able to meet all weekly objectives to remain in good standing in the program.
3. The absence policy of the Medical Assisting Program will apply (See Student Attendance Policy)

Student Dress Code

Your appearance reflects the clinical office and college standards and indicates to patients and co-workers your pride and interest in your profession. These standards are maintained by personal neatness and cleanliness, by wearing only the authorized uniform and by avoiding the use of elaborate jewelry and cosmetics.

1. Uniform Shirt/Top – Solid Burgundy: Scrub type top, with pockets, zip or snap front. The uniform shirt/top must fit freely over hips and be 2 to 4 inches below buttocks.
2. Pants – Burgundy: The pants must tie or fasten at the waist. They must fit loosely over knees and thighs. Jeans or stretch pants are not allowed. The length must be long enough to cover the top of shoe at the heel when standing. The uniform must be free from stains or wrinkles.
3. Sweater – White with button or zipper closure. The sweater is not required. If purchased, make sure it is machine washable. A lab jacket may be worn in place of a sweater. When in externships or participating in an off-campus clinical volunteer activity as an Allan Hancock College MA Program student, no other types of jackets or sweaters may be worn in clinical area.

4. Shoes/socks: White shoe with closed toe and heel. No clogs. White socks or neutral hose are to be worn with shoes.
5. Identification Name Pin: The identification name pin is mandatory and the following specifications are to be followed: (WHITE BACKGROUND WITH BLACK LETTERING) **S.M.A stands for Student Medical Assistant**

EXAMPLE:

Allan Hancock College Jane Doe, S.M.A.

It is also mandatory to purchase the Allan Hancock College student picture ID so that you may wear it at the externship sites. Many medical facilities will not allow you to work without a picture ID.

NOTE: THE NAME TAG IS AN ESSENTIAL PART OF YOUR UNIFORM. YOU ARE NOT CONSIDERED TO BE IN COMPLIANCE WITH THE DRESS CODE IF YOU DO NOT HAVE YOUR NAME TAG ON. CONSIDER PURCHASING MORE THAN ONE AND KEEP A SPARE IN YOUR CAR.

6. Watch: You MUST have a watch with a second hand (NOT digital).
7. Jewelry: You may wear an engagement and/or wedding ring on left hand only, and plain *post* earrings (only one earring per earlobe). Rings that are a hazard to patient care will be removed. **No other visible piercing is allowed (tongue, nose, eyebrow, etc.).** This may be offensive to patients, and we are complying with the rules of the facilities in which we are guests.
8. Nails must be cut so as not to be seen from "palm" side of hand. They must be clean and filed. **Clear nail polish only.**
9. Hair must be clean, contained and neat. Long hair must be held back or worn up. Hair must not be able to fall forward onto the patient when performing procedures. Hair clips or bands, used to hold the hair back, should be plain and functional.
10. Makeup to be minimal, and in good taste for daytime wear.
11. No perfume.
12. Tattoos must be covered.

Faculty Hours for Student Counseling

Each full time instructor has a minimum of 5 hours/week for student counseling. Hours are posted on the doors of the faculty offices. Each class syllabus contains faculty contact information.

Student Services

Learning Assistance Program(LAP)

Monday-Thursday / 8am-4:30 pm

Friday / 8am-4pm

Allan Hancock College's Learning Assistance Program serves the unique needs of two groups of students; those referred because of specific learning disabilities and students with permanent or temporary physical disabilities. Services are located in Building K-Annex, phone number 805-922-6966, Ext. 3274. Email address: lap@hancockcollege.edu. Students requesting accommodations for testing will take the exams at the Learning Assistance Center **ONLY**.

Financial Aid Program

Mon & Tues- 8am-6pm Wed & Thurs 8am- 4:30 pm Fri / 8am-4pm

Assistance with registration fees, supplies, and childcare may be available. Contact the Financial Aid Office at (805) 922-6966 ext. 3200 or the E.O.P.S. Office at ext. 3214 for more information. E.O.P.S. can refer students for funding which is provided under the Department of Social Services.

Learning Resources Center (LRC)

Mon-Thurs 8am-8pm Fri 8am-3pm Sat 9am-1pm

Students have ready access to the comprehensive services of the Allan Hancock College Library which is housed in the College Learning Resource Center (LRC) in Santa Maria and the Lompoc Valley Center. These services include routine book circulation, reserve materials, periodical access (both print and electronic), an online book and media catalog, Internet access, and audiovisual materials. Inter-library loan services are available to students and the library provides access to various on-line indexes. Suggestions for purchases and additions for library and departmental holdings are made jointly by the Health Sciences Department faculty in conjunction with the faculty librarians and associate dean, learning resources. The phone number is 922-6966, ext. 3224.

Tutorial Services

Mon-Thurs 9am-8pm Fri 9am-3pm Saturday 8am-12pm

The Allan Hancock College Tutorial Center provides free peer tutoring for most of the academic and vocational courses offered by the college. Students may seek one-time-only or on-going assistance at any time during the semester. Faculty members may also refer to the Tutorial Center students who need and desire help. Employment opportunities exist for qualified students who wish to serve as tutors. Applications are available at the Tutorial Center. The phone number is 922-6966, ext. 3260.

Job Placement Career Center:

Mon-Thurs 8am-4:30 pm Fri-8am-4pm

The Job Placement Career Center offers services to students in career exploration and job placement. Placement services are available for students and graduates seeking temporary, seasonal, and part-time or full-time employment. Staff is available to assist those who are undecided in their career choice and wish guidance in job search planning, resume and letter preparation, interviewing techniques, and information on careers. The center maintains a variety of career resources and information designed to assist the student in making realistic vocational and career choices.

Students are also provided with the following services:

- Career advising
- On-campus recruiters
- Annual Career/Job Fair Day
- Job announcements for other agencies
- Job opportunities locally, regionally, and nationally
- Summer jobs

Also available are the following computerized career information programs: Eureka, Quest, and the Skills Inventory. It is the responsibility of the student seeking employment to register at the Job Placement Career Center, to complete a job assistance application, and to report regularly after filing the initial application. Appointments for special assistance can be made directly with staff. Vocational students nearing completion of degree and certificate programs and desiring employment are encouraged to visit the center. The phone number is 922-6966, ext. 3374.

A link to AfterCollege is located on the Health Sciences web page. Local employers post jobs at this site.

Extended Opportunity Programs and Services (E.O.P.S.)

Mon, Wed, Thurs 8am- 4:30 pm Tues- 8am-6pm Fri 8am-4pm

The Extended Opportunity Programs and Services (E.O.P.S.) is a program designed to recruit, select, retain, and graduate low-income students who wish to continue their education. Students receive assistance in admissions, registration, financial aid, tutoring, counseling, job placement, and other supportive services, depending on individual needs. A candidate for E.O.P.S. is defined as an individual who has the potential to perform satisfactorily at the college level, but who has not been able to realize that potential because of economic, social, cultural, educational, or environmental reasons. To be eligible for E.O.P.S. Program, a student must:

1. Complete a Student Aid Application for California;
2. Meet E.O.P.S. income criteria.

Applications may be obtained by contacting the campus E.O.P.S. Office located in the Student Services Building A. The phone number is 922-6966, ext. 3214. Bilingual services are provided.

**ALLAN HANCOCK COLLEGE
CLARIFICATION OF STUDENT HEALTH INSURANCE
FOR HEALTH RELATED PROGRAM STUDENT**

As a registered student at Allan Hancock College, you are covered under a secondary insurance policy that covers specified accidents. This is part of what your health fee pays for. With a secondary insurance, you must first submit claims to your own private insurance company and then submit remaining bills to the Student Accident Insurance. If you do not have primary insurance, you must submit a verification form and then bill the student insurance as the primary insurer. There are limitations and deductibles on all claims.

If you have an accident during the time you are engaged in an Allan Hancock College class, whether that class takes place on campus or off-campus, you may be covered for the immediate care that the accident requires. However, it is important that you read the student health insurance brochure carefully to understand how the insurance carrier defines "accident". The definition is quite limited. Student health insurance does not cover you for illnesses that may result through your work with clients in your student role.

Injuries occurring in the skills lab are **NOT** covered under Workers' Compensation but may be covered under the Student Health Insurance. Report injuries of this kind to your instructor immediately and follow-up with the Campus Nurse as soon as possible.

EXAMPLES:

If you are walking on campus, trip on the lawn, and twist your ankle, you may be covered under Student Health Insurance.

If you are practicing in the lab and you stick yourself with a used needle, you may

be covered under Student Health Insurance.

If you are injured on campus, the Santa Maria Campus College Nurse (922-6966, ext. 3212) and your instructor must be notified immediately and action taken as directed.

If you are injured at an off-campus site while engaged in Allan Hancock College course work, the injury must be reported immediately to the instructor, who will direct the student in receiving appropriate treatment and in completing the necessary reports. In addition, it is **your** responsibility to notify the College Nurse within 72 hours. There is a deductible on the accident insurance through Allan Hancock College. All medical expenses not covered by insurance are the sole responsibility of the student - not the College. Under certain circumstances, you may be covered by Workers' Compensation.

If you would like further clarification, you may obtain a brochure that explains the health insurance policy in greater detail from the College Nurse - Santa Maria Campus, W-12 ext. 3212. Information on a primary health insurance policy is also available.

Medical Assistant Program Handbook Appendix "A"

Course Requirements

The AHC Medical Assisting program offers two (2) certificated program options: Medical Assisting and Medical Coding and Billing.

Core courses for MA certificate (26.5 units total)

First Semester (13u)

9. MA 305 Body Systems and Disease - 5 units (5 hours lecture)
10. MA 350 MA Fundamentals - 2 units (2 hours lecture)
11. MA 351 Clinical Procedures 1 - 3 units 2 hours lecture (3 hours lab)
12. MA 352 MA Administrative Procedures - 4 units (3 hours lecture, 3 hours lab)

Second Semester (12.5u)

13. MA 353 MA Clinical Procedures 2 - 5 units (3 hours lecture, 6 hours lab)
14. MA 355 Pharmacology - 4 units (2 hours lecture, 6 hours lab)
15. MA 356 Job Success Externship – 3.5 units (0.5 unit lecture, 2 units lab - 160 hours) Need physician verification of physical ability to participate in patient care activities without risk to student or patient. Verification of currency on immunizations is required by clinical agencies.

Courses for Billing and Coding Certificate (16u total)

1. MA 305 Body Systems and Disease (5 units)
2. MA 352 MA Administrative 1 (4 units)
3. MA 360 Medical Billing and Insurance (4 units) 2 hr lecture 6 hours lab
4. MA 361 Coding for Medical Insurance (3 units) 2 hours lecture 3 hrs lab

The courses for the Billing and Coding Certificate can be taken without completing the full MA program.

Pre-requisite Courses:

Courses must be completed with a grade of C or better.

English 300 or equivalent

Math 531 or equivalent

Entrance Requirements:

6. Student must be age 18 (required by California Codes- Business and Professions Code Section 2069-2071)
7. Complete a background check and drug screening (required by clinical agencies utilized for externship) Instructions for this will be given when accepted into the program. Do not complete prior to your application. If not done according to instructions you will need to repeat the process for an additional fee.
8. Current Healthcare Provider CPR card (American Heart Association or American Red Cross ONLY)
9. Physical exam clearing student for full clinical participation
10. Documentation of immunizations:
 - MMR (Measles, Mumps and Rubella)
 - DPT (Diphtheria, Pertussis, and Tetanus Toxoid)
 - Varicella
 - Hep B (Series of 3 shots)
 - H1N1
6. Must maintain currency through the duration of the program:
 - CPR for healthcare providers certificate (must be current)
 - TB skin test screening **annually**

In order to remain in any Medical Assisting Program a minimum grade of "C" must be earned in each course. A grade of "C" is required to progress within, and to graduate from any Medical Assisting Program.

Employment Opportunities

Medical Assistants are in demand with health care providers such as medical record and administration departments, industrial health facilities, public health research agencies, laboratories, insurance and billing business, medical sales operations, and emergency care and physicians' offices.

Medical assistants are trained in phlebotomy skills and may provide phlebotomy services in a medical office or clinic. If, however, more than 50% of the employee's time is spent in providing phlebotomy services, additional training and a certification in phlebotomy is required.

Medical Assisting Program Handbook
Appendix "B"

AHC Board of Trustees Policies

ALLAN HANCOCK JOINT COMMUNITY COLLEGE DISTRICT

ALCOHOL/DRUG-FREE WORKPLACE

(Board Policy 3030)

Allan Hancock College is committed to providing its employees and students with a drug-free workplace and campus environment. The Allan Hancock College substance abuse program emphasizes prevention and intervention through education. The dissemination of current and accurate information enables the students, officers, and employees to be better informed. Educational programs shall provide relevant courses, seminars, and lectures, and student services shall focus on providing guidance and referral for those affected by alcohol or substance abuse. Coordination shall be effected with educational agencies and with appropriate community organizations.

The unlawful manufacture, distribution, dispensing, possession or use of alcohol or any controlled substance is prohibited on Allan Hancock College property, during any college-sponsored field trip, activity or workshop, and in any facility or vehicle operated by the college.

Violation of this prohibition will result in appropriate action up to and including termination of employment, expulsion, and referral for prosecution, or, as permitted by law, may require satisfactory participation in an alcohol or drug abuse assistance or rehabilitation program.

As a condition of employment, employees must notify the District within five (5) days of any conviction for violating a criminal drug statute while in the workplace. The District is required to inform any agencies which require this drug-free policy within 10 days after receiving notice of a workplace drug conviction.

Reference:	Drug-Free Schools & Communities Act	Adopted: 06/16/87 (8992)
	Amendment, 1989 (Public Law 101-226)	Adopted: 06/16/89 (3140)
	Federal Drug-Free Workplace Act, 1988	Revised: 11/21/89
	AHC Board Policies 5920, 5921	Revised: 08/21/90
	California Education Code Sections 87009	Revised: 09/10/96
	87011, 87732, 87733, 87736, 88013, 88022	

**ALLAN HANCOCK JOINT COMMUNITY COLLEGE DISTRICT
STUDENT COMPLAINT POLICY**

(Board Policy 6200)

The Allan Hancock College student is encouraged to pursue academic studies and other college-sponsored activities that will promote his or her intellectual growth and personal development. In pursuing these ends, and in compliance with the requirements of Title IX and Section 504 of P.L. 93x112, the Allan Hancock Joint Community District establishes this Student Complaint Policy.

The person responsible for insuring that the college complies with the rules and regulations adopted by the Board of Governors of the California Community Colleges regarding unlawful discrimination against students shall be the district "affirmative action officer." When a student feels that he or she has been subjected to unfair and improper action by any member of the college community, the student can seek to resolve the complaint in an expeditious manner by using the following complaint procedure.

Adopted: 10/20/81
Revised: 3/16/93
Revised: 11/22/94

Administrative Procedure 6200.01
STUDENT COMPLAINTS

Grounds for student complaint:

1. Discrimination on the basis of sex, age, religion, ethnic group identification, color, citizenship, physical or mental disability, pregnancy, marital status or sexual harassment.
2. Violation of student rights which are described in board policies or the college catalog.
3. Arbitrary imposition of sanctions without proper regard for individual civil rights and due process.
4. Any act or threat of intimidation, harassment, or physical aggression.
5. Mistake, fraud, bad faith or incompetence in the academic evaluation of a student's performance. (See Section C of this Complaint Policy for Procedure for Grade Review.)
6. Academic complaints (See Section D of this Complaint Policy for Procedure for Academic Complaints.)

A. PROCEDURE FOR DISCRIMINATION COMPLAINTS

If a student believes that he/she has been a victim of discrimination based upon reasons stated in number 1, above, he/she should contact the Vice President, Student Development and Services and follow the procedure for filing a complaint of discrimination as outlined in the Staff Diversity/Affirmative Action Procedure.

B. PROCEDURE FOR COMPLAINTS OTHER THAN DISCRIMINATION, GRADE REVIEW AND ACADEMIC

Informal Complaint Procedure

When a student feels that he/she has just cause for a complaint, other than discrimination, grade review, or academics, the following steps must be taken in the sequence presented within ninety (90) days of the alleged incident:

1. Meet with the person(s) involved in the complaint to seek a solution. The Associated Student Body's (ASB) commissioner of student rights and development may accompany the student and may assist both parties to achieve a mutually acceptable resolution of the complaint.
2. Confer with the chairperson of the appropriate department in cases involving faculty or staff. The ASB commissioner of student rights and development may attend.
3. Confer with the vice president, student development and services or designee. He/she will call an informal conference with the parties involved in the complaint. In the case of a complaint against the vice president, student development and services, confer with the district affirmative action officer. In either case, the ASB commissioner of student rights and development may attend.

The ASB commissioner of student rights and development may record the dates and outcome of such conferences, and may present in writing such information to the college vice president, student

development and services or designee. If in any of the steps in the informal procedure an appointment with the student cannot be made or kept by the college personnel involved within five (5) regular session days of the attempt by the student to make the appointment, that step may be omitted and the next step initiated. Unavailability of the student is not cause to move to the next step. The ASB commissioner of student rights and development may also record any deviation from normal procedure.

Formal Complaint Procedure

1. If the student feels that the complaint has not been resolved by the informal procedures, he/she shall submit to the vice president, student development and services or designee a formal complaint form which is obtainable in the office of Student Services. This shall be done within five (5) regular session days after the informal conference with the vice president, student development and services or designee.
2. The vice president, student development and services or designee shall, within five (5) regular session days after receiving the completed complaint form, convene the Student Complaint Committee which will conduct a formal hearing.
3. The Student Complaint Committee shall conduct a formal hearing.

Composition of the Student Complaint Committee

- 1) The Committee shall consist of four classifications of members to be regular members or authorized alternate members:
 - One administrator (other than the vice president, Student Services or designee) selected by the college superintendent/president
 - One faculty member appointed by the president of the Faculty Senate
 - One member from the classified staff appointed by the CSEA president
 - Two full-time students appointed by the ASB president, one of whom may be the commissioner of student rights and development
 - All alternates will be selected by their respective constituent groups
- 2) In the case of a conflict of interest, a substitute member from the same classification as the ineligible member shall be selected by the appropriate president.
- 3) The Student Complaint Committee shall be appointed for that academic year within the first four weeks of each academic year. In the event of a vacancy during the course of tenure as a member of the Student Complaint Committee, the vacancy shall be filled promptly.

b. Rules of Organization

- 1) Three members, including one administrator, constitute a quorum. Decisions shall require a majority vote of the members (or their authorized alternate member) present.
- 2) The Committee shall select one of its members to be chairperson.
- 3) Each member of the Committee, including the chairperson, is entitled to one vote.
- 4) A person outside the Committee may be appointed by the chairperson to record the minutes, Committee actions, and proceedings.

c. Procedures

- 1) The complainant (the person bringing the complaint) shall be present. The respondent (the person against whom the complaint is brought) may be present if he/she desires.
- 2) All available relevant evidence shall be provided to the Student Complaint Committee.
- 3) The Committee shall discuss issues, hear testimony, examine witnesses, and consider available relevant evidence pertaining to the charge. Both parties have the right to be represented by legal counsel and to question witnesses and hear testimony.
- 4) The hearing shall be closed to the public.
- 5) The Committee shall judge the relevancy and weight of testimony and evidence and make its findings of facts, limiting its investigation to the formal charge. The Committee shall also make recommendations for the disposition or settlement of the charge to the vice president, student development and services or designee.
- 6) Procedures and rules for hearings and deliberations of the Student Complaint Committee not otherwise specified in this policy shall be established by a majority vote of the Committee.
- 7) The Committee shall submit its findings of facts and recommended action to the vice president, Student Services or designee, with a copy to each party, and the superintendent/president of the college.
- 8) A summary record of the proceedings shall be kept by the vice president, student development and services in his/her confidential file, and shall be available at all times to both parties of the complaint.

9) The vice president, Student Services or designee, upon receiving the findings of facts and recommendations of the Student Complaint Committee shall, within five (5) regular session days, render a decision and transmit it in writing to the respondent, the Student Complaint Committee, the superintendent-president of the college, and the other party concerned in the matter. The vice president, Student Services or designee may review the proceedings of the Committee, conduct such additional investigation as he/she may deem appropriate, and take one of the following actions:

- Dismiss the complaint
- Alter the recommended sanctions
- Concur with the Committee's recommendations

4. Appeal

a. The complainant or the respondent may write an appeal of the decision made by the vice president, Student Services or designee to the superintendent/president of the college within five (5) regular session days. Upon receipt of the appeal, the superintendent/president shall review the proceedings, conduct such investigation as he/she deems appropriate, and take one of the following actions:

- Dismiss the complaint
- Alter the recommended sanctions
- Concur with the decision of the vice president, Student Services or designee
- Concur with the recommendations of the Committee

b. If the complainant or the respondent is dissatisfied with the superintendent/president's decision, he/she may write an appeal to the board of trustees within five (5) regular session days. The board shall conduct a review of the case. The board may take one of the following actions:

- Dismiss the complaint
- Alter the recommended sanctions
- Concur with the superintendent/president's decision
- Concur with the recommendations of the Committee

c. If the final action in the complaint proceedings results in the dismissal of all charges, all records of the complaint shall be removed from the student's file within thirty (30) days of such final action. Such records will then be destroyed.

C. PROCEDURE FOR GRADE REVIEW

The State of California Education Code states (Section 76224) that the "...determination of the student's grade by the instructor in the absence of mistake, fraud, bad faith, or incompetence, shall be final."

If a student feels she or he has been unfairly assigned a grade based upon mistake, fraud, bad faith, or incompetence, not more than 120 days after the last day of the semester or term for which the grade was awarded, the student could initiate "Step 1" of the grade review procedure (certain exceptions can apply if extenuating circumstances are documented and approved by the Grade Review Committee (GRC)).

- Step 1 Meet with the instructor to explain the situation and see if the problem can be resolved.

- Step 2 If Step 1 does not resolve the issue and the student wishes to pursue it further then the student shall complete the Grade Review Petition Form and arrange a meeting with the department chair of the faculty person who assigned the grade.

- Step 3 If Step 2 does not resolve the issue and the student wishes to pursue it further then the student shall arrange a meeting with the dean of the faculty person who assigned the grade.

- Step 4 If Step 3 does not resolve the issue then the student may request a formal hearing by the GRC. The GRC shall be composed of the vice president, Student Services (who shall chair the committee), two faculty members (the president and vice president of the Academic Senate or their designees), and the ASB president or his/her designee.

The GRC shall hold a hearing within four weeks of receiving a valid request for such from the student, unless the student and/or the faculty member are unavailable due to vacation or other extenuating circumstances. All parties involved will have the right to present oral or written testimony, to have counsel, to have and question witnesses, and to hear all testimony. If the principal parties, either the student and/or the faculty member, does not wish to attend all formal hearings, he/she may waive this right by letter.

The findings of the GRC shall be stated in writing to all participants no later than two weeks from the date of the hearing. A copy of such findings will be forwarded to the superintendent/president.

Within two weeks the superintendent/president will issue a written decision to the GRC, the dean, chair, faculty member, and the student. If the faculty member or the student wishes to appeal the decision, the board of trustees will arrange an appeal review hearing within two months of the filing of the appeal. The board of trustees can review the matter based upon the record through Step 4, or grant a hearing de nova (full hearing).

- Step 5 Within two weeks after the board hearing, the board will issue its finding. The decision of the board is final.

D. ACADEMIC COMPLAINTS

Academic complaints are grievances that students may present against a faculty member. If a student believes that he/she has just cause for an academic complaint, other than to appeal a grade awarded for a course (grade review), the following steps must be taken no later than 30 calendar days into the next regular semester after the alleged incident(s) occurred. If the faculty member against whom the complaint is filed is not available, the complaint process may proceed to the next level, or by mutual agreement between the student and the dean of the area, the complaint process may be postponed and rescheduled at a time when all parties are available.

Step 1 For academic complaints, other than grade review, students should seek a resolution by meeting with the faculty member(s) involved in the complaint to try to achieve a mutually acceptable resolution of the complaint. The faculty member(s) should meet with the student within ten (10) session days of the student's request for a meeting. If the faculty member(s) does not meet with the student within ten (10) session days of the request for a meeting, the student may proceed to Step 2. If the time limit is not met at any step, the student may proceed to the next step.

Step 2 If the issue is not resolved at Step 1 and the student wishes to pursue the issue further, the student shall arrange a meeting with the chair of the appropriate department or the program coordinator to try to resolve the issue. If the chair of the department or the program coordinator is involved in the complaint or has another conflict of interest, the student shall go directly to Step 3. The chair of the department or the program coordinator should meet with the student within ten (10) session days of the student's request for a meeting. The chair or the program coordinator will attempt to resolve the issue by meeting with the student(s), and if appropriate, the faculty member(s). If appropriate, the chair or the program coordinator may have a joint meeting with the student(s) and the faculty member(s) involved in the complaint.

Step 3 If the issue is not resolved at Step 2 and the student wishes to pursue it further, the student shall meet with the dean of the area to try to resolve the issue. Prior to meeting with the dean of the area, the student shall submit the complaint in writing. The written complaint shall include the date(s) of the alleged incident(s), the name(s) of the faculty member(s) involved, any person(s) who may have knowledge of the incident(s) or situation, and a summary of what occurred from the student's perspective. The student shall also state what he/she desires as an outcome (resolution). The dean of the area shall meet with the student within ten (10) session days of receiving the student's written complaint. If appropriate, the dean of the area will conduct an investigation of the complaint. Prior to meeting with the faculty member(s) involved in the complaint, a copy of the student's written complaint will be forwarded to the faculty member(s). If the dean does not meet with the student within ten (10) session days of receiving the student's written complaint, the student may go directly to Step 4.

Within ten (10) session days after meeting with the student, the dean will forward a written notice of his/her decision/action to the student, the chair of the department or the program coordinator, and the faculty member(s) involved in the complaint.

Step 4

If the issue is not resolved at Step 3 and the student desires to pursue it further, the student shall submit a written appeal to the appropriate vice president. All written material involving the complaint shall be forwarded by the dean of the area to the appropriate vice president immediately after receiving notice that the student has appealed the dean's decision. A copy of the written appeal shall be forwarded to the faculty member. The appropriate vice president shall meet with the student within ten (10) session days after receiving written notification of the appeal. If appropriate, the vice president will conduct an investigation of the complaint. If the appropriate vice president does not meet with the student within ten (10) session days, the student may go to Step 5.

Within ten (10) session days after meeting with the student, the appropriate vice president will forward a written notice of his/her decision/action to the student, the dean, the chair of the department or the program coordinator, and the faculty member(s) involved in the complaint.

Step 5

If the issue is not resolved at Step 4 and the student wishes to pursue it further, the student shall submit a written appeal to the superintendent/president of the college to try to resolve the issue. A copy of the written appeal shall be forwarded to the faculty member. Within ten (10) session days after receiving the written appeal, the superintendent/president may meet with the student to discuss the issue, or render a decision based upon a review of the written complaint. If appropriate, the superintendent/president will conduct an investigation of the complaint. If the superintendent/president renders a decision based upon a written record of the incident, he/she will forward written notice of the decision/action to the student, the dean, the chair of the department or the program coordinator, and the faculty member(s) involved in the complaint within ten (10) session days of receiving the student's appeal.

If the superintendent/president meets with the student, he/she will forward a written notice of his/her decision/action to the student, the dean, the chair of the department or the program coordinator, and the faculty member(s) involved in the complaint within ten (10) session days of meeting with the student. The number of calendar days designated for a meeting may be extended if mutually agreed upon by the student and the superintendent/president.

Step 6

If the issue is not resolved at Step 5 and the student wishes to pursue it further, the student shall submit a written appeal to the board of trustees. The written appeal shall contain all written material submitted and received by the student involved in the complaint. Within two calendar months after receiving the appeal, the board of trustees shall review the appeal and issue a decision/action, in writing, to the student, the dean, the chair of the department or the program coordinator, and the faculty member(s) involved in the complaint. In reaching a decision, the board of trustees may render a decision based upon the written record or grant a hearing de nova (full hearing). The decision of the board is final.

If an academic complaint against a faculty member(s) is found to be valid, and it is determined that the violation is severe enough for disciplinary action, the faculty member(s) will be disciplined through the regular disciplinary process.

Adopted: 10/20/81

Revised: 3/16/93

Revised: 11/22/94

Revised: 5/19/98

GUIDELINES FOR STUDENT CONDUCT

These Standards of Student Conduct for violation of rules were established by the Board of Trustees for the Allan Hancock Joint Community College District on January 16, 1979.

(Revised 3/2006)

A student enrolling in Allan Hancock College may rightfully expect that the faculty and administrators will maintain an environment in which there is freedom to learn. Therefore, appropriate conditions and opportunities must be provided for all students to pursue their education within a safe and secure environment. As members of the college community, students should be encouraged to develop the capacity for critical judgment; to engage in sustained and independent search for truth; and to exercise their right to free inquiry and free speech in a responsible, non-violent manner.

Students shall respect and obey civil and criminal law, and shall be subject to legal penalties for violation of laws of the city, county, state, and nation in the same manner and to the same extent as any other person.

Student conduct in Allan Hancock College must also conform to district and college rules and regulations. The same standards of student conduct apply whether a student is physically present in a campus facility, is engaged in a distance learning course, or is using electronic (e.g. web-based) services of the district. Any behavior that interferes with the instructional, administrative, or service functions of the district will be considered to be disruptive and will be subject to disciplinary action. Refer to the "Allan Hancock Community College District Guidelines for Student Conduct, Disciplinary Action and Procedural Fairness," located in the Office of the Vice President for Student Services, for the procedural and substantive due process utilized in the adjudication of student disciplinary cases. Students found in violation of the Standards of Student Conduct, including but not limited to the following, will be subject to disciplinary action.

A. Conduct Related to Individuals and College Functions

1. Disruptive Conduct:

An individual shall not engage in disorderly, lewd, obscene, indecent, or offensive conduct or any conduct that is reasonably likely to cause a breach of peace, disrupt, or that does disrupt, any college function, process or activity including teaching, research, and administration of public service functions on campus, at college-sponsored events off campus, or through the use of college electronic resources not part of assigned college curriculum.

2. Alcohol, Drugs, and Drug Paraphernalia:

An individual shall not possess, sell, offer to sell, purchase, offer to purchase, use or transfer illegal drugs, drug paraphernalia or alcohol, or be under the influence of alcohol, drugs or medication (except as prescribed by a physician and used in accordance with the prescription), or furnish alcohol to a minor. {The term "drugs" includes any narcotic, dangerous drug, steroid, vapor releasing toxic substance, marijuana, or controlled substance (imitation or otherwise) as defined by law. The term "medication" means any substance that is available legally by prescription only.}

3. Threats, Assaults, Battery, Abuse, and Fighting:

An individual shall not verbally or physically threaten bodily harm or engage in any misconduct that results in injury or death to a student or to college personnel or otherwise abuse, assault, or fight with any other person on college property or at an off-campus college-sponsored event.

4. Defamation: An individual shall not use defamatory words or phrases or distribute defamatory materials. Defamatory words or materials are those that:

- (1) are false and expose any person or the college to hatred, contempt, ridicule, disgust or an equivalent reaction;
- or (2) are false and have a tendency to impugn a person's occupation, business, or office.

5. Obscenity and Vulgarity:

An individual shall not engage in the expression of obscene, libelous, slanderous, or vulgar language or gestures, distribute or exhibit such materials by any means including digital.

Medical Assisting Program Handbook

Appendix "C"

Student Consent Statements

Name (print) _____ Date _____

Name (signature) _____ Initials _____

Student Acceptance Statement

(To be retained in Health Occupations Student's File)

Having read all of the Allan Hancock College Health Occupations policies with care, I both understand and accept the responsibilities of my role as a Medical Assisting student at Allan Hancock and agree to abide and be bound by these policies as a condition of enrollment in and graduation from the program. I acknowledge that I have an opportunity to review this Medical Assisting Student Handbook and have had my questions answered.

Student Signature

Date

Consent to Participate

I understand that I will be offered the opportunity to VOLUNTARILY participate in skills practices on myself and fellow students, which may include transfer and positioning, injections and vital sign assessment and intravenous access for blood withdrawal. Should I choose to participate, I agree to hold harmless my fellow students, supervising instructors and Allan Hancock College from injury, loss, or claim of any kind.

Student Signature

Date

Electronic Mail

I acknowledge that electronic mail is not a confidential method of communication. I hereby authorize Allan Hancock College (AHC) faculty to communicate confidential matters (including grades and information regarding job opportunities) to me via electronic mail. I will keep faculty informed of my current e-mail address. I release AHC faculty from liability due to electronic mail issues.

Student Signature

Date

Student Performance

I understand that the faculty may discuss my academic and clinical performance in medical assisting program faculty meetings when needed to enable them to give me appropriate feedback and instruction.

Student Signature

Date

Consent to Videotape/Photograph

Photographs are taken of each student for identification purposes and videotaping is used to enable students to self-critique performance of clinical skills. My signature below confirms my consent to be videotaped and photographed for the purposes stated.

Student Signature

Date

Reference Permission

I understand that references may be requested of faculty for scholarship, academic advancement and employment purposes. I authorize faculty to provide this information.

Student Signature

Date

Name (print) _____ Date _____

**ALLAN HANCOCK COLLEGE
Medical Assisting Program**

Acknowledgement and Assumption of Potential Risk

I, _____, wish to participate in the Allan Hancock Joint Community College District sponsored activity/activities of the Medical Assisting Program, including skills lab participation.

I understand and acknowledge that these activities, by their very nature, pose the potential risk of serious injury/illness to individuals who participate. I understand and acknowledge that some of the injuries/illnesses, which may result from participating in these activities include, but are not limited to the following:

- | | | | |
|--------------------|---------------------|--------------------------|-----------------------|
| 1. sprains/strains | 2. fractured bones | 3. unconsciousness | 4. head/back injuries |
| 5. paralysis | 6. loss of eyesight | 7. communicable diseases | 8. death |

I understand and acknowledge that participation in this/these activity/activities is completely voluntary and as such is not required by the District.

I understand and acknowledge that in order to participate in this/these activity/activities, I agree to assume liability and responsibility for any and all potential risks that may be associated with participation in such activity/activities.

I understand, acknowledge, and agree that the District, its employees, officers, agent, or volunteers, shall not be liable for any injury/illness suffered by me, which is incidental to and/or associated with preparing for and/or participating in this activity/activities.

Unless otherwise advised, I understand that I am responsible for my own transportation to and from the activity/activities the college assumes no liability for loss or injury resulting from my transportation, and any person driving a personal vehicle is not an agent of the District. Although the college may assist in coordinating the transportation, any assistance and/or recommendations provided may not be mandatory.

If the college is providing transportation but I do not use the transportation, I am responsible to make my own transportation arrangements and the college assumes no responsibility or liability of any kind.

I have no known medical condition that may pose a health and/or safety risk to others or me by participating in the activity/activities.

I acknowledge that I have carefully read this **Acknowledgement and Assumption of Potential Risk** form and that I understand and agree to its terms.

Student Signature

Date

A signed **Acknowledgement and Assumption of Potential Risk** must be on file with the District before a student will be allowed to participate in the above activity/activities.

Medical Assisting Program Handbook **Appendix "D"**

Medical Assistant Scope of Practice Laws and Regulations

California Business and Professions Code Medical Practice Act

Laws Relating to Medical Assistants

Section 2069

A.

(1) Notwithstanding any other provision of law, a medical assistant may administer medication only by intradermal, subcutaneous, or intramuscular injections and perform skin tests and additional technical supportive service upon the specific authorization and supervision of a licensed physician and surgeon or a licensed podiatrist.

A medical assistant may also perform all these tasks and services in a clinic licensed pursuant to subdivision (a) of Section 1204 of the Health and Safety Code upon the specific authorization of a physician assistant, a nurse practitioner, or a nurse-midwife.

(2) The supervising physician and surgeon at a clinic described in paragraph (1) may, at his or her discretion, in consultation with the nurse practitioner, nurse-midwife, or physician assistant provide written instructions to be followed by a medical assistant in the performance of tasks or supportive services. These written instructions may provide that the supervisory function for the medical assistant for these tasks or supportive services may be delegated to the nurse practitioner, nurse-midwife, or physician assistant within the standardized procedures or protocol, and that tasks may be performed when the supervising physician and surgeon is not onsite, so long as the following apply:

(a) The nurse practitioner or nurse-midwife is functioning pursuant to standardized procedures, as defined by Section 2725, or protocol. The standardized procedures or protocol shall be developed and approved by the supervising physician and surgeon, the nurse practitioner or nurse-midwife, and the facility administrator or his or her designee. (b) The physician assistant is functioning pursuant to regulated services defined in Section 3502 and is approved to do so by the supervising physician or surgeon.

B.

As used in this section and Sections 2070 and 2071, the following definitions shall apply:

(1) "Medical assistant" means a person who may be unlicensed, who performs basic administrative, clerical, and technical supportive services in compliance with this section and Section 2070 for a licensed physician and surgeon or a licensed podiatrist, or group thereof, for a medical or podiatry corporation, or for a health care services plan, who is at least 18 years of age, and who has had at least the minimum amount of hours of appropriate training pursuant to standards established by the

Division of Licensing. The medical assistant shall be issued a certificate by the training institution or instructor indicating satisfactory completion of the required training. A copy of the certificate shall be retained as a record by each employer of the medical assistant.

(2) "Specific Authorization" means a specific written order prepared by the supervising physician and surgeon or the supervising podiatrist, or the physician assistant, the nurse practitioner, or the nurse-midwife as provided in subdivision (a), authorizing the procedures to be performed on a patient, which shall be placed in the patient's medical record, or a standing order prepared by the supervising physician and surgeon or the supervising podiatrist, or the physician assistant, the nurse practitioner, or the nurse-midwife as provided in subdivision (a), authorizing the procedures to be performed, the duration of which shall be consistent with accepted medical practice. A notation of the standing order shall be placed in the patient's medical record.

(3) "Supervision" means the supervision of procedures authorized by this section by the following practitioners, within the scope of their respective practices, who shall be physically present in the treatment facility during the performance of those procedures:

(A) A licensed physician and surgeon.

(B) A licensed podiatrist.

(C) A physician assistant, nurse practitioner, or nurse-midwife as provided in subdivision

(4) "Technical supportive services" means simple routine medical tasks and procedures which may be safely performed by a medical assistant who has limited training and who functions under the supervision of a licensed physician and surgeon or a licensed podiatrist or a physician assistant, a nurse practitioner, or a nurse-midwife as provided in subdivision

(a) Nothing in this section shall be construed as authorizing the licensure of medical assistants. Nothing in this section shall be construed as authorizing the administration of local anesthetic agents by a medical assistant. Nothing in this section shall be construed as authorizing the division to adopt any regulations which violate the prohibitions on diagnosis or treatment in Section 2052.

(b) Notwithstanding any other provision of law a medical assistant may not be employed for inpatient care in a licensed general acute care hospital as defined in subdivision (a) of Section 1250 of the Health and Safety Code.

(c) Nothing in this section shall be construed as authorizing a medical assistant to perform any clinical laboratory test or examination for which he or she is not authorized by Chapter 3 (commencing with Section 1206.5). Nothing in this section shall be construed as authorizing a nurse practitioner, nurse-midwife, or physician assistant to be a laboratory director of a clinical laboratory, as those terms are defined in paragraph (7) of subdivision (a) of Section 1206 and subdivision (a) of Section 1209.

CERTIFICATE REQUIRED FOR PERFORMING VENIPUNCTURE OR SKIN PUNCTURE TO WITHDRAW BLOOD

Section 2070. Notwithstanding any other provision of law, a medical assistant may perform venipuncture or skin puncture for the purposes of withdrawing blood upon specific authorization and

under the supervision of a licensed physician and surgeon or a licensed podiatrist, if prior thereto the medical assistant had at least the minimum amount of hours of appropriate training pursuant to standards established by the Division of Licensing. The medical assistant shall be issued a certificate by the training institution or instructor indicating satisfactory completion of the training required. A copy of the certificate shall be retained as a record by each employer of the medical assistant.

REGULATIONS ESTABLISHING STANDARDS FOR SERVICES RENDERED BY MEDICAL ASSISTANT-ADOPTION-ADMINISTRATION

Section 2071. The Division of Licensing adopt and administer regulations which establish standards for technical supportive services that may be performed by a medical assistant. Nothing in this section shall prohibit the board or division from amending or repealing regulations covering medical assistants. The board or division shall, prior to the adoption of any regulations request recommendations regarding these standards from appropriate public agencies, including, but not limited to, the Board of Optometry, the Board of Registered Nursing, the Board of Vocational Nurse and Psychiatric Technicians, the Laboratory Field Services division of the State Department of Health Services, those divisions of the State Department of Education that pertain to private postsecondary education and career and vocational preparation, the Chancellor of the California Community Colleges, the California Board of Podiatric Medicine, the Physician Assistant Examining Committee, and the Physical Therapy Examining Committee. The Division of Licensing shall also request recommendations regarding these standards from associations of medical assistants, physicians, nurses, doctors of podiatric medicine, physician's assistants, physical therapists, laboratory technologists, optometrists, and others as the board or division finds appropriate, including, but not limited to, the California Optometric Association, the California Nurses Association, the California Medical Association, the California Society of Medical Assistants, the California Medical Assistants Association, and the California Chapter of the American Physical Therapy Association. Nothing in this section shall be construed to supersede or modify that portion of the Administrative Procedure Act which relates to the procedure for the adoption of regulations and which is set forth in Article 5 (commencing with Section 11346) of Chapter 3.5 of Part 1 of Division 3 of Title 2 of the Government Code.

1366. Additional Technical Supportive Services

(a) A medical assistant may perform additional technical supportive services such as those specified herein provided that all of the following conditions are met.

- (1) Each technical supportive service is not prohibited by another provision of law, including Section 2069(c) of the code, or these regulations, and is a usual and customary part of the medical or podiatric practice where the medical assistant is employed.
- (2) The supervising physician or podiatrist authorizes the medical assistant to perform the service and shall be responsible for the patient's treatment and care.
- (3) The medical assistant has completed the training specified in Sections 1366.2, 1366.3, and 1366.4 and has demonstrated competence in the performance of the service.
- (4) A record shall be made in the patient chart or other record, including a computerized record, if any, of each technical supportive service performed by the medical assistant, indicating the name, initials or

other identifier of the medical assistant, the date and time, a description of the service performed, and the name of the physician or podiatrist who gave the medical assistant patient-specific authorization to perform the task or who authorized such performance under a patient-specific standing order.

(5) The supervising physician or podiatrist may, at his or her discretion, provide written instructions to be followed by a medical assistant in the performance of tasks or supportive services. Such written instructions may provide that a physician assistant or registered nurse may assign a task authorized by a physician or podiatrist.

(b) A medical assistant in accordance with the provisions of subsection (a) may perform additional technical supportive services such as the following:

(1) Administer medication orally, sublingually, topically, vaginally or rectally, or by providing a single dose to a patient for immediate self-administration. Administer medication by inhalation if the medications are patient-specific and have been or will be routinely and repetitively administered to that patient. In every instance, prior to administration of medication by the medical assistant, a licensed physician or podiatrist, or another person authorized by law to do so shall verify the correct medication and dosage. Nothing in this section shall be construed as authorizing the administration of any anesthetic agent by a medical assistant.

(2) Perform electrocardiogram, electroencephalogram, or plethysmography tests, except full body plethysmography. Nothing in this section shall permit a medical assistant to perform tests involving the penetration of human tissues except for skin tests as provided in Section 2069 of the code, or to interpret test findings or results.

(3) Apply and remove bandages and dressings; apply orthopedic appliances such as knee immobilizers, envelope slings, orthotics, and similar devices; remove casts, splints and other external devices; obtain impressions for orthotics, padding and custom molded shoes; select and adjust crutches to patient; and instruct patient in proper use of crutches.

(4) Remove sutures or staples from superficial incisions or lacerations.

(5) Perform ear lavage to remove impacted cerumen.

(6) Collect by non-invasive techniques, and preserve specimens for testing, including urine, sputum, semen and stool.

(7) Assist patients in ambulation and transfers.

(8) Prepare patients for and assist the physician, podiatrist, physician assistant or registered nurse in examinations or procedures including positioning, draping, shaving and disinfecting treatment sites; prepare a patient for gait analysis testing.

(9) As authorized by a physician or podiatrist, provide patient information and instructions.

(10) Collect and record patient data including height, weight, temperature, pulse, respiration rate and blood pressure, and basic information about the presenting and previous conditions.

(11) Perform simple laboratory and screening tests customarily performed in a medical office.

(c) Nothing in this section prohibits the administration of first aid or cardiopulmonary resuscitation in an emergency.

(d) Nothing in these regulations shall be construed to authorize a medical assistant to practice physical therapy.

(e) Nothing in these regulations shall be construed to modify the requirement that a licensed physician or podiatrist be physically present in the treatment facility as required in Section 2069 of the code.

(f) A medical assistant may also fit prescription lenses or use any optical device in connection with ocular exercises, visual training, vision training, or orthoptics pursuant to Sections 2544 and 3042 of the code, but nothing in these regulations shall require a technician performing only those functions permitted by Sections 2544 and 3042 of the code to be qualified as a medical assistant.

1366.1 Training to Perform Venipuncture, Injections and Inhalation of Medication.

In order to administer medications by intramuscular, subcutaneous and intradermal injection, to perform skin tests, or to perform venipuncture or skin puncture for the purposes of withdrawing blood, a medical assistant shall have completed the minimum training prescribed herein. Training shall be for the duration required by the medical assistant to demonstrate to the supervising physician, podiatrist, or instructor, as referenced in Section 1366.3(a)(2), proficiency in the procedures to be performed as authorized by Sections 2069 or 2070 of the code, where applicable, but shall include no less than:

(a) Ten (10) clock hours of training in administering injections and performing skin tests, and/or

(b) Ten (10) clock hours of training in venipuncture and skin puncture for the purpose of withdrawing blood, and

(c) Satisfactory performance by the trainee of at least ten (10) each of intramuscular, subcutaneous and intradermal injections and ten (10) skin tests, and/or at least ten (10) venipunctures and ten (10) skin punctures.

(d) For those only administering medication by inhalation, ten (10) clock hours of training in administering medication by inhalation.

(e) Training in (a) through (d) above, shall include instruction and demonstration in:

(1) pertinent anatomy and physiology appropriate to the procedures;

(2) choice of equipment;

- (3) proper technique including sterile technique;
- (4) hazards and complications;
- (5) patient care following treatment or test;
- (6) emergency procedures; and
- (7) California law and regulations for medical assistants.

1366.2 Training to Perform Additional Technical Supportive Services.

Prior to performing any of the additional technical supportive services provided in Section 1366, a medical assistant shall receive such training as, in the judgment of the supervising physician, podiatrist or instructor, as referenced in Section 1366.3(a)(2), is necessary to assure the medical assistant's competence in performing that service at the appropriate standard of care. Such training shall be administered pursuant to either subsection (a)(1) or (a)(2) of Section 1366.3.

1366.3 Administration of Training.

(a) Training required in Sections 1366, 1366.1 or 1366.2 may be administered in either of these setting:

(1) Under a licensed physician or podiatrist, who shall ascertain the proficiency of the medical assistant; or under a registered nurse, licensed vocational nurse, physician assistant or a qualified medical assistant acting under the direction of a licensed physician or podiatrist who shall be responsible for determining the content of the training and the proficiency of the medical assistant except that training to administer medication by inhalation shall be provided by a licensed physician or respiratory care practitioner; or

(2) In a secondary, postsecondary, or adult education program in a public school authorized by the Department of Education, in a community college program provided for in Part 48 of Division 7 of the Education Code, or a postsecondary institution accredited by an accreditation agency recognized by the United States Department of Education or approved by the Bureau for Private Postsecondary and Vocational Education under Sections 94130 or 94311 of the Education Code. A licensed physician or podiatrist shall serve as advisor to the medical assistant training program. The instructor in a public school setting shall possess a valid teaching credential issued by the Commission on Teacher Credentialing. The instructor in a private postsecondary institution shall meet the requirements of Sections 94310 and 94311 of the Education Code and any regulations adopted pursuant to those sections.

(b) The supervising physician or podiatrist, pursuant to subsection (a)(2) shall certify in writing the place and date such training was administered, the content and duration of the training, and that the medical assistant was observed by the certifying physician, podiatrist, or instructor to demonstrate competence in the performance of each such task or service, and shall sign the certification. More

than one task or service may be certified in a single document; separate certifications shall be made for subsequent training in additional tasks or services.

(c) For purposes of this section only, a "qualified medical assistant" is a medical assistant who:

(1) is certified by a medical assistant certifying organization approved by the division;

(2) holds a credential to teach in a medical assistant training program at a community college; or

(3) is authorized to teach medical assistants in a private postsecondary institution accredited by the accreditation agency recognized by the United States Department of Education or approved by the Bureau for Private Postsecondary and Vocational Education.

1366.4 Training in Infection Control.

Each medical assistant shall receive training in the Center for Disease Control "Guidelines for Infection Control in Hospital Personnel." (July 1983) and shall demonstrate to the satisfaction of the supervising physician, podiatrist or instructor that he or she understands the purposes and techniques of infection control.

Date BOT Approved:

Date Reviewed: Fall 2011

PCA Established:

Date DL Conversion Approved:

ALLAN HANCOCK COLLEGE COURSE OUTLINE

DISCIPLINE PLACEMENT: Health Care Ancillaries**DEPARTMENT:** Health Sciences**PREFIX & NUMBER:** MA 305**CATALOG COURSE TITLE:** Body Systems And Disease**BANNER COURSE TITLE:** Body Systems And Disease**UNITS:** 5

	Hours per week (based on 16 weeks)	Total Hours per Term (range based on 16-18 weeks)	Units
Lecture:	5.00	80.00-90.00	5.00
Lab:	-	-	-
Total Contact Hours:	5.00	80.00-90.00	5.00 – 0.00

NUMBER OF TIMES COURSE CAN BE REPEATED:**GRADING OPTION:**

GR - Letter Grade Only

PREREQUISITE(S): None**COREQUISITE(S):** None**ADVISORY(IES):** None**LIMITATION(S) ON ENROLLMENT:**

Admittance to MA program

ENTRANCE SKILLS:**CATALOG DESCRIPTION:**

A study of medical terminology, anatomy, physiology, pathophysiology, diagnostic testing and treatment modalities.

COURSE CONTENT:

1. Introduction to medical terminology: basic word structure, terms pertaining to the body as a whole, suffixes, and prefixes
2. Digestive, urinary, and male and female reproductive systems
3. Nervous system, cardiovascular, respiratory, and endocrine systems

4. Blood, lymphatic, and musculoskeletal systems
5. Skin and sense organs
6. Oncology, radiology, and nuclear medicine
7. Pharmacology
8. Psychiatry

COURSE OBJECTIVES:**At the end of the course, the student will be able to:**

1. recite the technical terms, root words, prefixes, and suffixes used to identify body parts and directional terminology in the language of health occupations with proper diction and phraseology.
2. identify anatomical structures found in each major body system.
3. identify how the progression of structural levels (atoms, molecules, compounds, cells, tissues, organs, and systems) contributes to the body's order and stability.
4. distinguish between the physiological processes that take place in each body system.
5. describe the structure, function, and reproduction of cells and the essentials of body chemistry.
6. discuss and differentiate between major diseases processes that occur in each body system and how they affect homeostasis.
7. compare and explain various diagnostic testing procedures used in each body system.
8. identify treatment modalities used for major disease processes in each body system.

METHODS OF INSTRUCTION:

Methods of Instruction
Discussion Lecture
Methods of Instruction Description: Class participation

OUTSIDE ASSIGNMENTS:

Other Assignments
1. Complete workbook assignments 2. Assigned reading 3. Verbal terminology practice with text CD
Sample assignment: Trace the path of blood through the heart. Begin as blood enters the right atrium from the vena cavae (and include the valves within the heart).

METHODS OF EVALUATION:

Methods of Evaluation
1. Quizzes 2. Comprehensive final examination 3. Written workbook exercises Sample Evaluation: Preoccupation with one's self and lack of responsiveness to others is a characteristic of: a. Dissociation b. Dysphoria c. Delusion d. Apathy e. Autism

REQUIRED TEXTS AND OTHER INSTRUCTIONAL MATERIALS:

Adopted Text:

- Chabner, D. (2011). *The Language of Medicine* (9th/e).

Other Materials:

- None

STUDENT LEARNING OUTCOMES:

1. MA305 SLO1 - Demonstrate an understanding of foundational allied health knowledge of anatomical and physiological function and how disease and injury affect the human body.

Date BOT Approved:

Date Reviewed: Fall 2011

PCA Established:

Date DL Conversion Approved:

ALLAN HANCOCK COLLEGE COURSE OUTLINE

DISCIPLINE PLACEMENT: Health Care Ancillaries**DEPARTMENT:** Health Sciences**PREFIX & NUMBER:** MA 350**CATALOG COURSE TITLE:** MA Fundamentals**BANNER COURSE TITLE:** MA Fundamentals**UNITS:** 2

	Hours per week (based on 16 weeks)	Total Hours per Term (range based on 16-18 weeks)	Units
Lecture:	2.00	32.00-36.00	2.00
Lab:	-	-	-
Total Contact Hours:	2.00	32.00-36.00	2.00 – 0.00

NUMBER OF TIMES COURSE CAN BE REPEATED:**GRADING OPTION:**

GR - Letter Grade Only

PREREQUISITE(S): None**COREQUISITE(S):** None**ADVISORY(IES):** None**LIMITATION(S) ON ENROLLMENT:**

Admittance to MA program

ENTRANCE SKILLS:**CATALOG DESCRIPTION:**

The course introduces the student to the medical assisting profession including aspects of the work environment, laws that govern the profession, code of ethics, multicultural issues, communication techniques, and the profession characteristics that enable the medical assistant to be a successful member of a health care team. Study skills, critical thinking, and basic pharmacological math are also included.

COURSE CONTENT:

1. History and Current Issues

2. Introduction into Allied Health Care
3. Role of the Medical Assistant
4. Law and Ethics
5. Customer Service and Multicultural Issues
6. Study Skills and Critical Thinking
7. Basic Pharmacological Math
8. OSHA, Hazardous and Biohazard Waste, and Standard Precautions
9. Body Mechanics and Ergonomics
10. Medical Office Equipment
11. Introduction to Medical Insurance

COURSE OBJECTIVES:

At the end of the course, the student will be able to:

1. Explain the legal and ethical boundaries of Medical Assisting practice.
2. Communicate professionally in all aspects of communication including listening, in person, telephone and written communications.
3. Correctly complete calculations related to giving medications.
4. Use office equipment including computers, telephones, and fax machines.

METHODS OF INSTRUCTION:

Methods of Instruction
Discussion
Lecture

OUTSIDE ASSIGNMENTS:

Other Assignments
1. Textbook reading 2. Workbook assignments
Sample Assignment: Identify a possible ethical conflict that a medical assistant might encounter. Describe why it is a conflict. Identify any legal issues that may also be present. Two pages, word processed, with sources identified.

METHODS OF EVALUATION:

Methods of Evaluation
1. Quizzes 2. Final examination
Sample Evaluation: Identify the elements present in professional communication. Give examples of each.

REQUIRED TEXTS AND OTHER INSTRUCTIONAL MATERIALS:

Adopted Text:

- Beaman, N., and Fleming-McPhillips, Routh, K.S, Goshman, R.S, and Reagan, S. (2011). *Pearson's Comprehensive Medical Assisting* (2nd/e).

Other Materials:

- Accompanying workbook

STUDENT LEARNING OUTCOMES:

1. MA350 SLO1 - Demonstrate individual responsibility, personal integrity and respect for diverse peoples and cultures including those with different cultural and linguistic backgrounds and different abilities.
2. MA350 SLO2 - Identify federal and state legislative standards and policies regulating medical assistant scope of

practice.



Date BOT Approved:

Date Reviewed: Fall 2011

PCA Established:

Date DL Conversion Approved:

ALLAN HANCOCK COLLEGE COURSE OUTLINE

DISCIPLINE PLACEMENT: Health Care Ancillaries**DEPARTMENT:** Health Sciences**PREFIX & NUMBER:** MA 351**CATALOG COURSE TITLE:** MA Clinical Procedures 1**BANNER COURSE TITLE:** MA Clinical Procedures 1**UNITS:** 3

	Hours per week (based on 16 weeks)	Total Hours per Term (range based on 16-18 weeks)	Units
Lecture:	2.00	32.00-36.00	2.00
Lab:	3.00	48.00-54.00	1.00
Total Contact Hours:	5.00	80.00-90.00	3.00 – 0.00

NUMBER OF TIMES COURSE CAN BE REPEATED:**GRADING OPTION:**

GR - Letter Grade Only

PREREQUISITE(S): None**COREQUISITE(S):** None**ADVISORY(IES):** None**LIMITATION(S) ON ENROLLMENT:**

Admittance to MA program

ENTRANCE SKILLS:**CATALOG DESCRIPTION:**

The course is designed to prepare the student to assist the doctor in selected phases of clinical procedures. It emphasizes asepsis, physical examination, screening practices, including care and use of equipment.

COURSE CONTENT:

- I. Medical Asepsis/ Infection Control
- II. Patient Interview, History, and Documentation

- III. Patient screening/ Intake
- IV. Vital Signs, Height, and Weight
- V. Positioning, Draping, and Assisting with Physical Exam
- VI. Scratch Test, Wound Culture, GI Procedures and Testing
- VII. Vision and Hearing Testing; Eye and Ear Irrigations
- VIII. Reproductive System Exams and Testing
- IX. Pediatric Measurements and Testing
- X. Assisting with Geriatrics
- XI. Suture and Staple Removal, Sterile Dressing Change, and Assisting with Minor Surgery
- XII. Assisting with Medical Emergencies

COURSE OBJECTIVES:

At the end of the course, the student will be able to:

1. Perform medical exam room procedures competently.
2. Utilize therapeutic communication based on the developmental level of the patient and family to accomplish patient education.
3. Use standard precautions implementing appropriate safety and infection control standards.
4. Perform procedures utilizing sterile technique.

METHODS OF INSTRUCTION:

Methods of Instruction
Demonstration Lab Lecture
Methods of Instruction Description: Video Presentation, Coaching, Simulations

OUTSIDE ASSIGNMENTS:

Other Assignments
1. Textbook reading 2. Workbook assignments
Sample assignment: Your patient is a 43-year-old female. Her blood pressure is 157/92. What is the patient's pulse pressure? Is the pulse pressure normal? Explain your answer.

METHODS OF EVALUATION:

Methods of Evaluation
1. Final Examination 2. Procedure Competency Check-Offs
Sample Evaluation: Use effective listening skills to obtain chief complaint from patient.

REQUIRED TEXTS AND OTHER INSTRUCTIONAL MATERIALS:

Adopted Text:

- Beaman, N., Fleming-McPhillips, Routh, K.S., Gohsman, R.S., and Reagan, S. (2011). *Pearson's Comprehensive*

Medical Assisting (2nd/e).

Other Materials:

- Accompanying workbook

STUDENT LEARNING OUTCOMES:

1. MA351 SLO1 - Demonstrate confidence in medical office laboratory procedures.

Date BOT Approved:

Date Reviewed: Fall 2011

PCA Established:

Date DL Conversion Approved:

ALLAN HANCOCK COLLEGE COURSE OUTLINE

DISCIPLINE PLACEMENT: Health Care Ancillaries**DEPARTMENT:** Health Sciences**PREFIX & NUMBER:** MA 352**CATALOG COURSE TITLE:** MA Administrative Procedures**BANNER COURSE TITLE:** MA Administrative Procedures**UNITS:** 4

	Hours per week (based on 16 weeks)	Total Hours per Term (range based on 16-18 weeks)	Units
Lecture:	3.00	48.00-54.00	3.00
Lab:	3.00	48.00-54.00	1.00
Total Contact Hours:	6.00	96.00-108.00	4.00 – 0.00

NUMBER OF TIMES COURSE CAN BE REPEATED:**GRADING OPTION:**

GR - Letter Grade Only

PREREQUISITE(S): None**COREQUISITE(S):** None**ADVISORY(IES):** None**LIMITATION(S) ON ENROLLMENT:**

Admittance to MA program

ENTRANCE SKILLS:**CATALOG DESCRIPTION:**

The course explores administrative office tasks including secretarial and accounting procedures, written and oral communications, appointment scheduling, and records management. Topics include insurance, banking, professional fees, billing, and collection of fees. Administrative legal and ethical issues are addressed. Computer applications are employed for most functions in the medical field.

COURSE CONTENT:

1. Telephone Techniques

2. Patient Reception
3. Appointment Scheduling
4. Office Facilities, Equipment, and Supplies
5. Written Communication
6. Computer Applications in the Medical Office
7. Managing Medical Records
8. Electronic Medical Records
9. Fees, Billing, Collections and Credit
10. Financial Management
11. Medical Insurance
12. Medical Insurance Claims
13. Medical Coding
14. Medical Office Management

COURSE OBJECTIVES:**At the end of the course, the student will be able to:**

1. Skillfully manage multiple types of telecommunication methods and equipment.
2. Conduct customer service procedures and explain the importance of first impressions.
3. Explain the legal implications of medical record control.
4. Explain fee and collections policies and procedures.
5. Use a variety of scheduling systems and equipment.
6. Correctly complete office forms including billing forms, insurance claims, and required reporting.
7. discuss personnel management duties as they relate to the medical office.

METHODS OF INSTRUCTION:

Methods of Instruction
Demonstration
Discussion
Lab
Lecture

OUTSIDE ASSIGNMENTS:

Other Assignments
1. Textbook readings
2. Workbook assignments
Sample Assignment: Using the Internet as a research source, look up three collection agencies that offer their services in your area. List the pros and cons for each of these three companies.

METHODS OF EVALUATION:

Methods of Evaluation
1. Quizzes
2. Final exam
Sample Evaluation: Accurately complete a registration form for a new patient

REQUIRED TEXTS AND OTHER INSTRUCTIONAL MATERIALS:

Adopted Text:

- Beaman, N., Fleming-McPhillips, Routh, K.S., Gohsman, R.S., and Reagan, S. (2011). *Pearson's Comprehensive Medical Assisting* (2nd/e).

Other Materials:

- Accompanying workbook

STUDENT LEARNING OUTCOMES:

1. MA352 SLO1 - Utilize current technology to complete common office forms, including insurance claims, billing forms, and required reporting.

Date BOT Approved:

Date Reviewed: Fall 2011

PCA Established:

Date DL Conversion Approved:

ALLAN HANCOCK COLLEGE COURSE OUTLINE

DISCIPLINE PLACEMENT: Health Care Ancillaries**DEPARTMENT:** Health Sciences**PREFIX & NUMBER:** MA 353**CATALOG COURSE TITLE:** MA Clinical Procedures 2**BANNER COURSE TITLE:** MA Clinical Procedures 2**UNITS:** 5

	Hours per week (based on 16 weeks)	Total Hours per Term (range based on 16-18 weeks)	Units
Lecture:	3.00	48.00-54.00	3.00
Lab:	6.00	96.00-108.00	2.00
Total Contact Hours:	9.00	144.00-162.00	5.00 – 0.00

NUMBER OF TIMES COURSE CAN BE REPEATED:**GRADING OPTION:**

GR - Letter Grade Only

PREREQUISITE(S): None**COREQUISITE(S):** None**ADVISORY(IES):** None**LIMITATION(S) ON ENROLLMENT:**

Admittance to MA program

ENTRANCE SKILLS:**CATALOG DESCRIPTION:**

The course is designed to provide the student with the opportunity to develop skills required to perform medical office laboratory procedures and to provide patient education.

COURSE CONTENT:

1. Use of the Microscope
2. Obtaining Specimens for Culture

3. Collecting, Processing, and Testing of Urine Specimens
4. Collecting, Processing, and Testing of Blood
5. Assisting with Radiology
6. Electrocardiography
7. Pulmonary Function Tests
8. Heat and Cold Therapies
9. Instructing Patients in Use of Assistive Devices
10. Patient Education
11. Nutrition
12. Mental Health

COURSE OBJECTIVES:

At the end of the course, the student will be able to:

1. Correctly use microscope and prepare slides for microscopic examination.
2. Describe general guidelines for collection of bodily fluids and substances for microbiological cultures and other testing
3. Perform capillary puncture and venipuncture with correct technique
4. Describe the MA's role in radiology.
5. Perform a 12-lead ECG using correct technique
6. Perform pulmonary function tests for vital capacity, peak flow, and oxygen saturation with correct technique
7. Apply heat and cold therapies using correct technique
8. Develop patient teaching plans and reinforce patient teaching regarding nutrition
9. Communicate effectively with the angry, frightened, or depressed patient

METHODS OF INSTRUCTION:

Methods of Instruction
Demonstration
Discussion
Lab
Lecture
Methods of Instruction Description: Coaching, Case scenarios

OUTSIDE ASSIGNMENTS:

Other Assignments
1. Textbook reading 2. Workbook exercises Sample assignment: As a medical assistant working in the medical office, you will encounter patients who are frightened, depressed, and angry. On this particular day, Timothy Smither seems to be quite angry with the procedure that he is to undergo, especially because the doctor is late in keeping the appointment. How should you act when experiencing anger?

METHODS OF EVALUATION:

Methods of Evaluation
1. Quizzes
2. Final Exam
Sample Evaluation: Perform venipuncture without error using the syringe and needle method.

REQUIRED TEXTS AND OTHER INSTRUCTIONAL MATERIALS:

Adopted Text:

- Beaman, N., Fleming-McPhillips, Routh, K.S., Gohsman, R.S., and Reagan, S. (2011). *Pearson's Comprehensive Medical Assisting* (2nd/e).

Other Materials:

- Accompanying workbook

STUDENT LEARNING OUTCOMES:

1. MA353 SLO1 - Demonstrate critical thinking by logically solving problems and explaining the rationale.
2. MA353 SLO2 - Demonstrate safe performance in the medical assistant clinical role.

Date BOT Approved:

Date Reviewed: Fall 2011

PCA Established:

Date DL Conversion Approved:

ALLAN HANCOCK COLLEGE COURSE OUTLINE

DISCIPLINE PLACEMENT: Health Care Ancillaries**DEPARTMENT:** Health Sciences**PREFIX & NUMBER:** MA 355**CATALOG COURSE TITLE:** MA Pharmacology**BANNER COURSE TITLE:** MA Pharmacology**UNITS:** 4

	Hours per week (based on 16 weeks)	Total Hours per Term (range based on 16-18 weeks)	Units
Lecture:	2.00	32.00-36.00	2.00
Lab:	6.00	96.00-108.00	2.00
Total Contact Hours:	8.00	128.00-144.00	4.00 – 0.00

NUMBER OF TIMES COURSE CAN BE REPEATED:**GRADING OPTION:**

GR - Letter Grade Only

PREREQUISITE(S): None**COREQUISITE(S):** None**ADVISORY(IES):** None**LIMITATION(S) ON ENROLLMENT:**

Admittance to MA program and/or
Successful completion of first semester MA courses

ENTRANCE SKILLS:**CATALOG DESCRIPTION:**

The course is designed to provide instruction in the scope of practice of the Medical Assistant in medication administration. Included are drug classifications, drug measurement systems, and calculation of dosages. Parenteral and non-parenteral drug administration techniques are practiced.

COURSE CONTENT:

1. Categories and Actions of Drugs

2. Safety Guidelines and Regulations
3. Medication Preparation, Units of Measure, and Equipment
4. Dosage Calculations
5. Oral, Sublingual, and Buccal Medications
6. Inhalation, Dermal, Vaginal, and Rectal Medications
7. Subcutaneous and Intradermal Injections
8. Intramuscular Injections and Z track

COURSE OBJECTIVES:**At the end of the course, the student will be able to:**

1. List sources for authoritative information on medications, their actions, interactions, side effects, dosage and expected outcomes.
2. Explain factors that influence dosage and drug action.
3. Identify the role of the medical assistant in calling a prescription to the pharmacy.
4. Identify controlled substances, regulations for use, and the role of the MA.
5. Explain correct technique in administering oral, buccal, sublingual, transdermal, and installation medications.
6. Administer medications via the intradermal, subcutaneous, or intra muscular routes using correct technique.
7. Discuss patient education regarding medications.

METHODS OF INSTRUCTION:**Methods of Instruction**

Demonstration

Lab

Lecture

Methods of Instruction Description:

Guided practice

OUTSIDE ASSIGNMENTS:**Other Assignments**

1. Textbook reading
2. Workbook exercises

Sample assignment: From the list given, choose three categories of drugs. Identify what possible interactions these medications may have with 1) other medications, 2) food and 3) external elements (for example, sunlight).

METHODS OF EVALUATION:**Methods of Evaluation**

1. Quizzes
2. Final Exam

Sample Evaluation: Identify the six rights of medication administration and explain why they are important.

REQUIRED TEXTS AND OTHER INSTRUCTIONAL MATERIALS:

Adopted Text:

- Fulcher, E. (2011). *Pharmacology Principles and Applications* (3rd/e).

Other Materials:

- Accompanying workbook

STUDENT LEARNING OUTCOMES:

1. MA355 SLO1 - Describe the role of the medical assistant in medication administration.

2. MA355 SLO2 - Demonstrate safe medication administration practice: choice of administration routes and sites, and administration of medications prescribed by the physician.

Date BOT Approved:

Date Reviewed: Fall 2011

PCA Established:

Date DL Conversion Approved:

**ALLAN HANCOCK COLLEGE
COURSE OUTLINE**

DISCIPLINE PLACEMENT: Health Care Ancillaries

DEPARTMENT: Health Sciences

PREFIX & NUMBER: MA 356

CATALOG COURSE TITLE: MA Job Success Externship

BANNER COURSE TITLE: MA Job Success Externship

UNITS: 3.5

	Hours per week (based on 16 weeks)	Total Hours per Term (range based on 16-18 weeks)	Units
Lecture:	0.50	8.00-9.00	0.50
Lab:	9.00	144.00-162.00	3.00
Total Contact Hours:	9.50	152.00-171.00	3.50 – 0.00

NUMBER OF TIMES COURSE CAN BE REPEATED:

GRADING OPTION:

P/NP - Pass/No Pass

PREREQUISITE(S): None

COREQUISITE(S): None

ADVISORY(IES): None

LIMITATION(S) ON ENROLLMENT:

Admittance to MA program and/or
Successful completion of the first semester MA courses.

ENTRANCE SKILLS:

CATALOG DESCRIPTION:

The course provides an opportunity for students to be exposed to the actual work environment and practice job skills learned in the program. Students interface regularly with faculty during the experience.

COURSE CONTENT:

1. Portfolio, Resume, and Cover Letter
2. Clinical Placement for Externship

3. Post-Conference, Evaluation of Preceptorship

COURSE OBJECTIVES:**At the end of the course, the student will be able to:**

1. Develop a portfolio, professional resume and cover letter.
2. Complete an application for employment utilizing a "master application."
3. Compose business "thank you" notes.
4. Complete the required non-paid clinical hours.
5. Perform the roles and responsibilities of the medical assistant in the workplace

METHODS OF INSTRUCTION:

Methods of Instruction
Discussion
Lab
Lecture
Methods of Instruction Description:
Coaching

OUTSIDE ASSIGNMENTS:

Other Assignments
1. Portfolio
2. Resume and Cover Letter

METHODS OF EVALUATION:

Methods of Evaluation
1. Successful completion of required hours with a positive evaluation by the clinical agency.
2. Completion of portfolio to include: cover letter, resume and evaluation of clinical experience.

REQUIRED TEXTS AND OTHER INSTRUCTIONAL MATERIALS:

Adopted Text:

- Beaman, N., Fleming-McPhillips, R, Outh, K.S., Gohsman, R.S., and Reagan, S. (2011). *Pearson's Comprehensive Medical Assisting* (2nd/e).

Other Materials:

- Accompanying workbook
- Appropriate uniforms

STUDENT LEARNING OUTCOMES:

1. MA356 SLO1 - Develop positive, professional job related attitudes and abilities to facilitate job success.

Date BOT Approved:

Date Reviewed: Fall 2011

PCA Established:

Date DL Conversion Approved:

ALLAN HANCOCK COLLEGE COURSE OUTLINE

DISCIPLINE PLACEMENT: Health Care Ancillaries**DEPARTMENT:** Health Sciences**PREFIX & NUMBER:** MA 360**CATALOG COURSE TITLE:** Medical Billing & Insurance**BANNER COURSE TITLE:** Medical Billing & Insurance**UNITS:** 4

	Hours per week (based on 16 weeks)	Total Hours per Term (range based on 16-18 weeks)	Units
Lecture:	2.00	32.00-36.00	2.00
Lab:	6.00	96.00-108.00	2.00
Total Contact Hours:	8.00	128.00-144.00	4.00 – 0.00

NUMBER OF TIMES COURSE CAN BE REPEATED:**GRADING OPTION:**

GR - Letter Grade Only

PREREQUISITE(S): None**COREQUISITE(S):**

MA 361

ADVISORY(IES): None**LIMITATION(S) ON ENROLLMENT:**

Successful completion of first semester MA courses

ENTRANCE SKILLS:**CATALOG DESCRIPTION:**

The course covers practices and principles of health insurance using medical terminology for completion of medical forms. It is an introduction to various types of medical billing practices including the pegboard system, computerized billing, basic insurance forms, collections, and basic legal aspects of billing.

COURSE CONTENT:

1. Insurance Terminology

2. Handling Insurance Claims, Establishing Eligibility, Completing Insurance Forms, Correlating Medical Terminology, Diagnosis and Treatment, Completing with Accurate Medical Data, Processing, and Filing
3. Commercial Insurance, Group, and Private
4. Government Agency Insurance, Medicare and Medicaid (Medi-Cal), Workman's Compensation, and State Disability
5. V.A. and Champus
6. Medical Billing and Using Computers for Patient Billing
7. Managing Data with Computerized System, Entering and Using Patient Information, Transactions, and Report Production
8. Printing Statements and Insurance Forms and Month-End Processing

COURSE OBJECTIVES:

At the end of the course, the student will be able to:

1. identify and compare the more commonly subscribed types of group and private health insurance policies.
2. identify the information required to complete an insurance form accurately.
3. carefully evaluate and follow instructions relating to insurance processing.
4. compare medical terminology and related medical procedures for accurate correlation of data processing.
5. utilize appropriate communication techniques for customer service related to billing and collections.

METHODS OF INSTRUCTION:

Methods of Instruction
Demonstration Lab Lecture
Methods of Instruction Description: Coaching

OUTSIDE ASSIGNMENTS:

Other Assignments
1. Textbook reading 2. Worksheet/Workbook activities
Sample assignment: Develop a form letter for use in bill collection.

METHODS OF EVALUATION:

Methods of Evaluation
1. Written exams 2. Accuracy of computer simulation
Sample Evaluation: A patient has called your office complaining about the amount of her bill. She is upset and yelling. Explain what steps you would take in this situation.

REQUIRED TEXTS AND OTHER INSTRUCTIONAL MATERIALS:

Adopted Text:

- Fordney, M. (2008). *Insurance Handbook for the Medical Office*
- Fordney, M. (2008). *Workbook for Insurance Handbook for the Medical Office*
- Sanderson, S. (2008). *Patient Billing using Medisoft-AHC*,

Other Materials:

- Flash drive Minimum 0.5 Megabyte capacity

STUDENT LEARNING OUTCOMES:

1. MA360 SLO1 - Demonstrate the ability to problem-solve insurance billing issues.
2. MA360 SLO2 - Write a collections letter in a culturally competent manner that demonstrates respect for the rights and dignity of the individual.

Date BOT Approved:

Date Reviewed: Fall 2011

PCA Established:

Date DL Conversion Approved:

ALLAN HANCOCK COLLEGE COURSE OUTLINE

DISCIPLINE PLACEMENT: Health Care Ancillaries**DEPARTMENT:** Health Sciences**PREFIX & NUMBER:** MA 361**CATALOG COURSE TITLE:** Coding for Medical Insurance**BANNER COURSE TITLE:** Coding for Medical Insurance**UNITS:** 3

	Hours per week (based on 16 weeks)	Total Hours per Term (range based on 16-18 weeks)	Units
Lecture:	2.00	32.00-36.00	2.00
Lab:	3.00	48.00-54.00	1.00
Total Contact Hours:	5.00	80.00-90.00	3.00 – 0.00

NUMBER OF TIMES COURSE CAN BE REPEATED:**GRADING OPTION:**

GR - Letter Grade Only

PREREQUISITE(S): None**COREQUISITE(S):**

MA 360

ADVISORY(IES): None**LIMITATION(S) ON ENROLLMENT:**

Successful completion of first semester MA courses

ENTRANCE SKILLS:**CATALOG DESCRIPTION:**

The course covers practices and principles of health insurance and health care finance coding procedures. International Classification of Diseases 9th Revision Clinical Modification (ICD 9-CM) and Current Procedural Terminology (CPT) guidelines for coding and reporting are utilized in practical application scenarios.

COURSE CONTENT:

1. Coding Procedures - Coding Terminology

2. CPT (Current Procedural Terminology) Code Book, RVS (California Relative Value Studies), and ICD-9
3. Procedure Code Terminology Modifiers, Basic and Multiple Modifiers
4. Relative Value Scale Variances and Comprehensive Modifiers
5. Diagnosis Related Groups, DRG system, and DRG and the Physician's Practice
6. DRG's and Medical Records
7. Simulated Practice

COURSE OBJECTIVES:

At the end of the course, the student will be able to:

1. accurately code procedures and diagnoses.
2. compare medical terminology and related medical procedures for accurate correlation of coding utilized.
3. appropriately use ICD-9 and CPT coding resources.

METHODS OF INSTRUCTION:

Methods of Instruction
Demonstration
Discussion
Lab
Lecture
Methods of Instruction Description: Coaching, Computer scenarios

OUTSIDE ASSIGNMENTS:

Other Assignments
1. Textbook reading
2. Worksheet/Workbook activities
Sample assignment. You have received a denial of payment for a patient that had a mole removal in the physician's office. Describe the steps to recode and resubmit the claim.

METHODS OF EVALUATION:

Methods of Evaluation
1. Written exams
2. Accuracy of computer simulation
Sample Evaluation. Explain three techniques that can be used to find information in the ICD-9 reference book. What other resources are available?

REQUIRED TEXTS AND OTHER INSTRUCTIONAL MATERIALS:

Adopted Text:

- Sanderson, S. (2008). *Patient Billing using Medisoft-AHC*
- Beebe, M. et al (2008). *Current Procedural Terminology (Cpt / Current Procedural Terminology (Standard/e).*
- Newby, C. (2010). *Medical Insurance Coding Workbook for Physician Practices and Facilities (2009-2010/e).*

Other Materials:

- Physician ICD-9-CM 2008, Volumes 1 & 2 (Spiral-bound) American Medical Association.
- Flash drive Minimum 0.5 Megabyte capacity

STUDENT LEARNING OUTCOMES:

1. MA361 SLO1 - Use information from the electronic medical record to decide upon the codes appropriate for the medical procedures performed.

2. MA361 SLO2 - Assign a medical code appropriate for the medical condition, using written and verbal communication with medical professionals.



PROGRAM SYLLABI

M.A. 305
Body Systems and Disease
Fall, 2014

Instructor: Fritz Hertzog
Section: 22096
Room: W-9

e-mail: fhertzog@hancockcollege.edu

Days: Wednesday, 9:00-2:00

Course Description:

A clinical study of medical terminology, anatomy, physiology, pathophysiology, diagnostic testing and treatment modalities.

Tardy and Attendance Policy:

The second absence will result in probation status. The third absence can result in being dropped from the course. Three tardies constitute one absence. Missing 30 minutes or more from a class constitutes an absence.

The last date to drop without a "W" is 8-29-14. The last date to drop with a "W" is 11-7-14. Students should always check with an academic counselor before dropping a course, as this may have a negative impact on their record. A student may attempt a course no more than three times during their tenure at Allan Hancock College. This includes any course in which the student has received any grade, including W, D, F, NC and/or NP.

Required Textbook:

The Language of Medicine, 10th edition, by Davi-Ellen Chabner; Saunders Elsevier 2014

Course Objectives:

Recite with proper diction and phraseology, the technical terms used in the language of health occupations.

Develop techniques to avoid errors in health record management by understanding medical terms used in diagnosis and treatment.

Understand the principles of anatomy and physiology as they relate to each body system.

Understand the major disease processes that occur in each body system.

Understand and compare various diagnostic testing procedures used to discover disease processes in each body system.

Communicate treatment modalities used for major disease processes in each body system.

Student Learning Outcomes:

Demonstrate critical thinking by logically solving problems and explaining the rationale.

Assessment of Student Learning Outcomes:

Tests will be evaluated to assess students' knowledge of anatomy, physiology, and pathophysiology.

Tests will be evaluated to assess students' ability to think critically.

Exercises related to real-world clinical scenarios will be evaluated to assess students' ability to think critically.

Course Evaluative Measures:

Tests..... 25%
Exercises..... 25%
Final Exam..... 25%
Professionalism.....25%

Course Grading:

A 90-100% of total points available
B 80-89%
C 70-79%
D 60-69%
F Less than 60%

Professionalism: If you were a patient, what kind of appearance, attitude (state of mind), and demeanor (language and behavior) would you expect from your medical assistant? Any breach of professionalism can result in a loss of 5 percentage points. Examples of such would be excessive tardies, excessive absences, an incomplete homework assignment, non-adherence to dress code, disrespectful of co-workers, class disruption...

There are no make-ups for tests and exercises. However, your lowest score for each will be disregarded in the grading.

Course Schedule:

Week One

Aug 20 Basic Word Structure
Terms Pertaining to the Body as a Whole

Week Two

Aug 27 Suffixes
Prefixes
Test 1

Week Three

Sept 3 Digestive System
Additional Suffixes and Digestive System Terminology
Test 2

Week Four

Sept 10 Urinary System
Test 3
Exercise 1

Sept 17 Female Reproductive System

Test 4

Exercise 2

Week Six

Sept 24 Male Reproductive System

Test 5

Exercise 3

Week Seven

Oct 1 Nervous System

Test 6

Exercise 4

Week Eight

Oct 8 Cardiovascular System

Test 7

Exercise 5

Week Nine

Oct 15 Respiratory System

Test 8

Exercise 6

Week Ten

Oct 22 Blood System

Test 9

Exercise 7

Week Eleven

Oct 29 Lymphatic and Immune System

Test 10

Exercise 8

Week Twelve

Nov 5 Musculoskeletal System

Test 11

Exercise 9

Week Thirteen

Nov 12 Skin

Test 12

Exercise 10

Week Fourteen

Nov 19 Sense Organs: The Eye and the Ear

Test 13

Week Fifteen

Nov 26 Endocrine System

Test 14

Exercise 12

Week Sixteen

Dec 3 Review for Final Exam

Test 15

Exercise 13

Week Seventeen

Dec 10 9:00 a.m. Final Exam



**MEDICAL ASSISTING
PROGRAM**

MA 350

MA FUNDAMENTALS

COURSE CONTENT

FALL 2014

Course Goals

The student will:

- 1. Understand the scope of practice of the medical assistant.**
- 2. Develop communication skills.**
- 3. Be familiar with current office technology and equipment.**

MA 350 – MA Fundamentals

Instructor: Susan Reardon

Office: 922-6966 x 3545

Email: sreardon@hancockcollege.edu

Office Hours: Monday – Friday, 6:00 p.m. – 7:00 p.m. on-line

Course Description

This course introduces the medical assisting profession to the student, including aspects of the work environment, laws that govern the profession, code of ethics, multicultural issues, communication techniques, and the professional characteristics that enable the medical assistant to be a successful member of a health care team. Study skills, critical thinking, and basic pharmacological math are also included

Alternate Format Statement

Allan Hancock College will provide, upon request, alternate translation of its general information documents in large print, Braille, e-text, etc. Please call 805 922-6966 ext. 3788.

Nondiscrimination Statement

The Allan Hancock College Joint Community College District is committed to the active promotion of diversity and equal access and opportunities to all staff, students, and applicants, including qualified members of underrepresented/protected groups. The college assures that no person shall be discriminated against regardless of race, color, ancestry, religion, gender, national origin, Vietnam-era veteran, marital status, or sexual orientation.

Academic Honesty

Honesty and integrity are essential to the academic community. Faculty, students, and staff are expected to be truthful, trustworthy, and fair in all academic endeavors. Students who violate these principles by cheating, plagiarizing, or acting in other academically dishonest ways, are subject to disciplinary action.

Tardy and Attendance Policy

Students are expected to be present during the entire scheduled time of class. A student with more than two absences may be dropped from the class. Missing 30 minutes or more from a class constitutes an absence. A student who is not present when role is taken at the beginning of class is tardy; three tardies equals an absence.

There will be quizzes over the semester. There are no make-ups for missed quizzes. The lowest quiz grade will be dropped and will not be counted in the final course average.

A student who wishes to withdraw from the class must complete the appropriate paperwork at the admissions office prior to the deadline listed in the schedule of classes. It is the responsibility of the student to initiate this process. MA program students must complete this course in order to continue in the program. Dropping the course equals dropping the program.

Course Objectives

To enable students to:

1. Explain the legal and ethical boundaries of Medical Assisting practice.
2. Communicate professionally in all aspects of communication including listening in person, telephone and written communication.
3. Correctly complete calculations related to giving medications.
4. Use office equipment including computers, telephones, and fax machines.

Student Learning Outcomes

At the end of the course, the student will demonstrate the ability to:

1. Demonstrate individual responsibility, personal integrity and respect for diverse peoples and cultures, including those with different cultural and linguistic backgrounds and different abilities. Measured by means of questions on quizzes and tests.
2. Identify federal and state legislative standards and polices regulating medical assistant scope of practice. Measured by means of questions on quizzes and tests.

Readings & Other Media

Required Text: Beaman, Fleming-Mcphillips, Routh, Gohsman, Reagan (2015).
Pearson's Comprehensive Medical Assisting Administrative and Clinical Competencies, 3rd ed., Pearson Education
Beaman, Fleming-Mcphillips, Routh, Gohsman, Reagan (2015).
Workbook to accompany Pearson's Comprehensive Medical Assisting Administrative and Clinical Competencies, 3rd ed., Pearson Education

Other Materials: myhealthprofessionskit, Pearson online student resource
Myhealthprofessionslab, Pearson online student resource
Lecture Notes and other readings supplied by the instructor.

Course Requirements

The student is expected to complete myhealthprofessionslab assignments as scheduled.

The instructor reserves the right to modify or revise the syllabus as deemed necessary.

Course Grading

A	90 - 100% of total points available
B	80 - 89%
C	70 - 79%
D	60 - 69%
F	Less than 60%

Course Evaluative Measures

Quizzes	30%
Final Exam	30%
Assignments	20%

MA 350 Schedule of Activities Fall 2014

Wk Date	Topics
1 8/17	Orientation to MA Program Handbook Review Orientation to Allan Hancock College Resources Syllabus Review Introduction to Pearson text, myhealthprofessionslab
2 8/24	<u>Lecture:</u> Learning Styles; Study Skills for Student Success; Critical Thinking
3 8/31	<u>Lecture:</u> Medical Assisting: The Profession <u>Reading:</u> <i>Prior to Class</i> , Read text Chapter 1, up to "Professional Certifying Organizations". <u>Speaker:</u> Alex Bell, RN, MSN, PHN, Student Health Services Coordinator, will explain the many services offered
4 9/7	Labor Day Holiday
5 9/14	<u>Lecture:</u> Professional Organizations and Career Opportunities for MAs <u>Reading:</u> <i>Prior to Class</i> , Read the remainder of Chapter 1 Assignments <u>Myhealthprofessionslab:</u> Ch 1 Homework A + B, Critical Thinking Quiz, Professionalism Scenario Quiz
6 9/21	<u>Lecture:</u> The History of Medicine <u>Reading:</u> <i>Prior to Class</i> , Read Chapter 2 Assignments <u>Myhealthprofessionslab:</u> Ch 2 Homework A + B Quiz #1
7 9/28	<u>Lecture:</u> The Practice of Medicine Assignments <u>Myhealthprofessionslab:</u> Ch 2 Critical Thinking Quiz, Professionalism Scenario Quiz
8 10/5	<u>Lecture:</u> Medical Law and Ethics <u>Reading:</u> <i>Prior to Class</i> , Read Chapter 3 Assignments <u>Myhealthprofessionslab:</u> Ch 3 Homework A + B
9 10/12	<u>Lecture:</u> Medical Law and Ethics Assignments <u>Myhealthprofessionslab:</u> Ch 3 Critical Thinking Quiz, Professionalism Scenario Quiz
10 10/19	<u>Lecture:</u> Communication: Verbal and Nonverbal <u>Reading:</u> <i>Prior to Class</i> , Read Chapter 5 Assignments <u>Myhealthprofessionslab:</u> Ch 5 Homework A + B, Critical Thinking Quiz Quiz #2
11 10/26	<u>Lecture:</u> Communication in Special Circumstances + In the Office Assignments

	<u>Myhealthprofessionslab</u> : Ch 5 Professionalism Scenario Quiz, Procedure Video Quiz, Professionalism Video Quiz
12 11/2	<u>Lecture</u> : The Office Environment: Safety in the Office <u>Reading</u> : <i>Prior to Class</i> , Read Chapter 6 Assignments <u>Myhealthprofessionslab</u> : Ch 6 Homework A + B Quiz #3
13 11/9	<u>Lecture</u> : The Office Environment: Quality Assurance Assignments <u>Myhealthprofessionslab</u> : Ch 6 Critical Thinking Quiz, Professionalism Scenario Quiz, Procedure Video Quiz
14 11/16	<u>Lecture</u> : Introduction to Medical Insurance (no reading assignment) Basic Pharmacological Math (no lab/workbook assignment)
15 11/23	<u>Lecture</u> : Basic Pharmacological Math
16 11/30	Review for Final
12/7	Final Exam

Medical Assisting Program Student Handbook

Table of Contents

	Page
Non-Discrimination Statement.....	3
Alternate Format Statement.....	3
Student Success	3
Program Policies.....	3
Student Policies	4
Grading Policy.....	5
Student Attendance Policy	5
Pregnancy Leave	5
Sick Leave: Injury, Post-Surgery or Extended Illness.....	6
Student Dress Code	6



MEDICAL ASSISTING PROGRAM

MA 351 MA CLINICAL PROCEDURES 1 COURSE CONTENT FALL 2014

Course Goals

The student will:

- 4. Understand the role of the medical assistant in rooming, interviewing, and screening patients.**
- 5. Learn to perform selected procedures according to guidelines.**
- 6. Gain knowledge of how to conduct appropriate patient education.**
- 7. Understand safety and infection control guidelines.**

MA 351 – MA Clinical Procedures 1

Instructor: Susan Reardon
Office: 922-6966 x 3545
Email: sreardon@hancockcollege.edu
Office Hours: Monday – Friday, 6:00 – 7:00 on-line

Course Description

Designed to prepare the student to assist the doctor in selected phases of clinical procedures. Emphasizes asepsis, physical examination, and screening practices, including care and use of equipment.

Alternate Format Statement

Allan Hancock College will provide, upon request, alternate translation of its general information documents in large print, Braille, e-text, etc. Please call 805 922-6966 ext. 3788.

Nondiscrimination Statement

The Allan Hancock College Joint Community College District is committed to the active promotion of diversity and equal access and opportunities to all staff, students, and applicants, including qualified members of underrepresented/protected groups. The college assures that no person shall be discriminated against regardless of race, color, ancestry, religion, gender, national origin, Vietnam-era veteran, marital status, or sexual orientation.

Academic Honesty

Honesty and integrity are essential to the academic community. Faculty, students, and staff are expected to be truthful, trustworthy, and fair in all academic endeavors. Students who violate these principles by cheating, plagiarizing, or acting in other academically dishonest ways, are subject to disciplinary action.

Tardy and Attendance Policy

Students are expected to be present during the entire scheduled time of class. A student with more than two absences may be dropped from the class. Missing 30 minutes or more from a class constitutes an absence. A student who is not present when role is taken at the beginning of class is tardy; three tardies equals an absence.

A student who wishes to withdraw from the class must complete the appropriate paperwork at the admissions office prior to the deadline listed in the schedule of classes. *It is the responsibility of the student to initiate this process.* MA program students must complete this course in order to continue in the program.

Any student with a documented physical or learning disability requiring accommodation should make an appointment to see me in my office.

Course Objectives

To encourage and enable students to:

1. Perform medical exam room procedures competently.
2. Utilize therapeutic communication based upon the developmental level

- infection control procedures.
4. Effectively educate patients.

Student Learning Outcomes - at the end of the course, the student will demonstrate the ability to:

1. Demonstrate competence in medical office laboratory procedures.
Measured by means of clinical skills check-offs.
2. Show accountability for making ethical and legal decisions as they relate to the delivery of care in the medical assistant role. Measured by means of questions on quizzes and tests.

Readings & Other Media

Required Text: Beaman, Fleming-Mcphillips, Routh, Gohsman, Reagan (2015).
Pearson's Comprehensive Medical Assisting Administrative and Clinical Competencies, 3rd ed., Pearson Education
Beaman, Fleming-Mcphillips, Routh, Gohsman, Reagan (2015).
Workbook to accompany Pearson's Comprehensive Medical Assisting Administrative and Clinical Competencies, 3rd ed., Pearson Education

Other Materials: myhealthprofessionskit, Pearson online student resource
myhealthprofessionslab, Pearson online student resource
Lecture Notes and other readings supplied by the instructor.

Course Requirements

The student must complete myhealthprofessionslab assignments for each chapter. There will be objective quizzes on related theory over the course of the semester. There are no make-ups given for the quizzes: your lowest quiz score will not be counted in the grading.

There will be skills check-offs for manual skills in this course. Each skill must be passed with a proficiency score of at least 90%. Proficiency scores for the check-offs are determined by the degree of mastery of the skill that the student demonstrates. The degree of mastery will be determined by the number of cues required for proficient performance of the skill. Students may repeat check-offs for a maximum of three attempts. The recorded grade for a skill on the first (successful) attempt equals the proficiency score. The recorded grade for a second (successful) attempt is 80%; the recorded grade for a third (successful) attempt is 70%.

Inability to pass a skill with at least a 90% proficiency score by the third attempt will result in being dropped from the course and the program.

Each student starts with 100 points for professionalism. Points can be lost by not adhering to the dress code, tardiness, or by exhibiting unprofessional behavior (disrespectful verbal or nonverbal communication with fellow students or instructors)

The instructor reserves the right to modify or revise the syllabus as deemed necessary.

B	80 - 89%
C	70 - 79%
D	65 - 69%
F	Less than 60%

Course Evaluative Measures

Quizzes	20%
Final Exam	30%
Assignments	10%
Skills Check-offs	30%
Professionalism	10%

MA 351 Course Schedule of Activities Fall 2014

Wk Date	Topics	Procedures	<input checked="" type="checkbox"/>
1 8/19	<u>Lecture:</u> Infection Control <u>Lab:</u> Disposal of Infectious Waste Performing Hand Washing Applying + Removing Non-sterile Gloves Isolation Techniques	34-1 34-2 34-3 34-4	34-2
2 8/26	<u>Lecture:</u> Infection Control <u>Lab:</u> Sanitizing Instruments Wrapping and Labeling Instruments Sterilizing Instruments in Autoclave Chemically Sterilizing Instruments <u>Assignment:</u> Read Text Ch 34	34-5 34-6 34-7 34-8	34-6
3 9/2	<u>Lecture:</u> Vital Signs <u>Lab:</u> Measuring Adult Weight and Height Oral Temp with Electronic Thermometer Axillary Temperature Using a Tympanic Thermometer Using a Wearable Thermometer Using a Temporal Artery Thermometer <u>Assignment:</u> Read Text Ch 35 up to Pulse on p772	35-1 35-2 35-4 35-5 35-6 35-7	35-1 35-2
4 9/9	<u>Lecture:</u> Vital Signs <u>Lab:</u> Measuring Radial Pulse Measuring Apical-Radial Pulse Measuring Respirations Measuring Blood Pressure Measuring Systolic BP using Palpation Calculating Adult Body Mass Index <u>Assignment:</u> Read remainder of Ch 35 <u>Workbook:</u> Complete pp256-260 (Key Terminology Review through Multiple Choice) Quiz #1	35-8 35-9 35-10 35-11 35-12 35-14	35-8 35-10 35-11
5 9/16	<u>Lecture:</u> Assisting with Physical Examinations: Preparing the exam room Patient Interview, History, Chief Complaint (CC) <u>Lab:</u> Obtaining Patient History + CC <u>Assignment:</u> Read Ch 36 to Assisting the Physician on	36-1 36-2 36-3	36-2

6 9/23	<u>Lecture:</u> Assisting with Physical Examinations: Equipment and Supplies Examination Methods Patient Positioning <u>Lab:</u> Patient Positioning <u>Assignment:</u> Read remainder of Ch 36 <u>Workbook:</u> Complete Key Terminology Review p277 through Fill in the Blank pp280-281	36-4 36-5 36-6 36-7 36-8 36-9 36-10	36-4 36-5 36-6 36-7 36-8 36-9 36-10
7 9/30	<u>Lecture:</u> Assisting with Physical Examinations: Patient Preparation and Positioning <u>Lab:</u> Patient Positioning	"	"
8 10/7	<u>Lecture:</u> Assisting with Medical Specialties: Allergy Testing, Dermatology, Cardiology, Endocrinology, Gastroenterology, Orthopedics, Neurology <u>Lab:</u> Scratch Test Wound Culture Testing for Occult Blood <u>Assignment:</u> Read Text Ch 37 <u>Workbook:</u> Key Terminology Review p289 + Multiple Choice p291	37-1 37-2 37-6	37-2 37-6
9 10/14	<u>Lecture:</u> Assisting with Reproductive and Urinary Specialties <u>Lab:</u> Assisting with Pelvic Exam and Pap Test <u>Assignment:</u> Read Text Ch 38 <u>Workbook:</u> Complete Fill in the Blank pp38-39 Quiz #2	38-2	38-2
10 10/21	<u>Lecture:</u> Assisting with Eye and Ear Care <u>Lab:</u> Testing Visual Acuity with Snellen Chart Eye Irrigation Ear Irrigation <u>Assignment:</u> Read Text Ch 39 <u>Workbook:</u> Complete Key Terminology Review p312 + Multiple Choice pp313-314	39-1 39-4 39-6	39-1 39-4 39-6
11 10/28	<u>Lecture:</u> Assisting with Life Span Specialties: Pediatrics <u>Lab:</u> Infant Wrapping Height and Weight of Infant Measuring Head Circumference on Infant Measuring Chest Circumference on Infant Calculating Growth Percentiles <u>Assignment:</u> Read Text Ch 40 <u>Workbook:</u> Complete Key Terminology Review p325 + True/False p326	40-1 40-3 40-4 40-5 40-6	40-3
12 11/4	<u>Lecture:</u> Assisting with Life Span Specialties: Geriatrics <u>Lab:</u> Continue Checkoffs from previous sessions <u>Assignment:</u> Read Text Ch 41 <u>Workbook:</u> Complete Key Terminology Review p334 + Multiple Choice pp335-336 Quiz #3		
13 11/11	<u>Lecture:</u> Assisting with Minor Surgery <u>Lab:</u> Surgical Hand Scrub	42-1	42-7

	Dropping Sterile Packet Onto a Sterile Field Transferring Sterile Objects with Forceps Transferring Sterile Solutions Assisting with Minor Surgery <u>Assignment:</u> Read Text Ch 42 up to Preparing the Patient for Minor Surgery p973	42-4 42-5 42-6 42-7	
14 11/18	<u>Lecture:</u> Assisting with Minor Surgery <u>Lab:</u> Prepping Patient's Skin for Surgery Assisting with Suturing Removing Sutures Changing a Sterile Dressing <u>Assignment:</u> Read Text remainder of Ch 42 <u>Workbook:</u> Complete Multiple Choice p347-348	42-8 42-9 42-10 42-11	42-8 42-10 42-11
15 11/25	<u>Lecture:</u> Assisting with Medical Emergencies and Emergency Preparedness <u>Lab:</u> Administer Oxygen Application of Pressure Bandage Application of Various Bandages Respond to Fainting Patient <u>Assignment:</u> Read Text Ch 43 <u>Workbook:</u> Complete Key Terminology Review p43 Quiz #4	43-5 43-6 43-7 43-8	43-7
16 12/2	Review for Final Finish Check-offs		
17 12/9	Final Exam Remaining Check-offs		



ALLAN HANCOCK COLLEGE

MEDICAL ASSISTING PROGRAM

MA 352 MA ADMINISTRATIVE PROCEDURES

COURSE CONTENT

FALL 2014

Course Goals

The student will:

- 1. Use technology effectively and responsibly at a level that achieves successful professional outcomes.**
- 2. Understand time management and organizational skill principles.**
- 3. Demonstrate appropriate work ethic and customer service skills.**
- 4. Understand the correct use and completion of required forms.**

ALLAN HANCOCK COLLEGE
MEDICAL ASSISTING PROGRAM
MA 352 - MA Administrative Procedures

Instructor: G. R. Austin, D.C., CPC
Office: 922-6966 x 3384
Email: george.austin@hancockcollege.edu

Class Hours: *Thursday (R): 9:00am - 12:00 pm Lecture W-9 / 12:30pm - 3:30pm Lab M-116*
Starting week of 9/18 until 12/10--17 weeks.

Course Description

Explores administrative office tasks including secretarial and accounting procedures, written and oral communications, appointment scheduling, records management. Topics include insurance, banking, professional fees, billing, and collection of fees.

Alternate Format Statement

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Academic Honesty

Honesty and integrity are essential to the academic community. Faculty, students, and staff are expected to be truthful, trustworthy, and fair in all academic endeavors. Students who violate these principles by cheating, plagiarizing, or acting in other academically dishonest ways are subject to disciplinary action.

Tardy and Attendance Policy

Students are expected to be present during the entire scheduled time of class. **A student with more than two absences may be dropped from the class. You will receive an "Attendance Probation" slip.**

Missing 30 minutes or more from a class constitutes an absence. A student who is not present when role is taken at the beginning of class is tardy; three tardies equals an absence.

A student who wishes to withdraw from the course must initiate this process. Withdrawal from the course equals withdrawal from the MA Program

Any student with a documented physical or learning disability requiring accommodation should make an appointment to see me or to Sue Reardon.

Course Objectives

1. skillfully manage multiple types of telecommunication methods and equipment.
2. conduct customer service procedures and explain the importance of first impressions.
3. explain the legal implications of medical record control.
4. explain fee and collections policies and procedures.
5. use a variety of scheduling systems and equipment.
6. correctly complete office forms including billing forms, insurance claims, and required reporting. Understand and using an EHR¹ program.
7. discuss personnel management duties as they relate to the medical office.

Course Attempts

A student may attempt a non-repeatable course no more than three times during their tenure at Allan Hancock College. This includes any course in which the student has received any grade, including W, D, F NC and/or NP. This new legislation affects all students' academic history. Under specific circumstances, the student may request to attempt a course a fourth time by submitting an appeal form to the Counseling Office.

Student Learning Outcomes

1. Use technology effectively and responsibly at a level that achieves successful professional outcomes. Measured by results of final exam.
2. Utilize current technology to complete common office forms, including insurance claims, billing forms . Measured by means of administrative skills check-offs.

Readings & Other Media

Required Text: Beaman, Routh, Papazian-Boyce, Sesser, Mills, Maly - 2015
Pearson's Comprehensive Medical Assisting Administrative and Clinical Competencies, 3rd ed., and the 3rd ed. workbook (2015) to accompany Pearson's Comprehensive Medical Assisting Administrative and Clinical Competencies, 3rd ed., Pearson Education

Richard Gartee - Electronic Health Records 2nd ed. (2011) Pearson Publications

Other Materials: myhealthprofessionskit, Pearson online student resource
Lecture Notes and other readings supplied by the instructor.

Course Requirements

Students must complete workbook and homework assignments for each chapter. There will be quizzes over the course of the semester. Absent on the day of a test/ quiz an automatic 10% will be taken off the make-up test/ quiz. Check with Dr. Austin to schedule the make-up.

The instructor reserves the right to modify or revise the syllabus as deemed necessary.

¹"EHR" is an Electronic Health Record system or program

Quizzes and tests	25%
Final Exam	30%
Workbook	20%
Homework	20%
Professionalism	5%

**ALLAN HANCOCK COLLEGE MEDICAL
ASSISTING PROGRAM**

Last Day to Drop Without a W Grade

The deadline to drop a course without a W grade has changed and now happens earlier in the term. The last day to drop without a W grade is the same day as the final day to drop a course and receive a refund. *In some cases, this date is the first day of the class or before the class begins.* Students should always check with an academic counselor before dropping a course, as this may have a negative impact on their record.

Class Rules

1. No food or beverages may be consumed in a classroom.
2. Cell phones must be silent and ignored during class unless you have an emergency.
3. Plagiarism is not acceptable.
4. Respect for Instructors, staff, classmates, visitors and school property is required.
5. All other Campus and College Policies must be respected.

METHODS OF COURSE DELIVERY: The subject matter in this course is presented in various forms, which may include lectures, PowerPoint or Prezi, class discussion, demonstrations, collaborative activities, computer assignments, student projects and presentations, online research, guest speakers, and/or field activity.

Course Grading

A	90 -100% of total points available
B	80 -89%
c	70 -79%
D	60 -69%
F	Less than 60%

Course Evaluative Measures

5 quizzes/4 tests

The instructor reserves the right to modify or revise the syllabus as deemed necessary.

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**ALLAN HANCOCK COLLEGE MEDICAL
ASSISTING PROGRAM**

Schedule of Activities for MA 352 Administrative Procedures

WEEK K DATE	TOPIC SCHEDULE	HOMEWORK , ACTIVITIES &
1a 8/2 1	W-9 BEAMAN's book (Read chapter 7 before coming to class) Syllabus Review Lecture: Telephone Techniques - Chapter 7 Computer Lab: Clinic Exercises and Telephone Case Studies	Workbook: Key Terms and Multiple choice Homework: Read Chapter 8
1b 8/2 1	Read -Chapter 1 p. 1 – 33 and Chapter 2 p. 35 – 75 before coming to class M-116 GARTEE's EHR Chapter 1 – Electronic Health Records: An Overview Chapter 2 – Functional EHR Systems	Assignment -Test your knowledge p. 34; 1-15 Assignment -Test
2a 8/2 8	W-9 BEAMAN's book Lecture: Patient Reception - Chapter 8 Computer Lab: Procedure 8-2 Patient Registration Procedure 8-3 Registering a New Patient	Workbook: Complete Chapter 8 Key Terminology Review + Multiple choice HOMEWORK:
2b 8/2 8	M-116 GARTEE's EHR (continue) Chapter 1 – Electronic Health Records: An Overview Chapter 2 – Functional EHR Systems	HOMEWORK: Read -Chapter 3 Assignment -Test your knowledge p. 117; 1 –15 Read -Chapter 4 p. 118 – 151 Assignment -Test your
3a 9/ 4	W-9 BEAMAN's book Lecture: Appointment Scheduling - Chapter 9 Computer Lab: Scheduling Patient Appointments Procedure 9-1 Scheduling Established Patients Procedure 9-2 Scheduling a New Patient Appointment Procedure 9-3 Arranging a Referral Appointment Procedure 9-4 Scheduling Inpatient Surgical Procedures Procedure 9-5 Scheduling Outpatient Surgical Procedures	Workbook: Complete Chapter 9 Applied Practice Homework: Read Chapter 10 to "Supplies" on page 211 Prepare for Quiz#1

	TEST #1—Chapter 1, 2		
3b 9/ 4	M-116 GARTEE's EHR Chapter 3 – Learning Medical Record Software Chapter 4 – Increased Familiarity with the		Continue Chapter 3 & 4 assignments
4a 9/1 1	W-9 BEAMAN's book QUIZ #1- Chapters 7,8,9 Lecture: Medical Office Facilities and Equipment – Chapter 10 Computer Lab: **myhealthprofessionskit exercises; check-offs		Workbook: Complete Chapter 10 Key Terminology Review
4b 9/1 1	M-116 GARTEE's EHR Chapter 3 review of exercise 8 p. 78 Chapter 4 exercises # 30, # 31		Homework: Read -Chapter 5 Assignment -Test your knowledge p.
5a 9/1 8	W-9 BEAMAN's book Lecture: Medical Office Supplies - Pg. 211 Computer Lab: **myhealthprofessionskit exercises; check-offs		Workbook: Key Terminology and Multiple choice
	TEST #2—Chapter 3, 4		
5b 9/1	M-116 GARTEE's EHR Chapter 5 – Data Entry at the Point of Care		Assignment -Test your knowledge p. 195: 1 - 15
6a 9/2 5	W-9 BEAMAN's book Lecture: Written Communication – Chapter 11 Computer Lab: Business Letters Procedure 11-1 Composing a Business Letter Procedure 11-2 Proofreading Written Documents		Workbook: Key Terminology and Multiple choice
6b 9/2 5	M-116 GARTEE's EHR Chapter 5 exercises # 33, # 34, # 35		Homework: Read – Chapter 6 Assignment –Test your knowledge p. 253; 1 -
7a 10/ 2	W-9 BEAMAN's book Lecture: Computers in the Medical Office – Chapter 12 Computer Lab: **myhealthprofessionskit exercises; check-offs Study for test		Workbook: Chapter 12 Key Terminology Review and Multiple choice Homework: Read Chapter 13 Prepare for Quiz # 2
7b 10/ 2	M-116 GARTEE's EHR Chapter 6 – Understanding Electronic Orders		Comprehensive Evaluation p. 254 – 260 Assignment – Written Exam Part I, p. 254 - 255; 1 – 25

<p>8a 10/ 9</p>	<p style="text-align: center;"><u>Quiz #2 - Chapters 10, 11, 12</u></p> <p>W-9 BEAMAN's book Lecture: Managing Medical Records – Chapter 13 Computer Lab: Patient Records **Procedure 13-1 Adding or Changing Items in the Patient Record</p>	<p>Workbook: Complete Chapter 13 Key Terminology and Multiple Choice</p> <p>Homework:</p>
<p>8b 10/ 9</p>	<p>M-116 GARTEE's EHR Comprehensive Evaluation: Chapter 1 – 6 Part II & Part III</p>	<p>Homework: Read – Chapter 7 Assignment – Test your knowledge p. 300: 1 – 15</p>
<p>9a 10/1 6</p>	<p>W-9 BEAMAN's book Lecture: Electronic Medical Records – Chapter 14 Computer Lab: Research EMR options Procedure **14-1 Correcting an Entry in the EMR</p>	<p>Workbook: Chapter 14 Key Terminology and True/False Questions Homework:</p>
<p>9b 10/1 6</p>	<p>M-116 GARTEE's EHR TEST #3 – Chapter 5, 6 Chapter 7 – Problem Lists, Results Management, and Trending</p>	<p>Complete Chapter assignment</p>
<p>10a 10/2 3</p>	<p>W-9 BEAMAN's book Lecture: Fees, Billing, Collections, and Credit – Chapter 18 Computer Lab: **myhealthprofessionskit activity Procedure 18-8 Collection Call Procedure 18-9 Collection Letter</p>	<p>Workbook: Chapter 18 Key Terminology Review and Multiple choice</p>
<p>10b 10/2 3</p>	<p>M-116 GARTEE's EHR Chapter 7 exercises # 45, # 46, # 47, #48, #49</p>	<p>Homework: Read Chapter 8 Assignment – Test your knowledge p. 341; 1 – 15</p>
<p>11a 10/3 0</p>	<p>W-9 BEAMAN's book Lecture: Accounting Systems Chapter 18 (continue) Computer Lab: **myhealthprofessionskit activity</p>	<p>Workbook: Complete Chapter 18 Multiple Choice Questions Homework: Read Chapter 10</p>
<p>11b 10/3 0</p>	<p>M-116 GARTEE's EHR Chapter 8 – Data Entry Using Flow Sheets and Anatomical Drawings</p>	<p>Complete Chapter assignment</p>

<u>Quiz#3 - Chapters 13, 14, 18</u>		
12a 11/ 6	W-9 BEAMAN's book Lecture: Banking and Practice Finances – Chapter 19 Computer Lab: **myhealthprofessionskit activity Procedure 19- 1 Prepare a Deposit Slip Procedure 19-2 Prepare a Check Procedure 19-4 Reconciling Bank Statements	Workbook: Complete Chapter 19 Key Terminology and Multiple Choice Homework: Read
12b 12/ 6	M-116 GARTEE's EHR Chapter 8 exercises # 51, # 52, # 53	Homework: Read -Chapter 9 Assignment -Test your knowledge p. 374; 1 – 15
13a 11/1 0	W-9 BEAMAN' book Lecture: Medical Insurance – Chapter 15 Computer Lab: Internet search for websites for Medical, Anthem Blue Cross, and CHAMPVA. Compare plans offered by	Workbook: Chapter 15 Key Terminology and True and False. Applied Practice
13b 11/1 3	M-116 GARTEE's EHR Chapter 9 – Using the EHR to Improve Patient Health	Complete Chapter assignments
14a 11/2 0	W-9 BEAMAN's book Lecture: Medical Insurance Claims – Chapter 15 pg. 335 Computer Lab: Internet search for medical claim software Myhealthprofessionskit activities Procedure 15-1	Completing the CMS 1500 Form Homework: Read Chapter 15 Workbook: Complete Chapter 15 Key Terminology Review Homework: Read Capters 16 &
14b 11/2 0	M-116 GARTEE's EHR Chapter 9 exercises- # 55, # 56, # 58 Complete exercise # 59, take quiz and print your results for chapter credit	Homework: Read -Chapter 10 Assignment -Test your knowledge p. 416; 1-15 Read -Chapter 11 p. 417 - 462 Assignment -Test your knowledge p. 463; 1-

11/27	THANKSGIVING NO SCHOOL	
15a 12/ 4	W-9 BEAMAN's book <u>Quiz#4- Chapters 19 & 15</u> Lecture: Medical Coding – Chapter 16 & 17 Computer Lab: **myhealthprofessionskit activities Procedure 16-1 ICD-9-CM Coding Procedure 17-1 Assign a CPT Code	Homework: Read Chapter 16 & 17 Workbook: Chapter 16 & 17 and Multiple choice Homework: Read
15b 12/ 4	M-116 GARTEE's EHR TEST #4 — <u>Chapter 7, 8 & 9</u> Chapter 10—Privacy and Security of Health Records Chapter 11—Using the Internet to	Homework: Read - Chapter 12 Assignment – Test your knowledge p. 518; 1 - 15
16a 12/1 1	W-9 BEAMAN's book Review for Final <u>Quiz#5- Chap. 16 & 17</u> Lecture: Medical Office Management – Chapter 20 Computer Lab: **myhealthprofessionskit activities Procedure 20-2	Workbook: Key Terminology Review True/False Questions Work on Booklet
16b 12/1 1	M-116 GARTEE's EHR Chapter 11 exercises #63, # 64, # 65, # 66, # 67 Chapter 12—EHR Coding and Reimbursement Chapter 12 exercises # 70, # 71, # 72, # 73 Comprehensive Evaluation: Chapter 7	Complete Chapter assignment Written Exam Part I p. 519 - 520; 1 - 30
17a 12/1	Complete all Chapter assignment (both books) BEAMAN's book & GARTEE's EHR book	STUDY FOR FINAL
17b 12/1 8	M-116 FINAL EXAM BOTH BOOKS	



MEDICAL ASSISTING PROGRAM

MA 353 MA 353 MA CLINICAL PROCEDURES 2

COURSE CONTENT SPRING 2015

Course Goals

The student will

- 1. Demonstrate competence in medical office laboratory procedures**
- 2. Know the OSHA standards for specimen collection.**

Instructor: Susan Reardon
Office: 922-6966 x 3545
Email: sreardon@hancockcollege.edu

Class Hours: Tues+Thurs: 9:00 a.m. – 11:10 a.m. lecture
11:25 a.m. – 4:00 p.m. lab

Office Hours: Mon–Thurs: 6:00 - 7:00 on-line
In-office by appointment

Course Description

Designed to provide the student with opportunity to develop skills required to perform medical office laboratory procedures and to provide patient education.

Alternate Format Statement

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Nondiscrimination Statement

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Academic Honesty

Honesty and integrity are essential to the academic community. Faculty, students, and staff are expected to be truthful, trustworthy, and fair in all academic endeavors. Students who violate these principles by cheating, plagiarizing, or acting in other academically dishonest ways, are subject to disciplinary action.

Tardy and Attendance Policy

Professional behavior is essential for anyone wishing to have a successful career in health care. Part of professional behavior is being reliable in attendance and punctuality. Students are expected to be present during the entire scheduled time of class, just as they will be expected to be present for all scheduled work hours in the medical office.

There is a great deal of new information presented at each class session. If an absence occurs, the student is responsible for obtaining information about what was missed from another student. Students are expected to keep up with the check-off schedule for proficiency testing. The second absence will result in probation status. The third absence may result in being dropped from the course. Three tardies constitute one absence. Missing 30 minutes or more from a class constitutes an absence.

A student who wishes to withdraw from the class must complete the appropriate paperwork at the admissions office prior to the deadline listed in the schedule of classes. It is the responsibility of the student to initiate this process. The last date to drop the course without a "W" is 1-22-14. The last date to drop with a "W" is 3-24-14. Students should always check with an academic counselor before dropping a course, as this may have a negative impact on their record. A student may attempt a non-repeatable course no more than three times during their tenure at Allan Hancock College. This includes any course in which the student has received any grade, including W, D, F, NC and/or NP.

Any student with a documented physical or learning disability requiring accommodation should make an appointment to see me in my office.

Course Objectives

At the end of the course, the student will be able to:

1. correctly use a microscope and prepare slides for microscopic examination.
2. describe general guidelines for collection of bodily fluids and substances for microbiological cultures and other testing.
3. perform capillary puncture and venipuncture with correct technique.
4. describe the MA's role in radiology.
5. perform a 12-lead ECG using correct technique.
6. perform pulmonary function tests for vital capacity, peak flow, and oxygen saturation with correct technique.
7. apply heat and cold therapies using correct technique.
8. develop patient teaching plans and reinforce patient teaching regarding nutrition.
9. communicate effectively with the angry or depressed patient.

Student Learning Outcomes

1. Demonstrate critical thinking by logically solving problems and explaining the rationale. This outcome is measured by answering scenario-based critical-thinking questions on quizzes and tests.
2. Demonstrate safe performance in the medical assistant clinical role. This outcome is measured by performing skills check-offs throughout the semester with at least 90% accuracy (see "Course Requirements" below).

Readings & Other Media

Required Text: Beaman, Fleming-McPhillips, Routh, Gohsman, Reagan (2011). Pearson's Comprehensive Medical Assisting Administrative and Clinical Competencies, 2nd ed., Pearson Education
Beaman, Fleming-McPhillips, Routh, Gohsman, Reagan (2011). Workbook to accompany Pearson's Comprehensive Medical Assisting Administrative and Clinical Competencies, 2nd ed., Pearson Education

Other Materials: Lecture Notes and other readings supplied by the instructor.

Course Requirements

In order to improve the chance of success in the externship experience, and in the student's future career, there is a heavy emphasis on professionalism in

this course. Professionalism points equal 30% of the total grade. Each student will begin the semester with 100 professionalism points. Professionalism points can be lost through unprofessional behavior:

Each tardy = 5 points

Talking or texting during lecture = 5 points

Each dress code violation = 5 points

Unprepared for skills check-off (no check-off sheet, watch, pen, etc.) = 5 points

Rude or unprofessional communication with instructor or peer = 10 points

There will be objective quizzes on related theory over the course of the semester. The student cannot make up a missed quiz; the lowest quiz score will not be counted in the grading.

There will be skills check-offs for the manual skills in this course. Each skill must be passed with a proficiency score of at least 90%. Proficiency scores for the check-offs are determined by the degree of mastery of the skill that the student demonstrates. The degree of mastery will be determined by the number of cues the instructor needs to give to the student in order for the student to perform each step of the skill proficiently.

Students may repeat check-offs for a maximum of three attempts. Repeat attempts should take place within 1 week of the initial attempt. The recorded grade for a skill on the first (successful) attempt equals the proficiency score. The recorded grade for a second (successful) attempt is 80%; the recorded grade for a third (successful) attempt is 70%.

Inability to pass a skill with at least a 90% proficiency score by the third attempt will result in being dropped from the course and the program.

A student must achieve at least a 70% weighted average in the course in order to progress to the MA 356 Job Success Externship course.

The instructor reserves the right to modify or revise the syllabus as deemed necessary.

Course Grading

A	90 - 100%
B	80 - 89%
C	70 - 79%
D	60 - 69%
F	Less than 60%

Course Evaluative Measures

Quizzes	20%
Final Exam	30%
Skills Check-offs	20%
Professionalism	30%

SCHEDULE OF ACTIVITIES			
Wk Date	Topics	Procedure	Text
1 1/20	Lecture: Overview of course and syllabus Review of vital signs and PPE <i>Lab: BP and Pulse Check-off (must successfully check off within 3 consecutive attempts)</i> <i>PPE Check-off</i>	BP+P PPE 34-4	Ch 34
1 1/22	Lecture: The Clinical Laboratory Safety in the clinical laboratory HIPAA, abuse reporting, and OSHA videos + tests <i>Lab: Using and Cleaning the Microscope</i> <i>BP and Pulse Practice</i> <i>Videotaping intake scenario/self critique</i>	44-4	Ch 44
2 1/27	Lecture: Microbiology Quiz #1 <i>Lab: Obtaining a Throat Culture</i> <i>Preparing a Smear</i> <i>BP and Pulse Practice</i> <i>Videotaping intake scenario/self critique</i>	45-1 45-5	Ch 45
2 1/29	Lecture: Urinalysis <i>Lab: Collecting a Midstream Urine Specimen</i> <i>Testing Urine with Reagent Strips</i> <i>BP and Pulse Practice</i> <i>Videotaping intake scenario/self critique</i>	46-2 46-6	Ch 46
3 2/3	Lecture: Hematology <i>Lab: Obtaining Venous Blood with Syringe and Needle simulation practice</i> <i>BP and Pulse Practice</i> <i>Videotaping intake scenario/self critique</i>	47-2	Ch 47
3 2/5	Lecture: Hematology (cont.) <i>Lab: Obtaining Venous Blood with Syringe and Needle</i> <i>BP and Pulse Practice</i> <i>Videotaping intake scenario/self critique</i>		Ch 47
4 2/10	Lecture: Hematology (cont.) Quiz #2 <i>Lab: Obtaining Venous Blood using Vacutainer</i> <i>BP and Pulse Practice</i> <i>Videotaping intake scenario/self critique</i>	47-3	Ch 47
4 2/12	Lecture: Hematology (cont.) <i>Lab: Obtaining Venous Blood using Vacutainer</i> <i>BP and Pulse Practice</i> <i>Videotaping intake scenario/self critique</i>		Ch 47

5 2/17	Lecture: Hematology (cont.) <i>Lab: Capillary Puncture - Monitor Blood Glucose Capillary Puncture - Perform Hemacue BP and Pulse Practice Videotaping intake scenario/self critique</i>	47-1 48-1	Ch 48
5 2/19	Lecture: Hematology (cont.) <i>Lab: Capillary Puncture - Monitor Blood Glucose Capillary Puncture - Perform Hemacue BP and Pulse Practice Videotaping intake scenario/self critique</i>		Ch 48
6 2/24	Lecture: Hematology (cont.) Quiz #3 <i>Lab: Preparing Slides Continue practice/check-offs on blood draws BP and Pulse Practice Videotaping intake scenario/self-critique</i>	48-4	Ch 48
6 2/26	Lecture: Radiology <i>Lab: Continue blood draws/Check-offs BP and Pulse Practice Videotaping intake scenario/self-critique</i>		Ch 49
7 3/3	Lecture: Electrocardiography <i>Lab: Recording a 12-Lead Electrocardiograph Continue blood draws/Check-offs BP and Pulse Practice Videotaping intake scenario/self-critique</i>	50-1	Ch 50
7 3/5	Lecture: Pulmonary Function <i>Lab: Teaching Peak Flow Measurement Measuring Oxygen with Pulse Oximetry Continue blood draws/Check-offs BP and Pulse Practice Videotaping intake scenario/self-critique</i>	51-2 51-3	Ch 51
8 3/10	Lecture: Physical Therapy and Rehabilitation Quiz #4 <i>Lab: Application of a Hot Compress Application of a Cold Chemical Pack Continue blood draws/Check-offs BP and Pulse Practice Videotaping intake scenario/self-critique</i>	52-3 52-6	Ch 52
8 3/12	Lecture: Physical Therapy and Rehabilitation <i>Lab: Wheelchair Transfer to the Exam Table Continue blood draws/Check-offs BP and Pulse Practice Videotaping intake scenario/self-critique</i>	52-12	Ch 52
9	Spring Break		
10 3/24	Lecture: Patient Education <i>Lab: Instructing Patients According to Their Needs Continue blood draw/Check-offs</i>	56-3	Ch 56

	<i>BP and Pulse Practice</i> <i>Videotaping intake scenario/self-critique</i>		
10 3/26	Lecture: Nutrition Mental Health <i>Lab: Effective Interaction with the Angry Patient</i> <i>Continue blood draws/Check-offs</i> <i>BP and Pulse Practice</i> <i>Videotaping intake scenario/self-critique</i>	58-2	Ch 57 Ch 58
11 3/31	Lecture: Professionalism Externship and Career <i>Lab: Job Interview</i> <i>Continue blood draws/Check-offs</i> <i>BP and Pulse Practice</i>	60-4	Ch 59 Ch 60
11 4/2	Lecture: Preparing for Externship <i>Lab: Continue blood draws/Check-offs</i> <i>BP and Pulse Practice</i>		
12 4/7	Lecture: Review for Final <i>Lab: Continue remaining check-offs</i>		
12 4/9	FINAL EXAM <i>Lab: Completion of remaining check-offs</i>		

M.A. 355
Pharmacology
Spring, 2014

Instructor: Francis Hertzog

e-mail: fhertzog@hancockcollege.edu

Section: 40755

Room: W-9

Days: Monday & Wednesday, 9:00 am – 3:10 pm

Course Description:

A study of the scope of practice of the Medical Assistant in medication administration. Included are drug classifications, drug measurement systems, and calculation of dosages. Parenteral and non-parenteral administration techniques are practiced.

Tardy and Attendance Policy:

The second absence will result in probation status. The third absence can result in being dropped from the course. Three tardies constitute one absence. Missing 30 minutes or more from a class constitutes an absence.

The last day to drop without a "W" is 1-27-14. The last date to drop with a "W" is 3-24-14. Students should always check with an academic counselor before dropping

a course, as this may have a negative impact on their record. A student may attempt a non-repeatable course no more than three times during their tenure at Allan Hancock College. This includes any course in which the student has received any grade, including W, D, F, NC and/or NP.

Required Textbooks:

Pharmacology Principles and Applications, 3rd edition, by Eugenia Fulcher; Saunders Elsevier, 2012

Pharmacology Principles and Applications Workbook

Course Objectives:

1. List sources for authoritative information on medications, their actions, interactions, side effects, dosage and expected outcomes.
2. Explain factors that influence dosage and drug action.
3. Identify the role of the medical assistant in calling a prescription to the pharmacy.
4. Identify controlled substances, regulations for use and the role of the medical assistant.
5. Explain correct technique in administering oral, buccal, sublingual, transdermal and installation medications.
6. Demonstrate correct technique in administering medications via the intradermal, subcutaneous or intramuscular routes.
7. Discuss patient education regarding medications.

Student Learning Outcomes:

1. Describe the role of the medical assistant in medication administration.
2. Demonstrate safe medication administration practice: correct calculation of dosages, choice of administration routes and sites, and administration of medications prescribed by the physician.

Assessment of Student Learning Outcomes:

1. Critical thinking questions based on clinical scenarios assess knowledge of the role of the medical assistant in medication administration. Test grades will be evaluated to determine the percentage of students who are able to answer the questions.
2. Clinical Skills Check-Offs are designed to assess competence in medication administration. Each student must pass clinical skills with no more than three attempts.

Course Evaluative Measures:

Clinical Skills Check-Offs...40%
Tests.....30%
Final Exam.....30%

Each clinical skill must be passed with a **proficiency** score of at least 90%. Profic-

iciency scores for the check-offs are determined by the degree of mastery of the skill that the student demonstrates. Students may repeat check-offs for a maximum of three attempts. Repeat attempts must take place within 1 week of the initial attempt. The **recorded** grade for a skill on the first (successful) attempt = 90% or better. The recorded grade on a second (successful) attempt = 80%; the recorded grade on a third (successful) attempt = 70%.

Inability to pass a skill with at least a 90% proficiency score by the third attempt will result in being dropped from the course and the program.

Professional appearance, attitude, and demeanor are essential to passing each clinical skill.

Course Grading:

- A 90-100% of total points available
- B 80-89%
- C 70-79%
- D 60-69%
- F Less than 60%

You must be present on the day of a test. There will be no make-up tests. However, your lowest test score will be disregarded in the grading.

Course Schedule:

Week One

Jan 22 Lecture: Basics of Pharmacology / Drug Information and Drug Forms
Lab: Math Review

Week Two

Jan 27 Lecture: Understanding Drug Dosages / Interpreting Medication Labels and Orders, Documenting / Measurement Systems and Their Equivalents
Lab: Math Review

Jan 29 Lecture: Converting Between Measurement Systems / Calculating Doses of Non-Parenteral Medications
Lab: Practice Calculations

Week Three

Feb 3 Lecture: Calculating Doses of Parenteral Medications
Lab: Practice Calculations

Feb 5 Lecture: Safety and Quality Assurance / Enteral Routes / **Test 1**

Lab: Enteral Routes: oral, suppository, enema

Week Four

Feb 10 Lecture: Percutaneous Routes
Lab: Enteral Routes

Feb 12 Lecture: Parenteral Routes
Lab: Percutaneous Routes: topical, ophthalmic, otic, MDI

Week Five

Feb 19 Lecture: Analgesics and Antipyretics / Immunizations and Immune System
Lab: Percutaneous Routes

Week Six

Feb 24 Lecture: Antimicrobials, Antifungals, Antivirals / Antineoplastics
Lab: Preparing Med. from an Ampule / Preparing Med. from a Vial

Feb 26 Lecture: Endocrine Disorders / Test 2
Lab: Preparing Med. from an Ampule / Preparing Med. from a Vial

Week Seven

Mar 3 Lecture: Eye and Ear Disorders / Skin Conditions
Lab: Reconstituting Med. from Powders / Mixing Med. Using Two Containers of Injectables

Mar 5 Lecture: Musculoskeletal Disorders
Lab: Reconstituting Med. from Powders / Mixing Med. Using Two Containers of Injectables

Week Eight

Mar 10 Lecture: Gastrointestinal Disorders
Lab: Giving an Intradermal Injection

Mar 12 Lecture: Respiratory Disorders
Lab: Giving a Subcutaneous Injection

Week Nine

Mar 24 Lecture: Circulatory Disorders
Lab: Giving an Intramuscular Injection

Mar 26 Lecture: Urinary Disorders / Reproductive Disorders / **Test 3**
Lab: Giving an Intramuscular Injection with Z-Track Method

Week Ten

Mar 31 Lecture: Neurologic Disorders
Lab: Injections

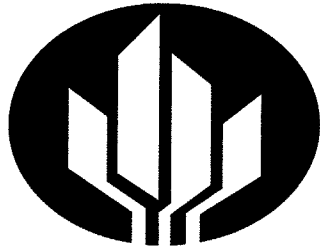
Apr 2 Lecture: Mental Health Disorders
Lab: Injections

Week Eleven

Apr 7 Lecture: Review for Final Exam
Lab: Injections

Apr 9 **Final Exam**

- The instructor reserves the right to modify this syllabus at his discretion, while making every effort to do so in a timely manner.



ALLAN HANCOCK COLLEGE

MEDICAL ASSISTING PROGRAM

MA 356 MA JOB SUCCESS EXTERNSHIP

COURSE CONTENT SPRING 2015

Course Goals

To encourage and enable students to:

- 3. Increase their understanding of their roles in the health care field.**
- 4. Develop positive, professional job-related attitudes and abilities to facilitate job success.**
- 5. Develop an understanding of how to enhance their chances for career advancement.**
- 6. Understand employer/employee rights and responsibilities, both ethical and legal.**
- 7. Demonstrate medical assisting skills necessary to obtain and maintain employment.**

MA 356 – MA Job Success Externship

Instructor: Sue Reardon, BSN

Office: 922-6966 x 3545

Email: sreardon@hancockcollege.edu

Office Hours: Mon-Thurs 7:00 p.m. – 8:00 p.m. on-line

Course Description

Provides an opportunity for students to be exposed to the actual work environment of a medical assistant and to practice job skills learned in the program. Students interface regularly with faculty during the work experience.

Alternate Format Statement

Allan Hancock College will provide, upon request, alternate translation of its general information documents in large print, Braille, e-text, etc. Please call 805 922-6966 ext. 3788.

Nondiscrimination Statement

The Allan Hancock College Joint Community College District is committed to the active promotion of diversity and equal access and opportunities to all staff, students, and applicants, including qualified members of underrepresented/protected groups. The college assures that no person shall be discriminated against regardless of race, color, ancestry, religion, gender, national origin, Vietnam-era veteran, marital status, or sexual orientation.

Academic Honesty

Honesty and integrity are essential to the academic community. Faculty, students, and staff are expected to be truthful, trustworthy, and fair in all academic endeavors. Students who violate these principles by cheating, plagiarizing, or acting in other academically dishonest ways, are subject to disciplinary action.

Tardy and Attendance Policy

Students are expected to be present during the entire scheduled time of this course. 160 hours of externship experience in a medical office must be completed by the end of the 5-week course. Any missed hours in the classroom or the externship must be made up in order to receive a Certificate of Completion for the MA Program.

Any student with a documented physical or learning disability requiring accommodation should make an appointment to see me in my office.

Instructional Objectives-

by the end of the course, the student will demonstrate the ability to:

1. Complete an application for employment utilizing a "master application".
2. Compose a business "thank you" note.
3. Successfully complete the required non-paid clinical hours.
4. Employ traits and perform skills that are necessary for success on the job.

Student Learning Outcomes

1. Develop positive, professional job related attitudes and abilities to facilitate job success. Outcome measured by receiving a "Yes" response on the question "Assuming a position were available, would you hire this student?" on the evaluation form completed by the externship site supervisor.
2. Demonstrate medical assisting skills necessary to obtain and maintain employment. Outcome measured by achieving at least "Satisfactory" ratings on skills section of evaluation form completed by externship site supervisor.

Readings & Other Media

No Text

Appropriate Readings: Professional Allied Health Literature such as AMT Journal of Topics and Issues, Mayo Clinic Health Letter, American Family Physician

Course Requirements

1. Successful completion of required hours with a positive evaluation by the clinical agency.
2. Completion of portfolio to include: narrative report of student objectives, student evaluation of externship site, daily hours log, externship skills performance record.

Course Grading

This is a pass/no pass course. In order to pass the course, students must receive an evaluation by the clinical agency with at least 80% positive ("strongly agree" or "agree") responses to the questions on the evaluation tool; all paperwork must be completed and turned in by the last day of class.

The instructor reserves the right to modify or revise the syllabus as deemed necessary.

Wk	Date	SCHEDULE OF ACTIVITIES
1	4/13-4/16	Report to externship site at time scheduled by site (8 hrs/day).
1 Fri.	4/17	Externship Post-Conference; <i>bring signed Student Objectives Form</i> Lecture: Getting the Job; Job Search
2	4/20-4/23	8 hours/day of externship experience
3	4/27-4/30	8 hours/day of externship experience
3 Fri.	5/1	Externship Post-Conference Lecture: Keeping the Job; Employment Satisfaction and Advancement

4	5/4-5/7	Report to externship site at time scheduled by site 8 hours/day of externship experience
5	5/11-5/14	Report to externship site at time scheduled by site 8 hours/day of externship experience
5 Fri.	5/15	Externship Post-Conference; <i>bring Student Evaluation of Externship Site, Daily Hours Log, Externship Skills Performance Record</i>



MEDICAL ASSISTING PROGRAM

MA 305 BODY SYSTEMS AND DISEASE

COURSE CONTENT

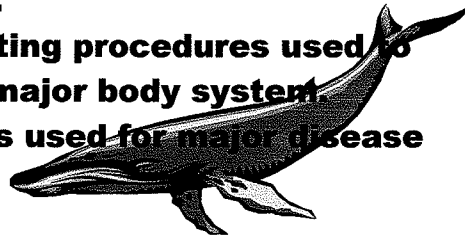
Fall 2014

Course Objectives:

The student will:

- 1. Understand medical language abbreviations, prefixes, suffixes, root words and their combinations.**
- 2. Develop techniques to avoid errors in health record processes by understanding medical terms used in diagnosis and treatment.**
- 3. Understand the principles of anatomy and physiology as they relate to major human body systems.**

4. **Understand the identification of major disease processes that occur in each major body systems.**
5. **Understand various diagnostic testing procedures used to discover disease process in each major body system.**
6. **Communicate treatment modalities used for major disease processes in each body system.**



Monday 4:30 p.m. to 9:30 pm

Instructor: Steve Hendricks

Office: classroom

Email: shendricks@hancockcollege.edu

Office Hours: Before/after class or by appointment

Course Description

A study of medical terminology, anatomy, physiology, pathophysiology, diagnostic testing and treatment modalities.

Alternate Format Statement

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Academic Honesty

Honesty and integrity are essential to the academic community. Students who violate these principles by cheating, plagiarizing, or acting in other academically dishonest ways are subject to disciplinary action.

Respect & Behavior:

I will and I expect you to show respect to every student in class. This means that when I am talking then **no one else should be talking or TEXTING**. If a student has a question or comment (by first raising their hand to be called upon), no one else will be talking. After one warning, you will be asked to leave the class. Please turn off cell phones while in class.

Tardy and Attendance Policy

Attendance in this class is required. In addition, **tardiness will not be tolerated**. Class starts at 4:30 p.m (make arrangements with work/childcare!). The quiz will be given at 4:30 p.m. If you are late you will receive a zero on the quiz AND anything due will receive a late score. Students are expected to be present during the entire scheduled time of class. Class is very tightly structured and intensive. In light of there being **no make-up quizzes/tests**, any absence has a serious bearing on the student's success. A student with more than two absences may be dropped. MA Program students who are dropped from the class are also dropped from the MA Program. Missing 30 minutes or more from a class constitutes an absence. A student who is not present when role is taken at the beginning of class is tardy; **three tardies equals an absence**. Coming and going during lecture will not be allowed. Breaks will be given...wait for break!!!

A student who wishes to withdraw from the class must complete the appropriate paperwork at the admissions office prior to the deadline listed in the schedule. *It is the responsibility of the student to initiate this process.*

Additional Help:

Tutoring is available in the library at no charge. Please feel free to seek help from me on any aspect of the course material. Any student with a documented physical or learning disability requiring accommodation should make an appointment to see me.

In addition, MA 305 is a Blackboard course. Log onto Blackboard to access assignments, internet sites, and grades.

Log on at: <http://blackboard.hancockcollege.edu/> (no www!!!)

Username: myHancock portal username

Password: first letter of first name and last name, then last 5 SSN (lowercase and no spaces: If you change it...write it down!!!)

Student Learning Outcomes

At the end of the course, the student will demonstrate the ability to:

1. Demonstrate an understanding of foundational allied health knowledge of anatomical and physiological function and how disease and injury affect the human body.
2. Demonstrate critical thinking by logically solving problems and explaining their rationale.

These SLOs will be assessed by answering questions on an exam.

Readings & Other Media

Required Text: Chabner (2014). The Language of Medicine, 10th ed.

Recommended Other Materials: Medical Dictionary (Taber's or Dorland's)

Reference: Beaman, Fleming-McPhillips, Routh, Gohsman, Reagan (2015). Pearson's Comprehensive Medical Assisting Administrative and Clinical Competencies, 3rd ed., Pearson Education

Course Requirements

Students must complete assigned homework for each chapter. There will be a quiz each class session, which will cover the definitions and spelling of medical terms, and basic facts concerning the related anatomy, physiology, and pathology. There are no make-ups given for the quizzes: *your lowest quiz score will not be counted in the grading.*

Other Notes: I cannot emphasize enough that you allow yourself plenty of time for study: reading the chapters thoroughly and writing out your homework assignments in their entirety. Constant repetition is your key to success!

Many students have found that making **flash cards** allows them to broaden their opportunities for study. Also, the CD-ROM included in the textbook offers another modality of self-study and self-testing.

Extra Credit:

You may earn up to 30 points extra credit (including points earned for jeopardy). See worksheet on Blackboard for instructions. See me if you have any questions.

Student Presentations:

You will be required to give a 5-10 minutes presentation. I will allow a lot of flexibility on your presentations as long as they pertain to this class. If you would prefer to do a presentation on a medical or disease report, please follow the general directions for the extra credit. See me if you have any questions.

The instructor reserves the right to modify or revise the syllabus as deemed necessary.

Course Grading

A	90 – 100% of total points available
B	80 – 89.9%
C	70 – 79.9%
D	60 – 69.9%
F	Less than 60%

Approximate Course Evaluative Measures

Weekly Quizzes	40%
Mid-term & Final Exam	40%
Homework	10%
Student Presentations	5%
In-Class Activity	5%

MA 352 – MA Administrative Procedures

Instructor: Robyn Adkins

Cell: 570-1911

Email: radkins@hancockcollege.edu

Class Hours: Monday and Wednesdays 6-9pm, room M116

Office Hours: 30 minutes before class each session

Course Description

Explores administrative office tasks including secretarial and accounting procedures, written and oral communications, appointment scheduling, and records management. Topics include insurance, banking, professional fees, billing, and collection of fees.

Course Goals

The student will:

8. Use technology effectively and responsibly at a level that achieves successful professional outcomes.
9. Understand time management and organizational skill principles.
10. Demonstrate appropriate work ethic and customer service skills.
11. Understand the correct use and completion of required forms.

Alternate Format Statement

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Academic Honesty

Honesty and integrity are essential to the academic community. Faculty, students, and staff are expected to be truthful, trustworthy, and fair in all academic endeavors. Students who violate these principles by cheating, plagiarizing, or acting in other academically dishonest ways are subject to disciplinary action.

Tardy and Attendance Policy

Students are expected to be present during the entire scheduled time of class. A student with more than two (2) absences may be dropped from the class. Missing 30

minutes or more from a class constitutes an absence. A student who is not present when role is taken at the beginning of class is tardy; three tardies equals an absence.

A student who wishes to withdraw from the class must complete the appropriate paperwork at the admissions office prior to the deadline listed in the schedule of classes. It is the responsibility of the student to initiate this process.

Any student with a documented physical or learning disability requiring accommodation should make an appointment to see or Sue Reardon.

Course Objectives

5. Explain the role and responsibilities of an Administrative Medical Assistant.
6. Skillfully manage multiple types of telecommunication methods and equipment.
7. Demonstrate appropriate customer service interactions.
8. Use a variety of scheduling systems and equipment.
9. Demonstrate the correct method for correcting documentation errors.
10. Describe how to handle unusual situations according to facility protocol.
11. Describe the organization of a medical record.
12. Explain the legal implications of record control.
13. Demonstrate appropriate documentation on the medical record.
14. Demonstrate ability to communicate professionally in writing.
15. Explain different fee and collections policies.
16. Identify current credit laws and regulations as they apply to collection letters.
17. Describe the various accounting systems and supplies available for use in the medical office.
18. Explain payroll forms, and taxes and deductions withheld from a paycheck.
19. Explain various insurance programs.

Student Learning Outcomes

At the end of the course, the student will demonstrate the ability to:

Use technology effectively and responsibly at a level that achieves successful professional outcomes.

Utilize current technology to complete common office forms, including insurance claims and patient billing forms.

Student Learning Outcomes are measured by midterm exam, final exam, and administrative procedures exercises.

Readings & Other Media

Required Text:

Pearson's Comprehensive Medical Assisting: Administrative and Clinical Competencies, 3rd ed. by Beaman, Fleming-McPhillips, Routh, Goshman, Reagan (2015).

Workbook to accompany **Pearson's Comprehensive Medical Assisting: Administrative and Clinical Competencies**, 3rd ed., by Beaman, Fleming-McPhillips, Routh, Goshman, Reagan (2015).

Electronic Health Records 2nd ed., by Gartee (2011)

Other Materials:

myhealthprofessionskit, a Pearson online resource

Course Requirements

Students must complete workbook and lab assignments as assigned. Homework is due at the Wednesday class session following the week it was assigned unless otherwise noted or announced. There will be 5 quizzes over the course of the semester. There are no make-ups given for the quizzes: your lowest quiz score will not be counted in the grading.

The instructor reserves the right to modify or revise the syllabus and class schedule as deemed necessary.

Course Grading

A	90 – 100% of total points available
B	80 – 89%
C	70 – 79%
D	65 – 69%
F	Less than 60%

Course Evaluative Measures

Quizzes	10%
Midterm Exam	25%
Final Exam	25%
Admin Procedures Lab	30%
Homework	10%

Schedule of Activities

Subject to change! Bring with you to each class session!

Week Dates	Topics
Week 1 Aug 18, 20	Syllabus Review <u>Lecture:</u> Beaman Chapter 3/Medical Law and Ethics, Beaman Chapter 5/Communication: Verbal and Nonverbal <u>Homework:</u> Read Gartee Chapter 1 & 2, Complete Chapter 3 & 5 Beaman Workbook (Student Study Guide ONLY)
Week 2 Aug 25, 27	<u>Lecture:</u> Gartee Chapter 1/Electronic Health Records, Gartee Chapter 2/Functional EHR Systems <u>Homework:</u> Read Beaman Chapters 6, Complete Gartee Chapter 1 & 2 Test Your Knowledge pages 34 & 76
Week 3 Sept 3 ONLY	<u>Lecture:</u> Beaman Chapter 6/The Office Environment <u>Homework:</u> Read Gartee Chapter 3, Complete Beaman Chapter 6 Workbook (all but Critical Thinking & Research Activity)
Week 4 Sept 8, 10	Quiz #1 Beaman Chapters 3, 5, & 6 (Wednesday) <u>Lecture:</u> Gartee Chapter 3/Learning Medical Record Software <u>Homework:</u> Read Beaman Chapter 7 & 8
Week 5 Sept 15, 17	<u>Lecture:</u> Beaman Chapter 7/Telephone Techniques, Beaman Chapter 8/Patient Reception <u>Homework:</u> Read Gartee Chapter 4 & 5, Complete Chapter 7 & 8 Workbook (all but Critical Thinking & Research Activity)
Week 6 Sept 22, 24	<u>Lecture:</u> Gartee Chapter 4/Increased Familiarity with Software, Gartee Chapter 5/Data Entry at Point of Care <u>Homework:</u> Read Beaman Chapter 9, Read Gartee Chapter 6, Complete Gartee Chapter 4 Test Your Knowledge page 151
Week 7 Sept 29, Oct 1	Quiz #2 Chapters 7, 8, & 9 (Wednesday) <u>Lecture:</u> Beaman Chapter 9/Appointment Scheduling, Gartee Chapter 6/Understanding Electronic Orders <u>Homework:</u> Complete Beaman Chapter 9 Workbook (all but Critical Thinking & Research Activity), Complete Gartee Chapter 6 Test Your Knowledge page 253, STUDY for MIDTERMS!
Week 8 Oct 6, 8	Monday: Beaman Midterm Blackboard Exam Chapters 3, 5, 6, 7, 8, 9 Wednesday: Gartee Midterm Practical Exam Chapters 1-6 <u>Homework:</u> Read Beaman Chapter 10, 11 & 12,
Week 9 Oct 13, 15	<u>Lecture:</u> Beaman Chapter 10/Office Facilities, Equipment, & Supplies; Beaman Chapter 11/Written Communications; Beaman Chapter 12/Computers in the Medical Office <u>Homework:</u> Read Gartee Chapter 7 & 8, Complete Beaman Chapter 10, 11, 12 Workbook (all but Critical Thinking & Research Activity)
Week 10 Oct 20, 22	Quiz #3 Chapters 10, 11, 12 (Monday) <u>Lecture:</u> Gartee Chapter 7/Problem Lists, Results Management, and Trending, Gartee Chapter 8/Data Entry Using Flow Sheets and Anatomical Drawings <u>Homework:</u> Read Beaman Chapter 13 & 15, Complete Gartee Chapters 7 & 8 Test Your Knowledge pages 300 & 341
Week 11 Oct 27, 29	<u>Lecture:</u> Chapter 13/Managing Paper Medical Records, Chapter 15/Medical Insurance <u>Homework:</u> Read Gartee Chapter 9 & 10, Complete Beaman Chapter 13 & 15 Workbook (all but Critical Thinking & Research Activity)

Week 12 Nov 3, 5	<u>Lecture:</u> Gartee Chapter 9/Using the EHR, Gartee Chapter 10/Privacy and Security <u>Homework:</u> Read Beaman 18, Complete Gartee Chapters 9 & 10 Test Your Knowledge pages 374 & 416
Week 13 Nov 12 ONLY	Quiz #4 Chapters 13, 15, & 18 (Wednesday) <u>Lecture:</u> Beaman Chapter 18/Patient Billing and Collections <u>Homework:</u> Read Gartee Chapter 11 12, Complete Chapter 18 Workbook (all but Critical Thinking & Research Activity)
Week 14 Nov 17, 19	<u>Lecture:</u> Gartee Chapter 11/Using the Internet, Gartee Chapter 12/EHR Coding and Reimbursement <u>Homework:</u> Read Beaman Chapter 19 & 20, Complete Gartee Chapters 11 & 12 Test Your Knowledge pages 463 & 518
Week 15 Nov 24, 26	Quiz #5 Chapters 19 & 20 (Wednesday) <u>Lecture:</u> Beaman Chapter 19/Banking & Finances, Beaman Chapter 20/Medical Office Management <u>Homework:</u> Complete Beaman Chapters 19 & 20 Workbook (all but Critical Thinking & Research Activity), STUDY for FINAL EXAMS!
Week 16 Dec 1, 3	Monday: Gartee Final Practical Exam Chapters 7-12 Wednesday: Beaman Midterm Blackboard Exam Chapters 10, 11, 12, 13, 15, 18, 19, 20
	<i>Final Exam may be moved to Monday December 8th if necessary. Please mark your calendars and DO NOT MAKE OTHER PLANS THAT NIGHT!</i>

Spring 2015

MA-360 Medical Billing and Insurance
Monday and Wednesday 5:30 to 9:20 pm

Room: M116

Instructor: Robyn Adkins

Voicemail: 805-570-1911 (my cell number, please leave a message)

Email: radkins@hancockcollege.edu

Office Hours: Thirty minutes prior to each class session, in the classroom M116.

Circumstances may require that dates or assignments be changed. Please bring your Syllabus and Class Assignment and Schedule with you to each class session. The instructor reserves the right to modify or revise the syllabus and class schedule as deemed necessary.

Required Texts:

- Insurance Handbook for the Medical Office, 13th edition, Marilyn T. Fordney.
- Insurance Handbook for the Medical Office Workbook, 13th edition, Marilyn T. Fordney.

Please bring these texts to class every day! We will be using the Workbook often for in-class assignments.

Supplementary Materials: whatever you need to get and stay organized. This class will generate a great deal of paper! I would suggest:

- a three-ring binder with dividers, enough for each homework assignment plus a few extra
- black or blue pens (as many as you feel you need to always have one in class)
- 20 copies of the CMS 1500 forms (available on my blackboard site) I prefer prints vs. photocopies.

Limitation on Enrollment: Successful completion of first semester MA courses.

Course Corequisite: MA 361.

Course Description: The course covers practices and principles of health insurance using medical terminology for completion of medical forms. It is an introduction to various types of medical billing practices including the pegboard system, computerized billing, basic insurance forms, collections, and basic legal aspects of billing.

Course Goals and Objectives: To prepare students for employment in medical offices, serving either primarily, or in support to, the role of medical biller and insurance specialist. Students will:

1. identify and compare the more commonly subscribed types of group and private health insurance policies.
2. identify the information required to complete an insurance form accurately.
3. carefully evaluate and follow instructions relating to insurance processing.
4. compare medical terminology and related medical procedures for accurate correlation of data processing.
5. utilize appropriate communication techniques for customer service related to billing and collections.

Student Learning Outcomes: Demonstrate the ability to problem-solve insurance billing issues. Write a collections letter in a culturally competent manner that demonstrates respect for the rights and dignity of the individual. Use technology effectively and responsibly at a level that achieves successful professional outcomes. Utilize current technology to complete common office forms, including insurance claims and patient billing forms.

Teaching Methods: Textbook reading assignments, lectures, group activities, quizzes, handouts, class discussion, videos, and use of the textbook and workbook resources. Attendance and participation in class activities are absolutely essential elements of the course.

Attendance Policy: It is the student's responsibility to know and comply with the attendance policy. Students are expected to be present during the entire scheduled time of class. A student with more than two (2) absences will be dropped from the class. Missing 30 minutes or more from a class constitutes an absence. A student who is not present when role is taken at the beginning of class is tardy; three tardies equals an absence. Requests for an exception to the Attendance Policy must be made in writing, and

must include documentation from outside sources (doctors, emergency rooms, etc.) to substantiate the request. Exceptions to the attendance policy, if approved, will require the completion of a make-up assignment to substitute hours of instruction.

A student who wishes to withdraw from the class must complete the appropriate paperwork at the admissions office prior to the deadline listed in the schedule of classes. It is the responsibility of the student to initiate this process.

Do not interrupt class time to discuss personal issues, see your instructor either before or after class.

Academic Honesty and Integrity: Honesty and integrity are essential to the academic community. Faculty, students, and staff are expected to be truthful, trustworthy, and fair in all academic endeavors. Students who violate these principles by cheating, plagiarizing, or acting in other academically dishonest ways are subject to disciplinary action. Further information regarding this policy can be found in the Hancock College Catalog.

Support Services: There are a variety of support services available for students on campus. Please refer to the Hancock College Catalog for more information.

Calculation of Grades: Students must maintain a 70% (letter grade C) to pass the class.

A	90 – 100% of total points available
B	80 – 89%
C	70 – 79%
D	65 – 69%
F	Less than 60%

Course Evaluative Measures:

Quizzes	20% of your grade
Midterm Exam	30%
Final Exam	30%
Assignments (homework & in-class)	20%

Grading Policy: Students must complete homework and in-class assignments as assigned. All assignments must be submitted on time to receive full points. A 20% penalty will be enforced on late homework and in-class assignments.

There will be 6 quizzes over the course of the semester. There are no make-ups given for the quizzes: your lowest quiz score will not be counted in the grading. If you disagree with a test question or a grade you have received, please document your reasons and reference any supporting literature. Class time will not be used to dispute test scores.

Demerits: Preparing you for the workforce is one of the goals of this course. To that end, a standard of behavior will be enforced. Students are expected to treat each other and

the instructor with respect and courtesy, and use polite language at all times. Demerits will be implemented as a consequence of poor behavior in the classroom. For each infraction, 10 points will be deducted from your grade. I have never had to enforce this policy...let's keep it that way!

CLASS SCHEDULE: Subject to change! Bring with you to each class session!

Week	Dates	Topics
Week 1	Jan 21 only	<u>Lecture/Lab:</u> Chapter 1, Introduction to Medisoft <u>Homework:</u> Read Chapters 1, 2, & 3 / Workbook Assignment 1-1
Week 2	Jan 26, 28	<u>Lecture/Lab:</u> Chapter 2, Chapter 3, Medisoft Project 1.1, 1.2, 1.3 <u>Homework:</u> Read Chapter 4 / Workbook Assignments 2-1 and 3-1
Week 3	Feb 2, 4	Quiz #1 Chapters 1, 2, & 3 (Monday) <u>Lecture/Lab:</u> Chapter 4 <u>Homework:</u> Read Chapter 5 & 6 / Workbook Assignment 4-1
Week 4	Feb 9, 11	<u>Lecture/Lab:</u> Chapter 5, Chapter 6, Medisoft Project 2.1, 2.2 <u>Homework:</u> Read Chapter 7 / Workbook Assignments 5-1 and 6-1
Week 5	Feb 18 only	Quiz #2 Chapters 4, 5, & 6 (Monday) <u>Lecture/Lab:</u> Chapter 7 <u>Homework:</u> Read Chapter 8 / Workbook Assignment 7-1
Week 6	Feb 23, 25	<u>Lecture/Lab:</u> Chapter 8, Medisoft Project 3.1, 3.2, 3.3 <u>Homework:</u> Read Chapter 9 / Workbook Assignment 8-1
Week 7	Mar 2, 4	<u>Lecture/Lab:</u> Chapter 9, Medisoft Project 4.1, 4.2, 4.3, 4.4 <u>Homework:</u> Study for Midterm / Workbook Assignment 9-1
Week 8	Mar 9, 11	Quiz #3 Chapters 7, 8, & 9 (Monday) <u>Lecture/Lab:</u> Review for Midterm, Medisoft Project 5.1, 5.2, 5.3 Midterm Exam Chapters 1-9 (Wednesday) <u>Homework:</u> Read Chapter 10
Week 9	Mar 16, 25	SPRING BREAK
Week 10	Mar 23, 25	<u>Lecture/Lab:</u> Chapter 10 <u>Homework:</u> Read Chapter 11 / Workbook Assignment 10-1
Week 11	Mar 30, Apr 1	<u>Lecture/Lab:</u> Chapter 11, Medisoft Project 6.1, 6.2 <u>Homework:</u> Read Chapter 12 / Workbook Assignment 11-1
Week 12	Apr 6, 8	<u>Lecture/Lab:</u> Chapter 12, Medisoft Project 7.1 <u>Homework:</u> Read Chapter 13 / Workbook Assignment 12-1
Week 13	Apr 13, 15	Quiz #4 Chapters 10, 11, & 12 (Monday) <u>Lecture/Lab:</u> Chapter 13, Medisoft Project 7.2 <u>Homework:</u> Read Chapters 14 & 15 / Workbook Assignment 13-1
Week 14	Apr 20, 22	<u>Lecture/Lab:</u> Chapter 14, Chapter 15 <u>Homework:</u> Read Chapters 16 & 17 / Workbook Assignments 14-1 and 15-1
Week 15	Apr 27, 29	Quiz #5 Chapters 13, 14, & 15 (Monday) <u>Lecture/Lab:</u> Chapter 16, Chapter 17 <u>Homework:</u> Read Chapter 18 / Workbook Assignments 16-1 and 17-1
Week 16		Quiz #6 Chapters 16, 17, & 18 (Wednesday)

May 4, 6	<u>Lecture/Lab:</u> Chapter 18, Review for Final Exam <u>Homework:</u> Workbook Assignment 18-1
Week 17 May 11, 13	<u>Lecture/Lab:</u> Review for Final Exam <u>Homework:</u> Study for Final Exam FINAL EXAM WEDNESDAY MAY 13, 5:30 PM, Chapters 10-18

MA 361

CODING FOR MEDICAL INSURANCE COURSE CONTENT

SPRING 2015

Course Goals The student will:

- 4. Understand coding requirements for full reimbursement.**
- 5. Understand the practices and principles of health insurance coding.**
- 6. Interpret and follow the different instructions of the various regulatory agencies.**
- 7. Understand the scientific terminology commonly used in medical coding.**
- 8. Correlate facts and medical data necessary to code medical forms and insurance claims.**

MA 361 – Coding for Medical Insurance - CRN 41933 (17weeks)

Instructor: George (Ron) Austin, D.C., CPC Email: george.austin@hancockcollege.edu
(T) Tues.: 5:30-6:20pm and 6:30-7:50pm Room: M116 (R) Thurs.: 5:30-6:20pm and 6:30-7:50pm Room: M116 Office hours: 30 mins. Prior to each class in classroom M116

The instructor reserves the right to modify or revise the syllabus as deemed necessary.

COREQUISITE(S): MA 360

Course Description

Practices and principles of health insurance and health care finance coding procedures. International Classification of Diseases 9th & 10th Revision Clinical Modification (ICD 9-CM/ ICD-10), Current Procedural Terminology (CPT) guidelines for coding and HCPCS reporting are utilized in practical application scenarios.

Alternate Format Statement

Allan Hancock College will provide, upon request, alternate translation of its general information documents in large print, Braille, e-text, etc. Please call 805 922-6966 ext. 3788.

Nondiscrimination Statement

The Allan Hancock College Joint Community College District is committed to the active promotion of diversity and equal access and opportunities to all staff, students, and applicants, including qualified members of underrepresented/protected groups. The college assures that no person shall be discriminated against regardless of race, color, ancestry, religion, gender, national origin, Vietnam-era veteran, marital status, or sexual orientation.

Academic Honesty

Honesty and integrity are essential to the academic community. Faculty, students, and staff are expected to be truthful, trustworthy, and fair in all academic endeavors. Students who violate these principles by cheating, plagiarizing, or acting in other academically dishonest ways are subject to disciplinary action and HCPCS

Tardy and Attendance Policy

Students are expected to be present during the entire scheduled time of class. A student with more than **two absences** may be dropped from the class. **Missing 30 minutes** or more from a class constitutes an absence. A student who is not present when role is taken at the beginning of class is tardy; **three tardies equals an absence.**

A student who wishes to withdraw from the class must complete the appropriate paperwork at the admissions office prior to the deadline listed in the schedule of classes. It is the responsibility of the student to initiate this process.

Any student with a documented physical or learning disability requiring accommodation should make an appointment to see me.

Course Attempts

A student may attempt a non-repeatable course no more than three times during their tenure at Allan Hancock College. This includes any course in which the student has received any grade, including W, D, F, NC and/or NP. This new legislation affects all students' academic history. Under specific circumstances, the student may request to attempt a course a fourth time by submitting an appeal form to the Counseling Office.

Last Day to Drop Without a W Grade

The deadline to drop a course without a W grade has changed and now happens earlier in the term. The last day to drop without a W grade is the same day as the final day to drop a course and receive a refund. *In some cases, this date is the first day of the class or before the class begins.*

Students should always check with an academic counselor before dropping a course, as this may have a negative impact on their record.

Course Objectives

1. Enable students to appropriately code procedures and diagnoses.
2. Enable students to compare medical terminology and related medical procedures for accurate correlation of coding utilized.
3. Enable students to appropriately use ICD-9/10 and CPT and HCPCS coding resources.

Student Learning Outcomes

1. Demonstrate the ability to assign appropriate diagnostic codes using information from medical records. Measured by the quizzes, exams and coding exercises
2. Demonstrate the ability to assign appropriate procedural codes using information from medical records. Measured by the quizzes, exams and coding exercises

Readings & Other Media AHC-MA 361 Bundle

includes the following Required Text: PLEASE OBTAIN THE BOOKS (AHC-MA 361 Bundle) FROM THE BOOKSTORE SO WE CAN BE ON THE SAME PAGE.

1. AAPC - 2015 ICD-9-CM Volumes 1-2 (Professional) - ISBN# 978-1-626881-648
2. AAPC - 2015 ICD-10-CM Draft Code Book - ISBN# 978-1-626881-662
3. AMA - 2015 CPT (Professional) ISBN# 978-1-62202-026-3
4. AAPC - 2015 HCPCS Level II ISBN# 978-1-626881-631

Other media: Flash drive – minimum of .5 GIG available space.

Course Requirements

Students must complete work assignments for each chapter. There will be quizzes over the course of the semester. **Absent on test day is an automatic 10% off the make-up test.** Schedule make-up with instructor.

CLASS RULES:

5. No food or beverages may be consumed in a classroom.
6. Cell phones must be silent and ignored during class unless you have an emergency.
7. Plagiarism is not acceptable.
8. Respect for Instructors, staff, classmates, visitors and school property is required.
9. All other Campus and College Policies must be respected.

METHODS OF COURSE DELIVERY: The subject matter in this course may be presented in various forms; which may include lectures, PowerPoint/ Prezi, class discussion, demonstrations, collaborative activities, computer assignments, student projects and presentations, online research, guest speakers, and/or field activity.

GRADING OPTION: Letter Grade Only

Course Grading

A	90 –100% of total points available
B	80 – 89%
C	70 – 79%
D	65 – 69%
F	Less than 60%

Course Evaluative Measures

Quizzes (7)	20%
Midterm Exam	25%
Final Exam	30%
Written Report* or a 15 slide PowerPoint or Prezi presentation on a Disease - Due Week 16b (*See attached Rubric for grading)	15%
Homework and Coding exercises and professionalism.	10%

Schedule of Activities

Week Date	Topics
1a 1/20	Syllabus Review Lecture: HIPAA, Terminology review and Intro to ICD-9 Homework: Definitions of Terms used (review) REPORT: Disease See: Rubric for scoring of report
1b 1/22	Lecture: Terminology review and Intro to ICD-9 (continued) Homework: Definitions of Terms used (review)
2a 1/27	Lecture: Intro to ICD-9-CM Outpatient coding (continued) LAB/ Homework: Definitions of Terms used in review
2b 1/29	Lecture: Intro to ICD-9-CM (continued) Also we will cover E-Codes and V-Codes LAB/ Homework: Code it assignments
3a 2/3	Quiz #1 Lecture: ICD-9-CM Coding: 1. Circulatory/ Cardiovascular conditions 2. Neoplasms LAB/ Homework: Code it assignments
3b 2/5	Lecture: ICD-9-CM Coding: (continued) 2. Circulatory/ Cardiovascular conditions 2. Neoplasms LAB/ Homework: Code it assignments
4a 2/10	Lecture: ICD-9-CM Coding: 8. Poisoning and adverse reactions 9. Burns LAB/ Homework: Code it assignments
4b 2/12	Lecture: ICD-9-CM Coding: (continued) 6. Poisoning and adverse reactions 7. Burns LAB/ Homework: Code it assignments
5a 2/17	Lecture: ICD-9-CM Coding: Burns (continued) Musculoskeletal Conditions LAB/ Homework: Code it assignments
5b 2/19	Lecture: ICD-9-CM Coding: 1. Musculoskeletal Conditions (continued) LAB/ Homework: Code it assignments
6a 2/24	Lecture: ICD-9-CM Coding: QUIZ #2 OB/ GYN conditions Congenital and Pediatric conditions LAB/ Homework: Code it assignments
6b 2/26	Lecture: ICD-9-CM Coding: (continued) OB/ GYN conditions Congenital and Pediatric conditions LAB/ Homework: Code it assignments

7a 3/3	Lecture: ICD-9-CM Coding: Infections Endocrine and Metabolic system LAB/ Homework: Code it assignments
7b 3/5	Lecture: ICD-9-CM Coding: 1. Respiratory LAB/ Homework: Code it assignments
8a 3/10	QUIZ #3 Lecture: Intro to the CPT Coding of Procedures 1. Evaluation and Management (Coding Grid) 2. Modifiers LAB/ Homework: Code it assignments
8b 3/12	Lecture: CPT Coding of Procedures (continued) 1. Evaluation and Management (Coding Grid) 2. Modifiers LAB/ Homework: Code it assignments Lecture: Intro to Level II National Codes (HCPCS) 1. HCPCS 2. Modifiers LAB/ Homework: Code it assignments
9a 3/17	SPRING BREAK - NO CLASS
9b 3/19	SPRING BREAK - NO CLASS
10a 3/24	Lecture: CPT Coding of Procedures 1. Continue E & M 2. HCPCS LAB/ Homework: Code it assignments
10b 3/26	Lecture: CPT Coding of Procedures QUIZ #4 1. Anesthesia 2. Surgery LAB/ Homework: Code it assignments
11a 3/31	Lecture: CPT Coding of Procedures 1. Continue Surgery LAB/ Homework: Code it assignments
11b 4/2	Lecture: CPT Coding of Procedures 1. Radiology (X-ray) MID TERM EXAM LAB/ Homework: Code it assignments
12a 4/7	Lecture: CPT Coding of Procedures 1. Pathology and Laboratory LAB/ Homework: Code it assignments
12b 4/9	QUIZ #5 Lecture: CPT Coding of Procedures 1. Continue Pathology and Lab LAB/ Homework: Code it assignments

13a 4/14	Lecture: CPT Coding of Procedures (continued) 1. Medicine Coding LAB/ Homework: Code it assignments
13b 4/16	Lecture: CPT Coding of Procedures (continued) 1. Medicine Coding LAB/ Homework: Code it assignments
14a 4/21	QUIZ #6 REVIEW ICD-9 and CPT CODING
14b 4/23	Lecture: Overview of ICD-10-CM LAB/ Homework: Code it assignments
15a 4/28	Lecture: Overview of ICD-10-CM LAB/ Homework: Code it assignments
15b 4/30	Lecture: Overview of ICD-10-CM LAB/ Homework: Code it assignments
16a 5/5	Lecture: Overview of ICD-10-CM LAB/ Homework: Code it assignments
16b 5/7	DISEASE - REPORT DUE QUIZ #7 Any Prezi or PowerPoint presentations due today.
17a 5/12	Review for Final Exam All assignments are to be completed and turned in at this time.
17b 5/14	FINAL EXAM





































































Scoring Rubric - Report on a Disease

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Excellent = A (9-10pts)	Above Average = B (8-8.9pts)	*Average = C (7-7.9pts)	Below Average =D (6-6.9pts)	Inadequate = F (0-5.9pts)
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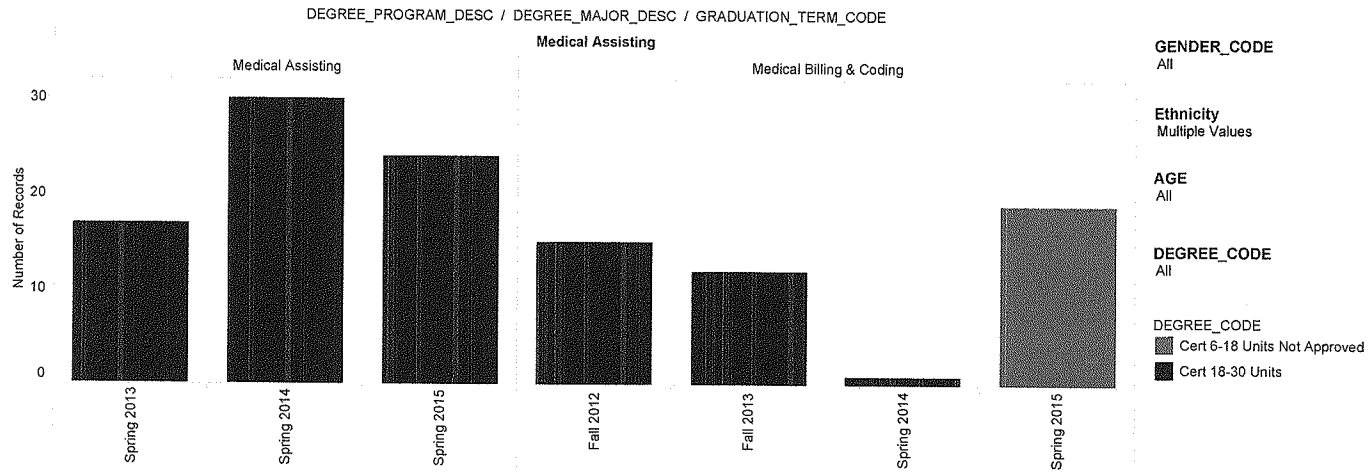
<p>Report on the disease should include: The Etiology, Signs and Symptoms of the disease. How the disease is Diagnosed. You will also need the ICD-9 Code and the ICD-10 Code. Address any Complications that can arise from the disease. Speak about any effects on population regarding: Children, Adults and the Elderly. Discuss the Treatment and Prevention of the disease. Report must include:</p> <ul style="list-style-type: none">   Cover page   Body   Glossary   Reference page   Number pages   Correct spelling   Charts   Statistics   Research papers 	<p>Report on the disease should include: The Signs and Symptoms of the disease. How the disease is Diagnosed. You will also need the ICD-9 Code and the ICD-10 Code. Address any Complications that can arise from the disease. Discuss the Treatment and Prevention of the disease. Report must include:</p> <ul style="list-style-type: none">   Cover page   Body   Glossary   Reference page   Number pages   Correct spelling   Charts 	<p>Report on the disease should include: The Signs and Symptoms of the disease. How the disease is Diagnosed. You will also need the ICD-9 Code. Address any Complications that can arise from the disease. Discuss the Treatment and Prevention of the disease. Report must include:</p> <ul style="list-style-type: none">   Cover page   Body   Glossary   Reference page   Number pages   Correct spelling 	<p>Report on the disease should include: The Signs and Symptoms of the disease. How the disease is Diagnosed. Address any Complications that can arise from the disease. Discuss the Treatment Report must include:</p> <ul style="list-style-type: none">   Cover page   Body   Glossary   Reference page   Number pages   Correct spelling <p>Missing some of the above listed material. Omitted pertinent information and the report had only 3-4 pages.</p>	<p>Report on the disease should include: The Signs and Symptoms of the disease. How the disease is Diagnosed. Address any Complications that can arise from the disease. Discuss the Treatment Report must include:</p> <ul style="list-style-type: none">   Cover page   Body   Glossary   Reference page   Number pages   Correct spelling <p>Missing some of the above listed material. Omitted pertinent information and the report has less than 3 pages. It would be obvious that minimal effort was utilized in producing the report.</p>
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The graph below shows the certificates awarded between fall 2012 – Spring 2015. The low number of certificates awarded in medical billing in some terms was due to the low enrollment and change of semesters for the start of the program.

Degrees & Certificates

			GRADUATION_TERM_CODE					
DEGREE_PRO..	DEGREE_MAJO..	DEGREE_CODE	Fall 2012	Spring 2013	Fall 2013	Spring 2014	Spring 2015	Grand Total
Medical	Medical Assisting	Cert 18-30 Units		17		30	24	71
Assisting	Medical Billing & Coding	Cert 6-18 Units Not Approved					19	19
		Cert 18-30 Units	15		12	1		28
	Total		15	17	12	31	43	118
Grand Total			15	17	12	31	43	118

Degrees & Certificates



REVIEW OF PREREQUISITES, COREQUISITES, AND ADVISORIES

Summary

List all courses in Discipline/Program

Course Prefix No	CURRENT Prerequisite/Coreq/Advisory/ Limitation on Enrollment	LEVEL OF SCRUTINY (Statistics, Content Review, UC/CSU Comparison, Student Survey – list all)	RESULT (i.e., current PCA is established, should be dropped/modified or new PCA is established)	ACTION TO BE TAKEN (None, APP- Major or Minor)
MA305	No Prerequisites/Coreq/Advisory Limitation on Enrollment: Admittance to MA Program	Statistics + Content Review	Current PCA Established	None
MA350	No Prerequisites/Coreq/Advisory Limitation on Enrollment: Admittance to MA Program	Statistics + Content Review	Current PCA Established	None
MA351	No Prerequisites/Coreq/Advisory Limitation on Enrollment: Admittance to MA Program	Statistics + Content Review	Current PCA Established	None
MA352	No Prerequisites/Coreq/Advisory Limitation on Enrollment: Admittance to MA Program	Statistics + Content Review	Current PCA Established	None
MA353	No Prerequisites/Coreq/Advisory Limitation on Enrollment: Admittance to MA Program	Statistics + Content Review	Limitation on Enrollment should be modified to: Admittance to MA Program and/or successful completion of first semester MA courses	APP; major modification
MA355	No Prerequisites/Coreq/Advisory Limitation on Enrollment: Admittance to MA Program and/or successful completion of first semester MA courses	Statistics + Content Review	Current PCA Established	None
MA 356	No Prerequisites/Coreq/Advisory Limitation on Enrollment: Admittance to MA Program and/or successful completion of first semester MA courses	Statistics + Content Review	Limitation on Enrollment should be modified to: Admittance to MA Program and/or successful completion of first semester and other second semester MA Courses	APP; major modification
MA360	No Prerequisites/Coreq/Advisory Limitation on Enrollment: Successful completion of first	Statistics + Content Review	Limitation on Enrollment should be modified to: Successful completion of first semester billing and coding	APP; major modification

	semester MA courses		option MA Courses	
MA361	No Prerequisites/Coreq/Advisory Limitation on Enrollment: Successful completion of first semester MA courses	Statistics + Content Review	Limitation on Enrollment should be modified to: Successful completion of first semester billing and coding option MA Courses	APP; major modification

Note: If prerequisite or corequisite is being established for the first time, course must be modified to include entrance skills.

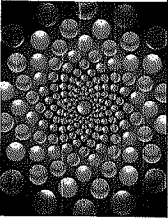
Implementation of Assessment

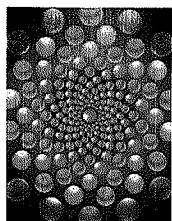
Each course instructor develops assessment tools and gathers assessment data for his or her own course, inputs outcomes into eLumen and writes a Plan of Action for the course. The program coordinator reviews the data and writes a Plan of Action for the program. Outcomes

and Plans of Action for the program are shared with all instructors in the department during faculty meetings held at the beginning of each semester. Most of the course outcomes have been assessed each semester that the course has been taught. Most of the courses have only one SLO.

During the process of completing this program review, the program coordinator realized that some of the SLOs listed on course syllabi are not the same as the official SLOs on the CORs. Some of the official SLOs are poorly worded and/or not measuring the most important outcomes for the course. Some of the tools being used to gather data could be improved upon.

Assessment Cycle

	ASSESSMENT SCHEDULE	AHC Program Student Learning Outcomes 6 Year Assessment Schedule
	6 Year	



ASSESSMENT SCHEDULE 6 Year	Program: <u> MEDICAL_ASSISTING </u>	page ____ of ____
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Use one row for each SLO

SLO	To be assessed in semester:	Assessment collection process	Assessment method (s)	Team to review assessment results	Resources needed to conduct assessment	Individual responsible for assessment report	Date we expect to complete review
MA 305 Demonstrate an understanding of foundational allied health knowledge of anatomical and physiological function and how disease and injury affect the human body.	FALL	Tests will be given to assess students' understanding of medical terminology, anatomy, physiology, and disease process	Tests administered in class	Instructor and Coordinator	Campus Graphics to make copies of tests	Instructor and coordinator	December 2015
MA 350 SLO1 Demonstrate individual responsibility, personal	SPRING	Instructor will administer a test with questions written to assess the students'	Quiz administered by instructor	Instructor and program coordinator	Campus Graphics to make copies of tests	Instructor and coordinator	December 2016

<p>integrity and respect for diverse peoples and cultures including those with different cultural and linguistic backgrounds and different abilities</p>		<p>understanding of cultural attributes and the implications for healthcare</p>					
<p>SLO 2 Identify federal and state legislative standards and policies regulating medical assistant scope of practice</p>	<p>FALL</p>	<p>Instructor will write a quiz with questions that assess students' ability to determine which actions are within the medical assisting scope of practice</p>	<p>A quiz will be given containing questions that ask students to choose the correct course of action based upon students' knowledge of MA scope of practice</p>	<p>Instructor and program coordinator</p>	<p>Campus Graphics to make copies of quiz</p>	<p>Instructor and program coordinator</p>	<p>December 2015</p>
<p>MA 351 Demonstrate confidence in medical office laboratory procedures</p>	<p>FALL</p>	<p>Instructors will assess students' ability to perform medical office laboratory procedures</p>	<p>Students perform lab procedures with 1:1 supervision of instructor. Instructor grades student using a check-</p>	<p>Primary instructor, lab instructor and program coordinator</p>	<p>Campus Graphics to copy check-off sheets Laboratory materials for procedures</p>	<p>Instructor and program coordinator</p>	<p>December 2015</p>

			off sheet.				
MA 352 Utilize current technology to complete common office forms, including insurance claims, billing forms, and required reporting	FALL	Instructor administers skills check-offs that assess the students' ability to correctly complete office forms	Students complete office forms on computer software installed on computers in lab.	Instructor and program coordinator	Myhealthprofessionslab online resource from Pearson's Comprehensive Medical Assisting and Medisoft software	Instructor and program coordinator	December 2015
MA 353 SLO 1 Demonstrate critical thinking by logically solving problems and explaining the rationale	SPRING	Instructor will assign critical thinking scenario quizzes	Students watch videos of patient and MA interactions and use critical thinking to determine the appropriate actions of the MA, then explain their rationale	Primary Instructor and program coordinator	Myhealthprofessionslab online resource from Pearson's Comprehensive Medical Assisting	Primary Instructor and program coordinator	May 2016
SLO 2 Demonstrate safe performance in the medical	SPRING	Instructor will administer clinical skills check-offs	Each student performs clinical skills in lab while being assessed for	Primary instructor, Lab instructors and program coordinator	Campus Graphics to copy skills check-off forms.	Primary instructor and program coordinator	May 2016

professional, job-related attitudes and abilities to facilitate job success		evaluation for students, assessing student's professionalism, attitudes, and clinical competence	"Yes" response on the question "Assuming a position were available, would you hire this student?" on the evaluation form completed by the externship site supervisor.	instructor, and program coordinator	clinical sites; clinical supervisors complete evaluation of student	supervisor, program coordinator	
MA 360 SLO 1 Demonstrate the ability to problem-solve insurance billing issues	SPRING	Instructor will administer a mid-term and final test with problem-solving questions based upon knowledge of proper billing procedures	Students take a mid-term and final test with specific questions to assess the SLO	Primary instructor and program coordinator	Campus graphics to copy tests	Primary instructor and program coordinator	Spring 2017
SLO2 Write a collections letter in a culturally competent manner that demonstrates respect for the	SPRING	Instructor will assign students to write a collections letter to assess the SLO	Students compose a collections letter in a culturally competent manner to a patient who immigrated to	Primary instructor and program coordinator	Computers with Medisoft software	Primary instructor and program coordinator	Spring 2016

PLAN OF ACTION – Post-Validation

Review and Approval

Plan Prepared By

Susan Reardon

Date: 11/30/15

Date: _____

Date: _____

Date: _____

Date: _____

Reviewed:

Department Chair*

Susan Reardon

Date: 11/30/15

*Signature of Department Chair indicates approval by department of Plan of Action.

Reviewed:

Dean of Academic Affairs

[Signature]

Date: 11/30/15

Vice President, Academic Affairs

[Signature]

Date: 12-8-15