

**MEDICAL ASSISTANT ADVISORY COMMITTEE MINUTES**

**Tuesday, March 12, 2019**

**Time: 5:30 pm – 7.00pm \* PUB 258B**

**Members Present**: Norman Berg (Committee Chair), The Vancouver Clinic; Lacie Thompson (Vice Chair), PeaceHealth; April Gapsch, PeaceHealth; Laurie Helms, Nurse Practitioner; Ray Maly, Community Member; Pepper Miller, Clark Student; Stefanie Tolliver, The Vancouver Clinic;

**Members Absent**: Morgan Berg, Lifeline Connections

**Clark College**: Instructors for BMED, Olga Lyubar, Suzanne Smith; Jennifer Obbard, Associate Dean – Health Occupations; Dr. Brenda Walstead, Dean of BHS; Sarah Kuzera, Director of Medical Assisting; Renee Schiffhauer, Associate Director of Advising; Travis Kibota; Interim Associate Vice President of Instruction; SueAnn McWatters, Program Specialist – Advisory Committees

Committee Chair Norman Berg called the meeting to order at 5:30pm and introductions were made.

**MINUTES OF PREVIOUS MEETING**

*The minutes of October 17th, 2018 were presented: Norman made a motion to approve. This was seconded by April and passed unanimously.*

**DATE OF NEXT MEETING**

The committee selected their next meeting date: **Tuesday, June 4th 2019 at 5:30pm.**

**OFFICE OF INSTRUCTION ANNOUNCEMENTS**

SueAnn McWatters made the following announcements

Currently the College is looking at significant budgetary shortfalls, caused by a flattening of enrollment and an increase in the cost of must-fund expenses. The college will use the budgetary structure recommended by the Economic Vitality Council the Executive Cabinet will be looking this month at strategies to solve the shortfall. The College must also find a way to fund critical initiatives, such as Guided Pathways and CTCLink computer program. This has resulted in reductions beyond the amount required to cover just the must-fund expenses. It is anticipated that this work will be ramping up in March with final budget adoption in the spring.

The entire college continues work to support the guided pathways initiative, increasing student enrollment, strengthening our technology infrastructure, balance the budget and place equity at the heart of all our decision-making.

* Professional Technical Day is February 28, 2019.
* All committees need to be working on getting a student on the Advisory Committee. Students can be paid a stipend through ASCC for their participation.

Travis thanked the advisory committee members for all attending including having a student and meeting diversity. Olga presented about HIM and represented Medical Assisting quite well.

Olga thanked The Vancouver Clinic for pushing the direct to practices. They will be starting the first direct to practice for students next term (spring 2019). If there are any other supervisors or managers on HIM from The Vancouver Clinic or PeaceHealth to sit, that would be great.

**PROGRAM GOALS AND LEARNING OBJECTIVES**

Sarah Kuzera stated that the program changes were accepted by IPT and the curriculum committee. Students will finish the AAT in 8 quarters with a crosswalk into phlebotomy. This will begin in 2020 and will give time for current students who are enrolled to either be accepted into the next cohort or finish out.

The Certificate of Program was approved for 5 quarters. It went from 80 credits to 69 credits. Students will be able to complete much faster. This will have a very specific sequencing of courses from prerequisite to completion. They worked with Olga in order to separate between Allied Health, then MA, and then Health Informatics. Students will still get the full curriculum required by the review board. The program is currently working on getting the MAERB Curriculum Change Workbook and will submit it for review before the fall term begins; hopefully by early August.

**ANNUAL REPORT AND OUTCOMES**

The MAERB requires the program submit an annual review form with a look at the previous cohort. Recently, the 2017 cohort was submitted. We are still obtaining graduate and employer surveys and also submitted the annual resource assessment. Sarah developed a direct to practice site and student manual, which will assess the resources at Clark as well as the resources at the site for the student. They can accept any surveys up to 5 years.

* 2017:
* Retention = 100%
* Placement threshold average = 60%, Clark College = 64%
* Graduate participation in the survey = 78.57%
* Graduate satisfaction in the survey = 90.91%
* Site participation of the survey = 88.90%
* Satisfaction with graduates = 100%
* Exam participation = 100%, and over 80% pass the exam.

There are currently 29 potential graduates in this cohort.

In regards to the 2017 year; retention was 100%, placement threshold is 60% and we were at 64%, graduate participation in survey was 78.57%, graduate satisfaction in survey, 90.91%, site participation of the survey 88.9% and 100% are satisfied with our graduates, exam participation was at 100%. Over 80% pass the exam. Currently there are 29 potential graduates in this cohort.

Brenda Walstead thanked Sarah Kuzera for all of her work.

**OTHER ASSESSMENT RESULTS**

Laurie Helms is the provider member.

**PROGRAM CHANGES**

There are substantive changes made to the course content, sequencing, and required hours for the Certificate of Proficiency (CP) and the Associates of Applied Technology (AAT) programs that have been approved. Crossover to the phlebotomy program in the AAT program and the reduction by the College to 160+ hours for the externship (practicum) has been implemented in the curriculum beginning next year.

The program must submit the course syllabi with all required psychomotor (skills) and affective (behavioral) competencies to MAERB and indicate how they are taught in each course.

**SUBSTANTIVE CHANGES**

Sarah stated that BMED&139 will be a hybrid course to take prep exams. Based on the results of the prep exams, students will be tracked. They will take quizzes at home to practice while still in their practicums.

There are two new affiliations with Concentra Occupational Health and Columbia River Mental Health Center.

PeaceHealth has partnered with ZoomCare.

Laurie Helms spoke on the responsibilities of an MA. It is good for them to work on procedures (sterile technique and sterile set-up).

Pepper Miller explained that they’ve done over 70 competencies. Sarah stated they do vital signs, electronic blood pressure and pulse, radio pulse with respirations, set up sterile fields, assist with suture removals, done surgical hand washing, put on and take off sterile gloves and plenty more. Students will eventually do phlebotomy and injections. Once they are at the sites, they will focus on injections since they will need to know this for the certification. The main focus will be injections and dosage calculations. Sarah is actively making sure that students know what to do.

Lacie Thompson further explained that dosages wasn’t a key part of the curriculum. Hopefully having that kind of course put back in would be very helpful. Sarah stated that she will be ordering vials. At the same time students are doing calculations, they will actively have to draw up at the same time. Norman stated that The Vancouver Clinic had to pull the MAs from dosage calculating. However, for the national exam, it is required. MAs can administer but cannot draw up. Anything that is combined or compounded or more than a single unit dose or a vaccine, MAs cannot draw it. If there is a doctor’s order, than the MAs can do it. Stefanie Tolliver spoke on making sure that students know that there is a possibility that some sites might not allow them to draw because of the legality issue.

Travis Kibota suggested working with the math department to come up with online courses for the meds; BMED&103 and also statistics.

**OTHER BUSINESS/INDUSTRY UPDATES**

Ray stated that he was impressed with the professionalism from the caregivers.

Regence Blue Advantage HMO is an insurance coverage. Once a year, they send a physician to your house to do a check-up. The report they gather is given back to the client’s primary care physician. Norman explained that some patients enjoy it while others find it confusing as it is a random doctor. It is another way to make sure that patients are getting the proper care. It is paid for by the insurance company and costs nothing to the patient.

Jennifer Obbard asked about a communication plan for the new curriculum and crosswalk into phlebotomy. Brenda stated that it’s too early for one. Sarah has talked with Carmen Roman about the next cohort as there will be students that are in the transition. The overflow might be accepted we will have to adjust accordingly.

Sarah stated the numbers now are almost full; there are 30 in a cohort and there are currently 29 students.

An evening cohort could potentially entail general and administrative aspects online, but the clinical piece would be difficult. Students would have to understand that they would have to be available for the practicum hours at the end.

Sarah also spoke about the practicum interviews. MA is one of the few allied health professions that does not just place students into their clinical. Students have to interview for their sites. The program developed mock panel interviews for the BMED&117 course. Students had to bring in their resume, cover letter, application, etc. Career services did say that they will be available to offer that to other students. The more experience for a true interview the better off students will be.

Ray asked about the coding books. Suzanne stated that Providence gave a whole trunk load of coding books. There were quite a few received from The Vancouver Clinic, a few from legacy, but most came from Providence. There is now a full file cabinet of coding books for in class coding. There is significant changes to each year’s book so it’s important to update it every year.

The meeting adjourned at 6:17pm.

Prepared by SueAnn McWatters