# Medical Assisting Education Review Board 20 N. Wacker Drive, Suite 1575 Chicago, IL 60606 Phone: 800/228-2262 www.maerb.org

February 8, 2018

Robert Knight, MBA President Clark College 1933 Ft Vancouver Way Vancouver, WA 98663

Dear President Knight:

This letter is to inform you that, based upon the receipt of the Progress Report submitted by November 1, 2017, the Medical Assisting Education Review Board (MAERB) has maintained Continuing Accreditation, with the next comprehensive review to be scheduled no later than fall 2024, for the Certificate Medical Assisting program at Clark College (Vancouver, Washington).

The attached list of citations continues to merit your institution's attention. There is an additional progress report required to demonstrate resolution of those citations in order indicate the program's compliance with the *2015 Standards and Guidelines for Medical Assisting Educational Programs*.

To help you organize and label your documents properly, MAERB has developed certain protocols, which are detailed in the document "Organization of Documents for Progress Reports and Other Submissions" posted on the Documents tab of the MAERB website under Program Resources/Accreditation Resources. Your progress report should either be sent on a USB drive, labeled "Progress Report: February 1, 2019 to **MAERB at 20 North Wacker Drive, Suite 1575, Chicago, IL 60606** or, if your report consists of only a few documents, it may be emailed to MAERB at maerb@maerb.org no later than February 1, 2019, indicating the manner in which the citations have been resolved.

It is important to conform to these timelines, as according to Appendix A.3 of the 2015 Standards and Guidelines for Medical Assisting Educational Programs:

Failure to meet any of the administrative requirements for maintaining accreditation may lead to administrative probation and ultimately to the withdrawal of accreditation. CAAHEP will immediately rescind the administrative probation once all administrative deficiencies have been rectified. MAERB will also impose late fees, in accordance with the Accreditation Fee Schedule, for failure to submit documentation within the timeframe established.

The MAERB thanks you and your colleagues for your commitment to continuous quality improvement in medical assistant education, as demonstrated by your participation in programmatic accreditation.

The Medical Assisting Education Review Board (MAERB), a Committee on Accreditation of the Commission on Accreditation of Allied Health Education Programs (CAAHEP)

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Sincerely,

Rebecca L. Walkn

Rebecca L. Walker, CMA (AAMA), BS, CPC, MAERB Chair

Encl: List of Citations or Citation Document

cc: Brenda Walstead, EdD, Dean of Business and Health Sciences Nicole Danforth, AAS, CMA (AAMA), Medical Assisting Program Director Tina Broderick, RN, ADN, CMA (AAMA), MAERB Vice Chair Francine Palermo, EdD, MAERB Vice Chair Sarah R. Marino, PhD, Executive Director, MAERB

SEE SEPARATE PAGE BELOW

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### Citations

These citations are taken from the *On-Site Survey Report* for the Clark College (Vancouver, Washington) Certificate Medical Assisting Program. The on-site survey was conducted on August 20-21, 2015.

The following citations merit critical attention and timely resolution in order to bring the program into compliance with the *Standards and Guidelines for Medical Assisting Educational Programs*. MAERB requests that you mail a USB drive, labeled "February 1, 2019" with all required information to **MAERB at 20 North Wacker Drive, Suite 1575, Chicago, IL 60606** or scan your cover letter on letterhead with signature, along with your documentation, into a PDF file and e-mail it to MAERB at <u>maerb@maerb.org</u> by <u>February 1, 2019</u>, indicating the manner in which the citations have been resolved.

## **II.B. Program Goals - Appropriateness of Goals and Learning Domains**

The program must regularly assess its goals and learning domains. Program personnel must identify and respond to changes in the needs and/or expectations of its communities of interest.

An advisory committee, which is representative of at least each of the communities of interest named in these Standards, must be designated and charged with the responsibility of meeting at least annually, to assist program and sponsor personnel in formulating and periodically revising appropriate goals and learning domains, monitoring needs and expectations, and ensuring program responsiveness to change.

#### **Original Rationale:**

The individual serving as public member is an instructor at the institution and is not eligible to serve as public member.

#### February 2018 Rationale

Program did not submit a CV or narrative describing the public member's qualifications for the public member position, nor do the advisory minutes identify participation of the public member.

#### Submit the following:

Roster of advisory committee indicating that all communities of interest are represented, specifically highlighting the members noted as missing and providing supporting documentation, if applicable:

a. student; b. graduate; c. faculty; d. sponsor administration (position at the institution); e. employers (name of organization); f. Physician, NP, PA, DO; g. Public Member (CV or narrative, describing the public member's qualifications for the public member position).

2018 Minutes of a recent advisory committee meetings that show active participation by public member, or documentation, such as an email showing the minutes sent, copy of letter indicating minutes were mailed, link to a video-recording of the meeting, that shows that the program informed all of the absent members of the proceedings of the recent meeting and has received feedback and input from the absent members.

NOTE: The year of the required minutes was changed to allow for the update.

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#### III.D. Resources - Resource Assessment

The program must, at least annually, assess the appropriateness and effectiveness of the resources described in these Standards. The results of resource assessment must be the basis for ongoing planning and appropriate change. An action plan must be developed when deficiencies are identified in the program resources. Implementation of the action plan must be documented and results measured by ongoing resource assessment.

**Original Rationale:** 

There was no evidence that the resources were assessed annually, as three years of resource assessments were not available.

#### February 2018 Rationale:

The program submitted a 2017 Resource Assessment evaluation of all resources and provided the necessary information about action plans and follow-up. Within the 2017 Resource Assessment, the program referred to a 2015-2016 assessment when discussing Support Staff, but they did not provide the requested 2015-2016 Resource Assessment evaluating all resources.

Submit the following:

2018 Resource Assessment evaluating all of the resources and providing the necessary information about action plans and follow up.

NOTE: The date of the Resource Assessment was adapted to allow for submission.